

REPUBLIC OF BELARUS

Monitoring the Situation of Children and Women

Multiple Indicator Cluster Survey 2005

FINAL REPORT



MINISTRY OF STATISTICS AND ANALYSIS OF
THE REPUBLIC OF BELARUS



UNITED NATIONS CHILDREN'S FUND



Republic of Belarus
Multiple Indicator Cluster Survey
2005

Ministry of Statistics and Analysis
of the Republic of Belarus

Research Institute of Statistics
of the Ministry of Statistics and Analysis
of the Republic of Belarus

United Nations Children's Fund
(UNICEF)

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The survey has been conducted as part of the third round of MICS surveys (MICS3), carried out around the world in more than 50 countries, in 2005-2006, following the first two rounds of MICS surveys that were conducted in 1995 and the year 2000. Survey tools are based on the models and standards developed by the global MICS project, designed to collect information on the situation of children and women in countries around the world. Additional information on the global MICS project may be obtained from www.childinfo.org.

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Summary Table of Findings

Multiple Indicator Cluster Surveys (MICS) and Millennium Development Goals (MDG) Indicators, Republic of Belarus, 2005

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value	
NUTRITION					
Nutritional status	6	4	Underweight prevalence	1.0	per cent
	7		Stunting prevalence	2.5	per cent
	8		Wasting prevalence	1.3	per cent
Breastfeeding	45		Timely initiation of breastfeeding	21.1	per cent
	15		Exclusive breastfeeding rate	9.0	per cent
	16		Continued breastfeeding rate at 12-15 months at 20-23 months	18.0	per cent
				3.6	per cent
	17		Timely complementary feeding rate	38.3	per cent
	18		Frequency of complementary feeding	27.9	per cent
19	Adequately fed infants	17.8	per cent		
Low birth weight infants	9		Low birth weight infants	3.8	per cent
	10		Infants weighed at birth	99.3	per cent
CHILD HEALTH					
Immunization	25	15	Tuberculosis immunization coverage	99.2	per cent
	26		Polio immunization coverage	96.5	per cent
	27		DPT immunization coverage	96.7	per cent
	28		Measles immunization coverage	96.9	per cent
	31		Fully immunized children	93.9	per cent
	29		Hepatitis B immunization coverage	96.9	per cent
Care of illness	33		Use of oral rehydration therapy (ORT)	84.9	per cent
	34		Home management of diarrhoea	15.7	per cent

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value	
	35		Received ORT or increased fluids, and continued feeding	54.2	per cent
	23		Care seeking for suspected pneumonia	89.5	per cent
	22		Antibiotic treatment of suspected pneumonia	67.0	per cent
Solid fuel use	24	29	Solid fuels use	3.4	per cent
ENVIRONMENT					
Water and Sanitation	11	30	Use of improved drinking water sources	99.6	per cent
	13		Water treatment	60.5	per cent
	12	31	Use of improved sanitation facilities	99.3	per cent
	14		Disposal of child's faeces	76.4	per cent
REPRODUCTIVE HEALTH					
Contraception	21	19c	Contraceptive prevalence	72.6	per cent
Maternal and newborn health	20		Antenatal care	99.4	per cent
	44		Content of antenatal care	99.4	per cent
	4	17	Skilled attendant at delivery	100.0	per cent
	5		Institutional deliveries	99.9	per cent
CHILD DEVELOPMENT					
Child development	46		Adult's support for learning	84.1	per cent
	47		Father's support for learning	71.0	per cent
EDUCATION					
Education	52		Pre-school attendance	86.1	per cent
	53		School readiness	92.9	per cent
	54		Net intake rate in primary education	75.5	per cent
	55	6	Net primary school attendance rate	93.2	per cent
	56		Net secondary school attendance rate	95.9	per cent

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value	
	57	7	Children reaching grade five	100.0	per cent
	58		Transition rate to secondary school	100.0	per cent
	59	7b	Primary school completion rate	69.0	per cent
	61	9	Gender parity index primary school secondary school	1.01 1.02	ratio ratio
Literacy	60	8	Adult literacy rate	100.0	per cent
CHILD PROTECTION					
Child labor	71		Child labour	5.1	per cent
	72		Labourer students	99.7	per cent
	73		Student labourers	5.2	per cent
Child discipline	74		Any psychological/physical punishment	82.6	per cent
Early marriage	67		Marriage before age 18	6.5	per cent
	68		Young women aged 15-19 currently married/in union	3.7	per cent
	69		Spousal age difference	8.2	per cent
Support to orphaned and vulnerable children	75		Prevalence of orphans	5.8	per cent
	78		Children's living arrangements	1.8	per cent
HIV/AIDS					
HIV/AIDS knowledge and attitudes	82	19b	Comprehensive knowledge about HIV prevention among young people	33.9	per cent
	89		Knowledge of mother- to-child transmission of HIV	61.2	per cent
	86		Attitude towards people with HIV/AIDS	4.6	per cent
	87		Women who know where to be tested for HIV	97.4	per cent
	88		Women who have been tested for HIV	66.4	per cent
	90		Counselling coverage for the prevention of mother-to-child transmission of HIV	72.8	per cent
	91		Testing coverage for the prevention of mother-to-child transmission of HIV	92.3	per cent

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Abbreviations and Remarks

AIDS	Acquired Immune Deficiency Syndrome
BCG	Bacillus-Cereus-Geuerin (Tuberculosis)
DPT	Diphtheria Pertussis Tetanus
EPI	Expanded Programme on Immunization
HIV	Human Immunodeficiency Virus
IUD	Intrauterine Device
MDG	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
NCMS	National Centre of Medical Statistics
SPSS	Statistical Package for Social Sciences
UNDP	United Nations Development Programme
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
WFFC	World Fit For Children
WHO	World Health Organization

- Percent, counted using nonweighted denominator, less than 25 cases are not shown in the tables.
- Percent, counted using nonweighted denominator, less than 50 cases, are shown in the tables in brackets.

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Implementing Agencies

Ministry of Statistics and Analysis of the Republic of Belarus
According to the decision of the Government of the Republic of Belarus the Ministry of Statistics and Analysis is accountable to organize, conduct and report the implementation of MICS3 in the Republic of Belarus.

The Ministry of Health provided technical assistance to the Ministry of Statistics and Analysis of the Republic of Belarus in receiving from medical institutions the lists of the households with children under five and the immunization cards.

The Research Institute of Statistics of the Ministry of Statistics and Analysis of the Republic of Belarus provided methodological support.

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Executive Summary

Multiple Indicator Cluster Survey of children and women aged 15-49 years (MICS3) is a representative sampling survey at the country level, as well as representative survey for a number of indicators at the regional level. The survey of this kind was conducted in the Republic of Belarus for the first time and provided up-to-date information on the most important aspects of life of children and women.

The main objectives of the survey were to collect the latest information for the assessment of the situation of children and women in the Republic of Belarus; to get data needed for the monitoring of the progress towards achieving the Millennium Development Goals, the child-specific targets set in the Action Plan "A World Fit for Children" and other international treaties as the basis for future actions.

Questionnaires were completed for 6,707 households, 5,895 women (age 15-49) and 3,051 under-5 children.

Nutritional Status

- In the Republic of Belarus the proportion of children under age five with moderate underweight is 1 per cent.
- 2.5 percent of children under age five are too short for their age.
- About 1 per cent of children under age five are thin for their height.
- Around 7 per cent of children under age five have overweight.

Breastfeeding

- Every fifth woman (21.1 per cent), who gave birth to a child within 2 years before the survey, started breastfeeding their infants within one hour of birth, and 28.6 per cent of infants were not breastfed within one day of birth.
- Only 9 per cent of children aged less than six months were exclusively breastfed what is considerably lower than recommended.
- About 38 per cent of children aged 6 - 9 months received breast milk and solid or semi-solid foods. By the age 12-15 months, 18 percent of children were still being breastfed but by age 20-23 months – only 3.6 percent of children.

Low Birth Weight Infants

- According to the results of the survey, in the Republic of Belarus practically all new-born infants were weighed at birth and about 4 per cent of infants had weigh less than 2,500 grams at birth.

Immunization

- Almost all children under 5 (99.6 per cent) had vaccination cards.
- Practically all children aged 18-29 months (99.2 per cent) received a BCG vaccination by the age of 12 months.
- The first dose of DPT by the age of 12 months was received by 99 per cent of children. The percentage of children received the further doses of DPT is getting lower (98 per cent for the second dose and 97 per cent for the third dose).
- Similarly, 98 per cent of children received Polio 1 and Polio 2 by age 12 months and Polio 3 – 97 percent.
- Coverage by measles vaccine is also high and constituted 97 per cent by the age of 18 months.
- Totally, the percentage of children who had all recommended vaccinations during the first year of life (measles vaccination – within first 18 months of life) was 94 per cent.

Oral Rehydration Treatment

- Overall in the country, only 4 percent of under-five children had diarrhoea within the two weeks preceding the survey

- Approximately 85 per cent of children with diarrhoea received at least of the recommended home treatments, while 15 per cent of children received no rehydration therapy at home.
- Only 16 per cent children with diarrhoea received sufficient amount of fluids and at the same time were continued feeding according to the recommendations.

Care Seeking with Suspected Pneumonia and Antibiotic Treatment of Pneumonia

- Almost 11 per cent of children aged 0-59 months were reported to have had symptoms of pneumonia during the two weeks preceding the survey.
- From all children with pneumonia-like symptoms 89.5 per cent was taken to appropriate medical institutions.
- Two third of under-5 children with suspected pneumonia had received antibiotics during the two weeks prior to the survey.
- Every third woman, having an under-five child, has knowledge about the two danger signs of pneumonia – fast and difficult breathing.

Solid Fuel Use

- Only 3.4 per cent of all households in the Republic of Belarus were using solid fuels (wood) for cooking.
- Among all households using solid fuels for cooking 58 per cent use open stoves with chimneys or smoke pipes and 42 per cent use closed stoves with chimneys.

Water and Sanitation

- Almost all population of the country (99.6 per cent) has access to improved source of drinking water (piped water in the dwelling, yard or plot, public tap/standpipe, protected well).
- Three fifth of the country's population used safe water treatment methods (overwhelming majority used boiling of water) irrespective of the type of the water source which a household used - improved or un-improved sources of drinking water.
- Almost all the population of the country (99.3 per cent) lives in households with improved sanitary and hygienic facilities.
- Totally in the country a child's faeces of 76.4 per cent of 0-2 year old children are disposed safely.

Contraception

- About 73 per cent of women currently married or in union used means of contraception.
- The most popular method is the IUD which is used by one of four married women in the Republic of Belarus 25.7 per cent). Almost every fifth woman indicated the use of condoms and every tenth woman – contraceptive pills.
- Only 16 per cent of married or in union women used traditional contraception methods.

Antenatal Care

- Coverage of antenatal care is practically absolute in the Republic of Belarus and percentage of women receiving antenatal care at least once during the pregnancy is 99 per cent.

Assistance at Delivery

- All births occurred within the two years prior to the survey were attended by skilled personnel.
- 94 per cent of the deliveries were assisted by doctors.

Child Development

- Within 3 days preceding the survey 84 per cent of under-five children were engaged by parents in four and more types of activities that promote learning and school readiness.
- An average number of activities arranged by adults for children was 5.0.
- Father's involvement with one or more activities that promote learning and school readiness was 71 per cent; average number of activities with a father's involvement was 2.2.

Pre-School Attendance and School Readiness

- Overall in the republic 86 per cent of children aged 36-59 months attended pre-schools.

- About 93 per cent of children aged 6, who attended the first grade of primary school, had been attending pre-school during the previous year.

Primary and Secondary School Participation

- In the Republic of Belarus 75.5 per cent of children who are of primary school entry age (age 6) attended the first grade of primary school.
- Totally 93 per cent of primary school age children attended primary or secondary school.
- Only 4 per cent of secondary school age children did not attend secondary educational establishments.
- In the Republic all children, entering first grade, usually reached grade 5.
- 69 per cent of children of primary school completion age (9 years) attended the last (the fourth) grade of primary school.
- Gender Parity Index for primary school was 1.01, indicating no difference in the attendance of primary school by girls and boys. For secondary education this index was 1.02.

Adult Literacy

- In the Republic of Belarus adult literacy is universal.

Child Labour

- About 5 per cent of children aged 5-14 years involved in child labour activities, for majority of those children it was unpaid work.
- Out of this 5 per cent of children, classified as working children, almost all of them attended school (99.7 per cent).

Child Discipline

- In the Republic of Belarus 83 per cent of children aged 2-14 years were subjected to at least one form of psychological or physical punishment by their parents/caretakers or other household members.

Early Marriage

- In the Republic of Belarus at the time of the survey about 4 per cent of women aged 15-19 years were married or in union with a man.
- Among women aged 20-49 years 6.5 per cent of women got married before the age of 18.
- Overall in the republic 8 per cent of women aged 20-24 years, married or in union with a man, had a husband/partner 10 years and more older than a woman.

Orphans and Vulnerable Children

- According to the results of the survey 73 per cent of children aged 0-17 years lived with both parents, 25 per cent of children lived with one of the parents and 2 per cent of children separately from their biological parents.

Knowledge of HIV Transmission and Condom Use

- From all interviewed women aged 15-49 57 per cent could correctly reject the two most common misconceptions and knew that a healthy-looking person can be infected.
- About 57 per cent of women reported about the knowledge of the two main ways of preventing HIV transmission.
- One third of young mothers (aged 15-24) had comprehensive and precise knowledge about the HIV transmission.
- Overall in the republic 98 per cent of women knew that HIV could be transmitted from mother to child. The share of women who knew all three main ways of mother-to-child transmission of HIV was 61 per cent, at the same time 2 per cent of women did not know of any specific way of HIV transmission from mother to child.
- More than 97 per cent of all women aged 15-49 knew where to be tested for HIV, at the same time two third had already had such a test.

I. Introduction

Background

This report is based on the Belarus Multiple Indicator Cluster Survey of children and women aged 15-49 years, conducted in 2005 by the institutions under the Ministry of Statistics and Analysis system. The survey was based, in large part, on the needs to monitor progress towards goals and targets emanating from recent international agreements: the Millennium Declaration, adopted by all 191 United Nations Member States in September 2000, and the Plan of Action of A World Fit For Children, adopted by 189 Member States at the United Nations Special Session on Children in May 2002. Both of these commitments build upon promises made by the international community at the 1990 World Summit for Children.

In signing these international agreements, governments committed themselves to improving conditions for their children and to monitoring progress towards that end. UNICEF was assigned a supporting role in this task.

A Commitment to Action: National and International Reporting Responsibilities

The governments that signed the Millennium Declaration and the World Fit for Children Declaration and Plan of Action also committed themselves to monitoring progress towards the goals and objectives they contained:

“We will monitor regularly at the national level and, where appropriate, at the regional level and assess progress towards the goals and targets of the present Plan of Action at the national, regional and global levels. Accordingly, we will strengthen our national statistical capacity to collect, analyse and disaggregate data, including by sex, age and other relevant factors that may lead to disparities, and support a wide range of child-focused research. We will enhance international cooperation to support statistical capacity-building efforts and build community capacity for monitoring, assessment and planning.” (**A World Fit for Children**, paragraph 60).

“...We will conduct periodic reviews at the national and subnational levels of progress in order to address obstacles more effectively and accelerate actions...” (**A World Fit for Children**, paragraph 61).

The Plan of Action (paragraph 61) also calls for the specific involvement of UNICEF in the preparation of periodic progress reports:

“... As the world’s lead agency for children, the United Nations Children’s Fund is requested to continue to prepare and disseminate, in close collaboration with Governments, relevant funds, programmes and the specialized agencies of the United Nations system, and all other relevant actors, as appropriate, information on the progress made in the implementation of the Declaration and the Plan of Action”.

Similarly, the **Millennium Declaration** (paragraph 31) calls for periodic reporting on progress:

“...We request the General Assembly to review on a regular basis the progress made in implementing the provisions of this Declaration, and ask the Secretary-General to issue periodic reports for consideration by the General Assembly and as a basis for further action”.

In the Republic of Belarus a set of National programmes were developed to solve the complex of social problems aimed at the improvement of children’s situation and their social protection:

- The main priorities of the governmental family policy;
- National Plan of Action on Improvement of Women’s Situation;
- Concept of the governmental demography policy in accordance with sustainable economical development;
- National Plan of Actions on Improvement of Children’s Situation and Protection of Their Rights 2004-2010.

At present in the Republic of Belarus the main priorities of the National Poverty Reduction Strategy were developed. In the Strategy the main forms of the government support to families with children are provided.

The MICS 3 allows the Republic of Belarus to have up-to-date information on the situation of children and women, as the survey of this kind is conducting in our country for the first time.

This final report presents the results of the indicators and topics covered in the survey.

Survey Objectives

The 2005 Belarus Multiple Indicator Cluster Survey has as its primary objectives:

- To provide additional information for assessing the situation of children and women in Belarus;
- To furnish additional data needed for monitoring progress toward goals established by the Millennium Development Goals and the goals of A World Fit For Children (WFFC) as a basis for future policy actions;
- To contribute to the improvement of data collection and data processing systems of the household surveys with application of modern software.

II. Sample and Survey Methodology

Sample Design

The sample for the Belarus Multiple Indicator Cluster Survey (MICS) was designed to provide representative data on a large number of indicators on the situation of children and women at the national level, for urban and rural areas, and for Minsk city and 6 regions: Brest, Vitebsk, Gomel, Grodno, Minsk (without Minsk city) and Mogilev regions.

MICS3 in Belarus was utilizing the existing sample frame of household surveys and, due to limited presentation of children under 5 in the sample, the additional subsample of households with children aged 0-4 years was developed. The additional sample was selected based on the lists of households with under 5 children that were received through the local out-patient health institutions.

The sample was stratified by region and was consisted of 7,000 households. For reporting national level results, sample weights were used. A more detailed description of the sample design can be found in Appendix A.

Questionnaires

Three sets of questionnaires were used in the survey: 1) a household questionnaire which was used to collect information on all *de jure* household members, the household, and the dwelling; 2) a women's questionnaire administered in each household to all women aged 15-49 years; and 3) an under-5 questionnaire, administered to mothers or caretakers of all children under 5 living in the household.

The questionnaires included the following modules:

- Household Questionnaire
 - Household listing
 - Education
 - Water and Sanitation
 - Household characteristics
 - Child Labour
 - Child Discipline
- Questionnaire for Individual Women
 - Child Mortality
 - Maternal and Newborn Health
 - Marriage/Union
 - Contraception
 - HIV/AIDS
- Questionnaire for Children Under Five
 - Early Learning
 - Breastfeeding
 - Care of Illness
 - Immunization
 - Anthropometry

The questionnaires are based on the MICS3 model questionnaire¹. From the MICS3 model English version, the questionnaires were translated into Russian and were pre-tested in Minsk city and Minsk region during September 2005. Based on the results of the pre-test, modifications were

¹ The model MICS3 questionnaire can be found at www.childinfo.org, or in UNICEF, 2006.

made to the wording and translation of the questionnaires. A copy of the Belarus MICS3 questionnaires is provided in Appendix G.

In addition to the administration of questionnaires, fieldwork teams measured the weights and heights of children age under 5 years. Details and findings of these measurements are provided in the respective sections of the report.

Training and Fieldwork

Training for the fieldwork was conducted for 5 days in early November 2005.

The data were collected by 14 teams; each was comprised of 4-5 interviewers, one driver, one editor/measurer and a supervisor. Fieldwork began in November 2005 and concluded in December 2005.

Data Processing

Data were entered on four computers using the CSPro software. In order to ensure quality control, all questionnaires were double entered and internal consistency checks were performed. Procedures and standard programmes developed under the global MICS3 project and adapted to the Belarus questionnaire were used throughout. Data processing began in December 2005 and finished in January 2006. Data were analysed using the SPSS software programme and the model syntax and tabulation plans developed for this purpose.

Data were entered using the CSPro software. The data were entered on four computers and carried out by 11 data entry operators and 5 data entry supervisors. In order to ensure quality control, all questionnaires were double entered and internal consistency checks were performed. Data processing began simultaneously with data collection in December 2005 and was completed in January 2006. Data were analysed using the Statistical Package for Social Sciences (SPSS) software programme, Version 14, and the model syntax and tabulation plans developed by UNICEF for this purpose.

III. Sample Coverage and the Characteristics of Households and Respondents

Sample Coverage

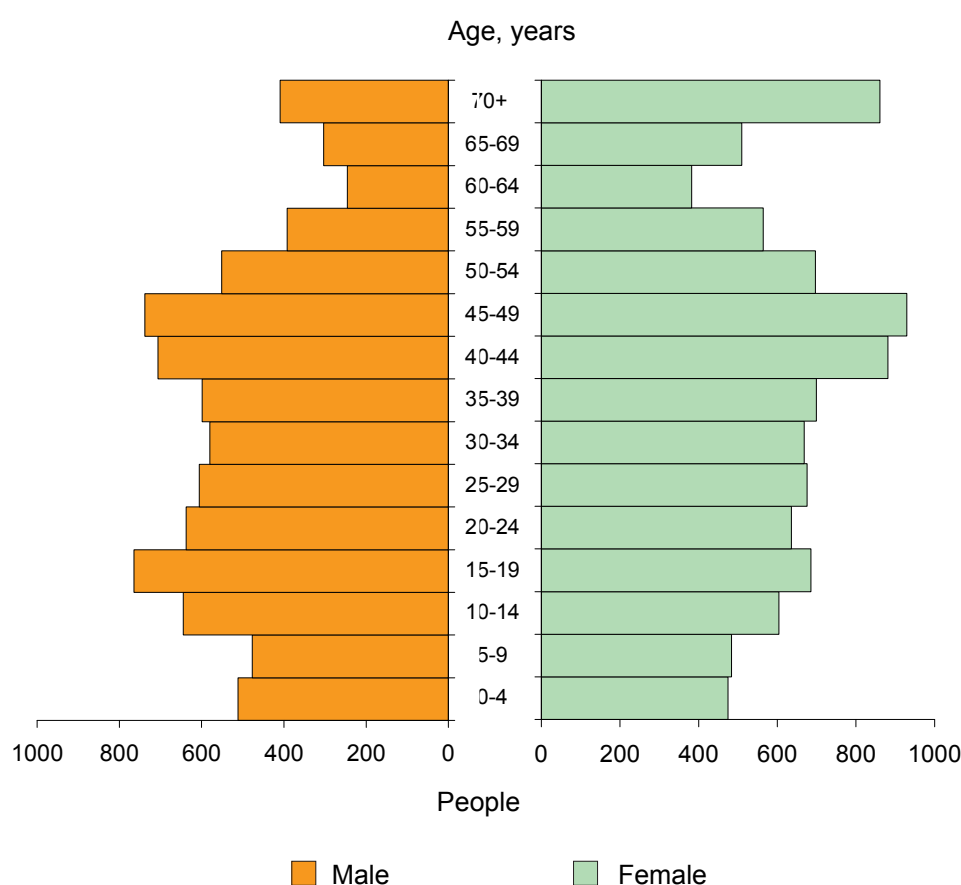
Of the 7,000 households selected for the sample, 100% were found to be occupied. Of these, 6,707 were successfully interviewed for a household response rate of 95.8% percent. In the interviewed households, 5,906 women (age 15-49) were identified. Of these, 5,895 were successfully interviewed, yielding a response rate of 99.8 percent. In addition, 3,051 children under age five were listed in the household questionnaire. Of these, questionnaires were completed for 3,051 which corresponds to a response rate of 100 percent. Overall response rates of 95.6% and 95.8% are calculated for the women's and under-5's interviews respectively (Table HH.1).

Differentials in household response rates by regions were from 94.4% in Mogilev region to 96.7% in Gomel region.

Characteristics of Households

The age and sex distribution of survey population is provided in Table HH.2. The distribution is also used to produce the population pyramid in Figure HH.1. In the 6,707 households successfully interviewed in the survey, 17,917 household members were listed. These figures also indicate that the survey estimated the average household size at 2.67.

Figure HH.1. Age and sex distribution of household population



According to the results of the survey, the proportion of males from the whole population was 45.6% (or 8,166 people) and 54.4% (or 9,751) were females. According to the 1999 census the sex distribution was 47 and 53%, as of 1st of January 2006 – 46.7 and 53.3 percent correspondingly. Thus, the sex distribution of sampled household population was not significantly different from the demographic statistical data.

The highest proportion accounted to the following age groups 35-39 years (8.8%) and 40-44 years (9.3%) within the structure of the survey population. Children aged 0-17 years made 23% (Table HH.2).

Table HH.3 provides basic background information on the sex of the household head, region, area of residence, number of household members.

According to the results of the survey, 66.1 % of households successfully interviewed in the survey, lived in urban areas and 33.9% in rural areas. More than half of households (56.8%) consisted of 2-3 members. From the total number of families in the Republic of Belarus, 43% are families with children. Besides, every seventh household had children under 5.

Characteristics of Respondents

The distribution of women 15-49 years of age according to region, area of residence, age, marital status, motherhood status, education, and wealth index quintiles² is provided in Table HH.4.

From the total number of interviewed women aged 15-49 years, 70.6% lived in urban areas and 29.4% – in rural areas. At the time of the survey 61.9% of women were married or lived in union, 15.7% – were widows or divorced, 22.4% – were never married. Half of the interviewed women had secondary special education, the quarter of women interviewed – the highest education.

The distribution of children by sex, region and area of residence, age, mother's or caretaker's education, and wealth is presented in Table HH.5.

From the total number of children under 5, 51.8% were boys and 48.2% – were girls. Two thirds of these children were lived in rural areas and one third in rural areas. The age distribution of children under 5 is equal: each year group consists of 20% of children. The children under 5 are equally represented in the wealth index quintiles groups with exception of extreme groups: in the wealthiest group of households the number of children under 5 is higher for 6.3% than in least wealthy group.

² The wealth index methodology can be found in Appendix C.

IV. Nutrition

Nutritional Status

Children's nutritional status is a reflection of their overall health. When children have access to an adequate food supply, are not exposed to repeated illness, and are well cared for, they reach their growth potential and are considered well nourished.

Malnutrition is associated with more than half of all children deaths worldwide. Undernourished children are more likely to die from common childhood ailments, and for those who survive, have recurring sicknesses and faltering growth. Three-quarters of the children who die from causes related to malnutrition were only mildly or moderately malnourished – showing no outward sign of their vulnerability. The Millennium Development target is to reduce by half the proportion of people who suffer from hunger between 1990 and 2015. The World Fit for Children goal is to reduce the prevalence of malnutrition among children under five years of age by at least one-third (between 2000 and 2010), with special attention to children under 2 years of age. A reduction in the prevalence of malnutrition will assist in the goal to reduce child mortality.

In a well-nourished population, there is a reference distribution of height and weight for children under age five. Under-nourishment in a population can be gauged by comparing children to a reference population. The reference population used in this report is the WHO/CDC/NCHS reference, which was recommended for use by UNICEF and the World Health Organization at the time the survey was implemented. Each of the three nutritional status indicators can be expressed in standard deviation units (z-scores) from the median of the reference population.

Weight-for-age is a measure of both acute and chronic malnutrition. Children whose weight-for-age is more than two standard deviations below the median of the reference population are considered *moderately or severely underweight* while those whose weight-for-age is more than three standard deviations below the median are classified as *severely underweight*.

Height-for-age is a measure of linear growth. Children whose height-for-age is more than two standard deviations below the median of the reference population are considered short for their age and are classified as *moderately or severely stunted*. Those whose height-for-age is more than three standard deviations below the median are classified as *severely stunted*. Stunting is a reflection of chronic malnutrition as a result of failure to receive adequate nutrition over a long period and recurrent or chronic illness.

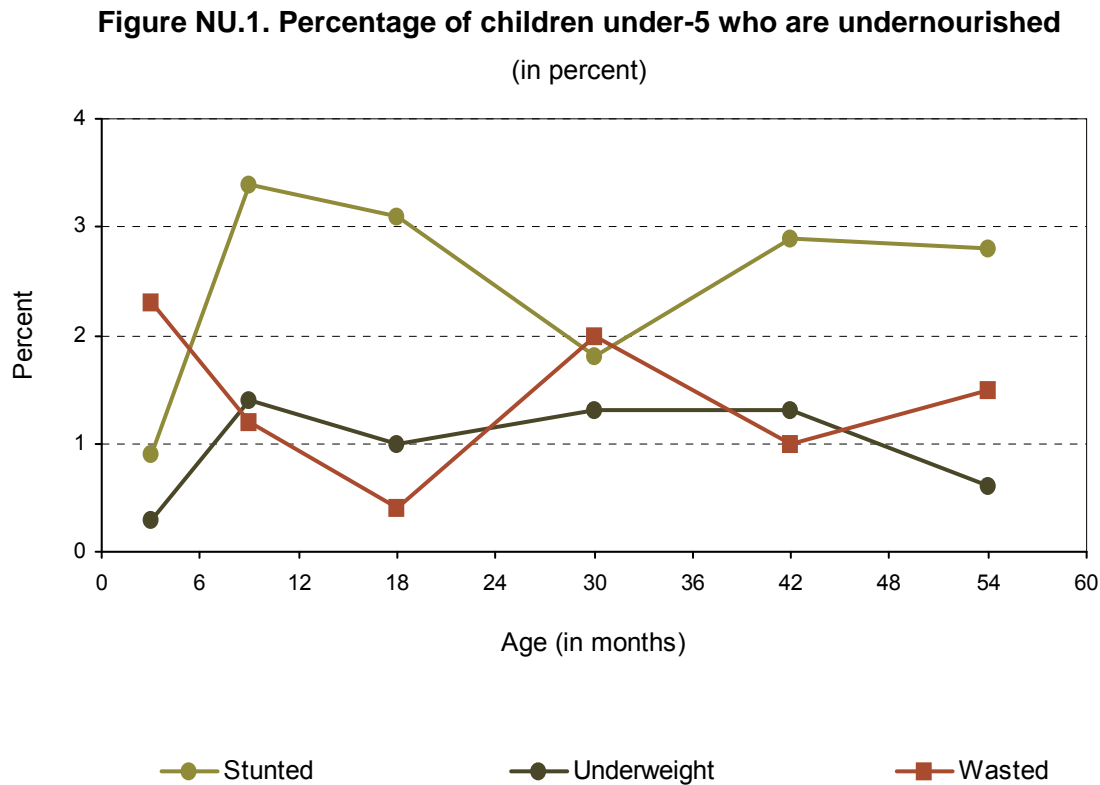
Finally, children whose weight-for-height is more than two standard deviations below the median of the reference population are classified as *moderately or severely wasted*, while those who fall more than three standard deviations below the median are *severely wasted*. Wasting is usually the result of a recent nutritional deficiency. The indicator may exhibit significant seasonal shifts associated with changes in the availability of food or disease prevalence.

In MICS3, weights and heights of all children under 5 years of age were measured using anthropometric equipment recommended by UNICEF (UNICEF, 2006). Findings in this section are based on the results of these measurements.

Table NU.1 shows percentages of children classified into each of these categories, based on the anthropometric measurements that were taken during fieldwork. Additionally, the table includes the percentage of children who are overweight, which takes into account those children whose weight for height is above 2 standard deviations from the median of the reference population.

According to the results of the survey, only one percent of children under age five in the Republic of Belarus are moderately underweight, 2.5 percent are too short for their age and 1.3 percent are too thin for their height (Table NU.1). Children in rural areas are more likely to be underweight and stunted than children in urban areas.

The children aged 6-11 months are subjected to underweight and stunted. The percent of the underweight children is the highest up to six months (Figure NU.1).



The proportion of overweight children in the Republic of Belarus is 6.7%. Among children in rural areas the proportion of overweight children is 7.8%; and in urban areas – 6.2. Among children whose mothers have incomplete secondary education the overweight proportion is higher (12.9 percent), compared to children of mothers with the highest education (5.9 percent).

Breastfeeding

Breastfeeding for the first few years of life protects children from infection, provides an ideal source of nutrients, and is economical and safe. However, many mothers stop breastfeeding too soon and there are often pressures to switch to infant formula, which can contribute to growth faltering and micronutrient malnutrition and is unsafe if clean water is not readily available. The World Fit for Children goal states that children should be exclusively breastfed for 6 months and continue to be breastfed with safe, appropriate and adequate complementary feeding for up to 2 years of age and beyond.

WHO/UNICEF have the following feeding recommendations:

- Exclusive breastfeeding for first six months.
- Continued breastfeeding for two years or more.
- Safe, appropriate and adequate complementary foods beginning at 6 months.
- Frequency of complementary feeding: 2 times per day for 6-8 month olds; 3 times per day for 9-11 month olds.

It is also recommended that breastfeeding be initiated within one hour of birth.

The indicators of recommended child feeding practices are as follows:

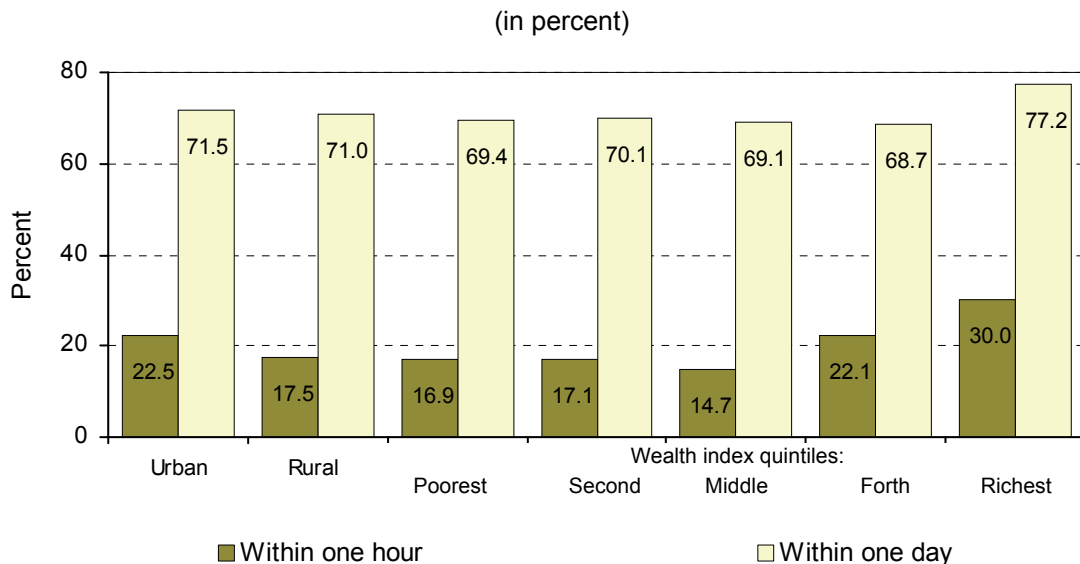
- Exclusive breastfeeding rate (< 6 months & < 4 months)
- Timely complementary feeding rate (6-9 months)
- Continued breastfeeding rate (12-15 & 20-23 months)

- Timely initiation of breastfeeding (within 1 hour of birth)
- Frequency of complementary feeding (6-11 months)
- Adequately fed infants (0-11 months)

In the Republic of Belarus the proportion of women who started breastfeeding their infants within one hour of birth is 21.1% and women who started breastfeeding within one day of birth (which includes those who started within one hour) is 71.4% (Table NU.2).

The proportion of women who started breastfeeding their infants within one hour of birth is 22.5% in urban areas, and 17.5% in rural areas (Figure NU.2). The disparities in this indicator were also found in wealth index quintiles. In the least wealthy quintile group the proportion of women who started breastfeeding their infants within one hour of birth is 16.9 %, but in the wealthiest quintile group – 30 %. The same situation was found among women who started breastfeeding within one day of birth: the least wealthy quintile group the proportion is 69.4% and in the most wealthiest – 77.2%.

Figure NU.2. Percentage of mothers who started breastfeeding within one hour and within one day of birth



Breastfeeding status is based on the reports of mothers/caretakers of children's consumption of food and fluids in the 24 hours prior to the interview. *Exclusively breastfed* refers to infants who received only breast milk (and vitamins, mineral supplements, or medicine). Table NU.3 shows exclusive breastfeeding of infants during the first six months of life (separately for 0-3 months and 0-5 months), as well as complementary feeding of children 6-9 months and continued breastfeeding of children at 12-15 and 20-23 months of age.

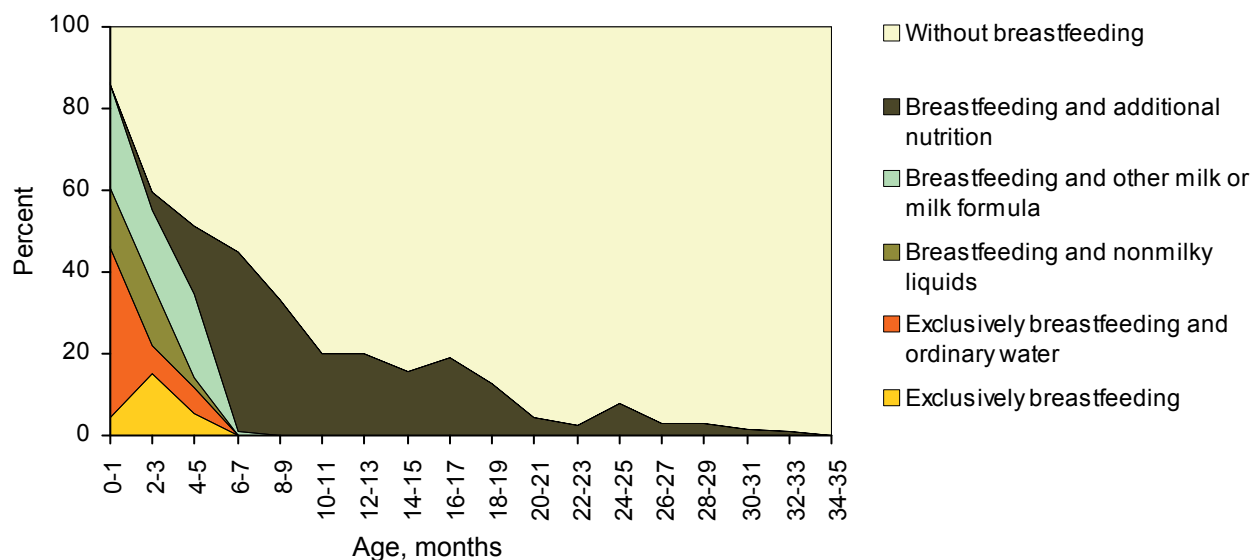
According to the results of the survey, approximately 12 percent of children aged 0-3 months are exclusively breastfed. Only nine percent of children aged less than six months were exclusively breastfed, in the urban areas the level is 9.7 percent and in rural areas – 6.7% (a level considerably lower than recommended). Among the children aged 0-5 months girls were more exclusively breastfed than boys (11.2 percent and 7 percent).

At age 6 months, 38 percent of children are receiving breast milk and solid or semi-solid foods. By age 12-15 months, 18 percent of children are still being breastfed and by age 20-23 months, 3.6 percent are still breastfed. At the age group 12-15 months, boys were more exclusively breastfed than girls (22.3 percent and 14 percent).

Figure NU.3 shows the detailed pattern of breastfeeding by the child's age. Even at the earliest ages, the majority of children are receiving liquids or foods other than breast milk. By the end of the sixth month, the percentage of children exclusively breastfed in the Republic of Belarus is below 10 percent. Only about 2.5 percent of children are receiving breast milk after 2 years.

Figure NU.3. Infant feeding patterns by age: Percent distribution of children aged under 3 years by feeding pattern by age group

(in percent)



According to the results of the survey, only 9 percent of infants aged 0-5 months, 34.4 percent of infants aged 6-8 months and 21 percent of infants aged 9-11 months are being adequately fed in the Republic of Belarus. Adequate feeding among all infants (aged 0-11) drops to 17.8 percent. All these indicators are higher in urban areas and among infants whose mothers have the highest education (Table NU.4).

Low Birth Weight Infants

Weight at birth is a good indicator not only of a mother's health and nutritional status but also the newborn's chances for survival, growth, long-term health and psychosocial development. Low birth weight (less than 2,500 grams) carries a range of grave health risks for children. Babies who were undernourished in the womb face a greatly increased risk of dying during their early months and years. Those who survive have impaired immune function and increased risk of disease.

Low birth weight stems primarily from the mother's poor health and nutrition. Three factors have most impact: the mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood), and poor nutrition during the pregnancy. Inadequate weight gain during pregnancy is particularly important since it accounts for a large proportion of foetal growth retardation.

In the industrialized world, cigarette smoking during pregnancy is the leading cause of low birth weight. In developed and developing countries alike, teenagers who give birth when their own bodies have yet to finish growing run the risk of bearing underweight babies.

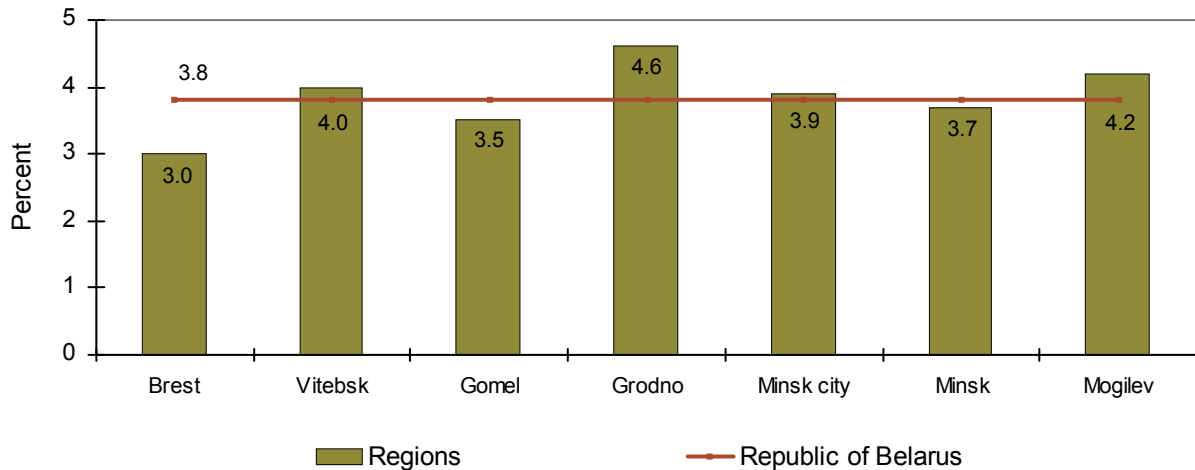
In MICS3, the percentage of new-born infants weighing below 2,500 grams is estimated from two items in the questionnaire: the mother's assessment of the child's **size** at birth (i.e., very small,

smaller than average, average, larger than average, very large) and the mother's recall of the child's **weight** or the weight as recorded on a health card if the child was weighed at birth³.

According to the results of the survey, 99.3 percent of infants were weighed at birth and 3.8 percent of infants are estimated to weigh less than 2,500 grams at birth (Table NU.5). There were not significant variations by region: from 3 percent in Brest region to 4.6 percent in Grodno region (Figure NU.4). The percentage of low birth weight does not vary much by place of residence or by wealth level.

Figure NU.4. Percentage of infants weighing less than 2,500 grams at birth

(in percent)



³ For a detailed description of the methodology, see Boerma, Weinstein, Rutstein and Sommerfelt, 1996.

V. Child Health

Immunization

The Millennium Development Goal (MDG) 4 is to reduce child mortality by two thirds between 1990 and 2015. Immunization plays a key part in this goal. Immunizations have saved the lives of millions of children in the three decades since the launch of the Expanded Programme on Immunization (EPI) in 1974. Worldwide there are still 27 million children overlooked by routine immunization and as a result, vaccine-preventable diseases cause more than 2 million deaths every year.

A World Fit for Children goal is to ensure full immunization of children under one year of age at 90 percent nationally, with at least 80 percent coverage in every district or equivalent administrative unit.

According to UNICEF and WHO guidelines, a child should receive a BCG vaccination to protect against tuberculosis, three doses of DPT to protect against diphtheria, pertussis, and tetanus, three doses of polio vaccine, and a measles vaccination by the age of 12 months.

The National expanded vaccination programme is realizing in the Republic of Belarus. The goal of the Programme is to reduce the morbidity, disability and mortality rates from the infectious pathology and as a final result – liquidation a number of infection diseases.

The National vaccination calendar guarantees the free of charge vaccination from nine infectious diseases: tuberculosis, polio, diphtheria, whooping-cough, tetanus and hepatitis B, measles, rubella and mumps.

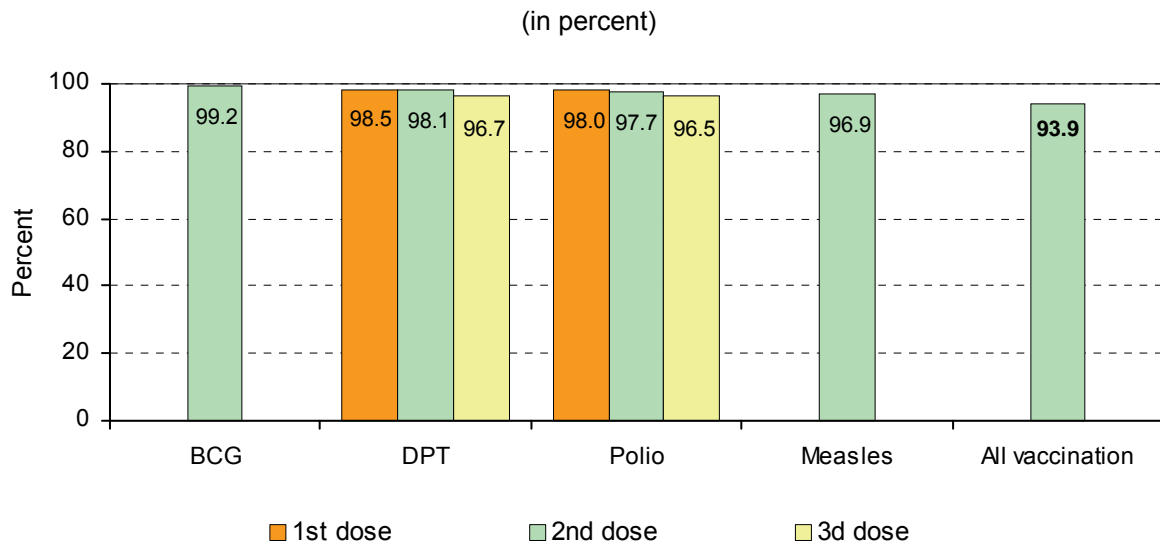
Term of vaccination	Vaccine
1 day (24 hours)	HepB-1
3-4 day	BCG
1 month	HepB-2
3 month	DTP-1, Polio-1
4 month	DTP-2, Polio-2
5 month	DTP-3, Polio-3, HepB-3
12 month	Measles, rubella, mumps

During the MICS3 survey the data about vaccination was collected by the interviewers from the vaccination cards of children under 5 in the local health institutions/polyclinics.

Overall, 99.6 percent of children had immunization cards (Table CH.2). The percentage of children aged 18-29 months who received all vaccinations within the first year of life is shown in Table CH.1 and Table CH.1c.

According to the survey, approximately 99 percent of children aged 18-29 months received a BCG vaccination and the first dose of DPT by the age of 12 months. The percentage of children received the second dose of DPT is 98.1 percent, the third dose – 96.7 percent (Figure CH.1). Similarly by the age of 12 months, 98 percent of children received Polio 1 and Polio 3 – 96.5 percent. Coverage by measles vaccine by the age of 18 months constituted 96.7 percent. As a result, the percentage of children who had all recommended vaccinations by their first birthday is 93.9 percent.

Figure CH.1. Percentage of children aged 18-29 months who received the recommended vaccination within the first year of life*



* for measles vaccination – during the first 18 months

In the Republic of Belarus, for children by the age of 12 month the Hepatitis B vaccination is also recommended. According to the immunization schedule 99.3 percent of infants aged 18-29 months received the first dose of Hep-B1 within the first year of life (Table CH.1c). The percentage declines for subsequent doses of Hepatitis B vaccine to 98.4 percent for the second dose, and 96.9 percent for the third dose.

Tables CH.2 and CH.2c show vaccination coverage rates among children 18-29 months by background characteristics. Thus, all recommended for children of this age vaccinations (three doses of DTP, three doses of Polio, BCG and MMR) were made for 98 percent of boys and for 96.5 percent of girls. The level of vaccination coverage in urban areas is lower than in rural areas. Regionally vaccination coverage rates vary from 95.5 percent in Minsk city to 100.0 percent in Grodno region.

The HepB vaccination coverage rate among children 18-29 months in the Republic of Belarus is approximately 99 percent (HepB-1 – 99.3%, HepB-2 – 99.1%, HepB-3 – 98.5%).

Oral Rehydration Treatment

Diarrhoea is the second leading cause of death among children under five worldwide. Most diarrhoea-related deaths in children are due to dehydration from loss of large quantities of water and electrolytes from the body in liquid stools. Management of diarrhoea – either through oral rehydration salts (ORS) or a recommended home fluid (RHF) - can prevent many of these deaths. Preventing dehydration and malnutrition by increasing fluid intake and continuing to feed the child are also important strategies for managing diarrhoea.

The goals are to:

- 1) reduce by one half death due to diarrhoea among children under five by 2010 compared to 2000 (A World Fit for Children); and
- 2) reduce by two thirds the mortality rate among children under five by 2015 compared to 1990 (Millennium Development Goals).

In addition, the World Fit for Children calls for a reduction in the incidence of diarrhoea by 25 percent.

The indicators are:

- Prevalence of diarrhoea
- Oral rehydration therapy (ORT)
- Home management of diarrhoea
- (ORT or increased fluids) **AND** continued feeding.

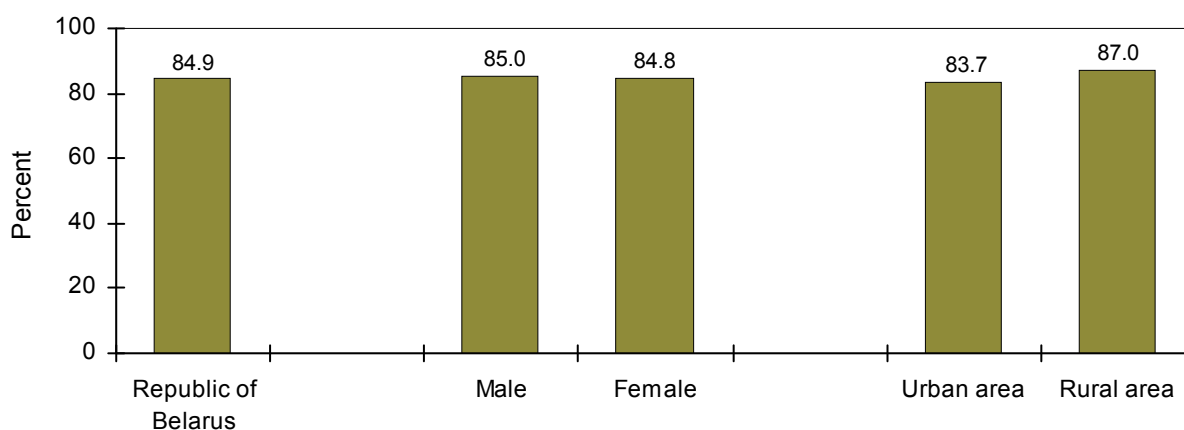
In the MICS questionnaire, mothers (or caretakers) were asked to report whether their child had had diarrhoea in the two weeks prior to the survey. If so, the mother was asked a series of questions about **what exactly** the child was drinking and eating during the episode and whether **that** was more or less the same what the child usually ate and drank.

Overall in the republic, 4 percent of under-five children had diarrhoea within the two weeks preceding the survey (Table CH.3). Boys and girls had almost equal percentage of diarrhoea; no big differences were registered in diarrhoea prevalence among regions or place of living.

From amongst total number of under-five children who had diarrhoea more than 21 percent received fluids from ORS packets; 18.2 percent received pre-packaged ORS fluids, and 61.3 percent received recommended homemade fluids. Approximately 85 percent of children with diarrhoea received one or more of the recommended home treatments, while 15 percent received no rehydration therapy at home.

Figure CH.2. Percentage of children aged 0-59 months with diarrhea who received oral rehydration treatment

(in percent)



More than one third (37 percent) of under five children with diarrhoea drank more than usual while 63 percent drank the same or less (Table CH.4). 62 percent ate somewhat less, same or more (continued feeding), but 38 percent ate much less or ate almost none.

Recommended diarrhoea treatment at home was received by almost 16 percent of children (they received sufficient amount of fluids and at the same time continued feeding). More than a half of children with diarrhoea (54.2 per cent) received oral rehydration treatment or home treatment.

There are some differences in the home management of diarrhoea according to place of living. Thus, in rural settlements 19.5 percent of children were treated at home, as in cities and towns – 13.6 percent of children.

Care Seeking for Suspected Pneumonia and Antibiotic Treatment of Pneumonia

Pneumonia is the leading cause of death in children and the use of antibiotics in under-5s with suspected pneumonia is a key intervention. A World Fit for Children goal is to reduce by one-third the deaths due to acute respiratory infections.

The indicators are:

- Prevalence of suspected pneumonia
- Care seeking for suspected pneumonia
- Antibiotic treatment for suspected pneumonia
- Knowledge of the danger signs of pneumonia

According to UNICEF, children with suspected pneumonia are those who had an illness with a cough accompanied by rapid or difficult breathing and whose symptoms were NOT due to a problem in the chest and a blocked nose.

10.6 percent of children aged 0-59 months were reported to have had symptoms of pneumonia during the two weeks preceding the survey (Table CH.5). Of these children, the main part of children (89.5 percent) was taken to appropriate medical institutions.

In cities and urban-type settlements 88.9 percent of children with suspected pneumonia sought for help at the state polyclinics. Share of children, taken to hospitals, constituted 10.2 percent. In rural villages 30.1 percent of children with suspected pneumonia sought for medical assistance at a local medical attendant, 29.7 – at polyclinics, 13.4 percent of children were taken to hospitals.

Table CH.6 presents the use of antibiotics for the treatment of suspected pneumonia in under-5s by sex, age, region, residence, age, and socioeconomic factors. In Belarus, 67 percent of under-5 children with suspected pneumonia had received an antibiotic during the two weeks prior to the survey, in cities and urban-type settlements – 66.4, in rural areas – 68.6 percent of children.

The use of antibiotics rises with the age of a child. Thus, the share of children who had antibiotic treatment in the age group 0-35 months is 60 percent, while in the age group 36-59 months - 74 percent. In the families where mothers/caregivers had special secondary education the share of children with suspected pneumonia who received antibiotic treatment was 71.6 percent and among children whose mothers/caretakers had higher education – 60.9 percent.

Issues related to knowledge of danger signs of pneumonia are presented in Table CH.6a. Obviously, mothers' knowledge of the danger signs is an important determinant of medical care seeking behaviour. Overall, 33.2 percent of women know about the two danger signs of pneumonia – fast and difficult breathing. The most commonly identified symptom for taking a child to a health facility is the developing of fever (noted by 94.6 percent of mothers/caretakers of under-5s). The second important symptom for taken a child to a medical facility identified by 61.8 percent of mothers/caregivers is heavy/difficult breathing and 41.9 percent of mothers identified fast breathing as the third reason for taking children immediately to a health care provider. The other symptoms considered by women as a reason for seeking help from a medical institution immediately were distributed as follows: a child has blood in stool – 46.1 percent, becomes sicker – 44.1 percent, not able to drink or breastfeed – 18.7 percent, has other symptoms – 28.3 percent.

The table also shows that the level of mothers' knowledge of the two danger signs of pneumonia and of other symptoms for taking a child immediately to a health facility actually does not depend upon wealth, education, place of mother's residence.

Solid Fuel Use

More than 3 billion people around the world rely on solid fuels (biomass and coal) for their basic energy needs, including cooking and heating. Cooking and heating with solid fuels leads to high levels of indoor smoke, a complex mix of health-damaging pollutants. The main problem with the use of solid fuels is products of incomplete combustion, including CO, polyaromatic hydrocarbons, SO₂, and other toxic elements. Use of solid fuels increases the risks of acute respiratory illness, pneumonia, chronic obstructive lung disease, cancer, and possibly tuberculosis, low birth weight, cataracts, and asthma. The primary indicator is the proportion of the population using solid fuels as the primary source of domestic energy for cooking.

At the period when the survey was conducted, only 3.4 percent of all households in the Republic of Belarus were using solid fuels (wood) for cooking. Percentage of households using solid fuels in towns and villages is very low – 0.4 percent. In rural settlements this indicator constituted 9.3 percent (Table CH.7).

The share of households, using solid fuels for cooking, considerably changes in dependence of the level of prosperity. The richest households do not use at all such type of fuel for cooking, whereas the share amongst poorest households is 14 percent. The main types of fuel for cooking are natural and liquefied gas (noted by 86.8 percent of households).

Solid fuel use alone is a poor proxy for indoor air pollution, since the concentration of the pollutants is different when the same fuel is burnt in different stoves or fires. Use of closed stoves with chimneys minimizes indoor pollution, while open stove or fire with no chimney or hood means that there is no protection from the harmful effects of solid fuels. The findings show that in the Republic of Belarus only closed stoves with chimneys and open stoves with chimneys or smoke pipes are used.

VI. Environment

Water and Sanitation

Safe drinking water is a basic necessity for good health. Unsafe drinking water can be a significant carrier of diseases such as trachoma, cholera, typhoid, and schistosomiasis. Drinking water can also be tainted with chemical, physical and radiological contaminants with harmful effects on human health. In addition to its association with disease, access to drinking water may be particularly important for women and children, especially in rural areas, who bear the primary responsibility for carrying water, often for long distances.

The MDG goal is to reduce by half, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation. The World Fit for Children goal calls for a reduction in the proportion of households without access to hygienic sanitation facilities and affordable and safe drinking water by at least one-third.

The list of indicators used in MICS are as follows:

Water

- Use of improved drinking water sources.
- Use of safe water treatment method.
- Time to source of drinking water.
- Person collecting drinking water.

The distribution of the population by source of drinking water is shown in Table EN.1 and Figure EN.1. The population using improved sources of drinking water are those using any of the following types of supply: piped water (into dwelling, yard or plot), public tap/standpipe, tubewell/borehole, protected well. Bottled water is considered as an improved water source only if the household is using an improved water source for other purposes, such as handwashing and cooking.

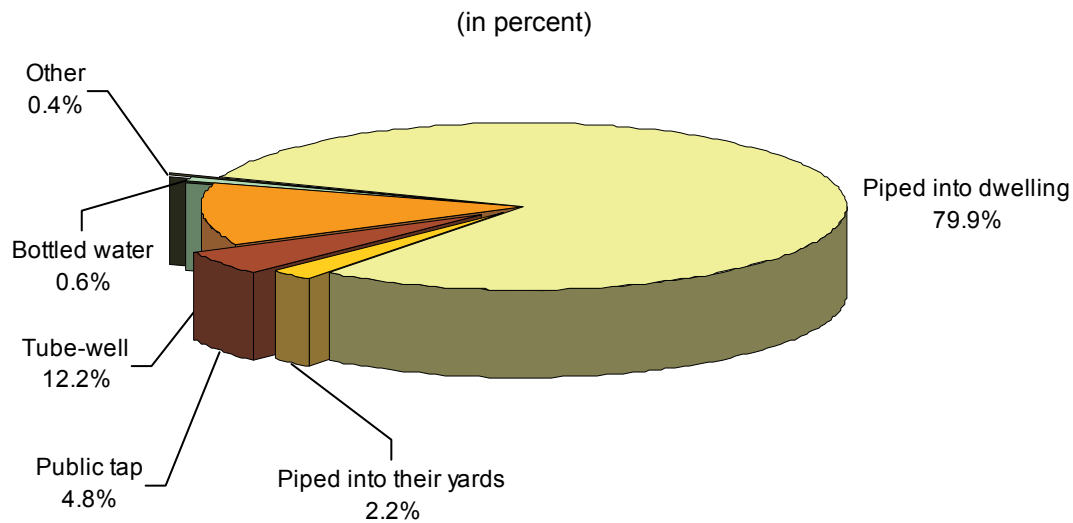
The findings show that practically all population of the country has access to improved source of drinking water – 99.6 percent, including 99.8 percent in urban areas and 99.3 per cent in rural areas. All population in the city of Minsk and Brest region is using improved sources of drinking water.

The source of drinking water for the population varies strongly by place of residence. On the whole in the country 82.1 percent of the population used drinking water that is piped into their dwelling or into their yard or plot, in urban areas – 92.7 percent, in rural areas – 61.3 percent. In rural areas an important source of drinking water for the population is a protected well (30.7 percent). Besides, rural population used public water-pumps in the street – 7.1 percent.

The differences in using of improved sources of drinking water are more significant depending on the population's wealth and level of education of the head of family. The richest population (according to wealth index) used drinking water piped into dwelling - 98.9 percent and bottled water – 1.1 percent. Only 22.3 percent of the poorest population used drinking water piped into dwelling, yard or plot. The main source of drinking water for them is protected well – 54.4 percent and public water-pumps in the street – 21.6 percent.

Population living in a household where the head of family has higher education uses mainly piped drinking water (93.3 percent) and bottled water (1.9 percent). Only 38.6 percent of household population where the head of family has primary education uses piped drinking water. The main source of drinking water for this population is a protected well – 49 percent and public water-pumps in the street – 10.8 percent.

Figure EN.1. Percentage distribution of household members by source of drinking water



The main part of the population of the Republic of Belarus is covered by centralized water-supply with controlled and adequately high quality of water.

Households were asked of the ways they may be treating water at home to make it safer to drink – boiling, adding bleach or chlorine, using a water filter which are considered as proper treatment of drinking water.

The findings show that 60.5 per cent of the household population of the country used appropriate water treatment methods to make it safer to drink (Table EN.2). In towns and urban settlements appropriate water treatment methods were used by 72.8 percent and in rural areas only 36.4 percent of the population.

On average 35.9 percent of the population of the country used no water treatment methods, in rural areas – 60.6 percent. The largest share of households not using any water treatment methods was observed among the households where the head of family has primary education (60.7 percent) and in the poorest quintile group (64.4 percent).

The most common in-house treatment method of drinking water, used by the country's population, is boiling: 53.3 percent of the population used that treatment method; in urban area – 62.9 percent, in rural area – 34.6 percent. The share of the population which used such treatment methods as “settle water” was 18.6 percent (in urban area – 22.3 percent, in rural area – 11.4 percent), “used a water filter” – 14.6 percent (in urban areas – 20.4 percent, in rural areas – 3.1 percent).

The percentage of households using different water treatment methods differs depending on the level of education of the head of household. So, in the households where the head of household has higher education, the share of the population using such treatment method as boiling is 59.7 percent; using a water filter – 26.9 percent, settle water – 18.2 percent. No treatment methods were used by 23.6 percent of this population category. In the households where the head of household has primary education, the following in-house treatment of drinking water was used: 33.8 percent of the population used boiling of water, 2.4 percent were using a water filter, 11.4 percent used “settle water”.

More than a half of this population category used no water treatment methods at all (60.7 percent).

The methods of water treatment differ considerably depending on the level of wealth of the population. The main share of the richest population (80.2 percent) and only 30.8 percent of the poorest population used proper methods of drinking water treatment. The share of the richest population using boiling of water is 64 percent, what is two times more than the share of the least

wealthy population (30.3 percent). Only 1.1 percent of the poorest population used a water filter and one third (33.3 percent) of the richest population.

Table EN.3 shows that 80.8 percent of households have a drinking water source on the premises. It takes less than 15 minutes to get to the water source and bring water for 16.8 percent of the households on average in the country, in rural areas – for 38.4 percent, among the poorest households – for 69.6 percent. Excluding those households with water on the premises, the average time to the source of drinking water and back to premises is 7.7 minutes. In Mogilev and Vitebsk regions this index is higher than the average time in the country and constitutes, correspondingly, 10.5 and 9.3 minutes.

More than 15 minutes for this purpose spent 2.3 percent of households of the country, among the poorest households this indicator was 8.7 percent.

In the households with no source of drinking water on the premises, the person usually collecting water is: 50.3 percent – adult female, 48.6 percent – adult male and boys (Table EN.4). In urban area the share of women collecting water is a bit higher than that of men (52.8 and 45.8 percent), in rural area no difference was revealed (49.5). Among regions the largest share of women collecting water was in Vitebsk region – 57 percent, the smallest in Grodno region – 44.9 percent.

Sanitation

- Use of improved sanitation facilities
- Sanitary disposal of child's faeces

Inadequate disposal of human excreta and personal hygiene is associated with a range of diseases including diarrhoeal diseases and polio. Improved sanitation facilities for excreta disposal include: flush or pour flush to a piped sewer system, septic tank, or latrine; ventilated improved pit latrine, pit latrine with slab, and composting toilet.

The findings show that 99.4 percent of the country's population is living in households using improved sanitation facilities for disposal of human excreta, in urban area – 99.5 percent, in rural area – 98.9 percent (Table EN.5).

The percentage of the population using improved sanitation facilities for disposal of human excreta is profoundly different between urban and rural areas. In urban area the main type of sanitary-hygienic facilities is flush or pour flush to a piped sewer system (mentioned by 85.6 percent of the population), in rural area it is a pit latrine with slab (mentioned by 54.5 percent of the population).

Use of different types of improved sanitation facilities is strongly correlated with wealth of households. All of the richest population (according to wealth index) used for disposal of human excreta flush or pour flush to a piped sewer system. Among least wealthy households only 0.2 percent used flush or pour flush to a piped sewer system. This category of population used mainly a pit latrine with slab (94.9 percent).

Differences in the equipment of accommodation with modern services and utilities are considerable depending on the level of education of the head of household. So, in the households where the head of household has higher education 88.5 percent of the population used flush or pour flush to a piped sewer system. In the households where the head of household had primary education, only 22 percent use this type of improved sanitation facilities.

Safe disposal of a child's faeces is disposing of the latest child's faeces using a toilet or by rinsing it into a toilet or latrine. The findings show that 76.4 percent of the population of the Republic of Belarus lives in households using safe disposal of a child's faeces (Table EN.6). In urban area the share of such population was 78.2 percent, in rural areas – 72.1 percent. The rest of the population

used less safe methods of disposal of a child's faeces (throw away or rinse into dumb well or into ditch – on average 4.9 percent, put into garbage – on average 16.6 percent).

An overview of the percentage of household members using improved sources of drinking water and sanitary means of excreta disposal is presented in Table EN.7. Total 99 percent of the population in the Republic of Belarus used improved sources of drinking water and sanitary means of excreta disposal (99.3 percent in urban and 98.3 percent in rural areas). Percentage of the household population using improved sources of drinking water and sanitary means does not vary much in different regions. There are no essential distinctions depending on the educational level of the head of household. All households with higher wealth index – 60 percent of the country's population (middle, fourth and richest quintiles according to wealth index) – use improved sources of drinking water and sanitary means of excreta disposal.

VII. Reproductive Health

Contraception

Appropriate family planning is important to the health of women and children by:

- 1) preventing pregnancies that are too early or too late;
- 2) extending the period between births;
- 3) limiting the number of children.

A World Fit for Children goal is access by all couples to information and services to prevent pregnancies that are too early, too closely spaced, too late or too many.

Current use of contraception was reported by 72.6 percent of women of the republic currently married or in union (Table RH.1). The most popular method is the IUD which is used by one of four married women in the Republic of Belarus. The next most popular method is condoms, which accounts for 17.5 percent of women. One of ten married women reported the use of the pills.

Modern contraceptive methods are: female and male sterilization, contraceptive pills, IUDs, injectables, implants, condom, diaphragm and spermicidal foam/jellies. Traditional methods are: the lactation amenorrhea method (LAM), periodic abstinence, withdrawal. The findings show that more than a half of married women (56.5 percent) pointed out the modern methods of contraception. 16.1 percent of women reported the usage traditional contraception methods.

Among married women lived in urban area 73.6 percent used contraception, in rural areas – 70.6 percent. From the group of married women without children 28.6 percent used one or the other method of contraception.

In addition to differences in prevalence, the method mix varies by women's education level. Among married women with secondary education the percentage of those using modern contraception methods is 52.1 percent, while this indicator among women with higher education is 63.1 percent. The most popular method among women with secondary education is the IUD (25.3 percent of women). Women with higher education more often use condoms (24.3 percent).

Different contraceptive methods prevalence among married women depends also upon the level of their wealth. Analysis of the quintile groups according to wealth index shows that the richest women more often use modern contraception methods than the poorest ones (58.6 percent and 49.3 percent).

Antenatal Care

The antenatal period presents important opportunities for reaching pregnant women with a number of interventions that may be vital to their health and well-being and that of their infants. Better understanding of foetal growth and development and its relationship to the mother's health has resulted in increased attention to the potential of antenatal care as an intervention to improve both maternal and newborn health. For example, if the antenatal period is used to inform women and families about the danger signs and symptoms and about the risks of labour and delivery, it may provide the route for ensuring that pregnant women do, in practice, deliver with the assistance of a skilled health care provider. The antenatal period also provides an opportunity to supply information on birth spacing, which is recognized as an important factor in improving infant survival. Tetanus immunization during pregnancy can be life-saving for both the mother and infant. The prevention and treatment of malaria among pregnant women, management of anaemia during pregnancy and treatment of STIs can significantly improve foetal outcomes and improve maternal health. Adverse outcomes such as low birth weight can be reduced through a combination of interventions to improve women's nutritional status and prevent

infections (e.g., malaria and STIs) during pregnancy. More recently, the potential of the antenatal period as an entry point for HIV prevention and care, in particular for the prevention of HIV transmission from mother to child, has led to renewed interest in access to and use of antenatal services.

WHO recommends a minimum of four antenatal visits based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific on the content on antenatal care visits, which include:

- Blood pressure measurement.
- Urine testing for bacteriuria and proteinuria.
- Blood testing to detect syphilis and severe anaemia.
- Weight/height measurement (optional).

The findings show that coverage of antenatal care is practically absolute in Belarus with 99.4 percent of women receiving antenatal care at least once during the pregnancy. Antenatal care coverage is practically unaltered in all the regions of the country and does not depend upon the place of residence (Tables RH.2 and RH.3).

Irrespective of age, level of education or wealth all pregnant women in the country received antenatal care and passed all tests.

Assistance at Delivery

Three quarters of all maternal deaths occur during delivery and the immediate post-partum period. The single most critical intervention for safe motherhood is to ensure a competent health worker with midwifery skills is present at every birth, and transport is available to a referral facility for obstetric care in case of emergency. A World Fit for Children goal is to ensure that women have ready and affordable access to skilled attendance at delivery. The indicators are the proportion of births with a skilled attendant and proportion of institutional deliveries. The skilled attendant at delivery indicator is also used to track progress toward the Millennium Development target of reducing the maternal mortality ratio by three quarters between 1990 and 2015.

The MICS-3 included a number of questions to assess the proportion of births attended by a skilled attendant. A skilled attendant includes a doctor, nurse, midwife or auxiliary midwife.

In the Republic of Belarus 100 percent of births occurring in the two years prior to the MICS-3 survey were attended by skilled personnel (Table RH.4). This indicator is unaltered in all the regions of the country. It does not depend upon age, education or wealth of a woman. At the same time in rural areas 99.5 percent of deliveries were at the medical institutions.

93.9 percent of the births in the two-year period prior to the MICS survey were delivered with assistance of a doctor, 6.1 percent – medical nurses and midwives. In urban area doctors assisted the delivery of 95.7 percent of births, in rural area – of 89.3 percent of deliveries. This indicator could be explained by the place of delivery (in rural area probability of assistance at delivery at home or ambulance car is higher than in urban area).

VIII. Child Development

It is well recognized that a period of rapid brain development occurs in the first 3-4 years of life, and the quality of home care is the major determinant of the child's development during this period. In this context, adult activities with children, presence of books in the home, for the child, and the conditions of care are important indicators of quality of home care. A World Fit for Children goal is that "children should be physically healthy, mentally alert, emotionally secure, socially competent and ready to learn."

Information on a number of activities that support early learning was collected in the survey. These included the involvement of adults with children in the following activities: reading books or looking at picture books, telling stories, singing songs, taking children outside the home, compound or yard, playing with children, and spending time with children naming, counting, or drawing things.

84.1 percent of under-five children were engaged by an adult in more than four activities that promote learning and school readiness during the 3 days preceding the survey (Table CD.1). The average number of activities that adults engaged with children was 5.0. A father's involvement in such activities was somewhat limited: average number of activities was 2.2. Father's involvement with one or more activities was 71 percent. Percent of children living in a household without their fathers was 16.4 from the total number of children.

There are no gender differentials in terms of adult activities with children. Percentage of adults engaged in learning and school readiness activities with children in urban areas (85 percent), in rural areas (82.4 percent). The largest differentials were observed by socio-economic status: 86.9 per cent of children living in the richest households, and 79.2 percent of children living in the poorest households were engaged in learning. The share of children whose father was engaged in learning and school readiness activities with children was 78.3 % in the richest households and 61.6% in the poorest households. More educated fathers engaged more in such activities with children than those with less education.

IX. Education

Pre-School Attendance and School Readiness

Attendance to pre-school education in an organized learning or child education programme is important for the readiness of children to school. One of the World Fit for Children goals is the promotion of early childhood education.

The findings show that more than 86 percent of children aged 36-59 months are covered by the child education programme and are attending pre-schools or centres of pre-school education and development (Table ED.1). Urban-rural differentials are significant – the figure is as high as 90.1 percent in urban areas, compared to 79.1 percent in rural areas.

It is necessary to note that the share of young children attending educational classes at the pre-schools or centres of pre-school education and development is lower in the age group 36-47 months (81.3 percent) than in the age group 48-59 months (90.6 percent).

Overall in the republic, 92.9 percent of children who are at the time of the survey reached age 6 and were attending the first grade of primary school were attending pre-school the previous year. The proportion among males is slightly higher (96.1 percent) than females (90 percent). In urban areas 91.6 percent of children of the first grade had attended pre-school during the previous year compared to 95.1 percent of children living in rural areas.

Primary and Secondary School Participation

Universal access to basic education and the achievement of primary education by the world's children is one of the most important goals of the Millennium Development Goals and A World Fit for Children. Education is a vital prerequisite for combating poverty, empowering women, protecting children from hazardous and exploitative labour and sexual exploitation, promoting human rights and democracy, protecting the environment, and influencing population growth.

The indicators for primary and secondary school attendance include:

- Net intake rate in primary education.
- Net primary school attendance rate.
- Net secondary school attendance rate.
- Net primary school attendance rate of children of secondary school age.
- Female to male education ratio (or gender parity index – GPI).

The indicators of school progression include:

- Survival rate to grade five.
- Transition rate to secondary school.
- Net primary completion rate.

The findings show that in 2005 in the Republic of Belarus, 75.5 percent of children who are of primary school entry age (age 6) were attending the first grade of primary school (ED.2). Besides, it is necessary to note that 22.9 percent of children were attending the first grade at the pre-school establishments. Sex differentials are minor (about 2-3 percentage points). Children's participation to primary school is timelier in rural areas (79.5 percent) than in urban areas (73 percent). A positive correlation with mother's education is observed: the higher level of mother's education – the bigger proportion of children age 6 were attending the first grade. So, 64.7 percent of children age 6 whose mothers had secondary education was attending the first grade and 79.6 percent of children whose mothers had higher education.

In 2005 the majority of children aged 6-9 (93.2 percent) were attending primary or secondary school, 6.4 percent attended pre-schools and were enrolled into the primary school education programme, and only 0.4 percent of children did not attend the educational establishments (Table ED.3). 100 percent school attendance was provided for children aged 7-9, 75.5 percent of six year-old children were attending primary schools. In urban areas 92.1 percent of children aged 6-9 were attending primary and secondary schools, in rural areas – 95 percent.

The MICS3 findings show that in 2005 secondary school net attendance ratio was 95.9 percent of children age 10-16 (Table ED.4). Of the remaining part some of them were either attending primary school (3.5 percent) or were out of school (0.6 percent). Analysis of the age factor shows that there are children of secondary school age (10-11 years old) who attend primary school when they should be attending secondary school.

The primary school net attendance ratio of children of secondary school age in 2005 is presented in Table ED.4W. The results of the survey show that 3.5 per cent of children age 10-11 were attending primary school (children aged 10 – 33.6 percent of children; children age 11 – 0.9 percent of children).

In the Republic of Belarus all children starting grade one will, as a rule, reach grade five.

At the moment of the survey, on average in the republic only 69 percent of the children of primary school completion age (9 years) were attending the last (the fourth) grade of primary education (Table ED.5). This value should be distinguished from the gross primary completion ratio which includes children of any age attending the last grade of primary school.

Primary completion rate is directly correlated with the household place of residence. The highest net primary completion rate is in rural areas (75.6 percent of children); in urban areas it is noticeably lower (64.3 percent of children).

All children that completed successfully the last grade of primary school in 2004/2005 school year were found at the moment of the survey to be attending the first grade of secondary school (grade 5).

The ratio of girls to boys attending primary and secondary education is better known as the Gender Parity Index (GPI). Notice that the ratios included here are obtained from net attendance ratios rather than gross attendance ratios. The last ratios provide an erroneous description of the GPI mainly because a part of children whose age exceeding that of primary school, nevertheless, are attending primary school.

Gender parity for primary school is 1.01, indicating no difference in the attendance of girls and boys to primary school (Table ED.6). However, the indicator is slightly rising up to 1.02 for secondary education.

The Gender Parity Index (GPI) for rural areas is 1.04 for primary school and 1.05 for secondary school. According to quintiles of wealth index in the poorest households this index for primary school is 1.03 and for secondary school is 1.06, while in the richest households – 1.01 and 0.98 accordingly.

Adult Literacy

One of the World Fit for Children goals is to assure adult literacy. Adult literacy is also an MDG indicator, relating to both men and women. In MICS, since only a women's questionnaire was administered, the results are based only on females aged 15-24. Literacy was assessed on the ability of women to read a short simple statement or on school attendance.

Favorable socio-economic atmosphere has a very positive impact on the level of education in the country what is vividly seen from the results of the survey. 1,505 women aged 15-24 participated in the survey. Literacy rate of women of this age group is universal.

X. Child Protection

Child Labour

Article 32 of the Convention on the Rights of the Child states: "States Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development...". The World Fit for Children mentions nine strategies to combat child labour and the MDGs call for the protection of children against exploitation.

In the MICS 3, a number of questions addressed the issue of child labour, that is, children 5-14 years of age involved in labour activities. A child is considered to be involved in child labour activities at the moment of the survey if during the week preceding the survey:

- Ages 5-11: at least one hour of economic work or 28 hours of domestic work per week.
- Ages 12-14: at least 14 hours of economic work or 28 hours of domestic work per week.

This definition allows differentiation between child labour and child work to identify the type of work that should be eliminated, as some children may be involved in hazardous labour activities. Table CP.1 and CP.1w presents the results of child labour.

According to the results of the survey, 6.1 percent of children aged 5-14 years were involved in unpaid work out of their homes, of these 2.9 percent of children were involved in the types of work that should be eliminated.

The percentage of children aged 5-14 years involved in household work was 69.7 percent, in the age group 5-11 years – 59.4 percent, and in the age group 12-14 years – 87 percent. Girls were more involved in household work, as well as children in rural areas.

Four percent of children were involved in work in the interests of family business. In urban areas this indicator reached 0.9 percent, in rural areas – 8.7 percent.

Throughout the republic the percentage of children aged 5-14 years, who during the week prior to the survey were involved in work out of household or were working in the interest of family business, is 10.1 percent: in the age group 5-11 years – 7.9 percent and in the age group 12-14 – 13.7 percent. The percentage of children involved in the types of work that should be eliminated is 5.1 percent, in rural areas this indicator was almost 4 times higher than in urban areas (9.0 and 2.6 percent). In the capital this indicator is 0.2 percent.

Children in the wealthiest households according to the wealth index quintiles are less involved in work out of their households and in interest of the family business (4.8 percent) than children in the least wealthy households – near 15 percent. The percentage of children involved in the types of work that should be eliminated is 1.9 percent of children in higher income households and 8.5 percent in the least wealthy households.

Table CP.2 presents the percentage of children classified as student labourers or as labourer students. Student labourers are the children attending school that were involved in child labour activities at the moment of the surveys. From the total number of the children 5-14 years of age attending school, 99.7 percent are also involved in child labour activities, 5.2 percent of students are involved in the types of work that should be eliminated.

Child Discipline

As stated in A World Fit for Children, “children must be protected against any acts of violence ...” and the Millennium Declaration calls for the protection of children against abuse, exploitation and violence.

In the Belarus MICS3 survey, parents of children age 2-14 years were asked a series of questions on the ways parents tend to use to discipline their children when they misbehave.

The two indicators used to describe aspects of child discipline are: 1) the number of children 2-14 years that experience psychological aggression as punishment or minor physical punishment or severe physical punishment; and 2) the number of parents/caretakers of children 2-14 years of age that believe that in order to raise their children properly, they need to physically punish them.

According to the results of the survey in the Republic of Belarus, 82.6 percent of children aged 2-14 years were subjected to at least one form of psychological or physical punishment by their parents/caretakers or other household members (Table CP.3). Severe physical punishment was subjected 2.1 percent of childhood, minor physical punishment – 49.4 percent of children. At the same moment, 15.2 percent of parents/caretakers believed that children should be physically punished.

Male children were subjected more to both minor and severe physical discipline (53.8 and 2.3 percent) than female children (44.9 and 1.9 percent). The differentials in terms of severe physical punishment were found with respect to place of residence, education of mothers/caretakers and wealth index. The percentage of children being subjected to severe physical punishment was higher in the wealthiest households with high level of income than in the least wealthy households (3.1 and 1.1 percent).

The percentage of children subjected to at least one psychological or physical punishment, in the age group of 5-9 years was 85.2 percent and in the age group of 10-14 years – 79.9 percent.

Early Marriage

Marriage before the age of 18 is a reality for many young girls. According to UNICEF's worldwide estimates, over 60 million women aged 20-24 were married/in union before the age of 18. Factors that influence child marriage rates include: the state of the country's civil registration system, which provides proof of age for children; the existence of an adequate legislative framework with an accompanying enforcement mechanism to address cases of child marriage; and the existence of customary or religious laws that condone the practice.

In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty. The right to 'free and full' consent to a marriage is recognized in the Universal Declaration of Human Rights - with the recognition that consent cannot be 'free and full' when one of the parties involved is not sufficiently mature to make an informed decision about a life partner. The Convention on the Elimination of all Forms of Discrimination against Women mentions the right to protection from child marriage in article 16, which states: "The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage..." While marriage is not considered directly in the Convention on the Rights of the Child, child marriage is linked to other rights - such as the right to express their views freely, the right to protection from all forms of abuse, and the right to be protected from harmful traditional practices - and is frequently addressed by the Committee on the Rights of the Child. Other international agreements related to child marriage are the Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages and the African Charter on the Rights

and Welfare of the Child and the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa. Child marriage was also identified by the Pan-African Forum against the Sexual Exploitation of Children as a type of commercial sexual exploitation of children.

Young married girls are a unique, though often invisible, group. Required to perform heavy amounts of domestic work, under pressure to demonstrate fertility, and responsible for raising children while still children themselves, married girls and child mothers face constrained decision-making and reduced life choices. Boys are also affected by child marriage but the issue impacts girls in far larger numbers and with more intensity. Cohabitation - when a couple lives together as if married - raises the same human rights concerns as marriage. Where a girl lives with a man and takes on the role of caregiver for him, the assumption is often that she has become an adult woman, even if she has not yet reached the age of 18. Additional concerns due to the informality of the relationship - for example, inheritance, citizenship and social recognition - might make girls in informal unions vulnerable in different ways than those who are in formally recognized marriages.

Research suggests that many factors interact to place a child at risk of marriage. Poverty, protection of girls, family honour and the provision of stability during unstable social periods are considered as significant factors in determining a girl's risk of becoming married while still a child. Women who married at younger ages were more likely to believe that it is sometimes acceptable for a husband to beat his wife and were more likely to experience domestic violence themselves. The age gap between partners is thought to contribute to these abusive power dynamics and to increase the risk of untimely widowhood.

Closely related to the issue of child marriage is the age at which girls become sexually active. Women who are married before the age of 18 tend to have more children than those who marry later in life. Pregnancy related deaths are known to be a leading cause of mortality for both married and unmarried girls between the ages of 15 and 19, particularly among the youngest of this cohort. There is evidence to suggest that girls who marry at young ages are more likely to marry older men which puts them at increased risk of HIV infection. Parents seek to marry off their girls to protect their honour, and men often seek younger women as wives as a means to avoid choosing a wife who might already be infected. The demand for this young wife to reproduce and the power imbalance resulting from the age differential lead to very low condom use among such couples.

The percentage of women married at various ages is provided in Table CP.4.

According to the law of the Republic of Belarus the marriage is allowed at the age of 18. The main reason for the marriages before 18 is the pregnancy of a woman. According to the results of the survey, 6.5 percent of women in the Republic of Belarus get married before the age of 18. In the urban areas this indicator reached 5.1 percent, in rural areas as – 9.8 percent.

The significant difference was found in percentage of early marriage of women depending on the level of their education. Thus, if the percentage of women with higher education who got married before the age of 18 was only 2.2 percent, this indicator for women with incomplete secondary education was 29.1 percent.

Some disparities in this indicator were found according to wealth index. Among the least wealthy group of women the early marriage was registered two times more often than among the wealthiest group of women (8.4 and 4.3 percent).

Another component is the spousal age difference with an indicator being the percentage of married/in union women with a difference of 10 or more years younger than their current spouse. Table CP.5 presents the results of the age difference between husbands and wives.

According to the results of the survey, more than a half of women aged 20-24 years (58.4%) were married or in union with men who were 0-4 years older than women. The quarter of women (25.4 percent) had husband/partner who was 5-9 years older than them, and 8.2 percent of women had a husband/partner who was 10 years or more old than a woman. The percentage of women that were elder than their husbands/partners is 7.9 percent.

Orphans and Vulnerable Children

Children who are orphaned or in vulnerable households may be at increased risk of neglect or exploitation. Monitoring the variations in different outcomes for orphans and vulnerable children and comparing them to their peers gives us a measure of how well communities and governments are responding to their needs.

According to the results of the survey in the Republic of Belarus three fourth of children aged 0-17 years (73.4 percent) lived with both parents. Percentage of children living separately from their biological parents is 1.8 percent. One or two parents of 5.8 percent of children aged 0-17 years died.

XI. HIV/AIDS

Knowledge of HIV Transmission and Condom Use

One of the most important prerequisites for reducing the rate of HIV infection is accurate knowledge of how HIV is transmitted and strategies for preventing transmission. Correct information is the first step toward raising awareness and giving young people the tools to protect them from infection. Misconceptions about HIV are common and can confuse young people and hinder prevention efforts. Different regions are likely to have variations in misconceptions although some appear to be universal (for example that sharing food can transmit HIV or mosquito bites can transmit HIV).

The UN General Assembly Special Session on HIV/AIDS (UNGASS) called on governments to improve the knowledge and skills of young people to protect themselves from HIV. The indicators to measure this goal as well as the MDG of reducing HIV infections by half include improving the level of knowledge of HIV and its prevention, and changing behaviours to prevent further spread of the disease.

The HIV module was administered to women 15-49 years of age.

One indicator which is both an MDG and UNGASS indicator is the percentage of young women who have comprehensive and correct knowledge of HIV prevention and transmission. Women were asked whether they knew of the three main ways of HIV transmission – having only one faithful uninfected partner, using a condom every time, and abstaining from sex. The results are presented in Table HA.1.

The findings show that in the Republic of Belarus almost all the interviewed women (99.9 percent) have heard of AIDS. However, the percentage of women who know of all three main ways of preventing HIV transmission is only 29.2 percent, in urban areas – 27.9 percent, in rural areas – 32.4 percent. 76.2 percent of women know of having one faithful uninfected sex partner, 66.6 percent know of using a condom every time, and 42.6 percent know of abstaining from sex as the main ways of preventing HIV transmission. While the main part of women (88.4 per cent) know at least one of the three of these ways, at the same time 11.6 percent of women did not know any of the three ways. Among the regions this indicator varies from 6.8 percent in Vitebsk region to 14.4 percent in Gomel region. The biggest percentage of women not knowing any of the three ways is registered in the age group 15-19 years old (15.5 percent) and among those with incomplete secondary education (17.1 percent).

The knowledge of preventing HIV transmission does not depend upon the place of women's residence. So, in urban and rural areas percentage of women knowing at least one of the three ways of preventing HIV transmission (88.2 and 88.7 percent) and those who do not know any of these three ways (11.8 and 11.3 percent) is almost the same.

From total number of women 15-49 years of age, the biggest percentage of women knowledgeable about all three main ways of preventing HIV transmission was registered in the age group 35-39 (30.7 percent) and those with secondary special education (31.3 percent). Besides, the poorest women were more informed about the main ways of HIV prevention than the richest ones (35.4 and 25.8 percent).

Table HA.2 presents the percentage of women who can correctly identify misconceptions concerning HIV. The indicator is based on the two most common and strong misconceptions in the Republic of Belarus, that HIV can be transmitted through food and mosquito bites or other blood-sucking insects. The table HA.2 also provides information on whether women know that HIV cannot be transmitted by supernatural means, and that HIV can be transmitted through sharing needles.

Percent of women know that HIV cannot be transmitted through sharing food constituted 75.8 percent. Among women with higher education the percentage of such women was 81.7 percent, with incomplete secondary education – 64.8 percent. Percent of women knowing that HIV cannot be transmitted through mosquito bites and other blood-sucking insects were 72 percent (with higher education – 79.5 percent, with uncompleted secondary education – 61.1 percent). Almost all interviewed women (91.5 percent) convinced that a healthy-looking person could be infected.

More than a half of all interviewed women aged 15-49 (56.7 percent) reject the two most common misconceptions and know that a healthy-looking person can be infected. The lowest percentage of such women was registered in Vitebsk region (44.4 percent) and the highest – in Gomel region (62.9 percent). In urban areas women are less influenced by misconceptions about the ways of HIV transmission (58.8 percent) than in rural areas – 51.5 percent. The highest percentage of women rejected the two mostly common misconceptions were registered in age group 20-29 years old (61.2 percent).

With the increase in the level of interviewed women's education, the level of their misconception about the ways of HIV transmission is getting lower. So, the percentage of women with higher education rejecting the two mostly common misconceptions of the ways of HIV/AIDS transmission and knowing that a healthy-looking person can be infected was 68.2 per cent, with special secondary education – 54.9 percent, with incomplete secondary education – 45 percent.

With the increase in the level of interviewed women's wealth, the percentage of women rejecting the two mostly common misconceptions of the ways of HIV/AIDS transmission is getting higher. So, among the richest women the percentage of women who rejected the two mostly common misconceptions was 61.7 percent, among the poorest women – 49.9 percent.

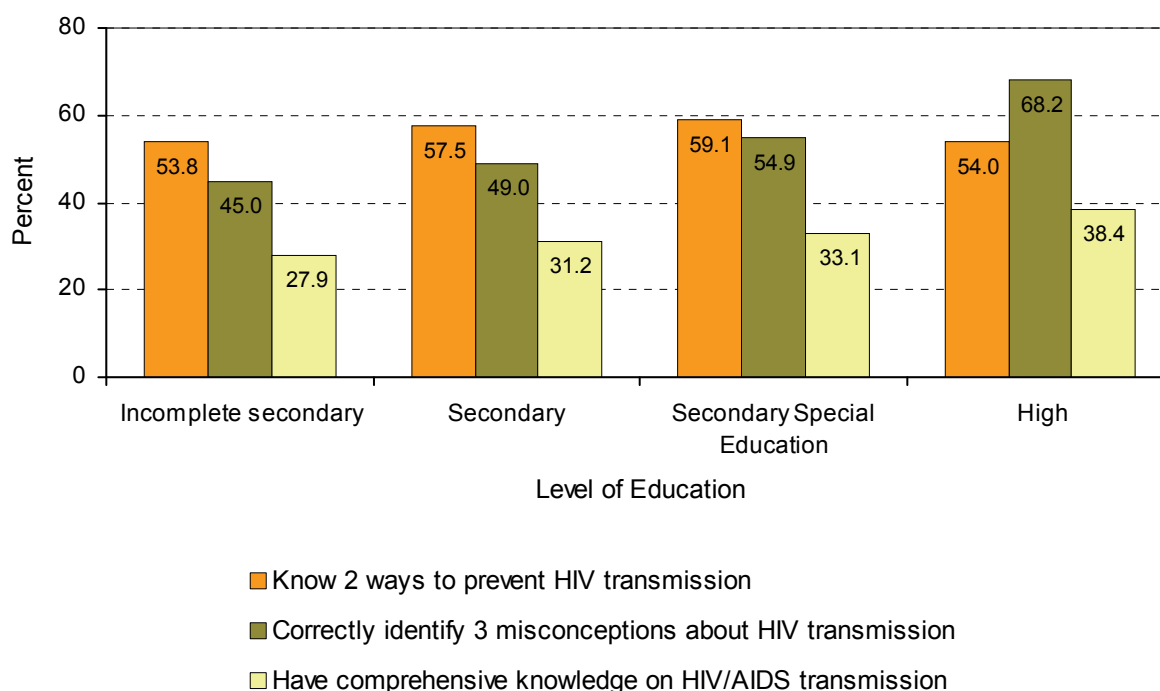
Percent of women who know that HIV cannot be transmitted by supernatural means on average in the republic was 92 percent, in urban areas – 93.5 percent, in rural areas – 88.4 percent; among the poorest – 89.6 percent, among the richest – 94.1 percent.

More than 99 percent of women know that HIV can be transmitted by sharing needles, and the level of this knowledge does not depend neither on a woman's age, education level, place of residence nor the level of wealth.

The results of answers of women aged 15-49 revealed that differences in the level of comprehensive knowledge about HIV/AIDS transmission depend upon the women's place of residence and their level of education (Table HA.3). Overall, only 33.9 percent of women pointed out the comprehensive knowledge; this indicator was considerably higher in Brest region (42 percent), but in Vitebsk region it was lower than average level in the republic (23.7 percent). The percent of women with comprehensive knowledge increases with the woman's education level (Figure HA.1).

Figure HA.1. Percent of women who have comprehensive knowledge of HIV/AIDS transmission

(in percent)



One of the main indicators, used for assessment of the countermeasures taken by countries to combat HIV/AIDS, is the percentage of young women aged 15-24 years who have knowledge of the two HIV prevention methods, can reject the two mostly common misconceptions of the ways of HIV/AIDS transmission and convinced that a healthy-looking person could be infected. In the Republic of Belarus 33.5 percent of women aged 15-24 years have comprehensive knowledge of HIV/AIDS transmission.

Knowledge of mother-to-child transmission of HIV is also an important first step for women to seek HIV testing when they are pregnant to avoid infection in the baby. Women should know that HIV can be transmitted during pregnancy, delivery, and through breastfeeding. The level of knowledge among women age 15-49 years concerning mother-to-child transmission is presented in Table HA.4.

Overall in the republic almost all women of age 15-49 years (98 percent) know that HIV can be transmitted from mother to child and only 2 percent of women did not know of any specific way of HIV transmission from mother to child. Percent of women who know all three ways of mother-to-child HIV transmission (during pregnancy, delivery, and through breastfeeding) was 61.2 percent. Among the richest women this share was 62.3 percent and among the poorest – 58.7 percent.

According to interviewed women's opinion about the ways of HIV transmission from mother to child, the mostly widely believed way of transmission is during pregnancy (94.2 percent), the least prevalent (as believed by 67.3 percent of women) – transmission of HIV through breastfeeding.

The indicators on attitudes toward people living with HIV measure stigma and discrimination in the community. Stigma and discrimination are low if respondents report an accepting attitude on the following four questions:

- 1) would care for family member sick with AIDS;
- 2) would buy fresh vegetables from a vendor who was HIV positive;
- 3) thinks that a female teacher who is HIV positive should be allowed to teach in school;
- 4) would **not** want to keep HIV status of a family member a secret.

Table HA.5 presents the attitudes of women towards people living with HIV/AIDS.

The high level of discrimination and stigma of the Belarusian women is seen from the percentage of women aged 15-49 (95.4 percent) consented at least to one of the discriminative statements concerning the HIV-infected people. Overall in the republic only 4.6 percent of the interviewed women did not agree with any of the discriminative statements, in Minsk this indicator is 10.1 percent. Percent of women disagreed with every of the discriminative statements is three times higher among women with higher education than among women with incomplete secondary education (6.1 and 2 percent).

Amongst the women interviewed on the issues of stigma and discrimination of HIV-infected people the biggest part of women (81.9 percent) would want to keep HIV status of a family member a secret, 77.1 percent of interviewed women would not buy foodstuff from a HIV positive vendor, 43 percent of women consider that a HIV positive teacher should not be allowed to work at school, 8.3 percent of women would not care for family member sick with AIDS, at that, in rural areas the percentage of such women is almost two times higher than in urban areas (12.1 and 6.7 percent).

The share of women who wanted to keep HIV status of a family member a secret in urban areas is 82.9 percent, in rural areas – 78.9 percent. Percentage of such women is growing with the growth of the educational level and the level of wealth. The most secretive on this issue are women with high education (82.7 percent compared to 78.7 percent of women with incomplete secondary education) and the richest women (84.5 percent compared to 78.1 percent of the poorest ones).

Other indicators of manifestation of discrimination and stigma towards people living with HIV reveal the inverse proportion: percentage of women rejecting the opportunity of work at school of a HIV-positive teacher or care for family member sick with AIDS is getting lower according to the increase in the level of education and prosperity of the interviewed women. So, for example, among women who would not care for family member sick with AIDS are 4.3 percent with higher education and 18.4 percent with incomplete secondary education, 5.1 percent from the richest and 14.8 percent from the poorest households. Percentage of women who think that a HIV positive teacher should not be allowed to teach in school is 33.1 percent among women with higher education and 56.9 percent among women with incomplete secondary education, among the richest is 35.1 percent and among the poorest is 52.7 percent.

Another important indicator is the knowledge of where to be tested for HIV and use of such services (Table HA.6).

In the Republic of Belarus the majority of women (97.4 percent) have knowledge of where to be tested for HIV. There is a high level of information distribution among the Belarusian women in all regions of the republic, for all age-groups and all socio-economic groups. 66.4 percent of women have actually been tested; of these a large proportion has received the result (90 percent). The smallest number of women who were tested for HIV was in Brest region – 37.3 percent of women.

Among women who had given birth within the two years preceding the survey, the percent who received counselling and HIV testing during antenatal care is presented in Table HA.7. In the Republic of Belarus the majority of women (99.4 percent) received antenatal care at the medical institutions during the period of their latest pregnancy. Counselling on HIV during their visits to a doctor for antenatal care was received by 72.8 percent of Belarusian women. 98 percent of women have actually been tested during antenatal care period, of these 92.3 percent received the result.

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Statistical Data Tables

Table HH.1: Results of household and individual interviews

Number of households, women, and children under 5 by results of the household, women's and under-five's interviews, and household, women's and under-five's response rates

	Residence		Regions							Total
	Urban	Rural	Brest	Vitebsk	Gomel	Grodno	Minsk city	Minsk	Mogilev	
Number of households										
Sampled	4579	2421	1086	933	1110	901	1043	1074	853	7000
Occupied	4579	2421	1086	933	1110	901	1043	1074	853	7000
Interviewed	4386	2321	1041	897	1073	860	1006	1025	805	6707
Response rate	95,8	95,9	95,9	96,1	96,7	95,4	96,5	95,4	94,4	95,8
Number of women										
Eligible	4025	1881	929	776	879	789	947	882	704	5906
Interviewed	4016	1879	929	773	877	787	944	882	703	5895
Response rate	99,8	99,9	100,0	99,6	99,8	99,7	99,7	100,0	99,9	99,8
Overall response rate	95,6	95,8	95,9	95,8	96,4	95,2	96,1	95,4	94,2	95,6
Number of children under 5										
Eligible	2033	1018	528	378	450	407	505	425	358	3051
Mother/caretaker interviewed	2033	1018	528	378	450	407	505	425	358	3051
Response rate	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0
Overall response rate	95,8	95,9	95,9	96,1	96,7	95,4	96,5	95,4	94,4	95,8

Table HH.2: Household age distribution by sex

Percent distribution of the household population by five-year age groups and dependency age groups, and number of children aged 0-17 years, by sex

	Males		Females		Total	
	number	percent	number	percent	number	percent
Age						
0-4	512	6,3	475	4,9	987	5,5
5-9	477	5,8	484	5,0	961	5,4
10-14	645	7,9	604	6,2	1249	7,0
15-19	764	9,4	685	7,0	1449	8,1
20-24	638	7,8	636	6,5	1274	7,1
25-29	606	7,4	676	6,9	1282	7,2
30-34	580	7,1	668	6,9	1248	7,0
35-39	599	7,3	699	7,2	1298	7,2
40-44	706	8,7	881	9,0	1587	8,8
45-49	738	9,0	929	9,5	1667	9,3
50-54	551	6,8	697	7,2	1248	7,0
55-59	392	4,8	564	5,8	956	5,3
60-64	246	3,0	382	3,9	628	3,5
65-69	303	3,7	510	5,2	813	4,5
70 +	409	5,0	861	8,8	1270	7,1
Dependency age groups						
< 15	1634	20,0	1563	16,0	3197	17,9
15-64	5819	71,3	6817	69,9	12636	70,5
65 +	713	8,7	1371	14,1	2084	11,6
Children aged 0-17	2128	26,1	1994	20,5	4122	23,0
Adults ages 18 +	6038	73,9	7757	79,5	13795	77,0
Total	8166	100	9751	100	17917	100

Таблица НН.3: Household composition

Percent distribution of households by selected characteristics

	Number of households		Weighted percent
	Weighted	Unweighted	
Sex of household head			
Male	3094	3421	46,1
Female	3613	3286	53,9
Region			
Brest	980	1041	14,6
Vitebsk	950	897	14,1
Gomel	1052	1073	15,7
Grodno	798	860	11,9
Minsk city	1065	1006	15,9
Minsk	1046	1025	15,6
Mogilev	816	805	12,2
Residence			
Urban	4431	4386	66,1
Rural	2276	2321	33,9
Number of household members			
1	1228	828	18,3
2-3	3808	3495	56,8
4-5	1557	2156	23,2
6-7	101	204	1,5
8 +	13	24	0,2
Total	6707	6707	100
At least one child aged < 18 years	2887	4132	43,0
At least one child aged < 5 years	911	2803	13,6
At least one woman aged 15-49 years	4238	5026	63,2

Table HH.4: Women's background characteristics

Percent distribution of women aged 15-49 years by background characteristics

	Number of women		Weighted percent
	Weighted	Unweighted	
Region			
Brest	879	929	14,9
Vitebsk	813	773	13,8
Gomel	863	877	14,6
Grodno	747	787	12,7
Minsk city	1023	944	17,4
Minsk	885	882	15,0
Mogilev	685	703	11,6
Residence			
Urban	4162	4016	70,6
Rural	1733	1879	29,4
Age			
15-19	781	562	13,3
20-24	724	982	12,3
25-29	772	1252	13,1
30-34	762	947	12,9
35-39	797	704	13,5
40-44	1001	709	17,0
45-49	1058	739	17,9
Marital/Union status			
Currently married/in union	3649	4173	61,9
Formerly married/in union	924	798	15,7
Never married/in union	1322	924	22,4
Motherhood status			
Ever gave birth	4301	4872	73,0
Never gave birth	1594	1023	27,0
Education *			
Incomplete secondary	118	159	2,0
Secondary	1370	1266	23,2
Secondary special	2928	2976	49,7
Higher	1470	1485	24,9
Wealth index quintiles			
Poorest	821	884	13,9
Second	1180	1207	20,0
Middle	1247	1209	21,2
Fourth	1254	1230	21,3
Richest	1393	1365	23,6
Total	5895	5895	100

* 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Таблица НН.5: Children's background characteristics

Percent distribution of children under five years of age by background characteristics

	Number of under-five children		Weighted percent
	Weighted	Unweighted	
Sex			
Male	1582	1576	51,8
Female	1469	1475	48,2
Region			
Brest	513	528	16,8
Vitebsk	352	378	11,5
Gomel	484	450	15,9
Grodno	411	407	13,5
Minsk city	434	505	14,2
Minsk	500	425	16,4
Mogilev	357	358	11,7
Residence			
Urban	2064	2033	67,7
Rural	987	1018	32,3
Age			
< 6 months	320	183	10,5
6-11 months	278	295	9,1
12-23 months	643	691	21,1
24-35 months	645	672	21,1
36-47 months	567	594	18,6
48-59 months	598	616	19,6
Mother's education *			
Incomplete secondary	124	128	4,0
Secondary	530	514	17,4
Secondary special	1577	1581	51,7
Higher	817	824	26,8
Wealth index quintiles			
Poorest	505	511	16,5
Second	616	616	20,2
Middle	615	599	20,2
Fourth	619	614	20,3
Richest	696	711	22,8
Total	3051	3051	100

* 4 unweighted cases with "primary education" not shown

Table NU.1: Child malnourishment

Percentage of children aged 0-59 months who are severely or moderately malnourished

	% of children				Number of children aged 0-59 months
	Weight for age % below -2 SD*	Height for age % below -2 SD**	Weight for height		
			% below -2 SD***	% above +2 SD	
Sex					
Male	1,0	2,5	1,6	6,6	1562
Female	1,0	2,6	1,0	6,9	1456
Region					
Brest	1,8	2,0	1,8	3,6	510
Vitebsk	0,8	4,0	2,3	10,4	349
Gomel	1,2	3,3	0,8	8,0	482
Grodno	1,2	2,5	1,0	6,7	409
Minsk city	0,4	0,8	0,9	7,9	431
Minsk	0,6	3,1	1,8	6,0	498
Mogilev	1,1	2,1	0,5	5,6	338
Residence					
Urban	0,7	1,8	1,6	6,2	2043
Rural	1,7	4,1	0,8	7,8	975
Age					
< 6 months	0,3	0,9	2,3	3,3	318
6-11 months	1,4	3,4	1,2	10,1	271
12-23 months	1,0	3,1	0,4	12,0	634
24-35 months	1,3	1,8	2,0	4,0	637
36-47 months	1,3	2,9	1,0	4,6	561
48-59 months	0,6	2,8	1,5	6,4	597
Mother's education****					
Incomplete secondary	4,7	6,3	0,7	12,9	122
Secondary	1,2	2,3	1,1	7,5	526
Secondary special	1,0	2,7	1,3	6,5	1559
Higher	0,3	1,7	1,6	5,8	807
Wealth index quintiles					
Poorest	1,7	5,4	0,7	6,6	500
Second	1,2	2,7	1,4	7,6	607
Middle	0,9	2,2	0,8	6,9	607
Forth	1,0	1,4	1,1	6,5	612
Richest	0,5	1,5	2,3	6,2	692
Total	1,0	2,5	1,3	6,7	3018

* MICS indicator 6; MDG indicator 4

** MICS indicator 7

*** MICS indicator 8

**** 4 unweighted cases with "primary education" not shown

Table NU.2: Initial breastfeeding

Percentage of women aged 15-49 years with a birth in the two years preceding the survey who breastfed their baby within one hour of birth and within one day of birth

	Percentage of women with a live birth in the two years preceding the survey		Number of women with a live birth in the two years preceding the survey
	Who started breastfeeding within one hour of birth	Who started breastfeeding within one day of birth	
Region			
Brest	20,1	84,2	79
Vitebsk	20,9	72,3	51
Gomel	14,3	63,8	70
Grodno	11,7	63,9	57
Minsk city	34,3	73,6	80
Minsk	24,8	75,7	72
Mogilev	16,7	60,2	53
Residence			
Urban	22,5	71,5	330
Rural	17,5	71,0	132
Months since birth			
< 6 months	20,1	74,7	120
6-11 months	22,7	70,6	104
12-23 months	20,8	70,0	238
Mother's education**			
Incomplete secondary	(18,9)	(73,4)	18
Secondary	17,8	73,0	79
Secondary special	19,4	67,7	231
Higher	26,2	76,7	133
Wealth index quintiles			
Poorest	16,9	69,4	67
Second	17,1	70,1	80
Middle	14,7	69,1	95
Fourth	22,1	68,7	97
Richest	30,0	77,2	123
Total	21,1	71,4	462

* Показатель МИКС 45

** 2 unweighted cases with "primary education" not shown

Table NU.3: Breastfeeding

Percentage of living children according to breastfeeding status at each age group

	Children 0-3 months		Children 0-5 months		Children 6-9 months		Children 12-15 months		Children 20-23 months	
	Percent exclusively breast-fed	Number of children	Percent exclusively breast-fed*	Number of children	Percent receiving breast-milk & solid/mushy food**	Number of children	Percent breast-fed***	Number of children	Percent breast-fed***	Number of children
Sex										
Male	(8,9)	81	7,0	169	36,2	111	22,3	99	2,9	106
Female	(15,4)	87	11,2	151	41,6	74	14,0	108	4,3	102
Residence										
Urban	11,4	134	9,7	242	41,2	129	17,0	151	4,4	145
Rural	(*)	34	(6,7)	78	31,8	57	20,6	57	1,7	63
Total	12,2	168	9,0	320	38,3	185	18,0	207	3,6	208

* MICS indicator 15

** MICS indicator 17

*** MICS indicator 16

Table NU.4: Adequately fed infants

Percentage of infants under 6 months of age exclusively breastfed, percentage of infants 6-11 months who are breastfed and who ate solid/semi-solid food at least the minimum recommended number of times yesterday and percentage of infants adequately fed

	Percent of infants					Number of infants aged 0-11 months
	0-5 months exclusively breastfed	6-8 months who received breastmilk and complementary food at least 2 times in prior 24 hours	9-11 months who received breastmilk and complementary food at least 3 times in prior 24 hours	6-11 months who received breastmilk and complementary food at least the minimum recommended number of times per day*	0-11 months who were appropriately fed**	
Sex						
Male	7,0	29,6	24,5	27,4	16,9	330
Female	11,2	42,7	17,2	28,5	18,8	268
Residence						
Urban	9,7	36,2	22,5	29,8	18,6	435
Rural	6,7	29,6	18,0	23,4	15,5	163
Mother's education***						
Secondary	0,0	41,2	26,9	32,3	15,3	101
Secondary special	4,5	28,5	15,4	22,2	13,5	292
Higher	19,2	46,1	31,1	39,7	27,1	182
Wealth index quintiles						
Poorest	13,8	19,6	8,0	13,8	13,8	92
Second	2,2	34,7	27,6	31,5	16,3	104
Middle	0,0	52,1	18,3	35,0	15,6	120
Forth	10,5	33,4	22,4	27,3	17,9	118
Richest	16,2	31,8	26,5	29,5	22,3	164
Total	9,0	34,4	21,0	27,9	17,8	598

* MICS indicator 18

** MICS indicator 19

*** 1 unweighted case with "primary education" and 19 unweighted cases with "incomplete secondary education" not shown

Table NU.5: Low birth weight infants

Percentage of live births in the 2 years preceding the survey that weighed below 2500 grams at birth

	Percent of live births		Number of live births
	Below 2500 grams *	Weighed at birth **	
Region			
Brest	3,0	100,0	79
Vitebsk	4,0	96,7	51
Gomel	3,5	99,5	70
Grodno	4,6	99,4	57
Minsk city	3,9	99,6	80
Minsk	3,7	100,0	72
Mogilev	4,2	99,4	53
Residence			
Urban	3,8	99,4	330
Rural	3,7	99,2	132
Mother's education***			
Incomplete secondary	(3,8)	(98,0)	18
Secondary	4,8	100,0	79
Secondary special	4,1	99,0	231
Higher	2,7	99,8	133
Wealth index quintiles			
Poorest	4,4	98,5	67
Second	3,3	100,0	80
Middle	4,4	100,0	95
Forth	3,9	99,7	97
Richest	3,3	98,6	123
Total	3,8	99,3	462

* MICS indicator 9

** MICS indicator 10

*** 2 unweighted cases with "primary education" not shown

Table CH.1: Vaccinations

Percentage of children age 18-29 months immunized against childhood diseases at any time before the survey and before the first birthday

	Percentage of children										Number of children aged 18-29 months
	who received:									None	
	BCG [*]	DPT1	DPT 2	DPT 3 ^{**}	Polio 1	Polio 2	Polio 3 ^{***}	Meas-les ^{****}	All ^{*****}		
Vaccinated at any time before the survey	99,6	99,4	99,6	98,8	99,1	99,1	99,0	98,1	97,2	0,4	633
According to vaccination card	99,4	99,3	99,4	98,7	99,0	99,1	99,0	98,0	97,2	0,2	633
Vaccinated by 12 months of age ^{*****}	99,2	98,5	98,1	96,7	98,0	97,7	96,5	96,9	93,9	0,4	633

* MICS indicator 25

** MICS indicator 27

*** MICS indicator 26

**** MICS indicator 28; MDG indicator 15

***** MICS indicator 31

***** For measles vaccination – during the first 18 months

Table CH.1c: Vaccinations (continued)

Percentage of children age 18-29 months immunized against childhood diseases at any time before the survey and before the first birthday

	Percentage of children, who received			Number of children aged 18-29 months
	Hep B1	Hep B2	Hep B3 [*]	
Vaccinated at any time before the survey	99,3	99,1	98,5	633
According to vaccination card	99,3	99,1	98,5	633
Vaccinated by 12 months of age	99,3	98,4	96,9	633

* MICS indicator 29

Table CH.2: Vaccinations by background characteristics

Percentage of children aged 18-29 months currently vaccinated against childhood diseases

	Percentage of children who received									Percent with health card	Number of children aged 18-29 months
	BCG	DPT1	DPT 2	DPT 3	Polio 1	Polio 2	Polio 3	Measles	All		
Sex											
Male	99,7	99,4	99,7	99,0	99,1	99,4	99,4	98,8	97,9	99,7	322
Female	99,4	99,4	99,4	98,6	99,1	98,8	98,5	97,4	96,5	99,5	311
Region											
Brest	100,0	100,0	100,0	99,2	100,0	100,0	100,0	98,4	98,4	100,0	108
Vitebsk	100,0	100,0	100,0	98,7	100,0	100,0	100,0	96,1	94,8	100,0	69
Gomel	100,0	100,0	100,0	99,0	100,0	100,0	100,0	96,9	96,9	100,0	100
Grodno	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	81
Minsk city	99,1	98,2	99,1	98,2	98,2	98,2	97,3	97,3	95,5	98,2	90
Minsk	99,1	99,1	99,1	98,2	97,4	97,4	97,4	99,1	96,4	100,0	120
Mogilev	98,5	98,5	98,5	98,5	98,5	98,5	98,5	98,5	98,5	98,5	65
Residence											
Urban	99,6	99,4	99,6	98,5	99,4	99,4	99,2	97,7	96,8	99,4	426
Rural	99,5	99,5	99,5	99,5	98,5	98,5	98,5	99,0	98,0	100,0	207
Mother's education*											
Secondary	99,0	99,0	99,0	98,1	98,0	98,0	98,0	98,1	96,2	99,0	101
Secondary special	100,0	100,0	100,0	99,1	100,0	100,0	100,0	98,3	98,0	100,0	335
Higher	99,5	99,1	99,5	99,1	98,5	98,5	98,0	98,1	96,6	99,1	179
Wealth index quintiles											
Poorest	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	106
Second	98,3	98,3	98,3	98,3	97,4	97,4	97,4	96,6	95,7	99,2	117
Middle	100,0	100,0	100,0	99,2	100,0	100,0	100,0	98,5	98,5	100,0	130
Forth	99,4	99,4	99,4	98,8	98,7	98,7	98,7	97,5	96,2	99,4	140
Richest	100,0	99,4	100,0	98,0	99,4	99,4	98,8	98,0	96,1	99,4	140
Total	99,6	99,4	99,6	98,8	99,1	99,1	99,0	98,1	97,2	99,6	633

* 20 unweighted cases with "incomplete secondary education" not shown

Table CH.2c: Vaccinations by background characteristics (continued)

Percentage of children aged 18-29 months currently vaccinated

	Percentage of children who received:			Percent with health card	Number of children aged 18-29 months
	Hep B1	Hep B2	Hep B3		
Sex					
Male	99,7	99,4	99,0	99,7	322
Female	98,9	98,9	98,1	99,5	311
Region					
Brest	100,0	100,0	100,0	100,0	108
Vitebsk	98,8	98,8	97,5	100,0	69
Gomel	100,0	99,0	99,0	100,0	100
Grodno	100,0	100,0	100,0	100,0	81
Minsk city	98,2	98,2	96,4	98,2	90
Minsk	99,1	99,1	98,1	100,0	120
Mogilev	98,5	98,5	98,5	98,5	65
Residence					
Urban	99,4	99,1	98,3	99,4	426
Rural	99,1	99,1	99,1	100,0	207
Mother's education *					
Secondary	97,2	97,2	97,2	99,0	101
Secondary special	100,0	99,7	98,8	100,0	335
Higher	99,1	99,1	98,6	99,1	179
Wealth index quintiles					
Poorest	100,0	100,0	100,0	100,0	106
Second	98,5	98,5	97,7	99,2	117
Middle	100,0	99,2	98,3	100,0	130
Forth	98,7	98,7	98,7	99,4	140
Richest	99,4	99,4	98,3	99,4	140
Total	99,3	99,1	98,5	99,6	633

* 20 unweighted cases with "incomplete secondary education" not shown

Table CH.3: Oral rehydration treatment

Percentage of children aged 0-59 months with diarrhoea in the last two weeks and treatment with oral rehydration solution (ORS) or other oral rehydration treatment (ORT)

	Had diarrhoea in last two weeks	Number of children aged 0-59 months	Children with diarrhoea who received				ORT Use Rate *	Number of children aged 0-59 months with diarrhoea
			Fluid from ORS packet	Recommended homemade fluid	Pre-packaged ORS fluid	No treatment		
Sex								
Male	3,6	1582	15,9	57,0	25,4	15,0	85,0	57
Female	4,5	1469	26,3	65,1	12,0	15,2	84,8	66
Residence								
Urban	3,8	2064	24,9	59,3	17,0	16,3	83,7	79
Rural	4,5	987	(15,2)	(65,0)	(20,5)	(13,0)	(87,0)	44
Total	4,0	3051	21,4	61,3	18,2	15,1	84,9	123

* MICS indicator 33

Table CH.4: Home management of diarrhoea

Percentage of children aged 0-59 months with diarrhoea in the last two weeks who took increased fluids and continued to feed during the episode

	Children with diarrhoea who:				Children with diarrhoea who received:		Number of children aged 0-59 months with diarrhoea
	Drank more	Drank the same or less	Ate somewhat less, same or more	Ate much less or none	Home management of diarrhoea *	Received ORT or increased fluids AND continued feeding **	
Sex							
Male	37,2	62,8	69,9	30,1	18,3	65,5	57
Female	36,4	63,6	55,4	44,6	13,5	44,4	66
Residence							
Urban	34,3	65,7	60,5	39,5	13,6	53,1	79
Rural	(41,1)	(58,9)	(65,0)	(35,0)	(19,5)	(56,2)	44
Total	36,8	63,2	62,1	37,9	15,7	54,2	123

* MICS indicator 34

** MICS indicator 35

Table CH.5: Care seeking for suspected pneumonia

Percentage of children aged 0-59 months with suspected pneumonia in the last two weeks taken to a health provider

	Had acute respiratory infection	Number of children aged 0-59 months	Children with suspected pneumonia who were taken to:										Number of children aged 0-59 months with suspected pneumonia		
			Public sources:						Private sources					Relative/ friend	Any appropriate provider
			Govt. Hospital	Govt. health centre	Govt. health post	Village health worker	Mobile/ outreach clinic	Other public	Private physician	Pharmacy					
Sex															
Male	11,5	1582	12,3	72,4	5,3	8,8	0,7	6,8	0,4	2,1	2,0	89,7	182		
Female	9,7	1469	9,4	73,6	3,2	7,3	1,3	4,7	1,4	-	1,2	89,3	143		
Residence															
Urban	11,5	2064	10,2	88,9	0,4	0,0	0,9	4,0	1,2	1,2	1,9	93,9	237		
Rural	8,9	987	13,4	29,7	15,0	30,1	0,9	11,1	-	1,0	0,9	77,7	88		
Age															
0-11 months	5,1	598	(19,6)	(59,6)	(-)	(25,4)	(-)	(2,9)	(-)	(-)	(-)	(94,5)	31		
12-23 months	8,1	643	15,3	74,2	5,7	5,0	3,9	7,2	2,3	-	-	91,6	52		
24-35 months	14,0	645	6,2	71,5	5,2	3,7	-	5,3	1,8	2,2	0,9	86,9	91		
36-47 months	13,2	567	10,0	78,6	4,9	8,6	1,4	2,3	-	1,2	3,5	91,8	75		
48-59 months	12,7	598	11,4	73,4	3,7	8,1	-	10,5	-	1,3	2,5	86,9	76		

Continued

	Had acute respiratory infection	Number of children aged 0-59 months	Children with suspected pneumonia who were taken to:										Number of children aged 0-59 months with suspected pneumonia			
			Public sources:						Private sources		Relative/ friend	Any appropriate provider				
			Govt. Hospital	Govt. health centre	Govt. health post	Village health worker	Mobile/ outreach clinic	Other public	Private physician	Pharmacy						
Mother's education**																
Secondary	11,6	530	11,7	64,4	6,5	13,9	2,0	6,8	-	1,5	88,1	61				
Secondary special	10,9	1577	7,5	73,6	2,7	7,2	-	6,0	0,7	1,6	87,0	172				
Higher	9,1	817	13,9	83,1	5,0	1,2	1,4	4,0	2,2	1,2	94,1	74				
Wealth index quintiles																
Poorest	8,6	505	(19,6)	(36,8)	(10,8)	(23,6)	-	(16,5)	-	-	(79,3)	43				
Second	10,2	616	13,8	58,9	7,5	11,2	1,3	8,0	1,9	1,3	81,2	63				
Middle	13,7	615	7,2	78,9	3,4	10,9	-	2,2	-	1,0	95,3	85				
Forth	9,9	619	9,7	86,6	3,2	-	2,0	5,0	1,3	2,9	92,8	61				
Richest	10,5	696	9,0	88,1	-	-	1,4	2,8	1,1	2,7	93,2	73				
Total	10,6	3051	11,0	72,9	4,4	8,1	0,9	5,9	0,9	1,7	89,5	325				

* MICS indicator 23

** 18 unweighted cases with "incomplete secondary education" not shown

Table CH.6: Antibiotic treatment of pneumonia

Percentage of children aged 0-59 months with suspected pneumonia who received antibiotic treatment

	Percentage of under fives with suspected pneumonia who received antibiotics in the last two weeks*	Number of children with suspected pneumonia in the two weeks prior to the survey
Sex		
Male	70,8	182
Female	62,1	143
Residence		
Urban	66,4	237
Rural	68,6	88
Age		
0-11 months	(51,5)	31
12-23 months	68,2	52
24-35 months	59,7	91
36-47 months	74,0	75
48-59 months	74,0	76
Mother's education**		
Secondary	61,4	61
Secondary special	71,6	172
Higher	60,9	74
Wealth index quintiles		
Poorest	(83,1)	43
Second	62,3	63
Middle	64,2	84
Fourth	66,0	61
Richest	65,4	73
Total	67,0	325

* MICS indicator 22

** 18 unweighted cases with "incomplete secondary education" not shown

Table CH.6a: Knowledge of the two danger signs of pneumonia

Percentage of mothers/caretakers of children aged 0-59 months by knowledge of types of symptoms for taking a child immediately to a health facility, and percentage of mothers/caretakers who recognize fast and difficult breathing as signs for seeking care immediately

	Percentage of mothers/caretakers of children aged 0-59 months who think that a child should be taken immediately to a health facility if the child:								Mothers/caretakers who recognize the two danger signs of pneumonia	Number of mothers/caretakers of children aged 0-59 months
	Is not able to drink or breastfed	Becomes sick	Develops a fever	Has fast breathing	Has difficult breathing	Has blood in stool	Is drinking poorly	Has other symptoms		
Regions										
Brest	28,0	59,6	98,8	70,1	80,4	69,8	14,5	17,3	61,4	513
Vitebsk	16,2	31,8	91,0	47,8	67,8	58,3	6,0	36,1	39,9	352
Gomel	12,4	41,7	94,0	29,6	51,1	34,5	3,3	25,0	21,5	484
Grodno	12,0	40,4	94,0	38,0	53,5	25,6	4,6	26,6	24,9	411
Minsk city	13,7	36,5	94,2	29,1	54,5	37,2	4,1	31,3	24,4	434
Minsk	22,0	48,7	96,2	43,7	61,6	45,7	3,8	32,3	32,5	500
Mogilev	25,2	44,8	92,0	29,9	62,6	50,2	8,2	33,8	23,5	357
Residence										
Urban	18,8	43,5	94,6	43,5	63,1	46,0	6,5	29,6	35,1	2064
Rural	18,3	45,4	94,7	38,5	59,1	46,1	6,3	25,7	29,2	987
Mother's education*										
Incomplete secondary	10,3	41,8	88,4	31,8	52,6	33,1	9,0	21,8	25,6	124
Secondary	22,0	45,6	96,0	44,8	63,6	47,4	5,2	26,6	34,7	530
Secondary special	17,5	44,9	94,5	42,4	61,8	45,2	7,3	26,8	33,2	1577
Higher	20,1	42,0	94,9	40,4	62,2	48,7	5,2	33,6	33,4	817
Wealth index quintiles										
Poorest	19,5	45,3	93,4	40,5	61,9	48,1	8,2	25,0	34,5	505
Second	20,2	47,8	95,7	43,5	63,7	49,7	7,7	28,2	33,1	616
Middle	15,1	46,7	94,2	44,7	61,9	46,0	5,2	27,4	33,5	615
Fourth	18,2	43,1	94,4	39,4	63,9	43,3	6,8	29,8	32,1	619
Richest	20,2	38,8	95,1	41,3	58,1	43,9	4,8	30,3	33,2	696
Total	18,7	44,1	94,6	41,9	61,8	46,1	6,4	28,3	33,2	3051

* 4 unweighted cases with "primary education" not shown

Table CH.7: Solid fuel use

Percent distribution of households according to type of cooking fuel, and percentage of households using solid fuels for cooking

	Percentage of households using:					Solid fuels for cooking	Number of households
	Electricity	Liquified Petroleum Gas (LPG)	Natural gas	Wood	Total		
Regions							
Brest	6,3	29,4	58,0	6,3	100,0	6,3	980
Vitebsk	5,7	36,3	54,5	3,5	100,0	3,5	950
Gomel	4,4	18,2	70,5	6,9	100,0	6,9	1052
Grodno	6,6	33,9	57,9	1,6	100,0	1,6	798
Minsk city	31,2	1,0	67,8	-	100,0	-	1065
Minsk	7,5	34,1	57,2	1,2	100,0	1,2	1046
Mogilev	3,5	34,5	57,4	4,6	100,0	4,6	816
Residence							
Urban	13,7	9,2	76,7	0,4	100,0	0,4	4431
Rural	2,0	58,8	29,9	9,3	100,0	9,3	2276
Household head education**							
Primary	1,3	53,6	27,8	17,3	100,0	17,3	458
Incomplete secondary	4,2	44,6	43,5	7,7	100,0	7,7	510
Secondary	8,9	28,9	59,3	2,9	100,0	2,9	1338
Secondary special	10,5	23,6	63,7	2,2	100,0	2,2	2976
Higher	13,7	11,9	73,9	0,5	100,0	0,5	1407
Wealth index quintiles							
Poorest	0,4	76,2	9,4	14,0	100,0	14,0	1489
Second	3,7	41,1	53,5	1,7	100,0	1,7	1298
Middle	13,7	5,1	81,2	-	100,0	-	1396
Fourth	12,8	0,4	86,8	-	100,0	-	1376
Richest	20,2	0,0	79,8	-	100,0	-	1148
Total	9,8	26,0	60,8	3,4	100,0	3,4	6707

* MICS indicator 24; MDG indicator 29

** 13 unweighted cases with "no education" not shown

Table EN.1: Use of improved water sources

Percent distribution of household members according to main source of drinking water and percentage of household members using improved drinking water sources

	Percentage of household members using as a main source of drinking water:							Total	Improved source of drinking water*	Number of household members
	Improved source					Unimproved source				
	Piped into dwelling	Piped into yard/plot	Public tap/stand-pipe	Protected well	Bottled water	Unprotected well	Other			
Regions										
Brest	78,1	5,0	2,1	14,8	-	-	-	100,0	100,0	2651
Vitebsk	71,5	0,9	8,2	18,8	0,4	0,1	0,1	100,0	99,8	2472
Gomel	82,1	3,6	5,1	8,8	0,2	0,2	0,0	100,0	99,8	2705
Grodno	75,5	2,0	1,1	19,6	0,1	1,6	0,1	100,0	98,3	2232
Minsk city	96,6	-	0,6	-	2,8	-	-	100,0	100,0	2849
Minsk	75,1	1,4	5,4	17,2	0,3	0,4	0,2	100,0	99,4	2838
Mogilev	77,5	2,6	12,0	7,4	0,3	0,1	0,1	100,0	99,8	2170
Residence										
Urban	92,0	0,7	3,5	2,7	0,9	0,1	0,1	100,0	99,8	11852
Rural	56,2	5,1	7,1	30,7	0,1	0,6	0,1	100,0	99,3	6065
Education of household head **										
Primary	33,6	5,0	10,8	49,0	-	1,4	0,2	100,0	98,4	782
Incomplete secondary	54,9	3,8	11,6	29,0	-	0,5	0,2	100,0	99,3	1096
Secondary	77,7	2,4	6,2	13,3	0,2	0,3	0,0	100,0	99,7	3796
Secondary special	83,1	2,1	4,1	9,9	0,5	0,3	0,0	100,0	99,7	8522
Higher	92,3	1,0	1,2	3,3	1,9	0,2	0,1	100,0	99,7	3688
Wealth index quintiles										
Poorest	13,1	9,2	21,6	54,4	-	1,4	0,3	100,0	98,3	3583
Second	91,3	1,6	1,9	4,9	0,1	0,2	-	100,0	99,8	3583
Middle	97,3	0,1	0,2	1,6	0,7	-	0,1	100,0	99,9	3584
Fourth	98,7	-	-	0,0	1,3	-	-	100,0	100,0	3584
Richest	98,9	-	-	-	1,1	-	0,0	100,0	100,0	3583
Total	79,9	2,2	4,7	12,2	0,6	0,3	0,1	100,0	99,6	17917

* MICS indicator 11; MDG indicator 30

** 23 unweighted cases with "no education" not shown

Table EN.2: Household water treatment

Percent distribution of household population according to drinking water treatment method used in the household, and percentage of household population that applied an appropriate water treatment method

	Water treatment method used in the household							Households which used						
								All drinking water sources		Improved drinking water sources		Unimproved drinking water sources		
	Boil	Strain through a cloth	Use water filter	Let it stand and settle	Other	None	Appropriate water treatment method	Number of household members	Appropriate water treatment method	Number of household members	Appropriate water treatment method*	Number of household members		
Regions														
Brest	60,7	0,9	10,4	19,9	0,1	34,1	64,4	2651	64,4	2651	-	-	-	
Vitebsk	47,8	0,2	11,6	15,7	0,4	42,3	53,6	2472	53,6	2468	(*)	4	4	
Gomel	59,2	0,2	13,4	18,4	1,2	32,7	64,3	2705	64,2	2699	(*)	6	6	
Grodno	49,2	0,0	10,1	20,6	0,6	41,8	55,8	2232	56,5	2195	(15,9)	36	36	
Minsk city	62,1	0,2	34,5	15,9	1,8	16,4	80,2	2849	80,2	2849	-	-	-	
Minsk	43,5	0,2	8,5	17,1	0,4	46,5	48,5	2838	48,6	2821	(*)	17	17	
Mogilev	48,4	0,5	10,7	24,0	0,6	40,8	53,2	2170	53,3	2166	(*)	4	4	
Residence														
Urban	62,9	0,4	20,4	22,3	1,1	23,3	72,8	11852	72,9	11828	(39,0)	24	24	
Rural	34,6	0,2	3,1	11,4	0,1	60,6	36,4	6065	36,5	6021	(22,9)	44	44	
Education of household head**														
Primary	33,8	0,4	2,4	11,4	0,5	60,7	34,9	782	35,4	769	(*)	13	13	
Incomplete secondary	43,3	0,1	5,2	14,4	0,4	50,8	45,5	1096	45,5	1088	(*)	8	8	
Secondary	54,3	0,3	10,4	21,6	0,5	37,3	58,9	3796	59,0	3785	(*)	11	11	
Secondary special	53,3	0,4	13,5	18,7	0,6	36,3	60,1	8522	60,1	8496	(52,4)	26	26	
Higher	59,7	0,2	26,9	18,2	1,4	23,6	73,5	3688	73,6	3677	(*)	11	11	
Wealth index quintiles														
Poorest	30,3	0,1	1,1	15,8	0,3	64,4	30,8	3583	30,8	3523	30,6	60	60	
Second	45,8	0,1	7,5	14,1	0,2	46,5	50,1	3583	50,1	3577	(*)	5	5	
Middle	60,2	0,4	12,3	19,1	0,5	30,1	66,3	3584	66,4	3583	(*)	1	1	
Fourth	66,1	0,7	18,7	23,1	1,4	21,4	74,9	3584	74,9	3584	-	-	-	
Richest	64,0	0,3	33,3	20,9	1,3	17,4	80,2	3583	80,2	3582	(*)	1	1	
Total	53,3	0,3	14,6	18,6	0,8	35,9	60,5	17917	60,6	17849	28,6	68	68	

* MICS indicator 13

** 23 unweighted cases with "no education" not shown

Table EN.3: Time to source of water

Percent distribution of households according to time to go to source of drinking water, get water and return, and mean time to source of drinking water

	Time to source of drinking water					Mean time to source of drinking water*	Number of households
	Less than 15 minutes	15 minutes to less than 30 minutes	Don't know	Water on premises	Total		
Regions							
Brest	18,6	0,6	-	80,8	100,0	6,9	980
Vitebsk	22,6	5,8	-	71,6	100,0	9,3	950
Gomel	14,0	2,7	-	83,3	100,0	8,2	1052
Grodno	23,2	1,9	-	74,9	100,0	6,2	798
Minsk city	0,5	-	-	99,5	100,0	4,4	1065
Minsk	24,1	0,6	-	75,3	100,0	5,4	1046
Mogilev	16,8	5,6	0,3	77,3	100,0	10,5	816
Residence							
Urban	5,6	1,3	0,1	93,0	100,0	9,1	4431
Rural	38,4	4,4	-	57,2	100,0	7,2	2276
Education of household head**							
Primary	52,8	8,7	-	38,5	100,0	8,5	458
Incomplete secondary	34,9	6,6	-	58,5	100,0	7,7	510
Secondary	18,1	2,4	-	79,5	100,0	7,1	1338
Secondary special	13,0	1,2	-	85,8	100,0	7,1	2976
Higher	4,6	0,8	0,1	94,5	100,0	9,6	1407
Wealth index quintiles							
Poorest	69,6	8,7	0,1	21,6	100,0	7,4	1489
Second	5,7	1,3	-	93,0	100,0	8,4	1298
Middle	0,7	0,7	0,1	98,5	100,0	16,9	1396
Fourth	-	-	-	100,0	100,0	-	1376
Richest	-	-	-	100,0	100,0	-	1148
Total	16,8	2,4	0,0	80,8	100,0	7,7	6707

* The mean time to source of drinking water is calculated based on those households that do not have water on the premises.

** 13 unweighted cases with "no education" not shown

Table EN.4: Person collecting water

Percent distribution of households according to the person collecting drinking water used in the household

	Person collecting drinking water				Number of households
	Adult woman	Adult man or male child under age 15	Missing	Total	
Regions[*]					
Brest	49,4	50,6	-	100,0	189
Vitebsk	57,0	42,4	0,6	100,0	269
Gomel	48,3	49,9	1,6	100,0	175
Grodno	44,9	53,7	1,4	100,0	200
Minsk	48,1	50,8	1,1	100,0	258
Mogilev	52,7	44,9	2,4	100,0	185
Residence					
Urban	52,8	45,8	1,4	100,0	307
Rural	49,5	49,5	1,0	100,0	974
Education of household head^{**}					
Primary	55,1	41,3	3,6	100,0	282
Incomplete secondary	51,1	48,2	0,7	100,0	212
Secondary	49,4	50,0	0,6	100,0	274
Secondary special	45,5	54,2	0,3	100,0	422
Higher	51,3	48,7	-	100,0	76
Wealth index quintiles^{***}					
Poorest	51,0	47,7	1,3	100,0	1168
Second	42,9	57,1	-	100,0	92
Middle	(41,1)	(58,9)	-	100,0	20
Total	50,3	48,6	1,1	100,0	1281

* 4 unweighted cases with "Minsk city" not shown

** 11 unweighted cases with "no education" not shown

*** 1 unweighted case with "fourth quintile" and 1 unweighted case with "richest quintile" not shown

Table EN.5: Use of sanitary means of excreta disposal

Percent distribution of household members according to type of toilet facility used by the household, and the percentage of household members using sanitary means of excreta disposal

	Type of toilet facility used by household										Percentage of population using sanitary means of excreta disposal*	Number of household members	
	Improved sanitation facility					Unimproved sanitation facility							Total
	Flush/pour flush to:			Pit latrine with:		Other	Pit latrine without slab/open pit	Other	Total				
	Piped sewer system	Septic tank	Pit latrine	Ventilation	Slab								
Regions													
Brest	64,4	5,2	-	-	30,3	-	0,1	-	-	-	100,0	99,9	2651
Vitebsk	67,4	2,8	0,3	1,9	24,1	-	3,4	-	-	0,1	100,0	96,5	2472
Gomel	65,8	1,0	4,6	0,4	28,1	-	0,0	-	-	0,0	100,0	99,9	2705
Grodno	63,2	2,0	1,1	0,3	32,4	-	1,0	-	-	-	100,0	99,0	2232
Minsk city	99,0	-	0,9	-	0,1	-	-	-	-	-	100,0	100,0	2849
Minsk	60,6	5,0	1,6	0,1	32,5	0,1	0,1	0,1	-	-	100,0	99,9	2838
Mogilev	62,7	4,4	0,2	0,1	32,5	-	-	-	-	0,1	100,0	99,9	2170
Residence													
Urban	85,6	1,7	1,6	0,4	10,2	-	0,4	-	-	0,0	100,0	99,5	11852
Rural	38,2	5,2	0,6	0,3	54,6	0,1	1,0	0,1	-	0,1	100,0	98,9	6065
Education of household head**													
Primary	22,0	0,6	0,2	1,1	75,0	0,0	0,9	0,0	-	0,2	100,0	98,9	782
Incomplete secondary	42,2	2,7	1,6	1,2	50,4	0,4	1,4	0,4	-	0,1	100,0	98,4	1096
Secondary	62,7	5,1	1,9	0,4	28,7	-	1,2	-	-	-	100,0	98,8	3796
Secondary special	72,5	2,7	1,4	0,4	22,5	-	0,5	-	-	0,0	100,0	99,5	8522
Higher	88,5	1,6	0,6	-	9,2	-	0,1	-	-	-	100,0	99,9	3688
Wealth index quintiles													
Poorest	0,2	0,9	1,4	0,7	94,9	0,1	1,7	0,1	-	0,1	100,0	98,2	3583
Second	49,0	12,3	5,0	1,1	31,1	-	1,4	-	-	0,0	100,0	98,5	3583
Middle	98,9	0,9	0,1	0,1	0,0	-	-	-	-	-	100,0	100,0	3584
Fourth	99,7	0,3	-	-	-	-	-	-	-	-	100,0	100,0	3584
Richest	100,0	-	-	-	-	-	-	-	-	-	100,0	100,0	3583
Total	69,6	2,9	1,3	0,4	25,2	0,0	0,6	0,0	0,0	0,0	100,0	99,3	17917

* MICS indicator 12; MDG indicator 31

** 23 unweighted cases with "no education" not shown

Table EN.5w: Joint use of sanitary means

The percentage of household members jointly using improved household sanitation facility

	Percentage of household members jointly using different number of improved household sanitation facility							Number of household members using improved sanitation facility
	1*	2	3	4	5-9	10 and more	Total	
Sanitation facility								
Flush/pour flush to:								
Piped sewer system	93,1	5,5	0,5	0,2	0,3	0,4	100,0	12462
Septic tank	98,6	1,4	-	-	-	-	100,0	517
Pit latrine	86,9	9,8	-	-	1,1	2,2	100,0	232
Pit latrine with:								
Ventilation	91,3	2,4	-	2,0	4,3	-	100,0	70
Slab	94,8	3,0	0,7	0,3	0,8	0,4	100,0	4513
Regions								
Brest	93,4	6,1	0,3	0,1	0,1	0,0	100,0	2649
Vitebsk	95,2	3,0	0,3	0,5	0,5	0,5	100,0	2385
Gomel	97,2	1,7	0,4	0,0	0,5	0,2	100,0	2703
Grodno	92,8	3,6	1,9	0,6	0,4	0,7	100,0	2210
Minsk city	88,5	10,9	0,2	-	0,2	0,2	100,0	2849
Minsk	93,9	4,1	0,1	0,3	0,8	0,8	100,0	2834
Mogilev	95,4	2,8	0,6	0,1	0,5	0,6	100,0	2168
Residence								
Urban	91,6	6,3	0,7	0,3	0,5	0,6	100,0	11797
Rural	97,6	1,6	0,2	0,2	0,3	0,1	100,0	6001
Education of household head**								
Primary	98,1	1,1	0,6	0,2	-	-	100,0	773
Incomplete secondary	95,5	3,1	0,3	0,4	0,5	0,2	100,0	1079
Secondary	93,4	5,5	0,5	0,1	0,1	0,4	100,0	3751
Secondary special	92,5	5,3	0,5	0,4	0,8	0,5	100,0	8480
Higher	95,0	4,1	0,5	0,1	0,0	0,3	100,0	3683
Wealth index quintiles								
Poorest	93,8	3,8	0,5	0,4	1,0	0,5	100,0	3518
Second	95,6	2,5	0,5	0,2	0,5	0,7	100,0	3529
Middle	90,3	7,1	1,1	0,3	0,5	0,7	100,0	3584
Fourth	94,7	4,4	0,3	0,3	0,2	0,1	100,0	3584
Richest	93,8	6,0	0,2	-	0,0	0,0	100,0	3583
Total	93,7	4,8	0,5	0,2	0,4	0,4	100,0	17798

* Says that the sanitation facility is not used on joint basis with other household's members.

** 23 unweighted cases with "no education" not shown

Table EN.6: Disposal of child's faeces

Percent distribution of children aged 0-2 years according to place of disposal of child's faeces, and the percentage of children aged 0-2 years whose stools are disposed of safely

	Place of disposal of child's faeces						Proportion of children whose stools are disposed of safely	Number of children aged 0-2 years
	Child used toilet	Put/ rinsed into toilet	Put/ rinsed into drain or ditch	Thrown into garbage	Other/ don't know	Total		
Regions								
Brest	11,0	89,0	0,0	0,0	0,0	100,0	100,0	328
Vitebsk	6,5	75,5	5,0	10,1	2,8	100,0	82,0	215
Gomel	6,2	69,6	6,7	12,4	5,1	100,0	75,8	278
Grodno	3,7	50,0	17,2	28,8	0,3	100,0	53,7	259
Minsk city	10,0	65,0	0,5	23,9	0,5	100,0	75,0	303
Minsk	11,3	53,4	3,4	26,7	5,2	100,0	64,7	311
Mogilev	4,1	77,3	3,4	14,0	1,2	100,0	81,4	219
Residence								
Urban	8,7	69,5	1,5	18,2	2,1	100,0	78,2	1332
Rural	6,1	66,0	12,7	12,7	2,5	100,0	72,1	581
Mother's education**								
Incomplete secondary	5,4	50,5	18,8	21,5	3,8	100,0	55,9	71
Secondary	7,0	70,5	4,7	12,3	5,5	100,0	77,5	313
Secondary special	7,6	70,1	5,5	16,0	0,9	100,0	77,7	974
Higher	9,3	66,8	2,2	19,2	2,5	100,0	76,1	553
Wealth index quintiles								
Poorest	2,0	54,6	23,4	15,6	4,4	100,0	56,6	304
Second	7,5	72,5	5,7	13,2	1,0	100,0	80,0	368
Middle	10,8	75,8	0,0	12,7	0,7	100,0	86,6	377
Fourth	10,9	71,5	0,2	15,0	2,4	100,0	82,4	399
Richest	7,1	65,8	0,2	24,2	2,7	100,0	72,9	465
Total	7,9	68,5	4,9	16,6	2,1	100,0	76,4	1913

* MICS indicator 14

** 23 unweighted cases with "no education" not shown

Table EN.7: Use of improved water sources and improved sanitation

Percentage of household population using both improved drinking water sources and sanitary means of excreta disposal

	Percentage of household population:			Number of household members
	Using improved sources of drinking water	Using sanitary means of excreta disposal	Using improved sources of drinking water and using sanitary means of excreta disposal	
Regions				
Brest	100,0	99,9	99,9	2651
Vitebsk	99,8	96,5	96,4	2472
Gomel	99,8	99,9	99,7	2705
Grodno	98,3	99,0	97,4	2232
Minsk city	100,0	100,0	100,0	2849
Minsk	99,4	99,9	99,3	2838
Mogilev	99,8	99,9	99,7	2170
Residence				
Urban	99,8	99,5	99,3	11852
Rural	99,3	98,9	98,3	6065
Education of household head^{***}				
Primary	98,4	98,9	97,3	782
Incomplete secondary	99,3	98,4	98,0	1096
Secondary	99,7	98,8	98,5	3796
Secondary special	99,7	99,5	99,2	8522
Higher	99,7	99,9	99,6	3688
Wealth index quintiles				
Poorest	98,3	98,2	96,6	3583
Second	99,8	98,5	98,4	3583
Middle	100,0	100,0	100,0	3584
Fourth	100,0	100,0	100,0	3584
Richest	100,0	100,0	100,0	3583
Total	99,6	99,3	99,0	17917

* MICS indicator 11; MDG indicator 30

** MICS indicator 12; MDG indicator T 31

*** 23 unweighted cases with "no education" not shown

Table RH.1: Use of contraception

Percentage of married or in union women aged 15-49 who are using (or whose partner is using) a contraceptive method

	Not using any method	Percent of women (currently married or in union) who are using										Percent of women (currently married or in union) who are using			Number of women currently married or in union		
		Female sterilization	Pill	IUD	Condom	LAM	Periodic abstinence	Withdrawal	Other	Total	Any modern method	Any traditional method	Any method*				
														Any modern method		Any traditional method	Any method*
Regions																	
Brest	27,2	0,5	7,6	32,2	21,7	0,4	3,8	6,0	0,6	100,0	62,5	10,3	72,8	566			
Vitebsk	33,8	1,3	9,2	21,9	16,9	0,7	5,7	10,0	0,5	100,0	49,6	16,6	66,2	524			
Gomel	24,6	2,7	12,1	26,7	17,0	0,2	7,7	8,9	0,1	100,0	58,6	16,8	75,4	530			
Grodno	24,3	3,1	10,7	28,7	10,4	0,8	5,5	15,1	1,4	100,0	52,9	22,8	75,7	507			
Minsk city	24,7	3,6	14,6	15,1	23,6	0,5	7,8	8,1	2,0	100,0	58,2	17,1	75,3	549			
Minsk	29,4	3,1	7,2	30,8	15,0	0,2	3,5	10,1	0,7	100,0	56,4	14,2	70,6	580			
Mogilev	27,6	2,8	12,4	23,3	17,2	1,1	4,5	9,4	1,7	100,0	57,0	15,4	72,4	392			
Residence																	
Urban	26,4	2,3	11,4	24,8	19,6	0,5	5,9	8,0	1,1	100,0	58,7	14,9	73,6	2436			
Rural	29,4	2,7	8,5	27,5	13,3	0,6	4,6	12,8	0,6	100,0	52,3	18,3	70,6	1212			
Age																	
15-19	(38,1)	(-)	(11,4)	(2,3)	(37,0)	(-)	(8,9)	(2,3)	(-)	(100,0)	(50,7)	(11,2)	(61,9)	29			
20-24	33,4	-	15,8	13,9	29,7	1,1	2,0	3,6	0,5	100,0	59,5	7,1	66,6	318			
25-29	26,3	1,2	16,0	21,7	24,3	1,2	2,0	5,8	1,5	100,0	64,1	9,6	73,7	572			
30-34	22,0	2,9	11,9	31,2	16,7	0,8	4,3	9,0	1,2	100,0	63,7	14,3	78,0	577			
35-39	18,1	4,4	11,7	35,5	16,9	0,6	3,5	7,7	1,5	100,0	69,2	12,7	81,9	627			
40-44	23,0	3,3	7,9	32,2	12,6	0,1	7,3	12,5	1,1	100,0	56,6	20,4	77,0	757			
45-49	41,2	1,5	4,2	15,8	12,6	-	10,2	14,4	-	100,0	34,2	24,6	58,8	768			

Continued

	Not using any method	Percent of women (currently married or in union) who are using										Percent of women (currently married or in union) who are using			Number of women currently married or in union		
		Female sterilization	Pill	IUD	Condom	LAM	Periodic abstinence	Withdrawal	Other	Total	Any modern method	Any traditional method	Any method*				
Number of living children																	
0	71,4	-	9,9	2,2	14,0	-	1,9	-	0,6	100,0	26,1	2,5	28,6	255			
1	26,4	0,6	13,6	23,8	22,2	0,7	4,1	7,4	1,2	100,0	61,0	12,6	73,6	1248			
2	22,1	3,5	8,9	30,0	16,1	0,4	6,5	11,6	0,9	100,0	58,9	19,0	77,9	1759			
3	25,9	3,6	6,7	28,3	11,7	0,8	7,6	15,2	0,2	100,0	50,5	23,6	74,1	294			
4 +	25,7	10,2	10,0	25,3	8,6	2,6	8,2	9,4	-	100,0	54,1	20,2	74,3	92			
Education**																	
Incomplete secondary	35,6	1,6	6,3	18,6	19,9	-	1,7	16,3	-	100,0	46,4	18,0	64,4	60			
Secondary	32,7	2,6	8,1	25,3	15,8	0,2	5,8	9,1	0,4	100,0	52,1	15,2	67,3	686			
Secondary special	26,5	2,5	10,2	27,2	15,1	0,6	5,8	11,1	1,0	100,0	55,5	18,0	73,5	2038			
Higher	24,8	2,0	13,2	23,0	24,3	0,7	4,9	6,0	1,1	100,0	63,1	12,1	75,2	864			
Wealth index quintiles																	
Poorest	31,6	2,3	6,5	27,0	12,9	0,8	3,3	14,8	0,8	100,0	49,3	19,1	68,4	550			
Second	27,0	2,2	11,0	25,9	14,3	1,0	5,1	13,1	0,4	100,0	53,4	19,6	73,0	763			
Middle	29,7	2,6	10,4	26,7	19,3	0,2	4,7	6,0	0,4	100,0	59,1	11,2	70,3	727			
Fourth	24,5	2,4	10,0	27,2	19,7	0,7	7,1	7,3	1,1	100,0	60,3	15,3	75,6	732			
Richest	25,6	2,5	12,7	22,6	19,8	0,2	6,7	8,1	1,8	100,0	58,6	15,8	74,4	876			
Total	27,4	2,4	10,4	25,7	17,5	0,5	5,5	9,6	1,0	100,0	56,5	16,1	72,6	3648			

* MICS indicator 21; MDG indicator 19c

** 1 unweighted case with "primary education" not shown

Table RH.2: Antenatal care provider

Percent distribution of women aged 15-49 who gave birth in the two years preceding the survey by type of personnel providing antenatal care

	Person providing antenatal care		No antenatal care received	Total	Any skilled personnel*	Number of women who gave birth in the preceding two years
	Medical doctor	Nurse/midwife				
Regions						
Brest	100,0	-	-	100,0	100,0	79
Vitebsk	99,4	0,6	-	100,0	100,0	51
Gomel	100,0	-	-	100,0	100,0	70
Grodno	99,4	0,6	-	100,0	100,0	57
Minsk city	100,0	-	-	100,0	100,0	80
Minsk	94,7	5,3	-	100,0	100,0	72
Mogilev	95,1	-	4,9	100,0	95,1	53
Residence						
Urban	99,2	0,1	0,7	100,0	99,3	330
Rural	96,6	3,1	0,3	100,0	99,7	132
Age**						
15-19	(96,8)	(1,5)	(1,7)	100,0	(98,3)	21
20-24	97,4	1,5	1,1	100,0	98,9	147
25-29	99,1	0,7	0,2	100,0	99,8	162
30-34	98,7	0,9	0,4	100,0	99,6	87
35-39	100,0	-	-	100,0	100,0	37
Education***						
Incomplete secondary	(100,0)	(-)	(-)	(100,0)	(100,0)	18
Secondary	98,6	1,0	0,4	100,0	99,6	79
Secondary special	98,6	1,1	0,3	100,0	99,7	231
Higher	98,0	0,8	1,2	100,0	98,8	133
Wealth index quintiles						
Poorest	99,0	-	1,0	100,0	99,0	67
Second	95,8	3,8	0,4	100,0	99,6	80
Middle	98,8	1,2	-	100,0	100,0	95
Fourth	100,0	-	-	100,0	100,0	97
Richest	98,4	0,3	1,3	100,0	98,7	123
Total	98,4	1,0	0,6	100,0	99,4	462

* MICS indicator 20

** 21 unweighted cases in age group "40-44" and 3 unweighted cases in age group "45-49" not shown

*** 2 unweighted cases with "primary education" not shown

Table RH.3: Antenatal care

Percentage of pregnant women receiving antenatal care among women aged 15-49 years who gave birth in two years preceding the survey and percentage of pregnant women receiving specific care as part of the antenatal care received

	Percent of pregnant women receiving ANC one or more times during pregnancy	Percent of pregnant women who had:				Number of women who gave birth in two years preceding survey
		Blood test taken	Blood pressure measured	Urine specimen taken	Weight measured	
Regions						
Brest	100,0	100,0	100,0	100,0	100,0	79
Vitebsk	100,0	100,0	100,0	100,0	100,0	51
Gomel	100,0	100,0	100,0	100,0	100,0	70
Grodno	100,0	100,0	100,0	100,0	100,0	57
Minsk city	100,0	100,0	100,0	100,0	100,0	80
Minsk	100,0	100,0	100,0	100,0	100,0	72
Mogilev	95,1	95,1	95,1	95,1	95,1	53
Residence						
Urban	99,3	99,3	99,3	99,3	99,3	330
Rural	99,7	99,7	99,7	99,7	99,7	132
Age**						
15-19	(98,3)	(98,3)	(98,3)	(98,3)	(98,3)	21
20-24	98,9	98,9	98,9	98,9	98,9	147
25-29	99,8	99,8	99,8	99,8	99,8	162
30-34	99,6	99,6	99,6	99,6	99,6	87
35-39	100,0	100,0	100,0	100,0	100,0	37
Education***						
Incomplete secondary	(100,0)	(100,0)	(100,0)	(100,0)	(100,0)	18
Secondary	99,5	99,5	99,5	99,5	99,5	79
Secondary special	99,7	99,7	99,7	99,7	99,7	231
Higher	98,8	98,8	98,8	98,8	98,8	133
Wealth index quintiles						
Poorest	99,0	99,0	99,0	99,0	99,0	67
Second	99,5	99,5	99,5	99,5	99,5	80
Middle	100,0	100,0	100,0	100,0	100,0	95
Fourth	100,0	100,0	100,0	100,0	100,0	97
Richest	98,7	98,7	98,7	98,7	98,7	123
Total	99,4	99,4	99,4	99,4	99,4	462

* MICS indicator 44

** 21 unweighted cases in age group "40-44" and 3 unweighted cases in age group "45-49" not shown

*** 2 unweighted cases with "primary education" not shown

Table RH.4: Assistance during delivery

Percent distribution of women aged 15-49 with a birth in two years preceding the survey by type of personnel assisting at delivery

	Person assisting at delivery				Any skilled personnel*	Delivered in health facility**	Number of women who gave birth in preceding two years
	Medical doctor	Nurse/midwife	Auxiliary midwife	Total			
Regions							
Brest	100,0	0,0	-	100,0	100,0	100,0	79
Vitebsk	87,9	12,1	-	100,0	100,0	100,0	51
Gomel	89,7	9,7	0,5	100,0	100,0	99,5	70
Grodno	98,3	1,7	-	100,0	100,0	100,0	57
Minsk city	95,5	4,5	-	100,0	100,0	100,0	80
Minsk	97,8	2,2	-	100,0	100,0	100,0	72
Mogilev	83,3	16,7	-	100,0	100,0	99,4	53
Residence							
Urban	95,7	4,2	0,1	100,0	100,0	100,0	330
Rural	89,3	10,7	-	100,0	100,0	99,5	132
Age***							
15-19	(89,8)	(10,2)	(-)	(100,0)	(100,0)	(100,0)	21
20-24	94,2	5,8	-	100,0	100,0	100,0	147
25-29	93,9	6,1	-	100,0	100,0	99,8	162
30-34	94,1	5,5	0,4	100,0	100,0	99,6	87
35-39	92,6	7,4	-	100,0	100,0	100,0	37
Education****							
Incomplete secondary	(83,7)	(16,3)	(-)	(100,0)	(100,0)	(98,0)	18
Secondary	93,5	6,0	0,5	100,0	100,0	100,0	79
Secondary special	93,8	6,2	-	100,0	100,0	99,9	231
Higher	95,6	4,4	-	100,0	100,0	100,0	133
Wealth index quintiles							
Poorest	90,2	9,8	-	100,0	100,0	99,0	67
Second	90,8	8,7	0,5	100,0	100,0	100,0	80
Middle	94,3	5,7	-	100,0	100,0	100,0	95
Fourth	95,9	4,1	-	100,0	100,0	100,0	97
Richest	96,0	4,0	-	100,0	100,0	100,0	123
Total	93,9	6,0	0,1	100,0	100,0	99,9	462

* MICS indicator 4; MDG indicator 17

** MICS indicator 5

*** 21 unweighted cases in age group "40-44" and 3 unweighted cases in age group "45-49" not shown

**** 2 unweighted cases with "primary education" not shown

Table CD.1: Family support for learning

Percentage of children aged 0-59 months for whom household members are engaged in activities that promote learning and school readiness

	For whom household members engaged in four or more activities that promote learning and school readiness*	Mean number of activities household members engage in with the child	For whom the father engaged in one or more activities that promote learning and school readiness**	Mean number of activities the father engaged in with the child	Living in a household without their natural father	Number of children aged 0-59 months
Sex						
Male	83,1	5,0	72,1	2,2	17,1	1582
Female	85,3	5,1	69,8	2,2	15,6	1469
Regions						
Brest	78,9	4,9	75,6	2,0	13,2	513
Vitebsk	84,6	4,9	66,2	2,1	19,5	352
Gomel	84,6	5,0	67,4	2,1	18,0	484
Grodno	85,0	5,1	78,9	2,4	10,8	411
Minsk city	91,3	5,3	76,2	2,9	12,5	434
Minsk	85,6	5,1	66,5	2,0	17,8	500
Mogilev	79,1	4,7	64,9	1,9	24,7	357
Residence						
Urban	85,0	5,1	72,2	2,4	15,3	2064
Rural	82,4	4,9	68,6	1,8	18,5	987
Age						
0-23 months	66,3	4,2	70,2	1,9	13,6	1241
24-59 months	96,4	5,5	71,6	2,4	18,3	1810
Mother's education***						
Incomplete secondary	74,8	4,5	56,3	1,3	27,8	123
Secondary	82,5	4,9	68,4	1,9	17,3	530
Secondary special	84,3	5,0	70,8	2,2	16,9	1577
High	86,2	5,1	75,5	2,6	12,8	817
Father's education****						
Incomplete secondary	86,6	4,8	73,5	1,6	na	84
Secondary	82,3	5,0	80,2	2,2	na	550
Secondary special	84,1	5,0	84,3	2,6	na	1307
Higher	86,4	5,2	88,0	3,2	na	607
Father not in household	83,1	4,9	na	na	na	499
Wealth index quintiles						
Poorest	79,2	4,8	61,6	1,5	23,7	505
Second	83,4	5,0	70,5	2,0	16,1	616
Middle	83,5	5,0	70,6	2,2	15,9	615
Fourth	86,4	5,1	71,4	2,4	17,7	619
Richest	86,9	5,1	78,3	2,7	10,4	696
Total	84,1	5,0	71,0	2,2	16,4	3051

* MICS indicator 46

** MICS indicator 47

*** 4 unweighted cases with "primary education" not shown

**** 4 unweighted cases with "primary education" not shown

Table ED.1: Early childhood education

Percentage of children aged 36-59 months who are attending some form of organized early childhood education program and percentage of first graders who attended pre-school

	Percentage of children aged 36-59 months currently attending early childhood education*	Number of children aged 36-59 months	Percentage of children attending first grade who attended preschool program in previous year**	Number of children attending first grade
Sex				
Male	87,0	605	96,1	75
Female	85,1	560	90,0	81
Residence				
Urban	90,1	742	91,6	96
Rural	79,1	423	95,1	60
Child's age				
36-47 months	81,3	567	na	na
48-59 months	90,6	598	na	na
6 years	na	na	92,9	156
Mother's education***				
Incomplete secondary	71,5	55	-	-
Secondary	84,6	218	(98,9)	25
Secondary special	88,2	617	90,0	90
Higher	85,8	272	(95,4)	38
Total	86,1	1165	92,9	156

* MICS indicator 52

** MICS indicator 53

*** 2 unweighted cases with "primary education" not shown

Table ED.2: Primary school entry

Percentage of children of primary school entry age attending grade 1

	Percentage of children of primary school entry age currently attending grade 1*	Number of children of primary school entry age
Sex		
Male	74,2	103
Female	76,9	105
Residence		
Urban	73,0	131
Rural	79,8	77
Child's age		
6 years	75,5	208
Mother's education**		
Secondary	(65,2)	38
Secondary special	77,1	117
Higher	79,6	50
Wealth index quintiles		
Poorest	78,1	32
Second	69,3	49
Middle	(77,8)	44
Fourth	80,9	48
Richest	(71,8)	35
Total	75,5	208

* MICS indicator 54

** 10 unweighted cases with "incomplete secondary education" not shown

Table ED.3: Primary school net attendance ratio

Percentage of children of primary school age attending primary or secondary school (NAR)

	Male		Female		Total	
	Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio	Number of children
Regions						
Brest	93,1	68	92,4	67	92,8	135
Vitebsk	87,8	48	(97,2)	38	92,0	86
Gomel	94,2	59	98,5	62	96,4	121
Grodno	87,9	36	91,7	57	90,3	94
Minsk city	91,1	54	91,0	53	91,0	107
Minsk	96,4	67	93,4	67	95,0	134
Mogilev	96,0	38	(92,6)	42	94,2	80
Residence						
Urban	92,5	221	91,7	230	92,1	451
Rural	93,0	149	96,8	157	95,0	306
Age**						
6 years	74,2	103	76,9	105	75,5	208
7 years	99,7	93	100,0	98	99,9	191
8 years	100,0	81	100,0	101	100,0	182
9 years	100,0	93	100,0	83	100,0	176
Mother's education***						
Incomplete secondary	(100,0)	13	(96,1)	16	97,9	29
Secondary	92,4	77	89,3	70	91,0	147
Secondary special	91,8	199	95,2	222	93,6	421
Higher	94,0	80	93,2	79	93,6	159
Wealth index quintiles						
Poorest	94,3	91	97,2	70	95,6	161
Second	86,0	76	95,0	88	90,8	164
Middle	96,5	78	91,8	87	94,0	165
Fourth	94,4	71	92,4	71	93,4	142
Richest	91,5	54	92,6	71	92,1	125
Total	92,7	370	93,8	387	93,2	757

* MICS indicator 55; MDG indicator 6

** Primary school age range corresponds to the classification.

*** 1 unweighted case with "primary education" not shown

Table ED.4: Secondary school net attendance ratio

Percentage of children of secondary school age attending secondary school or higher (NAR)

	Male		Female		Total	
	Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio	Number of children
Regions						
Brest	97,1	166	97,0	116	97,0	282
Vitebsk	92,0	140	99,0	144	95,5	284
Gomel	94,1	136	96,8	149	95,5	285
Grodno	97,4	140	96,5	136	96,9	276
Minsk city	94,4	118	94,9	114	94,7	232
Minsk	93,4	164	95,7	127	94,4	291
Mogilev	95,4	127	98,4	125	96,9	252
Residence						
Urban	95,8	623	96,3	580	96,1	1203
Rural	93,2	368	98,0	331	95,5	699
Age						
10 years	63,2	102	68,1	87	65,4	189
11 years	97,2	124	100,0	108	98,5	232
12 years	98,9	136	100,0	136	99,5	272
13 years	100,0	155	100,0	123	100,0	278
14 years	100,0	128	100,0	150	100,0	278
15 years	99,6	166	100,0	145	99,8	311
16 years	95,6	180	100,0	162	97,7	342
Mother's education**						
Incomplete secondary	(91,6)	24	(100,0)	17	95,0	41
Secondary	90,3	205	96,7	168	93,2	373
Secondary special	96,1	523	97,3	531	96,7	1054
Higher	96,2	225	95,6	179	95,9	404
Wealth index quintiles						
Poorest	92,0	185	97,7	162	94,7	347
Second	94,0	238	98,6	215	96,2	453
Middle	96,6	192	95,8	203	96,2	395
Fourth	94,2	196	97,0	152	95,4	348
Richest	97,7	180	95,6	179	96,7	359
Total	94,9	991	96,9	911	95,9	1902

* MICS indicator 55; MDG indicator 6

** 1 unweighted case with "primary education" and 24 unweighted cases with "mother not in household" not shown

Table ED.4w: Secondary school age children attending primary school

Percentage of children of secondary school age attending primary school

	Male		Female		Total	
	Percent attending primary school	Number of children	Percent attending primary school	Number of children	Percent attending primary school	Number of children
Regions						
Brest	1,9	166	3,0	116	2,3	282
Vitebsk	5,5	140	1,0	144	3,3	284
Gomel	4,0	136	3,2	149	3,6	285
Grodno	2,6	140	3,5	136	3,1	276
Minsk city	3,9	118	5,1	114	4,5	232
Minsk	5,6	164	4,3	127	5,0	291
Mogilev	3,4	127	1,6	125	2,5	252
Residence						
Urban	3,8	623	3,7	580	3,8	1203
Rural	3,8	368	2,0	331	3,0	699
Age						
10	35,1	102	31,9	87	33,6	189
11	1,8	124	-	108	0,9	232
12	-	136	-	136	-	272
13	-	155	-	123	-	278
14	-	128	-	150	-	278
15	-	166	-	145	-	311
16	-	180	-	162	-	342
Mother's education*						
Incomplete secondary	(8,4)	24	(-)	17	5,0	41
Secondary	5,8	205	3,3	168	4,7	373
Secondary special	3,0	523	2,7	531	2,9	1054
Higher	3,8	225	4,4	179	4,1	404
Wealth index quintiles						
Poorest	6,0	185	2,3	162	4,3	347
Second	3,6	238	1,4	215	2,5	453
Middle	2,5	192	4,2	203	3,4	395
Fourth	4,9	196	3,0	152	4,0	348
Richest	2,3	180	4,4	179	3,3	359
Total	3,8	991	3,1	911	3,5	1902

* 1 unweighted case with "primary education" and 24 unweighted cases with "mother not in household" not shown

Table ED.5: Primary school completion and transition to secondary education

Primary school completion rate and transition rate to secondary education

	Net primary school completion rate [*]	Number of children of primary school completion age	Transition rate to secondary education ^{**}	Number of children who were in the last grade of primary school the previous year
Sex				
Male	66,5	93	100,0	110
Female	71,8	83	100,0	99
Residence				
Urban	64,3	103	100,0	117
Rural	75,6	73	100,0	92
Total	69,0	176	100,0	209

^{*} MICS indicator 59; MDG indicator 7b

^{**} MICS indicator 58

Table ED.6: Education gender parity

Ratio of girls to boys attending primary education and ratio of girls to boys attending secondary education

	Primary school net attendance ratio (NAR), girls	Primary school net attendance ratio (NAR), boys	Gender parity index (GPI) for primary school NAR*	Secondary school net attendance ratio (NAR), girls	Secondary school net attendance ratio (NAR), boys	Gender parity index (GPI) for secondary school NAR*
Regions						
Brest	92,4	93,1	0,99	97,0	97,1	1,00
Vitebsk	97,2	87,8	1,11	99,0	92,0	1,08
Gomel	98,5	94,2	1,05	96,8	94,1	1,03
Grodno	91,7	87,9	1,04	96,5	97,4	0,99
Minsk city	91,0	91,1	1,00	94,9	94,4	1,01
Minsk	93,4	96,4	0,97	95,7	93,4	1,02
Mogilev	92,6	96,0	0,96	98,4	95,4	1,03
Residence						
Urban	91,7	92,5	0,99	96,3	95,8	1,01
Rural	96,8	93,0	1,04	98,0	93,2	1,05
Mother's education						
Incomplete secondary	(96,1)	(100,0)	(0,96)	(100,0)	(91,6)	(1,09)
Secondary	89,3	92,4	0,97	96,7	90,3	1,07
Secondary special	95,2	91,8	1,04	97,3	96,1	1,01
Higher	93,2	94,0	0,99	95,6	96,2	0,99
Wealth index quintiles						
Poorest	97,2	94,3	1,03	97,7	92,0	1,06
Second	95,0	86,0	1,1	98,6	94,0	1,05
Middle	91,8	96,5	0,95	95,8	96,6	0,99
Fourth	92,4	94,4	0,98	97,0	94,2	1,03
Richest	92,6	91,5	1,01	95,6	97,7	0,98
Total	93,8	92,7	1,01	96,9	94,9	1,02

* MICS indicator 61; MDG indicator 9

Table CP.1: Child labour

Percentage of children aged 5-14 years who are involved in child labour activities by type of work

	Working outside household		Household chores for 28+ hours/week	Working for family business	Percentage of children whose labour should be liquidated*	Number of children aged 5-14 years
	Paid work	Unpaid work				
Sex						
Male	1,1	3,2	-	2,3	5,8	1122
Female	0,7	2,6	0,0	1,7	4,4	1088
Region						
Brest	0,1	1,7	-	0,5	1,9	367
Vitebsk	1,5	1,2	-	1,5	3,8	309
Gomel	0,7	4,4	0,1	0,3	5,3	344
Grodno	2,9	1,0	-	7,2	10,0	323
Minsk city	-	0,2	-	-	0,2	262
Minsk	0,2	3,7	-	3,5	5,6	331
Mogilev	0,5	8,3	-	0,7	9,0	274
Residence						
Urban	0,4	1,9	-	0,2	2,6	1337
Rural	1,5	4,4	0,0	4,8	9,0	873
Age						
5-11	1,4	4,5	-	3,0	7,9	1382
12-14	-	0,2	0,0	0,3	0,5	828
School participation						
Yes	0,9	2,9	0,0	2,0	5,2	2181
No	(-)	(1,1)	(-)	(-)	(1,1)	29
Mother's education**						
Incomplete secondary	-	2,6	0,4	2,9	5,9	70
Secondary	1,2	1,8	-	1,7	4,1	439
Secondary special	0,6	3,3	-	1,9	5,2	1235
Higher	1,5	2,8	-	2,2	5,6	463
Wealth index quintiles						
Poorest	1,5	3,8	0,1	4,0	8,3	456
Second	1,8	4,0	-	4,5	8,5	508
Middle	0,4	2,2	-	0,6	2,9	482
Fourth	-	2,8	-	-	2,8	401
Richest	0,4	1,4	-	0,1	1,9	363
Total	0,9	2,9	0,0	2,0	5,1	2210

* MICS indicator 71

** 3 unweighted cases with "primary education" not shown

TableCP.1w: Child labour

Percentage of children aged 5-14 years whose labour should be eliminated

	Working outside household						Doing any kind of house work	Household chores for 28+ hours/week	Working for family business		Doing different kinds of jobs		Number of children aged 5-14 years
	Paid work			Unpaid work					Total	whose labour should be liquidated	Total	whose labour should be liquidated*	
	Total	whose labour should be liquidated	Total	Total	whose labour should be liquidated								
Sex													
Male	1,6	1,1	6,3	3,2	65,6	-	4,3	2,3	10,6	5,8	1122		
Female	0,8	0,7	5,9	2,6	74,1	0,0	3,7	1,7	9,5	4,4	1088		
Region													
Brest	0,1	0,1	2,1	1,7	51,8	-	0,5	0,5	2,3	1,9	367		
Vitebsk	2,6	1,5	4,4	1,2	70,0	-	2,0	1,5	8,3	3,8	309		
Gomel	0,7	0,7	10,2	4,4	70,8	0,0	1,5	0,3	11,9	5,3	344		
Grodno	3,9	2,9	7,6	1,0	79,0	-	15,7	7,2	24,8	10,0	323		
Minsk city	-	-	0,3	0,2	67,7	-	-	-	0,3	0,2	262		
Minsk	0,6	0,2	7,2	3,7	75,0	-	6,3	3,5	10,1	5,6	331		
Mogilev	0,5	0,5	10,8	8,3	76,7	-	1,3	0,7	12,0	9,0	274		
Residence													
Urban	0,6	0,4	4,6	1,9	66,4	-	0,9	0,2	6,0	2,6	1337		
Rural	2,2	1,5	8,3	4,4	74,9	0,0	8,7	4,8	16,3	9,0	873		
Age													
5-11	1,4	1,4	4,5	4,5	59,4	-	3,0	3,0	7,9	7,9	1382		
12-14	1,0	-	8,7	0,2	87,0	0,0	5,6	0,3	13,7	0,5	828		

Continued

	Working outside household						Doing any kind of house work	Household chores for 28+ hours/week	Working for family business		Doing different kinds of jobs		Number of children aged 5-14 years
	Paid work			Unpaid work					Total	whose labour should be liquidated	Total	whose labour should be liquidated*	
	Total	whose labour should be liquidated	Total	Total	whose labour should be liquidated								
School participation													
Yes	1,2	0,9	6,2	2,9	70,2	0,0	4,0	2,0	10,2	5,2	2181		
No	(-)	(-)	(1,1)	(1,1)	(36,2)	(-)	(-)	(-)	(1,1)	(1,1)	29		
Mother's education**													
Incomplete secondary	-	-	2,6	2,6	62,6	0,4	4,0	2,9	7,1	5,9	70		
Secondary	1,9	1,2	5,1	1,8	68,9	-	3,2	1,7	9,0	4,1	439		
Secondary special	1,0	0,6	6,6	3,3	70,6	-	4,6	1,9	11,0	5,2	1235		
Higher	1,5	1,5	6,2	2,8	69,7	-	3,2	2,2	9,2	5,6	463		
Wealth index quintiles													
Poorest	2,4	1,5	7,5	3,8	76,4	0,1	6,6	4,0	14,6	8,3	456		
Second	2,2	1,8	8,2	4,0	73,2	-	7,3	4,5	15,3	8,5	508		
Middle	0,4	0,4	5,0	2,2	65,0	-	3,4	0,6	7,9	2,9	482		
Fourth	0,4	-	5,3	2,8	62,3	-	0,1	-	5,7	2,8	401		
Richest	0,4	0,4	3,7	1,4	71,1	-	1,0	0,1	4,8	1,9	363		
Total	1,2	0,9	6,1	2,9	69,7	0,0	4,0	2,0	10,1	5,1	2210		

* MICS indicator 71

** 3 unweighted cases with "primary education" not shown

Table CP.2: Labourer students and student labourers

Percentage of children aged 5-14 years who are labourer students whose labour should be liquidated

	Percentage of children attending school	Number of children 5-14 years of age	Percentage of children labourers whose labour should be liquidated	Number of children 5-14 years of age whose labour should be liquidated	Percentage of children labourers who are also attending school*	Percentage of students labourers whose labour should be liquidated**	Number of students aged 5-14
Sex							
Male	98,4	1122	5,8	66	99,5	5,9	1104
Female	99,0	1088	4,4	47	100,0	4,4	1077
Region							
Brest	98,7	367	1,9	7	(*)	2,0	362
Vitebsk	98,4	309	3,8	12	(*)	3,8	304
Gomel	98,5	344	5,3	18	(*)	5,3	339
Grodno	99,5	323	10,0	32	(*)	10,0	321
Minsk city	98,5	262	0,2	1	(*)	0,2	258
Minsk	98,1	331	5,6	19	(*)	5,7	325
Mogilev	99,1	274	9,0	25	(*)	9,0	272
Residence							
Urban	99,1	1337	2,6	34	(100,0)	2,6	1325
Rural	98,0	873	9,0	79	99,6	9,2	856
Age							
5-11	98,0	1382	7,9	109	99,7	8,0	1355
12-14	99,8	828	0,5	4	(*)	0,5	826
Mother's education ***							
Incomplete secondary	97,3	70	5,9	4	(*)	5,6	68
Secondary	98,7	439	4,1	18	(*)	4,2	433
Secondary special	98,6	1235	5,2	65	100,0	5,3	1218
Higher	99,3	463	5,6	26	(100,0)	5,6	460
Wealth index quintiles							
Poorest	98,5	456	8,3	38	(99,2)	8,3	449
Second	97,6	508	8,5	43	100,0	8,7	496
Middle	99,4	482	2,9	14	(*)	2,9	479
Fourth	98,7	401	2,8	11	(*)	2,8	396
Richest	99,4	363	1,9	7	(*)	1,9	361
Total	98,7	2210	5,1	113	99,7	5,2	2181

* MICS indicator 72

** MICS indicator 73

*** 3 unweighted cases with "primary education" not shown

Table CP.3: Child discipline

Percentage of children aged 2-14 years according to method of disciplining the child

	Percentage of children 2-14 years of age who experience:						Mother/ caretaker believes that the child needs to be physically punished	Number of children aged 2-14 years
	Only non-violent discipline	Psychological punishment	Minor physical punishment	Severe physical punishment	Any psychological or physical punishment	No discipline or punishment		
Sex								
Male	11,5	80,5	53,8	2,3	85,8	2,3	18,2	1083
Female	15,7	73,6	44,9	1,9	79,2	4,8	12,1	1044
Region								
Brest	16,3	79,2	49,7	1,1	82,7	1,0	17,4	334
Vitebsk	9,5	79,6	45,0	3,4	82,8	7,7	16,4	312
Gomel	12,3	79,1	56,7	2,9	84,9	2,7	14,6	329
Grodno	14,3	75,5	50,4	0,4	80,4	5,2	21,8	285
Minsk city	13,6	75,6	46,2	4,6	82,4	2,7	14,2	284
Minsk	15,3	70,0	50,0	0,8	80,4	3,7	9,8	323
Mogilev	13,6	81,4	47,2	1,9	84,5	1,9	11,8	260
Residence								
Urban	14,3	76,5	50,6	2,4	82,7	2,7	14,5	1395
Rural	12,3	78,4	47,2	1,7	82,5	5,2	16,5	732
Age								
2-4	12,9	73,6	67,7	1,1	84,3	2,5	13,9	445
5-9	13,0	79,8	57,2	3,1	85,2	1,8	17,6	719
10-14	14,3	76,8	35,2	1,9	79,9	5,3	13,9	962
Mother's education **								
Incomplete secondary	9,5	82,2	61,1	-	86,5	1,0	22,9	61
Secondary	9,9	81,9	52,9	2,2	86,8	3,2	16,4	393
Secondary special	13,5	76,5	51,1	2,1	82,3	3,9	15,8	1166
Higher	16,9	74,6	41,9	2,4	79,8	3,2	12,0	503
Wealth index quintiles								
Poorest	9,7	80,2	49,1	1,1	84,9	5,4	17,9	377
Second	15,0	76,2	50,1	2,5	81,4	3,2	12,8	441
Middle	10,6	79,2	52,7	1,8	85,3	4,1	16,1	474
Fourth	16,9	73,7	44,5	2,0	79,4	2,9	13,9	429
Richest	15,6	76,7	50,5	3,1	82,1	2,2	15,5	405
Total	13,6	77,2	49,4	2,1	82,6	3,5	15,2	2127

* MICS indicator 74

** 5 unweighted cases with "primary education" not shown

Table CP.4: Early marriage

Percentage of women aged 15-49 years in marriage or union before their 15th birthday, percentage of women aged 20-49 years in marriage or union before their 18th birthday, percentage of women aged 15-19 years currently married or in union, and the percentage of married or in union women

	Number of women aged 15-49 years	Percentage married before age 18*	Number of women aged 20-49 years	Percentage of women 15-19 married/in union**	Number of women aged 15-19 years
Region					
Brest	879	7,2	788	4,7	91
Vitebsk	813	7,4	713	5,0	100
Gomel	863	8,3	741	6,0	122
Grodno	747	6,1	647	3,1	100
Minsk city	1023	3,8	860	0,7	163
Minsk	885	5,0	770	4,1	115
Mogilev	685	8,9	594	3,9	91
Residence					
Urban	4162	5,1	3580	2,4	582
Rural	1733	9,8	1533	7,5	200
Age					
15-19	781	na	na	3,7	781
20-24	724	6,6	724	na	na
25-29	772	9,5	772	na	na
30-34	762	8,8	762	na	na
35-39	797	6,0	797	na	na
40-44	1001	5,0	1001	na	na
45-49	1058	4,6	1058	na	na
Education***					
Incomplete secondary	118	29,1	101	(*)	17
Secondary	1370	11,5	914	2,9	456
Secondary special	2928	6,2	2723	5,8	205
Higher	1470	2,2	1369	0,8	101
Wealth index quintiles					
Poorest	821	8,4	721	5,8	100
Second	1180	9,9	1035	2,9	145
Middle	1247	6,8	1092	5,4	155
Fourth	1254	4,3	1100	3,9	154
Richest	1393	4,3	1165	2,1	228
Total	5895	6,5	5114	3,7	781

* MICS indicator 67

** MICS indicator 68

*** 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table CP.5: Spousal age difference

Percent distribution of currently married/in union women aged 20-24 years according to the age difference with their husband or partner

	Percentage of currently married/in union women aged 20-24 years whose husband or partner is:						Number of women aged 20-24 years currently married/ in union
	younger	0-4 years older	5-9 years older	10+ years older*	No data about age	Total	
Region							
Brest	4,8	50,5	37,6	7,1	-	100,0	50
Vitebsk	20,7	53,7	12,7	12,9	-	100,0	49
Gomel	4,3	70,3	22,3	3,1	-	100,0	35
Grodno	7,1	62,8	24,3	5,8	-	100,0	39
Minsk city	8,0	57,1	24,2	10,7	-	100,0	65
Minsk	5,5	62,8	25,5	6,3	-	100,0	52
Mogilev	1,2	54,3	33,9	9,5	1,1	100,0	28
Residence							
Urban	7,3	58,3	25,0	9,2	0,1	100,0	243
Rural	9,9	58,4	26,8	4,8	-	100,0	75
Education**							
Secondary	8,9	51,7	29,2	10,3	-	100,0	67
Secondary special	7,4	56,7	26,4	9,3	0,2	100,0	156
Higher	9,0	68,7	18,4	3,9	-	100,0	86
Wealth index quintiles							
Poorest	10,6	51,7	27,1	10,6	-	100,0	43
Second	5,7	58,8	32,9	2,6	-	100,0	51
Middle	8,3	62,5	23,4	5,8	-	100,0	71
Fourth	6,3	63,1	21,2	8,9	0,5	100,0	67
Richest	8,9	54,3	24,9	11,9	-	100,0	86
Total	7,9	58,4	25,4	8,2	0,1	100,0	318

* MICS indicator 69

** 1 unweighted case with "primary education" and 21 unweighted cases with "incomplete secondary education" not shown

Table HA.1: Knowledge of preventing HIV transmission

Percentage of women aged 15-49 years who know the main ways of preventing HIV transmission

	Heard of AIDS	Percentage who know transmission can be prevented by:			Percentage of women, who:			Number of women aged 15-49 years
		Having only one faithful uninfected sex partner	Using a condom every time	Abstaining from sex	Knows all three ways	Knows at least one way	Doesn't know any way	
Region								
Brest	100,0	77,4	70,4	48,4	36,8	86,6	13,4	879
Vitebsk	100,0	77,5	64,7	38,9	21,6	93,2	6,8	813
Gomel	99,8	70,1	66,7	36,8	24,0	85,6	14,4	863
Grodno	100,0	74,3	66,9	46,7	35,3	85,9	14,1	747
Minsk city	100,0	75,1	62,1	41,5	26,4	87,8	12,2	1023
Minsk	99,8	80,2	67,6	39,2	27,7	89,8	10,2	885
Mogilev	100,0	79,6	69,5	48,7	34,6	90,3	9,7	685
Residence								
Urban	100,0	75,5	65,6	41,8	27,9	88,2	11,8	4162
Rural	99,9	78,0	69,2	44,7	32,4	88,7	11,3	1733
Age								
15-19	100,0	70,1	63,7	41,3	27,2	84,5	15,5	781
20-24	99,8	76,7	66,2	42,0	28,7	87,6	12,4	724
25-29	100,0	78,0	68,6	41,6	29,4	89,7	10,3	772
30-34	100,0	79,0	65,2	43,3	30,1	88,5	11,5	762
35-39	99,8	78,2	71,7	42,3	30,7	91,5	8,5	797
40-44	100,0	76,0	67,3	42,4	29,8	87,4	12,6	1001
45-49	100,0	75,9	64,2	44,8	28,5	89,3	10,7	1058
Education*								
Incomplete secondary	100,0	71,1	65,0	39,4	30,3	82,9	17,1	118
Secondary	100,0	75,7	66,5	43,5	28,7	88,0	12,0	1370
Secondary special	100,0	77,4	68,6	45,0	31,3	89,7	10,3	2928
Higher	100,0	75,0	63,2	37,4	25,6	86,6	13,4	1470
Wealth index quintiles								
Poorest	100,0	80,6	73,1	46,0	35,4	91,0	9,0	821
Second	99,7	75,8	68,3	46,1	31,8	88,8	11,2	1180
Middle	100,0	74,8	66,0	44,2	30,2	86,9	13,1	1247
Fourth	100,0	76,7	65,1	39,8	25,5	89,5	10,5	1254
Richest	100,0	74,8	63,5	38,9	25,8	86,8	13,2	1393
Total	99,9	76,2	66,6	42,6	29,2	88,4	11,6	5895

* 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table HA.2: Identifying misconceptions about HIV/AIDS

Percentage of women aged 15-49 years who correctly identify misconceptions about HIV/AIDS

	Percent who know that:			Reject two most common misconceptions and know a healthy looking person can be infected	Percent who know that:		Number of women aged 15-49 years
	HIV cannot be transmitted by:		A healthy looking person can be infected		HIV cannot be transmitted by supernatural means	HIV can be transmitted by sharing needles	
	Mosquito bites	by sharing food					
Region							
Brest	78,8	79,0	93,9	64,2	99,7	100,0	879
Vitebsk	57,6	69,2	90,7	44,4	88,9	99,6	813
Gomel	78,9	82,2	89,9	62,9	91,8	96,9	863
Grodno	71,4	79,8	88,5	57,1	90,0	99,5	747
Minsk city	72,9	74,8	93,2	56,7	91,3	99,9	1023
Minsk	74,2	70,6	91,9	54,7	90,0	99,0	885
Mogilev	67,7	75,2	91,7	55,7	91,9	99,5	685
Residence							
Urban	73,4	77,9	91,4	58,8	93,5	99,1	4162
Rural	68,5	70,7	91,6	51,5	88,4	99,4	1733
Age							
15-19	74,7	77,3	89,6	57,5	92,4	99,2	781
20-24	75,3	79,4	91,9	61,2	90,9	99,3	724
25-29	73,7	78,9	93,7	61,2	93,3	98,8	772
30-34	72,5	74,5	92,4	57,0	92,2	99,5	762
35-39	72,5	76,1	91,3	58,1	92,0	98,9	797
40-44	68,2	74,4	91,5	53,6	92,2	99,2	1001
45-49	69,2	71,9	90,6	51,1	91,1	99,4	1058
Education*							
Incomplete secondary	61,1	64,8	84,6	45,0	80,1	98,5	118
Secondary	68,8	71,3	89,2	49,0	89,8	99,2	1370
Secondary special	70,1	75,4	91,0	54,9	92,1	99,3	2928
Higher	79,5	81,7	95,4	68,2	94,9	99,2	1470
Wealth index quintiles							
Poorest	66,5	73,8	90,7	49,9	89,6	99,4	821
Second	68,8	72,6	90,9	53,9	90,0	99,0	1180
Middle	71,9	75,6	91,2	55,7	92,3	99,3	1247
Fourth	73,6	77,6	91,8	59,0	92,9	98,8	1254
Richest	76,4	78,2	92,5	61,7	94,1	99,5	1393
Total	72,0	75,8	91,5	56,7	92,0	99,2	5895

* 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table HA.3: Comprehensive knowledge of HIV/AIDS transmission

Percentage of women aged 15-49 years who have comprehensive knowledge of HIV/AIDS transmission

	Percentage of women, who:			Number of women aged 15-49 years
	Know 2 ways to prevent HIV transmission	Correctly identify 3 misconceptions about HIV transmission	Have comprehensive knowledge (identify 2 prevention methods and 3 misconceptions)*	
Region				
Brest	63,7	64,2	42,0	879
Vitebsk	51,2	44,4	23,7	813
Gomel	53,7	62,9	36,5	863
Grodno	59,3	57,1	33,6	747
Minsk city	53,1	56,7	31,6	1023
Minsk	60,2	54,7	34,1	885
Mogilev	61,4	55,7	35,9	685
Residence				
Urban	55,9	58,8	34,0	4162
Rural	60,7	51,5	33,6	1733
Age				
15-19	52,6	57,5	31,9	781
20-24	57,9	61,2	35,2	724
15-24	55,1	59,3	33,5 [*]	1505
25-29	59,4	61,2	37,0	772
30-34	57,6	57,0	35,4	762
35-39	60,8	58,1	37,7	797
40-44	58,8	53,6	33,6	1001
45-49	54,8	51,1	28,6	1058
Education**				
Incomplete secondary	53,8	45,0	27,9	118
Secondary	57,5	49,0	31,2	1370
Secondary special	59,1	54,9	33,1	2928
Higher	54,0	68,2	38,4	1470
Wealth index quintiles				
Poorest	64,4	49,9	33,8	821
Second	58,6	53,9	33,6	1180
Middle	56,5	55,7	32,3	1247
Fourth	55,5	59,0	33,9	1254
Richest	54,4	61,7	35,6	1393
Total	57,3	56,7	33,9	5895

* MICS indicator 82; MDG indicator 19b

** 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table HA.4: Knowledge of mother-to-child HIV transmission

Percentage of women aged 15-49 years who correctly identify means of HIV transmission from mother to child

	Know AIDS can be transmitted from mother to child	Percent who know AIDS can be transmitted:				Did not know any specific way	Number of women aged 15-49 years
		During pregnancy	At delivery	Through breastmilk	All three ways		
Region							
Brest	99,4	97,9	93,4	67,3	64,7	0,6	879
Vitebsk	98,4	95,2	88,9	71,4	66,2	1,6	813
Gomel	97,9	95,8	82,4	67,7	60,7	1,9	863
Grodno	96,1	91,7	88,4	64,5	59,3	3,9	747
Minsk city	97,5	89,6	82,2	62,6	50,7	2,5	1023
Minsk	98,4	95,5	91,2	76,6	72,6	1,4	885
Mogilev	98,1	94,3	81,8	60,2	54,5	1,9	685
Residence							
Urban	98,0	93,9	86,0	67,5	60,8	2,0	4162
Rural	98,1	95,1	89,0	66,8	62,2	1,9	1733
Age							
15-19	96,6	92,8	78,6	69,4	58,5	3,4	781
20-24	97,5	91,5	85,9	74,1	65,5	2,3	724
25-29	98,3	94,4	88,2	72,0	65,7	1,7	772
30-34	98,6	94,3	89,7	68,5	63,8	1,4	762
35-39	98,6	96,0	88,9	61,2	56,2	1,2	797
40-44	98,0	94,6	88,7	61,1	57,0	2,0	1001
45-49	98,2	95,2	87,5	67,4	63,0	1,8	1058
Education**							
Incomplete secondary	96,8	91,5	83,7	70,5	62,5	3,2	118
Secondary	97,2	94,0	82,5	64,7	57,2	2,8	1370
Secondary special	98,4	95,1	88,7	67,5	62,7	1,6	2928
Higher	98,3	93,2	88,1	69,4	62,0	1,7	1470
Wealth index quintiles							
Poorest	97,7	96,2	85,5	62,3	58,7	2,3	821
Second	98,6	94,8	87,0	63,1	57,6	1,1	1180
Middle	97,8	93,2	88,7	69,4	63,2	2,2	1247
Fourth	97,4	94,4	86,6	69,1	63,0	2,6	1254
Richest	98,3	93,3	86,3	70,5	62,3	1,7	1393
Total	98,0	94,2	86,9	67,3	61,2	2,0	5895

* MICS indicator 89

** 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table HA.5: Attitudes toward people living with HIV/AIDS

Percentage of women aged 15-49 years who have heard of AIDS who express a discriminatory attitude towards people living with HIV/AIDS

	Percent of women who:						Number of women aged 15-49 years who have heard of AIDS
	Would not care for a family member who was sick with AIDS	If a family member had HIV would want to keep it a secret	Believe that a teacher with HIV should not be allowed to work	Would not buy food from a person with HIV/AIDS	Agree with at least one discriminatory statement	Agree with none of the discriminatory statements*	
Region							
Brest	11,3	83,3	48,7	81,3	97,1	2,9	879
Vitebsk	6,9	82,3	39,6	76,9	95,2	4,8	813
Gomel	6,1	87,0	44,2	77,6	96,8	3,2	862
Grodno	13,5	84,4	53,6	90,0	98,9	1,1	747
Minsk city	5,2	78,2	34,1	63,4	89,9	10,1	1023
Minsk	7,8	80,3	45,2	78,3	96,6	3,4	883
Mogilev	8,6	76,9	37,4	76,0	94,3	5,7	685
Residence							
Urban	6,7	82,9	40,8	73,4	94,7	5,3	4161
Rural	12,1	78,9	48,4	86,0	97,0	3,0	1731
Age							
15-19	10,3	79,5	39,4	76,0	93,5	6,5	781
20-24	10,0	80,9	41,8	76,3	96,4	3,6	722
25-29	7,5	80,6	38,5	71,0	93,0	7,0	772
30-34	9,5	83,7	45,0	76,0	96,4	3,6	762
35-39	7,7	79,4	43,2	77,7	94,3	5,7	796
40-44	8,2	83,9	45,1	80,4	96,6	3,4	1001
45-49	5,9	83,2	46,4	80,1	96,6	3,4	1058
Education**							
Incomplete secondary	18,4	78,7	56,9	88,2	98,0	2,0	118
Secondary	9,1	79,9	49,4	81,7	95,4	4,6	1370
Secondary special	9,5	82,2	44,5	78,9	96,0	4,0	2928
Higher	4,3	82,7	33,1	68,2	93,9	6,1	1470
Wealth index quintiles							
Poorest	14,8	78,1	52,7	85,8	98,0	2,0	821
Second	10,7	79,6	44,8	79,8	95,3	4,7	1177
Middle	7,5	81,7	46,2	77,4	95,0	5,0	1247
Fourth	6,1	83,2	40,8	77,6	95,3	4,7	1254
Richest	5,1	84,5	35,1	68,9	94,3	5,7	1393
Total	8,3	81,8	43,0	77,1	95,4	4,6	5892

* MICS indicator 86

** 2 unweighted cases with "no education" and 5 unweighted cases with "primary education" not shown

Table HA.6: Knowledge of a facility for HIV testing

Percentage of women aged 15-49 years who know where to get an HIV test, percentage of women who have been tested and, of those tested the percentage who have been told the result

	Percentage of women, who:		Number of women aged 15-49 years	Number of women who have been tested and told the result	Number of women aged 15-49 years who have been tested
	Know a place to get tested*	Have been tested**			
Region					
Brest	99,4	37,3	879	99,1	328
Vitebsk	96,5	74,0	813	92,8	601
Gomel	96,9	66,9	863	90,3	577
Grodno	96,7	70,3	747	87,5	525
Minsk city	96,0	65,5	1023	84,4	670
Minsk	98,5	79,7	885	91,9	705
Mogilev	97,8	74,5	685	88,2	511
Residence					
Urban	97,1	64,5	4162	90,2	2685
Rural	98,0	71,1	1733	89,6	1232
Age					
15-19	91,1	24,7	781	86,3	193
20-24	98,2	68,7	724	90,8	497
25-29	99,4	81,5	772	93,0	629
30-34	99,5	82,4	762	90,3	628
35-39	97,9	76,5	797	88,4	610
40-44	97,7	68,8	1001	90,2	689
45-49	98,0	63,4	1058	88,7	671
Education ***					
Incomplete secondary	97,9	71,4	118	87,3	85
Secondary	94,7	51,3	1370	89,9	702
Secondary special	98,0	72,3	2928	88,9	2116
Higher	98,8	69,0	1470	92,8	1014
Wealth index quintiles					
Poorest	96,7	69,6	821	88,7	571
Second	97,5	67,6	1180	89,9	797
Middle	98,7	66,8	1247	90,3	833
Fourth	96,3	66,5	1254	91,9	834
Richest	97,5	63,3	1393	89,0	882
Total	97,4	66,4	5895	90,0	3917

* MICS indicator 87

** MICS indicator 88

*** 3 unweighted cases with "no education" and 6 unweighted cases with "primary education" not shown

Table HA.7: HIV testing and counseling coverage during antenatal care

Percentage of women aged 15-49 years who gave birth in the two years preceding the survey who were offered HIV testing and counseling with their antenatal care

	Percent of women who:				Number of women who gave birth in the 2 years preceding the survey
	Received antenatal care from a health care professional for last pregnancy	Were provided information about HIV prevention during ANC visit	Were tested for HIV at ANC visit	Received results of HIV test at ANC visit**	
Regions					
Brest	100,0	99,2	98,3	97,4	79
Vitebsk	100,0	51,2	96,0	90,4	51
Gomel	100,0	59,6	98,9	89,1	70
Grodno	100,0	75,0	98,8	92,7	57
Minsk city	100,0	59,8	98,1	90,6	80
Minsk	100,0	88,9	100,0	95,5	72
Mogilev	95,1	67,2	94,4	88,1	53
Residence					
Urban	99,3	72,1	97,8	92,9	330
Rural	99,7	74,6	98,5	90,7	132
Age					
15-19 years	(98,3)	(56,9)	(98,3)	(98,3)	21
20-24 years	98,9	72,6	96,4	89,2	147
25-29 years	99,8	74,7	98,4	93,3	162
30-34 years	99,6	69,6	99,2	92,5	87
35-49 years	100,0	80,6	99,3	95,1	45
Education***					
Incomplete secondary	(100,0)	(76,0)	(98,4)	(92,9)	18
Secondary	99,5	72,6	97,4	89,1	79
Secondary special	99,7	76,4	98,4	92,7	231
Higher	98,8	66,3	97,6	93,3	133
Wealth index quintiles					
Poorest	99,0	79,6	98,0	89,6	67
Second	99,5	74,7	98,3	93,5	80
Middle	100,0	76,0	98,9	95,5	95
Fourth	100,0	75,1	98,6	93,6	97
Richest	98,7	63,7	96,6	89,4	123
Total	99,4	72,8	98,0	92,3	462

* MICS indicator 90

** MICS indicator 91

*** 2 unweighted cases with "primary education" not shown

Appendix A. Sample Design

The major features of sample design are described in this appendix. Sample design features include target sample size, sample allocation, sampling stages, and the calculation of sample weights.

The primary objective of the sample design for the Belarus Multiple Indicator Cluster Survey was to produce statistically reliable estimates of most indicators, at the national level, for urban and rural areas, and for Minsk city and the six regions: Brest, Vitebsk, Gomel, Grodno, Minsk (without Minsk city) and Mogilev. Urban and rural areas in each region were defined as the sampling domains.

A multi-stage, stratified cluster sampling approach was used for the selection of the survey sample.

Sample Size and Sample Allocation

The target sample size for the Belarus MICS3 was calculated as 7,000 households.

MICS3 is utilizing the sample frame of household surveys that is being used in the republic. To provide uniform distribution of the sample allocation of the households in the republic the selection was carried out in Brest, Vitebsk, Gomel, Grodno, Minsk, Mogilev regions and in Minsk city.

Three stage sampling has been carried out. At the first stage in each of the regions (oblasts) three sampling strata has been created: big cities, small towns and rural areas (selskie soveti); at the second stage – polling stations in urban areas and rural settlements in selskie soveti; at the third stage in the selected settlements the households were selected.

Within the strata of big cities, at first stage, 20 big cities were selected with the probability equaling to 1.

Within the strata of small towns 29 small towns were sampled systematically with pps and the measure of size was total population of the small towns. The number of small towns in every region (oblast) was selected based on division of the total number of population of all small towns of each region into average household size (2,6), sample share (1/600) and average load of interviewer (40).

Within the strata of rural settlements (selskie soveti) at the first stage of sampling 53 rural settlements were selected systematically with pps and the measure of size was number of households in the rural settlement.

On the second stage of sampling within the big cities and the small towns the polling stations were selected as sampling unit, in the rural settlements – settlements in rural area (selskie soveti).

To cover the whole territory of the selected city the cartographical materials were used on the second stage of sampling within the big cities. The number of the polling stations was calculated based on division of the population of the city into the average size of the family (2,6), sample share (1/600) and estimated number of the households in each polling station (20).

Three polling stations were selected in each small town from the list of the polling stations, ranking by number of voters.

In rural areas, taking into account the difficulty of access and scattered nature of settlements, the territories of the rural areas (selskie soveti) were divided into zones and the closest rural settlements were grouped. One zone was selected in each rural area (selskie soveti) and within this zone all settlements were investigated.

Throughout the Republic of Belarus there were 304 polling stations and the rural zones in selskie sovery selected in 2005.

The distribution of clusters by each oblast and sampling domain:

Region (Oblast)	<i>Big cities</i>	<i>Small towns</i>	<i>Rural (selskie sovery)</i>	Total
Brest	19	15	10	44
Vitebsk	21	12	8	41
Gomel	27	11	8	46
Grodno	13	15	8	36
Minsk city	55	-	-	55
Minsk (oblast)	11	21	13	45
Mogilev	19	12	6	37
Total	165	86	53	304

On the third stage of sampling, households were selected from the updated lists systematically taking into account the size of the cluster. In big cities the size of the cluster which is selected from the updated list households within the territory of polling station is 19-20 households, in small towns the size of the cluster is 13-14 households, and in rural areas the size of the cluster is 39-40 households. The size of clusters is not uniform. Variation in cluster sizes for urban and rural settlements was done on purpose since existing sampling plan was considering load of one interviewer, as one of the parameters, and distribution of sampled population into the sampling domains - proportionally to the distribution in general population.

Besides, taking into account the limited representation of children under 5 in the household sample, the additional sub-sample of households with children aged 0-4 was formed. For this purpose, in each of the 304 clusters the lists of households was updated with the information on households with under 5 children through local out-patient health institutions. From these lists with higher probability than for households without children, the households with children aged 0-4 were selected.

The resulting number of households for MICS3 sample in the Republic of Belarus was 7,000, including 2,857 households with children aged 0-4.

Calculation of Sample Weights

The Belarus Multiple Indicator Cluster Survey sample is not self-weighted. Essentially, by allocating equal numbers of households to each of the regions, different sampling fractions were used in each region since the size of the regions varied. For this reason, sample weights were calculated and these were used in the subsequent analyses of the survey data.

The major component of the weight is the reciprocal of the sampling fraction employed in selecting the number of sample households in that particular sampling domain:

$$W = 1 / f$$

The term f , the sampling fraction at the household stratum.

Since all households selected for the survey were occupied in the republic, a second component which has to be taken into account in the calculation of sample weights is the level of non-

response for the household and individual interviews. The adjustment for household non-response is equal to the inverse value of:

$$RR = \text{Number of interviewed households} / \text{Number of occupied households listed}$$

After the completion of fieldwork, response rates were calculated for each sampling domain. These were used to adjust the sample weights calculated for each cluster. Response rates in the Belarus Multiple Indicator Cluster Survey are shown in Table HH.1 in this report.

Similarly, the adjustment for non-response at the individual level (women aged 15-49 and under-5 children) is equal to the inverse value of:

$$RR = \text{Completed women's (or under-5's) questionnaires} / \text{Eligible women (or under-5s)}$$

Numbers of eligible women and under-5 children were obtained from the household listing in the Household Questionnaire in households where interviews were completed.

The unadjusted weights for the households were calculated by multiplying the above factors for each enumeration area. These weights were then standardized (or normalized), one purpose of which is to make the sum of the interviewed sample units equal the total sample size at the national level. Normalization is performed by multiplying the aforementioned unadjusted weights by the ratio of the number of completed households to the total unadjusted weighted number of households. Adjusted (normalized) weights varied in 19 strata between 0,263363 in households with children to 1,749831 in households without children.

A similar standardization procedure was followed in obtaining standardized weights for the women's and under-5's questionnaires.

Appendix B. List of Personnel Involved in the Survey

Survey Coordinators	Galina Galina Gasyuk – The First Deputy Minister-Ministry of Statistics and Analysis.
	Svetlana Novoselova – Head of the Living Standard Statistics and the Household Survey Department.
Technical Director	Victor Tamashevich – Director of the Research Institute of Statistics of the Ministry of Statistics and Analysis of the Republic of Belarus.
Sampling Expert	Irina Bulgakova – Deputy Head of the Living Standard Statistics and the Household Survey Department.
	Olga Yakimovich – Chief economist of the Living Standard Statistics and the Household Survey Department.
Data Entry and Processing specialists	Inna Konoshonok – Head of the Data Processing and Analysis Department.
	Zanna Izvekova – Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Tatyana Schvedova – Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Galina Kravchuk – Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Yanina Careva – Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Iryna Kanarskaya – Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Tatyana Maksimenko – Leading Economist of the Living Standard Statistics and the Household Survey Department.
	Iryna Buinevich – Leading Chief Economist of the Living Standard Statistics and the Household Survey Department.
	Maria Kozinskaya – Head of the Household Statistics Department of Brest Region Statistical Board.
	Svetlana Obrazova – Head of the Household Statistics Department of Vitebsk Region Statistical Board.
Maria Zinkevich – Head of the Household Statistics Department of Gomel Region Statistical Board.	
Galina Moroz – Head of the Household Statistics Department of Grodno Region Statistical Board.	
Valentina Zapolskaya – Head of the Household Statistics Department of Minsk City Statistical Board.	
Tatyana Kasinskaya – Head of the Household Statistics Department of Minsk Region Statistical Board.	
Valentina Chausova – Head of the Household Statistics Department of Mogilev Region Statistical Board.	

Appendix C. Wealth index

Wealth Index reflects the main long-term wealth of a household and is meant for households ranking according to the level of wealth – from the least wealthy to the wealthiest.

Analysis of the main wealth components was realized by means of information about the housing conditions and the availability of the household goods. Indicators used for calculation of Wealth Index are the following:

- main material of floor, roof and walls of a household's dwelling;
- number of rooms used as a bedroom;
- source of domestic energy for cooking;
- main source of drinking water and water for cooking at the household;
- type of sanitation facilities for disposal of human excreta;
- availability at the household of:
 - electricity,
 - TV-set,
 - personal computer,
 - refrigerator,
 - microwave,
 - laundry washer,
 - vacuum cleaner,
 - sewing-machine,
 - mobile and stationary telephones,
 - watches,
 - bicycle,
 - motorcycle/motor scooter,
 - cartage,
 - car.

Each piece of household goods received its weight and on the basis of this the estimate (in points) of the wealth of every household was made.

Then, the members of the household were divided into five equal groups (quintiles) – from the least wealthy to the wealthiest – in accordance with the aggregated amount of points of the wealth level of a household where these people live.

Wealth Index does not provide the information about absolute poverty, current gains or expenses level; and estimation of Wealth Index applicable only for concrete aggregate of indicators which it is based on.

Additional information on building of the Wealth Index can be found in Rutstein and Johnson, 2004, and Filmer and Pritchett, 2001.

Appendix D. Estimates of Sampling Errors

The sample of respondents selected in the Belarus Multiple Indicator Cluster Survey is only one of the samples that could have been selected from the same population, using the same design and size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. The extent of variability is not known exactly, but can be estimated statistically from the survey results.

The following sampling error measures are presented in this appendix for each of the selected indicators:

- Standard error (*se*): Sampling errors are usually measured in terms of standard errors for particular indicators (means, proportions etc). Standard error is the square root of the variance. The Taylor linearization method is used for the estimation of standard errors.
- Coefficient of variation (*se/r*) is the ratio of the standard error to the value of the indicator
- Design effect (*deff*) is the ratio of the actual variance of an indicator, under the sampling method used in the survey, to the variance calculated under the assumption of simple random sampling. The square root of the design effect (*deff*) is used to show the efficiency of the sample design. A *deff* value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a *deff* value above 1.0 indicates the increase in the standard error due to the use of a more complex sample design.
- Confidence limits are calculated to show the interval within which the true value for the population can be reasonably assumed to fall. For any given statistic calculated from the survey, the value of that statistics will fall within a range of plus or minus two times the standard error ($p + 2.se$ or $p - 2.se$) of the statistic in 95 percent of all possible samples of identical size and design.

For the calculation of sampling errors from MICS data, SPSS Version 14 Complex Samples module has been used. The results are shown in the tables that follow. In addition to the sampling error measures described above, the tables also include weighted and unweighted counts of denominators for each indicator.

Sampling errors are calculated for indicators of primary interest, for the national total, for the regions, and for urban and rural areas. All indicators presented here are in the form of proportions.

Table SE.1 shows the list of indicators for which sampling errors are calculated, including the base population (denominator) for each indicator. Tables SE.2 to SE.11 show the calculated sampling errors.

Table SE.1. Indicators selected for sampling error calculations

List of indicators selected for sampling error calculations, and base populations (denominators) for each indicator

MICS indicator		Base population
HOUSEHOLDS		
74	Child discipline	Children aged 2-14 years selected
HOUSEHOLD MEMBERS		
11	Use of improved drinking water sources	All household members
12	Use of improved sanitation facilities	All household members
55	Net primary school attendance rate	Children of primary school age
56	Net secondary school attendance rate	Children of secondary school age
59	Primary completion rate	Children of primary school completion age
71	Child labour	Children aged 5-14 years
WOMEN		
4	Skilled attendant at delivery	Women aged 15-49 years with a live birth in the last 2 years
20	Antenatal care	Women aged 15-49 years with a live birth in the last 2 years
21	Contraceptive prevalence	Women aged 15-49 currently married/in union
67	Marriage before age 18	Women aged 20-49 years
82	Comprehensive knowledge about HIV prevention among young people	Women aged 15-24 years
86	Attitude towards people with HIV/AIDS	Women aged 15-49 years
88	Women who have been tested for HIV	Women aged 15-49 years
89	Knowledge of mother- to-child transmission of HIV	Women aged 15-49 years
UNDER 5-S		
6	Underweight prevalence	Children under age 5
25	Tuberculosis immunization coverage	Children aged 18-29 months
26	Polio immunization coverage	Children aged 18-29 months
27	Immunization coverage for DPT	Children aged 18-29 months
28	Measles immunization coverage	Children aged 18-29 months
31	Fully immunized children	Children aged 18-29 months
-	Acute respiratory infection in last two weeks	Children under age 5
22	Antibiotic treatment of suspected pneumonia	Children under age 5 with suspected pneumonia in the last 2 weeks
-	Diarrhoea in last two weeks	Children under age 5
35	Received ORT or increased fluids and continued feeding	Children under age 5 with diarrhoea in the last 2 weeks
46	Support for learning	Children under age 5

Table SE.2. Sampling errors: Total sample

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,826	0,010	0,013	2,353	1,534	2127	3097	0,805	0,847
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,996	0,001	0,001	3,181	1,783	17917	6707	0,994	0,999
Use of improved sanitation facilities	EN.5	0,993	0,002	0,002	5,586	2,364	17917	6707	0,989	0,998
Net primary school attendance rate	ED.3	0,932	0,010	0,011	1,506	1,227	757	948	0,912	0,952
Net secondary school attendance rate	ED.4	0,959	0,005	0,006	1,305	1,142	1902	1774	0,948	0,969
Primary completion rate	ED.5	0,690	0,029	0,042	0,879	0,937	175	223	0,631	0,748
Child labour	CP.1	0,051	0,007	0,145	2,743	1,656	2210	2423	0,036	0,066
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	462	1179	1,000	1,000
Antenatal care	RH.2	0,994	0,004	0,004	2,855	1,690	462	1179	0,987	1,002
Contraceptive prevalence	RH.1	0,726	0,010	0,014	2,047	1,431	3648	4173	0,707	0,746
Marriage before age 18	CP.4	0,065	0,004	0,064	1,541	1,241	5114	5333	0,057	0,074
Comprehensive knowledge about HIV prevention among young people	HA.3	0,335	0,019	0,055	2,379	1,542	1505	1544	0,298	0,372
Attitude towards people with HIV/AIDS	HA.5	0,046	0,004	0,079	1,798	1,341	5892	5893	0,039	0,054
Women who have been tested for HIV	HA.6	0,664	0,013	0,019	4,188	2,047	5895	5895	0,639	0,690
Knowledge of mother-to-child transmission of HIV	HA.4	0,612	0,014	0,023	4,885	2,210	5895	5895	0,584	0,640

Continued

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
UNDER-5s										
Underweight prevalence	NU.1	0,010	0,002	0,210	1,367	1,169	3018	3014	0,006	0,014
Tuberculosis immunization coverage	CH.2	0,996	0,003	0,003	1,016	1,008	633	665	0,990	1,001
Polio immunization coverage	CH.2	0,990	0,005	0,005	1,331	1,154	633	665	0,981	0,999
Immunization coverage for DPT	CH.2	0,988	0,004	0,004	0,854	0,924	633	665	0,980	0,996
Measles immunization coverage	CH.2	0,981	0,005	0,005	0,915	0,956	633	665	0,971	0,991
Fully immunized children	CH.2	0,972	0,006	0,007	0,985	0,993	633	665	0,959	0,985
Acute respiratory infection in last two weeks	CH.5	0,106	0,007	0,066	1,596	1,263	3051	3051	0,092	0,121
Antibiotic treatment of suspected pneumonia	CH.6	0,670	0,022	0,032	0,717	0,847	325	339	0,626	0,713
Diarrhoea in last two weeks	CH.3	0,040	0,004	0,102	1,327	1,152	3051	3051	0,032	0,049
Received ORT or increased fluids and continued feeding	CH.4	0,542	0,031	0,057	0,468	0,684	123	124	0,481	0,604
Support for learning	CD.1	0,841	0,009	0,011	1,910	1,382	3051	3051	0,823	0,860

Table SE.3. Sampling errors: Urban areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,827	0,011	0,014	1,839	1,356	1395	2004	0,804	0,850
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,998	0,001	0,001	2,925	1,710	11852	4386	0,996	1,000
Use of improved sanitation facilities	EN.5	0,995	0,002	0,002	4,238	2,059	11852	4386	0,991	1,000
Net primary school attendance rate	ED.3	0,921	0,013	0,015	1,277	1,130	451	514	0,894	0,948
Net secondary school attendance rate	ED.4	0,961	0,007	0,007	1,418	1,191	1203	1063	0,947	0,975
Primary completion rate	ED.5	0,643	0,029	0,044	0,417	0,646	103	119	0,586	0,700
Child labour	CP.1	0,026	0,005	0,185	1,218	1,104	1337	1361	0,016	0,035
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	330	833	1,000	1,000
Antenatal care	RH.2	0,993	0,005	0,005	3,109	1,763	330	833	0,983	1,003
Contraceptive prevalence	RH.1	0,736	0,011	0,015	1,850	1,360	2437	2766	0,714	0,759
Marriage before age 18	CP.4	0,051	0,005	0,094	1,723	1,313	3580	3626	0,042	0,061
Comprehensive knowledge about HIV prevention among young people	HA.3	0,332	0,020	0,061	2,012	1,418	1146	1090	0,291	0,372
Attitude towards people with HIV/AIDS	HA.5	0,053	0,005	0,093	1,953	1,397	4161	4015	0,043	0,063
Women who have been tested for HIV	HA.6	0,645	0,013	0,020	2,937	1,714	4162	4016	0,619	0,671
Knowledge of mother-to-child transmission of HIV	HA.4	0,608	0,012	0,020	2,569	1,603	4162	4016	0,583	0,633

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,007	0,002	0,272	1,015	1,008	2043	2009	0,003	0,010
Tuberculosis immunization coverage	CH.2	0,996	0,003	0,003	0,940	0,970	426	445	0,990	1,002
Polio immunization coverage	CH.2	0,992	0,004	0,004	0,902	0,950	426	445	0,984	1,000
Immunization coverage for DPT	CH.2	0,985	0,005	0,005	0,793	0,891	426	445	0,974	0,995
Measles immunization coverage	CH.2	0,977	0,007	0,007	0,870	0,933	426	445	0,963	0,990
Fully immunized children	CH.2	0,968	0,008	0,008	0,816	0,903	426	445	0,953	0,983
Acute respiratory infection in last two weeks	CH.5	0,115	0,008	0,065	1,126	1,061	2064	2033	0,100	0,130
Antibiotic treatment of suspected pneumonia	CH.6	0,664	0,025	0,037	0,667	0,817	237	247	0,614	0,713
Diarrhoea in last two weeks	CH.3	0,038	0,005	0,123	1,222	1,106	2064	2033	0,029	0,048
Received ORT or increased fluids and continued feeding	CH.4	0,531	0,021	0,040	0,145	0,381	79	81	0,488	0,573
Support for learning	CD.1	0,850	0,012	0,014	2,114	1,454	2064	2033	0,827	0,873

Table SE.4. Sampling errors: Rural areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (<i>t</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/t</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Child discipline	CP.3	0,825	0,021	0,026	3,355	1,832	732	1093	0,782	0,867
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,993	0,003	0,003	3,390	1,841	6065	2321	0,986	0,999
Use of improved sanitation facilities	EN.5	0,989	0,006	0,006	6,886	2,624	6065	2321	0,978	1,001
Net primary school attendance rate	ED.3	0,950	0,015	0,015	1,926	1,388	307	434	0,920	0,979
Net secondary school attendance rate	ED.4	0,955	0,008	0,009	1,115	1,056	699	711	0,938	0,971
Primary completion rate	ED.5	0,756	0,058	0,076	1,855	1,362	73	104	0,641	0,872
Child labour	CP.1	0,090	0,017	0,193	3,919	1,980	873	1062	0,055	0,125
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	132	346	1,000	1,000
Antenatal care	RH.2	0,997	0,003	0,003	0,877	0,937	132	346	0,992	1,003
Contraceptive prevalence	RH.1	0,706	0,019	0,027	2,429	1,559	1212	1407	0,669	0,745
Marriage before age 18	CP.4	0,098	0,008	0,083	1,292	1,137	1533	1707	0,082	0,114
Comprehensive knowledge about HIV prevention among young people	HA.3	0,344	0,043	0,125	3,727	1,931	359	454	0,258	0,431
Attitude towards people with HIV/AIDS	HA.5	0,030	0,004	0,125	0,900	0,949	1731	1878	0,022	0,037
Women who have been tested for HIV	HA.6	0,711	0,030	0,042	8,033	2,834	1733	1879	0,652	0,770
Knowledge of mother-to-child transmission of HIV	HA.4	0,622	0,038	0,060	11,238	3,352	1733	1879	0,547	0,697

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>d_{eff}</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,017	0,005	0,309	1,703	1,305	975	1005	0,007	0,028
Tuberculosis immunization coverage	CH.2	0,995	0,005	0,005	1,151	1,073	207	220	0,985	1,005
Polio immunization coverage	CH.2	0,985	0,011	0,011	1,786	1,336	207	220	0,963	1,007
Immunization coverage for DPT	CH.2	0,995	0,005	0,005	1,151	1,073	207	220	0,985	1,005
Measles immunization coverage	CH.2	0,990	0,007	0,007	1,104	1,051	207	220	0,976	1,004
Fully immunized children	CH.2	0,980	0,012	0,012	1,583	1,258	207	220	0,956	1,004
Acute respiratory infection in last two weeks	CH.5	0,089	0,015	0,172	2,937	1,714	987	1018	0,058	0,120
Antibiotic treatment of suspected pneumonia	CH.6	0,686	0,044	0,064	0,815	0,903	88	92	0,598	0,774
Diarrhoea in last two weeks	CH.3	0,045	0,008	0,179	1,538	1,240	987	1018	0,029	0,061
Received ORT or increased fluids and continued feeding	CH.4	0,562	0,076	0,134	0,973	0,986	44	43	0,411	0,713
Support for learning	CD.1	0,824	0,015	0,018	1,559	1,249	987	1018	0,794	0,854

Table SE.5. Sampling errors: Brest region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (<i>t</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/t</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Child discipline	CP.3	0,827	0,021	0,025	1,595	1,263	334	514	0,785	0,870
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	1,000	0,000	0,000	-	-	2651	1041	1,000	1,000
Use of improved sanitation facilities	EN.5	0,999	0,001	0,001	0,552	0,743	2651	1041	0,998	1,001
Net primary school attendance rate	ED.3	0,928	0,028	0,030	2,233	1,494	135	189	0,871	0,984
Net secondary school attendance rate	ED.4	0,970	0,012	0,013	1,523	1,234	282	282	0,946	0,995
Child labour	CP.1	0,019	0,007	0,358	1,114	1,056	367	441	0,006	0,033
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	79	213	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	79	213	1,000	1,000
Contraceptive prevalence	RH.1	0,728	0,026	0,036	2,350	1,533	566	690	0,676	0,780
Marriage before age 18	CP.4	0,072	0,010	0,134	1,194	1,093	788	858	0,052	0,091
Comprehensive knowledge about HIV prevention among young people	HA.3	0,437	0,053	0,121	2,666	1,633	194	235	0,331	0,543
Attitude towards people with HIV/AIDS	HA.5	0,029	0,009	0,299	2,487	1,577	879	929	0,012	0,047
Women who have been tested for HIV	HA.6	0,373	0,042	0,112	6,912	2,629	879	929	0,289	0,456
Knowledge of mother-to-child transmission of HIV	HA.4	0,647	0,046	0,072	8,770	2,961	879	929	0,554	0,740

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,018	0,006	0,356	1,194	1,092	510	525	0,005	0,030
Tuberculosis immunization coverage	CH.2	1,000	0,000	0,000	-	-	108	115	1,000	1,000
Polio immunization coverage	CH.2	1,000	0,000	0,000	-	-	108	115	1,000	1,000
Immunization coverage for DPT	CH.2	0,992	0,008	0,008	0,943	0,971	108	115	0,976	1,008
Measles immunization coverage	CH.2	0,984	0,012	0,012	0,974	0,987	108	115	0,960	1,007
Fully immunized children	CH.2	0,984	0,012	0,012	0,974	0,987	108	115	0,960	1,007
Support for learning	CD.1	0,789	0,020	0,026	1,304	1,142	513	528	0,748	0,829

Table SE.6. Sampling errors: Vitebsk region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Child discipline	CP.3	0,828	0,022	0,026	1,397	1,182	312	417	0,784	0,872
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,998	0,001	0,001	0,975	0,988	2472	897	0,996	1,001
Use of improved sanitation facilities	EN.5	0,965	0,016	0,017	6,831	2,614	2472	897	0,933	0,997
Net primary school attendance rate	ED.3	0,920	0,027	0,030	0,984	0,992	86	99	0,866	0,974
Net secondary school attendance rate	ED.4	0,955	0,013	0,014	1,097	1,047	283	259	0,928	0,982
Child labour	CP.1	0,038	0,017	0,452	2,434	1,560	309	306	0,004	0,071
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	51	135	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	51	135	1,000	1,000
Contraceptive prevalence	RH.1	0,662	0,024	0,036	1,395	1,181	524	550	0,614	0,710
Marriage before age 18	CP.4	0,074	0,011	0,148	1,232	1,110	713	702	0,052	0,096
Comprehensive knowledge about HIV prevention among young people	HA.3	0,237	0,033	0,140	1,220	1,105	195	202	0,171	0,303
Attitude towards people with HIV/AIDS	HA.5	0,048	0,012	0,246	2,373	1,541	813	773	0,025	0,072
Women who have been tested for HIV	HA.6	0,740	0,031	0,042	3,866	1,966	813	773	0,678	0,802
Knowledge of mother-to-child transmission of HIV	HA.4	0,662	0,023	0,034	1,785	1,336	813	773	0,616	0,707

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,008	0,004	0,567	0,945	0,972	349	374	-0,001	0,017
Tuberculosis immunization coverage	CH.2	1,000	0,000	0,000	-	-	69	79	1,000	1,000
Polio immunization coverage	CH.2	1,000	0,000	0,000	-	-	69	79	1,000	1,000
Immunization coverage for DPT	CH.2	0,987	0,013	0,013	1,052	1,026	69	79	0,961	1,013
Measles immunization coverage	CH.2	0,961	0,023	0,024	1,129	1,063	69	79	0,914	1,007
Fully immunized children	CH.2	0,948	0,027	0,029	1,174	1,084	69	79	0,893	1,002
Support for learning	CD.1	0,846	0,028	0,033	2,301	1,517	352	378	0,789	0,902

Table SE.7. Sampling errors: Gomal region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Child discipline	CP.3	0,849	0,022	0,026	1,819	1,349	329	481	0,805	0,893
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,998	0,002	0,002	1,756	1,325	2705	1073	0,994	1,002
Use of improved sanitation facilities	EN.5	0,999	0,001	0,001	0,519	0,721	2705	1073	0,998	1,000
Net primary school attendance rate	ED.3	0,964	0,018	0,018	1,355	1,164	121	154	0,929	0,999
Net secondary school attendance rate	ED.4	0,955	0,014	0,014	1,181	1,087	285	276	0,928	0,982
Child labour	CP.1	0,053	0,014	0,257	1,424	1,193	344	384	0,026	0,081
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	70	159	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	70	159	1,000	1,000
Contraceptive prevalence	RH.1	0,754	0,022	0,029	1,526	1,235	530	606	0,711	0,797
Marriage before age 18	CP.4	0,083	0,015	0,180	2,306	1,519	741	783	0,053	0,113
Comprehensive knowledge about HIV prevention among young people	HA.3	0,361	0,031	0,087	0,904	0,951	208	213	0,298	0,424
Attitude towards people with HIV/AIDS	HA.5	0,032	0,006	0,174	0,886	0,941	862	876	0,021	0,043
Women who have been tested for HIV	HA.6	0,669	0,028	0,041	3,023	1,739	864	877	0,613	0,724
Knowledge of mother-to-child transmission of HIV	HA.4	0,607	0,038	0,062	5,167	2,273	864	877	0,532	0,682

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,012	0,009	0,705	2,760	1,661	482	448	-0,005	0,030
Tuberculosis immunization coverage	CH.2	1,000	0,000	0,000	-	-	100	98	1,000	1,000
Polio immunization coverage	CH.2	1,000	0,000	0,000	-	-	100	98	1,000	1,000
Immunization coverage for DPT	CH.2	0,990	0,010	0,010	0,986	0,993	100	98	0,969	1,010
Measles immunization coverage	CH.2	0,969	0,014	0,014	0,606	0,778	100	98	0,942	0,997
Fully immunized children	CH.2	0,969	0,014	0,014	0,606	0,778	100	98	0,942	0,997
Support for learning	CD.1	0,846	0,023	0,027	1,820	1,349	484	450	0,800	0,892

Table SE.8. Sampling errors: Grodno region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,804	0,047	0,059	6,086	2,467	285	429	0,710	0,899
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,983	0,009	0,009	4,554	2,134	2232	860	0,965	1,002
Use of improved sanitation facilities	EN.5	0,990	0,007	0,007	3,926	1,981	2232	860	0,977	1,004
Net primary school attendance rate	ED.3	0,903	0,037	0,040	2,052	1,432	94	136	0,830	0,976
Net secondary school attendance rate	ED.4	0,969	0,011	0,011	1,125	1,061	276	274	0,947	0,991
Child labour	CP.1	0,100	0,028	0,281	3,311	1,820	323	379	0,044	0,156
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	58	141	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	58	141	1,000	1,000
Contraceptive prevalence	RH.1	0,757	0,025	0,033	2,074	1,440	507	597	0,706	0,808
Marriage before age 18	CP.4	0,061	0,011	0,184	1,573	1,254	647	713	0,039	0,084
Comprehensive knowledge about HIV prevention among young people	HA.3	0,320	0,064	0,200	3,572	1,890	190	191	0,192	0,448
Attitude towards people with HIV/AIDS	HA.5	0,011	0,005	0,415	1,516	1,231	747	787	0,002	0,020
Women who have been tested for HIV	HA.6	0,703	0,033	0,047	4,086	2,021	747	787	0,637	0,769
Knowledge of mother-to-child transmission of HIV	HA.4	0,593	0,041	0,070	5,526	2,351	747	787	0,510	0,675

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,012	0,004	0,355	0,606	0,778	409	405	0,003	0,020
Tuberculosis immunization coverage	CH.2	1,000	0,000	0,000	-	-	81	85	1,000	1,000
Polio immunization coverage	CH.2	1,000	0,000	0,000	-	-	81	85	1,000	1,000
Immunization coverage for DPT	CH.2	1,000	0,000	0,000	-	-	81	85	1,000	1,000
Measles immunization coverage	CH.2	1,000	0,000	0,000	-	-	81	85	1,000	1,000
Fully immunized children	CH.2	1,000	0,000	0,000	-	-	81	85	1,000	1,000
Support for learning	CD.1	0,850	0,033	0,038	3,377	1,838	411	407	0,785	0,915

Table SE.9. Sampling errors: Minsk city

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,824	0,030	0,037	2,696	1,642	284	429	0,763	0,884
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	1,000	0,000	0,000	-	-	2849	1006	1,000	1,000
Use of improved sanitation facilities	EN.5	1,000	0,000	0,000	-	-	2849	1006	1,000	1,000
Net primary school attendance rate	ED.3	0,910	0,033	0,036	1,570	1,253	107	120	0,845	0,976
Net secondary school attendance rate	ED.4	0,947	0,016	0,016	0,882	0,939	232	185	0,916	0,978
Child labour	CP.1	0,002	0,001	0,723	0,276	0,525	263	263	-0,001	0,005
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	80	243	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	80	243	1,000	1,000
Contraceptive prevalence	RH.1	0,753	0,026	0,035	2,371	1,540	549	642	0,700	0,805
Marriage before age 18	CP.4	0,038	0,010	0,260	2,255	1,502	860	848	0,018	0,058
Comprehensive knowledge about HIV prevention among young people	HA.3	0,330	0,035	0,106	1,537	1,240	334	280	0,260	0,400
Attitude towards people with HIV/AIDS	HA.5	0,101	0,013	0,128	1,721	1,312	1023	944	0,075	0,126
Women who have been tested for HIV	HA.6	0,655	0,026	0,040	2,925	1,710	1023	944	0,602	0,708
Knowledge of mother-to-child transmission of HIV	HA.4	0,507	0,023	0,045	1,984	1,408	1023	944	0,462	0,553

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,004	0,004	0,998	1,891	1,375	431	501	-0,004	0,011
Tuberculosis immunization coverage	CH.2	0,991	0,009	0,009	1,003	1,002	90	110	0,973	1,009
Polio immunization coverage	CH.2	0,973	0,016	0,016	1,038	1,019	90	110	0,941	1,004
Immunization coverage for DPT	CH.2	0,982	0,013	0,013	1,025	1,012	90	110	0,956	1,008
Measles immunization coverage	CH.2	0,973	0,016	0,016	1,057	1,028	90	110	0,941	1,005
Fully immunized children	CH.2	0,955	0,020	0,021	1,046	1,023	90	110	0,914	0,995
Support for learning	CD.1	0,913	0,022	0,025	3,202	1,789	434	505	0,868	0,958

Table SE.10. Sampling errors: Minsk region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,804	0,022	0,028	1,421	1,192	323	448	0,760	0,849
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,994	0,004	0,004	2,301	1,517	2838	1025	0,987	1,001
Use of improved sanitation facilities	EN.5	0,999	0,001	0,001	1,481	1,217	2838	1025	0,996	1,001
Net primary school attendance rate	ED.3	0,950	0,016	0,017	0,768	0,877	134	151	0,918	0,981
Net secondary school attendance rate	ED.4	0,944	0,019	0,020	1,739	1,319	291	264	0,906	0,981
Child labour	CP.1	0,056	0,022	0,387	3,125	1,768	331	353	0,013	0,099
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	-	-	72	157	1,000	1,000
Antenatal care	RH.2	1,000	0,000	0,000	-	-	72	157	1,000	1,000
Contraceptive prevalence	RH.1	0,706	0,028	0,040	2,432	1,560	580	634	0,649	0,762
Marriage before age 18	CP.4	0,050	0,008	0,152	0,963	0,981	770	796	0,035	0,065
Comprehensive knowledge about HIV prevention among young people	HA.3	0,312	0,051	0,163	2,792	1,671	214	234	0,211	0,414
Attitude towards people with HIV/AIDS	HA.5	0,034	0,005	0,160	0,790	0,889	883	881	0,023	0,045
Women who have been tested for HIV	HA.6	0,797	0,032	0,040	5,555	2,357	885	882	0,733	0,861
Knowledge of mother-to-child transmission of HIV	HA.4	0,726	0,035	0,048	5,362	2,316	885	882	0,657	0,796

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,006	0,004	0,558	0,835	0,914	498	424	-0,001	0,013
Tuberculosis immunization coverage	CH.2	0,991	0,009	0,009	0,981	0,990	120	106	0,973	1,009
Polio immunization coverage	CH.2	0,974	0,019	0,019	1,445	1,202	120	106	0,936	1,011
Immunization coverage for DPT	CH.2	0,982	0,009	0,010	0,515	0,718	120	106	0,963	1,001
Measles immunization coverage	CH.2	0,991	0,009	0,009	0,981	0,990	120	106	0,973	1,009
Fully immunized children	CH.2	0,964	0,019	0,019	1,049	1,024	120	106	0,927	1,001
Support for learning	CD.1	0,856	0,022	0,025	1,589	1,260	500	425	0,813	0,899

Table SE.11. Sampling errors: Mogilev region

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deff), and confidence intervals for selected indicators

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design (deff)	Weighted count	Unweighted count	Confidence limits	
									r - 2 se	r + 2 se
HOUSEHOLDS										
Child discipline	CP.3	0,845	0,022	0,026	1,439	1,199	260	379	0,801	0,890
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,998	0,001	0,001	0,486	0,697	2170	805	0,996	1,000
Use of improved sanitation facilities	EN.5	0,999	0,001	0,001	0,530	0,728	2170	805	0,998	1,001
Net primary school attendance rate	ED.3	0,942	0,026	0,028	1,249	1,117	79	99	0,889	0,995
Net secondary school attendance rate	ED.4	0,969	0,013	0,013	1,215	1,102	252	234	0,944	0,994
Child labour	CP.1	0,090	0,033	0,373	4,066	2,016	274	297	0,023	0,157
WOMEN										
Skilled attendant at delivery	RH.4	1,000	0,000	0,000	.	.	53	131	1,000	1,000
Antenatal care	RH.2	0,951	0,032	0,034	2,812	1,677	53	131	0,887	1,014
Contraceptive prevalence	RH.1	0,724	0,029	0,039	1,874	1,369	392	454	0,671	0,786
Marriage before age 18	CP.4	0,089	0,012	0,139	1,199	1,095	594	633	0,065	0,114
Comprehensive knowledge about HIV prevention among young people	HA.3	0,352	0,076	0,216	4,771	2,184	170	189	0,200	0,504
Attitude towards people with HIV/AIDS	HA.5	0,057	0,015	0,257	2,789	1,670	685	703	0,028	0,086
Women who have been tested for HIV	HA.6	0,745	0,031	0,041	3,493	1,869	685	703	0,683	0,806
Knowledge of mother-to-child transmission of HIV	HA.4	0,545	0,049	0,090	6,741	2,596	685	703	0,447	0,642

Continued

	Table	Value (<i>r</i>)	Standard error (<i>se</i>)	Coefficient of variation (<i>se/r</i>)	Design effect (<i>deff</i>)	Square root of design (<i>deff</i>)	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
UNDER-5s										
Underweight prevalence	NU.1	0,011	0,006	0,517	0,981	0,990	338	337	0,000	0,022
Tuberculosis immunization coverage	CH.2	0,985	0,015	0,015	1,025	1,012	65	72	0,956	1,014
Polio immunization coverage	CH.2	0,985	0,015	0,015	1,025	1,012	65	72	0,956	1,014
Immunization coverage for DPT	CH.2	0,985	0,015	0,015	1,025	1,012	65	72	0,956	1,014
Measles immunization coverage	CH.2	0,985	0,015	0,015	1,025	1,012	65	72	0,956	1,014
Fully immunized children	CH.2	0,985	0,015	0,015	1,025	1,012	65	72	0,956	1,014
Support for learning	CD.1	0,791	0,022	0,028	1,064	1,031	357	358	0,746	0,835

Appendix E. Data Quality Tables

Table DQ.1. Age distribution of household population

Single-year age distribution of household population by sex (weighted)

Age, years	Males		Females		Age, years	Males		Females	
	number	per cent	number	per cent		number	per cent	number	percent
0	112	1,4	91	0,9	41	121	1,5	178	1,8
1	104	1,3	103	1,1	42	144	1,8	163	1,7
2	105	1,3	104	1,1	43	171	2,1	142	1,5
3	93	1,1	89	0,9	44	159	1,9	212	2,2
4	99	1,2	88	0,9	45	162	2,0	200	2,0
5	108	1,3	96	1,0	46	146	1,8	191	2,0
6	104	1,3	105	1,1	47	154	1,9	176	1,8
7	93	1,1	98	1,0	48	145	1,8	179	1,8
8	81	1,0	102	1,0	49	130	1,6	184	1,9
9	92	1,1	83	0,8	50	126	1,5	176	1,8
10	102	1,2	87	0,9	51	112	1,4	115	1,2
11	124	1,5	108	1,1	52	104	1,3	136	1,4
12	136	1,7	136	1,4	53	112	1,4	127	1,3
13	155	1,9	123	1,3	54	97	1,2	144	1,5
14	127	1,6	151	1,5	55	93	1,1	134	1,4
15	166	2,0	145	1,5	56	96	1,2	105	1,1
16	180	2,2	162	1,7	57	78	1,0	128	1,3
17	148	1,8	124	1,3	58	59	0,7	105	1,1
18	143	1,7	113	1,2	59	66	0,8	92	0,9
19	127	1,5	141	1,4	60	43	0,5	67	0,7
20	125	1,5	127	1,3	61	43	0,5	65	0,7
21	133	1,6	132	1,3	62	40	0,5	59	0,6
22	143	1,7	123	1,3	63	51	0,6	94	1,0
23	132	1,6	125	1,3	64	69	0,8	98	1,0
24	106	1,3	128	1,3	65	46	0,6	89	0,9
25	131	1,6	158	1,6	66	55	0,7	97	1,0
26	125	1,5	125	1,3	67	65	0,8	131	1,3
27	102	1,2	119	1,2	68	70	0,9	115	1,2
28	113	1,4	142	1,5	69	66	0,8	77	0,8
29	135	1,7	132	1,3	70	55	0,7	88	0,9
30	124	1,5	135	1,4	71	32	0,4	67	0,7
31	108	1,3	142	1,5	72	31	0,4	58	0,6
32	114	1,4	115	1,2	73	38	0,5	78	0,8
33	121	1,5	127	1,3	74	47	0,6	60	0,6
34	113	1,4	148	1,5	75	42	0,5	68	0,7
35	122	1,5	148	1,5	76	28	0,3	81	0,8
36	124	1,5	140	1,4	77	30	0,4	59	0,6
37	103	1,3	138	1,4	78	18	0,2	34	0,3
38	128	1,6	132	1,3	79	18	0,2	41	0,4
39	121	1,5	142	1,5					
40	112	1,4	185	1,9	80 and elder	70	0,9	226	2,3
					Total	8166	100	9751	100

Table DQ.2: Age distribution of eligible and interviewed women

Household population of women age 10-54, interviewed women age 15-49, and percentage of eligible women who were interviewed (weighted), by five-year age group

	Household population of women age 10-54	Interviewed women age 15-49		Percentage of eligible women interviewed
	number	number	per cent	
Age, years				
10-14	604	na	na	na
15-19	685	685	13,3	99,9
20-24	636	634	12,3	99,7
25-29	676	676	13,1	100,0
30-34	667	667	12,9	100,0
35-39	699	699	13,5	100,0
40-44	881	877	17,0	99,6
45-49	929	927	17,9	99,7
50-54	697	na	na	na
15-49	5173	5165	100	99,8

na: not applicable

Note: Weights for both household population of women and interviewed women are household weights. Age is based on the household schedule.

Table DQ.3: Age distribution of eligible and interviewed under-5s

Household population of children age 0-4, children whose mothers/caretakers were interviewed, and percentage of under-5 children whose mothers/caretakers were interviewed (weighted), by five-year age group

	Household population of children age 0-7	Interviewed children age 0-4		Percentage of eligible children interviewed
	number	number	per cent	
Age, years				
0	203	203	20,6	100,0
1	207	207	21,0	100,0
2	209	209	21,1	100,0
3	182	182	18,4	100,0
4	186	186	18,9	100,0
5	203	na	na	na
6	209	na	na	na
7	191	na	na	na
0-4	987	987	100	100

na: not applicable

Note: Weights for both household population of children and interviewed children are household weights. Age is based on the household schedule.

Table DQ.4: Age distribution of under-5 children

Age distribution of under-5 children by 3-month groups (weighted)

Age, months	Males		Females		Total	
	number	per cent	number	per cent	number	per cent
0-2	32	2,0	63	4,3	95	3,1
3-5	136	8,6	89	6,0	225	7,4
6-8	90	5,7	52	3,6	142	4,6
9-11	71	4,5	65	4,4	136	4,4
12-14	68	4,3	87	5,9	155	5,1
15-17	89	5,6	81	5,5	170	5,6
18-20	95	6,0	72	4,9	167	5,4
21-23	70	4,4	82	5,6	152	5,0
24-26	79	5,0	67	4,6	146	4,8
27-29	78	5,0	90	6,1	168	5,5
30-32	89	5,6	83	5,7	172	5,7
33-35	80	5,0	78	5,3	158	5,2
36-38	71	4,5	73	5,0	144	4,7
39-41	74	4,7	73	5,0	147	4,8
42-44	76	4,8	68	4,6	144	4,7
45-47	68	4,3	64	4,3	132	4,3
48-50	56	3,6	47	3,2	103	3,4
51-53	73	4,6	64	4,3	137	4,5
54-56	89	5,6	75	5,1	164	5,4
57-59	98	6,2	96	6,6	194	6,4
Total	1582	100	1469	100	3051	100

Table DQ.5: Heaping on ages and periods

Age and period ratios at boundaries of eligibility by type of information collected (weighted)

	Age and period ratios*			Eligibility boundary (lower-upper)	Module or questionnaire
	Male	Female	Total		
Age in household questionnaire					
1	0,97	1,04	1,00		
2	1,04	1,05	1,05	Lower	Child discipline
3	0,94	0,95	0,95		
4	0,99	0,97	0,98	Upper	Under-5 questionnaire
5	1,04	1,00	1,02	Lower	Child labour and education
6	1,02	1,05	1,04		
8	0,91	1,08	1,00		
9	1,01	0,91	0,96		
10	0,96	0,94	0,95		
13	1,11	0,90	1,01		
14	0,85	1,08	0,96	Upper	Child discipline and child labour
15	1,05	0,95	1,00	Lower	Women's questionnaire
16	1,09	1,13	1,11		
17	0,95	0,93	0,94	Upper	Orphaned and vulnerable children
18	1,07	0,99	1,03		
23	1,04	1,00	1,02		
24	0,86	0,93	0,90	Upper	Education
25	1,08	1,15	1,12		
48	1,01	1,00	1,00		
49	0,97	1,03	1,00	Upper	Women's questionnaire
50	1,02	1,11	1,07		
Age in women's questionnaire					
23	na	0,99	na		
24	na	0,94	na		
25	na	1,15	na		
Months since last birth in women's questionnaire					
6-11	na	0,92	na		
12-17	na	1,03	na		
18-23	na	1,03	na	Upper	maternal and child health
24-29	na	0,96	na		
30-35	na	1,06	na		

* Age or period ratios are calculated as $x / ((x_{n-1} + x_n + x_{n+1}) / 3)$, where x is age or period.

na: not applicable

Table DQ.6: Completeness of reporting

Percentage of observations missing information for selected questions and indicators (weighted)

Questionnaire and Subject	Reference group	Percent with missing information *	Number of cases
Women			
Date of Birth	All women age 15-49		
Month only		-	5895
Month and year missing		-	5895
Date of first birth	All women age 15-49 with at least one live birth		
Month only		0,0	4301
Month and year missing		0,0	4301
Completed years since first birth	All women age 15-49 with at least one live birth	0,0	2
Date of last birth	All women age 15-49 with at least one live birth		
Month only		-	4301
Month and year missing		-	4301
Date of first marriage/union	All ever married women age 15-49		
Month only		0,4	4573
Month and year missing		1,2	4573
Age at first marriage/union	All ever married women age 15-49	0,1	4573
Children under 5			
Date of Birth	All under five children surveyed		
Month only		-	3051
Month and year missing		-	3051
Anthropometry	All under five children surveyed		
Height		0,6	3051
Weight		0,6	3051
Height or Weight		0,7	3051

* Includes "Don't know" responses

Table DQ.7: Presence of mother in the household and the person interviewed for the under-5 questionnaire

Distribution of children under five by whether the mother lives in the same household, and the person interviewed for the under-5 questionnaire (weighted)

	Mother in the household	Mother not in the household		Total	Number of children aged 0-4 years
	Mother interviewed	Father interviewed	Other adult female interviewed		
Age, years					
0	99,9	-	0,1	100,0	203
1	99,4	-	0,6	100,0	207
2	98,5	-	1,5	100,0	209
3	97,9	-	2,1	100,0	182
4	98,2	0,3	1,5	100,0	186
Total	98,8	0,1	1,1	100,0	987

Table DQ.9: Sex ratio at birth among children ever born and living

Sex ratio at birth among children ever born, children living, and deceased children, by age of women (weighted)

Age, years	Children Ever Born			Children Living			Children deceased			Number of women
	Number of sons ever born	Number of daughters ever born	Sex ratio	Number of sons living	Number of daughters living	Sex ratio	Number of deceased sons	Number of deceased daughters	Sex ratio	
15-19	16	8	2,01	16	8	2,01	-	-	-	781
20-24	167	152	1,10	165	152	1,09	2	0	5,29	724
25-29	416	393	1,06	408	387	1,05	8	6	1,46	772
30-34	565	548	1,03	550	541	1,02	15	7	2,36	762
35-39	728	665	1,09	700	650	1,08	28	15	1,87	797
40-44	981	962	1,02	958	937	1,02	23	25	,92	1001
45-49	1060	1010	1,05	1017	989	1,03	43	21	2,00	1058
Total	3933	3738	1,05	3814	3664	1,04	119	74	1,61	5895

Note: Sex ratios are calculated as number of males/ number of females

Table DQ.10: Distribution of women by time since last birth

Distribution of women aged 15-49 with at least one live birth, by months since last birth (weighted),

	Number of women	Percent		Number of women	Percent
Months since last birth			Months since last birth		
0	6	0,9	18	22	3,3
1	16	2,3	19	19	2,8
2	17	2,5	20	21	3,1
3	36	5,2	21	17	2,5
4	30	4,4	22	20	3,0
5	16	2,4	23	17	2,5
6	15	2,3	24	18	2,6
7	19	2,9	25	14	2,1
8	18	2,6	26	17	2,5
9	18	2,6	27	18	2,7
10	16	2,4	28	21	3,1
11	18	2,7	29	21	3,1
12	19	2,9	30	22	3,2
13	18	2,6	31	18	2,7
14	18	2,7	32	20	3,0
15	20	3,0	33	18	2,7
16	18	2,7	34	17	2,4
17	22	3,2	35	16	2,4
			Total	676	100

Appendix F. MICS Indicators: Numerators and Denominators

INDICATOR	NUMERATOR	DENOMINATOR
4 Skilled attendant at delivery	Number of women aged 15-49 years with a birth in the 2 years preceding the survey that were attended during childbirth by skilled health personnel	Total number of women surveyed aged 15-49 years with a birth in the 2 years preceding the survey
5 Institutional deliveries	Number of women aged 15-49 years with a birth in the 2 years preceding the survey that delivered in a health facility	Total number of women surveyed aged 15-49 years with a birth in 2 years preceding the survey
6 Underweight prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five that were weighed
7 Stunting prevalence	Number of children under age five that fall below minus two standard deviations from the median height for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five measured
8 Wasting prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for height of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five weighed and measured
9 Low-birthweight infants	Number of last live births in the 2 years preceding the survey weighing below 2,500 grams	Total number of last live births in the 2 years preceding the survey
10 Infants weighed at birth	Number of last live births in the 2 years preceding the survey that were weighed at birth	Total number of last live births in the 2 years preceding the survey
11 Use of improved drinking water sources	Number of household members living in households using improved sources of drinking water	Total number of household members in households surveyed
12 Use of improved sanitation facilities	Number of household members using improved sanitation facilities	Total number of household members in households surveyed
13 Water treatment	Number of household members using water that has been treated	Total number of household members in households surveyed
14 Disposal of child's faeces	Number of children under age three whose (last) stools were disposed of safely	Total number of children under age three surveyed
15 Exclusive breastfeeding rate	Number of infants aged 0-5 months that are exclusively breastfed	Total number of infants aged 0-5 months surveyed
16 Continued breastfeeding rate	Number of infants aged 12-15 months, and 20-23 months, that are currently breastfeeding	Total number of children aged 12-15 months and 20-23 months surveyed
17 Timely complementary feeding rate	Number of infants aged 6-9 months that are receiving breastmilk and complementary foods	Total number of infants aged 6-9 months surveyed

INDICATOR	NUMERATOR	DENOMINATOR
18 Frequency of complementary feeding	Number of infants aged 6-11 months that receive breastmilk and complementary food at least the minimum recommended number of times per day (two times per day for infants aged 6-8 months, three times per day for infants aged 9-11 months)	Total number of infants aged 6-11 months surveyed
19 Adequately fed infants	Number of infants aged 0-11 months that are appropriately fed: infants aged 0-5 months that are exclusively breastfed and infants aged 6-11 months that are breastfed and ate solid or semi-solid foods the appropriate number of times (see above) yesterday	Total number of infants aged 0-11 months surveyed
20 Antenatal care	Number of women aged 15-49 years that were attended at least once during pregnancy in the 2 years preceding the survey by skilled health personnel	Total number of women surveyed aged 15-49 years with a birth in the 2 years preceding the survey
21 Contraceptive prevalence	Number of women currently married or in union aged 15-49 years that are using (or whose partner is using) a contraceptive method (either modern or traditional)	Total number of women aged 15-49 years that are currently married or in union
22 Antibiotic treatment of suspected pneumonia	Number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks receiving antibiotics	Total number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks
23 Care-seeking for suspected pneumonia	Number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks that are taken to an appropriate health provider	Total number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks
24 Solid fuels	Number of residents in households that use solid fuels (wood, charcoal, crop residues and dung) as the primary source of domestic energy to cook	Total number of residents in households surveyed
25 Tuberculosis immunization coverage	Number of children aged 18-29 months receiving BCG vaccine before their first birthday	Total number of children aged 18-29 months surveyed
26 Polio immunization coverage	Number of children aged 18-29 months receiving OPV3 vaccine before their first birthday	Total number of children aged 18-29 months surveyed
27 Immunization coverage for diphtheria, pertussis and tetanus (DPT)	Number of children aged 18-29 months receiving DPT3 vaccine before their first birthday	Total number of children aged 18-29 months surveyed
28 Measles immunization coverage	Number of children aged 18-29 months receiving measles vaccine before their first birthday	Total number of children aged 18-29 months surveyed
29 Hepatitis B immunization coverage	Number of children aged 18-29 months immunized against hepatitis before their first birthday	Total number of children aged 18-29 months surveyed
31 Fully immunized children	Number of children aged 18-29 months receiving DPT1-3, OPV-1-3, BCG and measles ¹⁾ vaccines before their first birthday	Total number of children aged 18-29 months surveyed
33 Use of oral rehydration therapy (ORT)	Number of children aged 0-59 months with diarrhoea in the previous 2 weeks that received oral rehydration salts and/or an appropriate household solution	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks
34 Home management of diarrhoea	Number of children aged 0-59 months with diarrhoea in the previous 2 weeks that received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks

¹⁾ For MMR (measles vaccination) – during the first 18 months.

INDICATOR	NUMERATOR	DENOMINATOR
35 Received ORT or increased fluids and continued feeding	Number of children aged 0-59 months with diarrhoea that received ORT (oral rehydration salts or an appropriate household solution) or received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks
44 Content of antenatal care	Number of women with a live birth in the 2 years preceding the survey that received antenatal care during the last pregnancy	Total number of women with a live birth in the 2 years preceding the survey
45 Timely initiation of breastfeeding	Number of women with a live birth in the 2 years preceding the survey that put the newborn infant to the breast within 1 hour of birth	Total number of women with a live birth in the 2 years preceding the survey
46 Support for learning	Number of children aged 0-59 months living in households in which an adult has engaged in four or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0-59 months surveyed
47 Father's support for learning	Number of children aged 0-59 months whose father has engaged in one or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0-59 months surveyed
52 Pre-school attendance	Number of children aged 36-59 months that attend some form of early childhood education programme	Total number of children aged 36-59 months surveyed
53 School readiness	Number of children in first grade that attended some form of pre-school the previous year	Total number of children in the first grade surveyed
54 Net intake rate in primary education	Number of children of school-entry age that are currently attending first grade	Total number of children of primary- school entry age surveyed
55 Net primary school attendance rate	Number of children of primary-school age currently attending primary or secondary school	Total number of children of primary- school age surveyed
56 Net secondary school attendance rate	Number of children of secondary-school age currently attending secondary school or higher	Total number of children of secondary-school age surveyed
57 Children reaching grade five	Proportion of children entering the first grade of primary school that eventually reach grade five	
58 Transition rate to secondary school	Number of children that were in the last grade of primary school during the previous school year that attend secondary school	Total number of children that were in the last grade of primary school during the previous school year surveyed
59 Primary completion rate	Number of children (of any age) attending the last grade of primary school (excluding repeaters)	Total number of children of primary school completion age (age appropriate to final grade of primary school) surveyed
60 Adult literacy rate	Number of women aged 15-24 years that are able to read a short simple statement about everyday life	Total number of women aged 15-24 years surveyed
61 Gender parity index	Proportion of girls in primary and secondary education	Proportion of boys in primary and secondary education
67 Marriage before age 18	Number of women that were first married or in union by the exact age of 15 and the exact age of 18, by age groups	Total number of women aged 15-49 years and 20-49 years surveyed, by age groups

INDICATOR	NUMERATOR	DENOMINATOR
68 Young women aged 15-19 years currently married or in union	Number of women aged 15-19 years currently married or in union	Total number of women aged 15-19 years surveyed
69 Spousal age difference	Number of women married/in union aged 15-19 years and 20-24 years with a difference in age of 10 or more years between them and their current spouse	Total number of women aged 15-19 and 20-24 years surveyed that are currently married or in union
71 Child labour	Number of children aged 5-14 years that are involved in child labour	Total number of children aged 5-14 years surveyed
72 Labourer students	Number of children aged 5-14 years involved in child labour activities that attend school	Total number of children aged 5-14 years involved in child labour activities
73 Student labourers	Number of children aged 5-14 years attending school that are involved in child labour activities	Total number of children aged 5-14 years attending school
74 Child discipline	Number of children aged 2-14 years that (1) experience only non-violent aggression, (2) experience psychological aggression as punishment, (3) experience minor physical punishment, (4) experience severe physical punishment	Total number of children aged 2-14 years selected and surveyed
75 Prevalence of orphans	Number of children under age 18 with at least one dead parent	Total number of children under age 18 surveyed
78 Children's living arrangements	Number of children aged 0-17 years not living with a biological parent	Total number of children aged 0-17 years surveyed
82 Comprehensive knowledge about HIV prevention among young people	Number of women aged 15-24 years that correctly identify two ways of avoiding HIV infection and reject three common misconceptions about HIV transmission	Total number of women aged 15-24 years surveyed
86 Attitude towards people with HIV/AIDS	Number of women expressing acceptance on all four questions about people with HIV or AIDS	Total number of women surveyed
87 Women who know where to be tested for HIV	Number of women that state knowledge of a place to be tested	Total number of women surveyed
88 Women who have been tested for HIV	Number of women that report being tested for HIV	Total number of women surveyed
89 Knowledge of mother-to-child transmission of HIV	Number of women that correctly identify all three means of vertical transmission	Total number of women surveyed
90 Counselling coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received counselling on HIV/AIDS during this care	Total number of women that gave birth in the previous 24 months surveyed
91 Testing coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received the results of an HIV test during this care	Total number of women that gave birth in the previous 24 months surveyed

Appendix G. Questionnaires

Scientific and Research Institute of Statistics of the Ministry of
Statistics and Analysis of the Republic of Belarus jointly with
the United Nations Children's Fund (UNICEF)



HOUSEHOLD QUESTIONNAIRE

I AM FROM THE MINISTRY OF STATISTICS AND ANALYSIS OF THE REPUBLIC OF BELARUS, AT PRESENT WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. IN THIS RESPECT I WANT TO ASK SEVERAL QUESTIONS. THE INTERVIEW WILL TAKE ABOUT 40 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE IDENTIFIED. I WOULD LIKE TO SPEAK WITH THE HOUSEHOLD HEAD AND ALL MOTHERS OR OTHERS WHO TAKE CARE OF CHILDREN IN THE HOUSEHOLD. MAY I START NOW? *If permission is given, begin the interview.*

HOUSEHOLD INFORMATION PANEL		HH
HH1. Cluster number: _____	HH2. Household number: _____	
HH3. Interviewer number: _____	HH4. Supervisor's (department staff) number: _____	
HH5. Day/Month/Year of interview: _____ / _____ / _____		
HH6. Place of Residence: Cities, towns and settlements..... 1 Villages 2	HH7. Region (Oblast): Brest Oblast..... 1 Vitebsk Oblast 2 Gomel Oblast..... 3 Grodno Oblast 4 Minsk city..... 5 Minsk Oblast..... 6 Mogilev Oblast..... 7	
HH8. Name of head of household: _____		
<i>After all questionnaires for the household have been completed, fill in the following information:</i>		
HH9. Result of HH interview: Completed 1 Not at home 2 Refused 3 HH not used for living 4 Other (specify) _____ 6	HH10. Name and line No. of Respondent to HH questionnaire: Name: _____ Line No.: _____	
	HH11. Total number of household members: _____	
HH12. No. of women of 15-49 years old: _____	HH13. No. of women questionnaires completed: _____	
HH14. No. of children under age 5: _____	HH15. No. of under-5 questionnaires completed: _____	
Interviewer/supervisor notes:		
HH 16. Data entry clerk number: _____		

HOUSEHOLD LISTING FORM **HL**

FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD. List the head of the household in line 01. List all household members (HL2), their relationship to the household head (HL3), and their sex (HL4).

Then ask: ARE THERE ANY OTHERS WHO LIVE HERE, EVEN IF THEY ARE NOT AT HOME NOW? (THESE MAY INCLUDE CHILDREN IN SCHOOL OR AT WORK). If yes, complete listing. Then, ask questions starting with HL5 for each person at a time.

					Eligible for:			For children age 0-17 years			
					WOMEN'S INTERVIEW	CHILD LABOUR MODULE	UNDER-5 INTERVIEW				
HL1. Line no.	HL2. Name	HL3. WHAT IS THE RELATIONSHIP OF (name) TO THE HEAD OF THE HOUSEHOLD? <i>See codes below</i>	HL4. IS (name) MALE OR FEMALE? 1 MALE 2 FEM.	HL5. HOW OLD IS (name)? HOW OLD WAS (name) ON HIS/HER LAST BIRTHDAY? <i>If age is 97 and over, record '97'</i> 98 = DK*	HL6. Circle Line no. if woman is age 15-49	HL7. For each child age 5-14: WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD? <i>Record Line no. of mother/ caretaker</i>	HL8. For each child under 5: WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD? <i>Record Line no. of mother/ caretaker</i>	HL9. Is (name's) NATURAL MOTHER ALIVE? 1 YES 2 NO ⇨ HL11 8 DK ⇨ HL11	HL10. If alive: DOES (name's) NATURAL MOTHER LIVE IN THIS HOUSEHOLD? <i>Record Line no. of mother or 00 for 'No'</i>	HL11. Is (name's) NATURAL FATHER ALIVE? 1 YES 2 NO ⇨ NEXT LINE 8 DK ⇨ NEXT LINE	HL12. If alive: DOES (name's) NATURAL FATHER LIVE IN THIS HOUSEHOLD? <i>Record Line no. of father or 00 for 'No'</i>
LINE	NAME	REL.	M F	AGE	15-49	MOTHER	MOTHER	Y N DK	MOTHER	Y N DK	FATHER
01		0 1	1 2	__ __	01	__ __	__ __	1 2 8	__ __	1 2 8	__ __
02		__ __	1 2	__ __	02	__ __	__ __	1 2 8	__ __	1 2 8	__ __
03		__ __	1 2	__ __	03	__ __	__ __	1 2 8	__ __	1 2 8	__ __
04		__ __	1 2	__ __	04	__ __	__ __	1 2 8	__ __	1 2 8	__ __
05		__ __	1 2	__ __	05	__ __	__ __	1 2 8	__ __	1 2 8	__ __
06		__ __	1 2	__ __	06	__ __	__ __	1 2 8	__ __	1 2 8	__ __
07		__ __	1 2	__ __	07	__ __	__ __	1 2 8	__ __	1 2 8	__ __
08		__ __	1 2	__ __	08	__ __	__ __	1 2 8	__ __	1 2 8	__ __
09		__ __	1 2	__ __	09	__ __	__ __	1 2 8	__ __	1 2 8	__ __
10		__ __	1 2	__ __	10	__ __	__ __	1 2 8	__ __	1 2 8	__ __
					Women 15-49	Children 5-14	Children under-5s				
Totals					__ __	__ __	__ __				

Codes for HL3: Relationship to head of household

01 = HEAD 02 = WIFE OR HUSBAND 03 = SON OR DAUGHTER 04 = SON OR DAUGHTER IN-LAW 05 = GRANDCHILD 06 = PARENT	07 = PARENT-IN-LAW 08 = BROTHER OR SISTER 09 = BROTHER OR SISTER-IN-LAW 10 = UNCLE/AUNT 11 = NIECE/NEPHEW BY BLOOD 12 = NIECE/NEPHEW BY MARRIAGE	13 = OTHER RELATIVE 14 = ADOPTED/FOSTER/STEPCHILD 15 = NOT RELATED 98 = DON'T KNOW
--	---	---

* Used only for elderly household members (code meaning "Do not know/over age 50").

EDUCATION MODULE														ED		
NOW PLEASE LET ME ASK SEVERAL QUESTIONS CONCERNING THE EDUCATION OF YOUR HOUSEHOLD MEMBERS																
<i>For household members age 5 and above</i>								<i>For household members age 5-24 years</i>								
ED1. Line no.	ED1A. Name	ED2. HAS (name) EVER ATTENDED SCHOOL OR PRESCHOOL?		ED3. WHAT IS THE HIGHEST LEVEL OF SCHOOL (name) ATTENDED? WHAT IS THE HIGHEST GRADE (name) COMPLETED AT THIS LEVEL? LEVEL: ☺ See codes below GRADE: <input type="text"/> <input type="text"/> 98 = DK		ED4. DURING THE (2005/2006) SCHOOL YEAR, DID (name) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME? 1 YES 2 NO ☺ ED7		ED5. SINCE LAST (day of the week), HOW MANY DAYS DID (name) ATTEND SCHOOL? Insert number of days in space below.		ED6. DURING THIS/THAT SCHOOL YEAR, WHICH LEVEL AND GRADE IS/WAS (name) ATTENDING? LEVEL: ☺ See codes below GRADE: <input type="text"/> <input type="text"/> 98 = DK		ED7. DID (name) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME DURING THE PREVIOUS SCHOOL YEAR, THAT IS (2004/2005) 1 YES 2 NO ☺ NEXT LINE 8 DK ☺ NEXT LINE			ED8. DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE DID (name) ATTEND? LEVEL: ☺ See codes below GRADE: <input type="text"/> <input type="text"/> 98 = DK	
LINE	NAME	YES	NO	LEVEL	GRADE	YES	NO	DAYS	LEVEL	GRADE	Y	N	DK	LEVEL	GRADE	
01		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
02		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
03		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
04		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
05		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
06		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
07		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
08		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
09		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	
10		1	2	0 1 2 3 6 8	___	1	2	___	0 1 2 3 6 8	___	1	2	8	0 1 2 3 6 8	___	

Codes for ED3, ED6, ED8
0 = PRESCHOOL
1 = PRIMARY
2 = AVERAGE
3 = HIGHER
4 = INCOMPLETE SECONDARY
5 = SECONDARY SPECIAL
6 = NON-STANDARD CURRICULUM
8 = DK
<i>If less than 1 level, enter 00</i>

WATER AND SANITATION MODULE		W
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?	Piped water Piped into dwelling..... 11 Piped into yard or plot..... 12 Public tap/standpipe 13 Dug well Protected well 31 Unprotected well..... 32 Bottled water 91 Other (<i>specify</i>) 96	11⇒WS5 12⇒WS5 13⇒WS3 31⇒WS3 32⇒WS3 96⇒WS3
WS2. WHAT IS THE MAIN SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND HANDWASHING?	Piped water Piped into dwelling 11 Piped into yard or plot..... 12 Public tap/standpipe 13 Dug well Protected well 31 Unprotected well..... 32 Other (<i>specify</i>) 96	11⇒WS5 12⇒WS5
WS3. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK?	No. of minutes..... Water on premises..... 995 DK..... 998	995⇒WS5
WS4. WHO USUALLY GOES TO THIS SOURCE TO FETCH THE WATER FOR YOUR HOUSEHOLD?	Adult woman..... 1 Adult man..... 2 Female child (under 15)3 Male child (under 15)..... 4 DK..... 8	
<i>Probe: What sex and age of this person?</i>		
WS5. DO YOU TREAT YOUR WATER IN ANY WAY TO MAKE IT SAFER TO DRINK?	Yes.....1 No2 DK.....8	2⇒WS7 8⇒WS7
WS6. WHAT DO YOU USUALLY DO TO THE WATER TO MAKE IT SAFER TO DRINK? ANYTHING ELSE?	Boil A Add bleach/chlorine B Strain it through a cloth C Use water filter (ceramic, sand, composite, etc.) D Let it stand and settle..... F Other (<i>specify</i>) X DK..... Z	
<i>Record all items mentioned.</i>		
WS7. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE?	Flush / pour flush Flush to piped sewer system..... 11 Flush to septic tank..... 12 Flush to pit..... 13 Flush to somewhere else 14 Flush to unknown place/not sure/DK where... 15 Pit Ventilated 21 With slab 22 Pit without slab / open pit 23 Composting toilet..... 31 Bucket 41 No facilities or bush or field 95 Other (<i>specify</i>) 96	95 ↓ HC2A
<i>If "flush" or "pour flush", probe: WHERE DOES IT FLUSH TO?</i>		

WS8. DO YOU SHARE THIS FACILITY WITH OTHER HOUSEHOLDS?	Yes..... 1 No 2	2 ↓ HC2A
WS9. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY?	No. of households (if less than 10)..... 0 __ Ten or more households 10 DK.....98	

HOUSEHOLD CHARACTERISTICS MODULE		HC
HC2A. WHAT IS THE TYPE OF YOUR HOSEHOLD?	Apartment/flat..... 1 Private dwelling house 2 Common apartment/flat 3 A part of private dwelling house..... 4 Hostel 5	
HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	No. of rooms __ __	
HC3. Main material of the dwelling floor of the household. <i>Record observation</i>	Rudimentary floor Wood planks 21 Finished floor Parquet or polished wood 31 Vinyl or asphalt strips..... 32 Ceramic tiles 33 Cement 34 Carpet 35 Linoleum 36 Laminated floor 37 Other (<i>specify</i>) _____ 96	
HC4. Main material of the roof. <i>Record observation</i>	Rudimentary Roofing Wood planks 23 Finished roofing Metal 31 Wood..... 32 Calamine/cement fiber 33 Ceramic tiles 34 Cement 35 roofing slate 37 Tile 38 Ruberoid 39 Other (<i>specify</i>) _____ 96	
HC5. Main material of the of the walls. <i>Record observation</i>	Finished walls Bricks 33 Cement blocks 34 Wood planks/shingles 36 Wall panel 37 Concrete (reinforced concrete) 38 Other (<i>specify</i>) _____ 96	

<p>HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD MAINLY USE FOR COOKING?</p>	<p>Electricity01 Liquid Propane Gas (LPG)02 Natural gas03 Kerosene05 Coal06 Wood08 Other (<i>specify</i>) _____96</p>	<p>01⇒HC8 02⇒HC8 03⇒HC8</p>																																				
<p>HC7. IN THIS HOUSEHOLD, IS FOOD COOKED ON AN OPEN FIRE, AN OPEN STOVE OR A CLOSED STOVE?</p>	<p>Open fire1 Open stove2 Closed stove3 Other (<i>specify</i>) _____6</p>	<p>3⇒HC8 6⇒HC8</p>																																				
<p>HC7A. DOES THE FIRE/STOVE HAVE A CHIMNEY OR A HOOD?</p>	<p>Yes.....1 No2</p>																																					
<p>HC8. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS?</p>	<p>In the house1 In a separate building2 Outdoors3 Other (<i>specify</i>) _____6</p>																																					
<p>HC9. DOES YOUR HOUSEHOLD HAVE:</p>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> </thead> <tbody> <tr><td>Electricity 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Radio 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Television 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Mobile Telephone 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Non-Mobile Telephone 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Refrigerator 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Vacuum cleaner 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Sewing-machine 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Microwave..... 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Personal computer..... 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Laundry washer 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> </tbody> </table>		Yes	No	Electricity 1	1	2	Radio 1	1	2	Television 1	1	2	Mobile Telephone 1	1	2	Non-Mobile Telephone 1	1	2	Refrigerator 1	1	2	Vacuum cleaner 1	1	2	Sewing-machine 1	1	2	Microwave..... 1	1	2	Personal computer..... 1	1	2	Laundry washer 1	1	2	
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<p>HC10. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:</p>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> </thead> <tbody> <tr><td>Watch 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Bicycle 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Motorcycle/Scooter 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Animal drawn-cart 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Car/Truck 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Boat with motor 1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> </tbody> </table>		Yes	No	Watch 1	1	2	Bicycle 1	1	2	Motorcycle/Scooter 1	1	2	Animal drawn-cart 1	1	2	Car/Truck 1	1	2	Boat with motor 1	1	2																
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**NOW LET US TALK ABOUT CHILDREN, WHO LIVE IN YOUR HOUSEHOLD.
FIRST I WOULD LIKE TO ASK A QUESTION ABOUT ANY WORK CHILDREN IN THIS HOUSEHOLD MAY DO.**

CHILD LABOUR MODULE													CL				
To be administered to mother/caretaker of each child in the household age 5 through 14 years. Write down the line No. of each relevant for the survey child from Household Listing Form.																	
CL1. Line No	CL2. Name	CL3. DURING THE PAST WEEK, DID (<i>name</i>) DO ANY KIND OF WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD? <i>If yes: FOR PAY IN CASH OR KIND?</i> 1 YES, FOR PAY (CASH OR KIND) 2 YES, UNPAID 3 NO ⇒ TO CL5			CL4. SINCE LAST (<i>day of the week</i>), ABOUT HOW MANY HOURS DID HE/SHE DO THIS WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD? <i>If more than one job, include all hours at all jobs.</i> <i>Record response then ⇒ CL.6</i>		CL5. AT ANY TIME DURING THE PAST YEAR, DID (<i>name</i>) DO ANY KIND OF WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD? <i>If yes: FOR PAY IN CASH OR KIND?</i> 1 YES, FOR PAY (CASH OR KIND) 2 YES, UNPAID 3 NO			CL6. DURING THE PAST WEEK, DID (<i>name</i>) HELP WITH HOUSEHOLD CHORES SUCH AS SHOPPING, COLLECTING FIREWOOD, CLEANING, FETCHING WATER, OR CARING FOR CHILDREN? 1 YES 2 NO ⇒ CL8		CL7. SINCE LAST (<i>day of the week</i>), ABOUT HOW MANY HOURS DID HE/SHE SPEND DOING THESE CHORES?		CL8. DURING THE PAST WEEK, DID (<i>name</i>) DO ANY OTHER FAMILY WORK (ON THE FARM OR IN A FAMILY BUSINESS, ETC.)? 1 YES 2 NO ⇒ NEXT LINE		CL9. SINCE LAST (<i>day of the week</i>), ABOUT HOW MANY HOURS DID HE/SHE DO THIS WORK?	
LINE NO.	NAME	YES			NO. HOURS	YES			NO. HOURS	YES	NO	NO. HOURS	YES	NO	NO. HOURS		
		PAID	UNPAID	NO		PAID	UNPAID	NO								YES	NO
01		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
02		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
03		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
04		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
05		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
06		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
07		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
08		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
09		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___
10		1	2	3	___	___	1	2	3	1	2	___	___	1	2	___	___

CHILD DISCIPLINE MODULE

CD

TABLE 1: CHILDREN AGED 2-14 YEARS ELIGIBLE FOR CHILDREN DISCIPLINE QUESTIONS

Review the household listing and list each of the children aged 2-14 years below in order according to their line number (HL1). Do not include other household members outside of the age range 2-14 years. Record the line number, name, sex, age, and the line number of the mother or caretaker for each child. Then record the total number of children aged 2-14 in the box provided (CD7).

CD1. Rank №	CD2. Line no. from HL1	CD3. Name from HL2	CD4. Sex from HL4.		CD5. Age from HL5	CD6. Line no. of mother/ caretaker from HL7 or HL8
LINE	LINE	NAME	M	F	AGE	MOTHER/CARETAKER
01	___		1	2	___	___
02	___		1	2	___	___
03	___		1	2	___	___
04	___		1	2	___	___
05	___		1	2	___	___
06	___		1	2	___	___
07	___		1	2	___	___
08	___		1	2	___	___
CD7.	TOTAL CHILDREN AGED 2-14 YEARS					___

IF THERE IS ONLY ONE CHILD AGE 2-14 YEARS IN THE HOUSEHOLD, THEN GO TO CD11, IN OTHER CASE CONTINUE FROM CD8.

TABLE 2: SELECTION OF RANDOM CHILD FOR CHILD DISCIPLINE QUESTIONS

Use this table to select one child between the ages of 2 and 14 years, if there is more than one child in that age range in the household. Look for the last digit of the household number from the cover page. This is the number of the row you should go to in the table below. Check the total number of eligible children in CD7 above. This is the number of the column you should go to. Find the box where the row and the column meet and circle the number that appears in the box. This is the rank number of the child about whom the questions will be asked. Record the rank number in CD9 below. Finally, record the line number and name of the selected child in CD11. Then, find the mother or primary caretaker of that child, and ask the questions, beginning with CD12.

CD8.	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD							
Last digit of the household questionnaire number	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5

CD9. Record the rank number of the selected child from Table 2

Rank number of child

CD11. Write name and line no. of the child selected for the module from CD3 and CD2, based on the rank number in CD9.	Name _____ LINE NUMBER _____	
CD12. ALL ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED AND I WANT YOU TO TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH (<i>name</i>) IN THE PAST MONTH.		
	Yes	No
CD12A. TOOK AWAY PRIVILEGES, FORBADE SOMETHING (<i>name</i>) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE HOUSE ?	1	2
CD12B. EXPLAINED WHY SOMETHING (THE BEHAVIOR) WAS WRONG ?	1	2
CD12C. SHOOK HIM/HER ?	1	2
CD12D. SHOUTED, YELLED AT HIM/HER ?	1	2
CD12E. GAVE HIM/HER SOMETHING ELSE TO DO ?	1	2
CD12F. SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND ?	1	2
CD12G. HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING HARD OBJECTS LIKE A BELT?	1	2
CD12H. CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT ?	1	2
CD12I. HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS ?	1	2
CD12J. HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG ?	1	2
CD12K. BEAT HIM/HER UP WITH AN IMPLEMENT (HIT OVER AND OVER AS HARD AS ONE COULD)?	1	2
CD13. DO YOU BELIEVE THAT IN ORDER TO BRING UP (RAISE, EDUCATE) (<i>name</i>) PROPERLY, YOU NEED TO PHYSICALLY PUNISH HIM/HER ?	Yes..... 1 No2 Don't know/no opinion8	



QUESTIONNAIRE FOR INDIVIDUAL WOMEN

WOMEN'S INFORMATION PANEL		WM
<i>This module is to be administered to all women age 15 through 49 (see column HL6 of Household Listing Form). Fill in one form for each eligible woman</i>		
WM1. Cluster number: _____	WM2. Household number: _____	
WM3. Woman's Name: _____	WM4. Woman's Line Number: _____	
WM5. Interviewer number: _____	WM6. Day/Month/Year of interview: _____/_____/_____	
WM7. Result of women's interview	Completed 1 Not at home 2 Refused 3 Partly completed 4 Incapacitated 5 Other (<i>specify</i>) _____ 6	
WM8. IN WHAT MONTH AND YEAR WERE YOU BORN?	Date of birth: Month _____ DK month 98 Year _____ DK year 9998	
WM9. HOW OLD WERE YOU AT YOUR LAST BIRTHDAY?	Age (<i>in completed years</i>) _____	
WM10. HAVE YOU EVER ATTENDED SCHOOL?	Yes 1 No 2	2 ⇒ WM14
WM11. WHAT IS THE HIGHEST LEVEL OF SCHOOL YOU ATTENDED: PRIMARY, SECONDARY, OR HIGHER?	Primary 1 Secondary 2 Higher 3 Incomplete secondary 4 Secondary special 5 Non-standard curriculum 6	
WM12. WHAT IS THE HIGHEST GRADE YOU COMPLETED AT THAT LEVEL?	GRADE _____	
WM13. <i>Check WM11</i>	<input type="checkbox"/> <i>Secondary, incomplete secondary, secondary special or higher.</i> ⇒ CM1 <input type="checkbox"/> <i>Primary or non-standard curriculum.</i> ⇒ WM14	
WM14. NOW I WOULD LIKE YOU TO READ THIS SENTENCE TO ME. <i>Show sentences to respondent. If respondent cannot read whole sentence, probe:</i> CAN YOU READ PART OF THE SENTENCE TO ME? <i>Example sentences for literacy test:</i> 1. <i>It has started to rain late this year.</i> 2. <i>Parents must love their children.</i> 3. <i>A child is reading a book.</i>	Cannot read at all 1 Able to read only parts of sentence 2 Able to read whole sentence 3 No sentence in required language _____ 4 (<i>specify language</i>) Blind/mute, visually/speech impaired 5	

CHILD MORTALITY MODULE		CM
<p><i>This module is to be administered to all women age 15-49. All questions refer only to LIVE births.</i></p>		
<p>CM1. NOW I WOULD LIKE TO ASK ABOUT ALL THE BIRTHS YOU HAVE HAD DURING YOUR LIFE. HAVE YOU EVER GIVEN BIRTH?</p> <p><i>If "No" probe by asking: I MEAN, TO A CHILD WHO EVER BREATHED OR CRIED OR SHOWED OTHER SIGNS OF LIFE – EVEN IF HE OR SHE LIVED ONLY A FEW MINUTES OR HOURS?</i></p>	<p>Yes 1 No 2</p>	2 ↓ MA1
<p>CM2A. WHAT WAS THE DATE OF YOUR FIRST BIRTH?</p> <p>I MEAN THE VERY FIRST TIME YOU GAVE BIRTH, EVEN IF THE CHILD IS NO LONGER LIVING, OR WHOSE FATHER IS NOT YOUR CURRENT PARTNER.</p>	<p>Date of first birth Day DK day98</p> <p>Month DK month98</p> <p>Year DK year9998</p>	⇒ CM3 ↓ CM2B
<p>CM2B. HOW MANY YEARS AGO DID YOU HAVE YOUR FIRST BIRTH?</p>	Completed years since first birth	
<p>CM3. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE NOW LIVING WITH YOU?</p>	<p>Yes 1 No 2</p>	2 ⇒ CM5
<p>CM4. HOW MANY SONS LIVE WITH YOU? HOW MANY DAUGHTERS LIVE WITH YOU?</p>	<p>Sons at home Daughters at home</p>	
<p>CM5. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE ALIVE BUT DO NOT LIVE WITH YOU?</p>	<p>Yes 1 No 2</p>	2 ⇒ CM7
<p>CM6. HOW MANY SONS ARE ALIVE BUT DO NOT LIVE WITH YOU? HOW MANY DAUGHTERS ARE ALIVE BUT DO NOT LIVE WITH YOU?</p>	<p>Sons elsewhere Daughters elsewhere</p>	
<p>CM7. HAVE YOU EVER GIVEN BIRTH TO A BOY OR GIRL WHO WAS BORN ALIVE BUT LATER DIED?</p>	<p>Yes 1 No 2</p>	2 ⇒ CM9
<p>CM8. HOW MANY BOYS HAVE DIED? HOW MANY GIRLS HAVE DIED?</p>	<p>Boys dead Girls dead</p>	
<p>CM9. <i>Sum answers to CM4, CM6, and CM8.</i></p>	Total	
<p>CM10. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE HAD IN TOTAL (<i>TOTAL NUMBER</i>) BIRTHS DURING YOUR LIFE. IS THIS CORRECT?</p>	<p><input type="checkbox"/> Yes. ⇒ CM11 <input type="checkbox"/> No. ⇒ Check responses and make corrections before proceeding to CM11</p>	
<p>CM11. OF THESE (<i>total number</i>) BIRTHS YOU HAVE HAD, WHEN DID YOU DELIVER THE LAST ONE (EVEN IF HE OR SHE HAS DIED)?</p> <p><i>If day is not known, enter '98' in space for day.</i></p>	<p>Date of last birth: Day/Month/Year / /</p>	

<p>CM12. Check CM11: Did the woman's last birth occur within the last 2 years, that is, since (day and month of interview in 2003)?</p> <p><i>If child has died, take special care when referring to this child by name in the following modules.</i></p>	<p>Yes, live birth in last 2 years1</p> <p>No live birth in last 2 years2</p>	<p>1⇒CM13</p> <p>2 ↓ MA1</p>
<p>CM13. AT THE TIME YOU BECAME PREGNANT WITH (<i>name</i>), DID YOU WANT TO BECOME PREGNANT THEN, DID YOU WANT TO WAIT UNTIL LATER, OR DID YOU WANT NO (MORE) CHILDREN AT ALL?</p>	<p>Then1</p> <p>Later2</p> <p>No more.....3</p>	

MATERNAL AND NEWBORN HEALTH MODULE		MN															
<p><i>This module is to be administered to all women with a live birth in the 2 years preceding date of interview.</i></p> <p><i>Check Child Mortality Module CM12 and record name of last-born child _____</i></p> <p><i>Use this child's name in the following questions, where indicated.</i></p>																	
<p>MN2. DID YOU SEE ANYONE FOR ANTENATAL CARE FOR THIS PREGNANCY?</p> <p><i>If yes: WHOM DID YOU SEE?</i></p> <p>ANYONE ELSE?</p> <p><i>Probe for the type of person seen and circle all answers given.</i></p>	<p>Health professional:</p> <p>DoctorA</p> <p>Nurse/midwifeB</p> <p>Auxiliary midwifeC</p> <p>Other person</p> <p>Community health worker G</p> <p>Relative/friendH</p> <p>Other (<i>specify</i>) _____ X</p> <p>No one Y</p>	<p>Y⇒MN7</p>															
<p>MN3. AS PART OF YOUR ANTENATAL CARE, WERE ANY OF THE FOLLOWING DONE AT LEAST ONCE?</p> <p>MN3A. WERE YOU WEIGHED?</p> <p>MN3B. WAS YOUR BLOOD PRESSURE MEASURED?</p> <p>MN3C. DID YOU GIVE A URINE SAMPLE?</p> <p>MN3D. DID YOU GIVE A BLOOD SAMPLE?</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>MN3A. WERE YOU WEIGHED?</td> <td>1</td> <td>2</td> </tr> <tr> <td>MN3B. WAS YOUR BLOOD PRESSURE MEASURED?</td> <td>1</td> <td>2</td> </tr> <tr> <td>MN3C. DID YOU GIVE A URINE SAMPLE?</td> <td>1</td> <td>2</td> </tr> <tr> <td>MN3D. DID YOU GIVE A BLOOD SAMPLE?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	MN3A. WERE YOU WEIGHED?	1	2	MN3B. WAS YOUR BLOOD PRESSURE MEASURED?	1	2	MN3C. DID YOU GIVE A URINE SAMPLE?	1	2	MN3D. DID YOU GIVE A BLOOD SAMPLE?	1	2	
	Yes	No															
MN3A. WERE YOU WEIGHED?	1	2															
MN3B. WAS YOUR BLOOD PRESSURE MEASURED?	1	2															
MN3C. DID YOU GIVE A URINE SAMPLE?	1	2															
MN3D. DID YOU GIVE A BLOOD SAMPLE?	1	2															
<p>MN4. DURING ANY OF THE ANTENATAL VISITS FOR THE PREGNANCY, WERE YOU GIVEN ANY INFORMATION OR COUNSELED ABOUT AIDS OR THE AIDS VIRUS?</p>	<p>Yes..... 1</p> <p>No 2</p> <p>DK..... 8</p>																
<p>MN5. I DON'T WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR HIV/AIDS AS PART OF YOUR ANTENATAL CARE?</p>	<p>Yes..... 1</p> <p>No 2</p> <p>DK..... 8</p>	<p>2⇒MN7</p> <p>8⇒MN7</p>															
<p>MN6. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?</p>	<p>Yes..... 1</p> <p>No 2</p> <p>DK..... 8</p>																

<p>MN7. WHO ASSISTED WITH THE DELIVERY OF YOUR LAST CHILD (<i>NAME</i>)?</p> <p>ANYONE ELSE?</p> <p><i>Probe for the type of person assisting and circle all answers given.</i></p>	<p>Health professional:</p> <p>Doctor..... A</p> <p>Nurse/midwife..... B</p> <p>Auxiliary midwife..... C</p> <p>Other person</p> <p>Community health worker..... G</p> <p>Relative/friend H</p> <p>Other (<i>specify</i>) _____ X</p> <p>No one..... Y</p>	
<p>MN8. WHERE DID YOU GIVE BIRTH TO (<i>name</i>)?</p> <p><i>If source is hospital, health center, or clinic, write the name of the place below. Probe to identify the type of source and circle the appropriate code.</i></p> <p>_____</p> <p>(<i>Name of place</i>)</p>	<p>Home</p> <p>Your home 11</p> <p>Other home..... 12</p> <p>Public sector</p> <p>Gov. hospital.....21</p> <p>Gov. clinic/health center22</p> <p>Other public (<i>specify</i>) _____ 26</p> <p>Private Medical Sector</p> <p>Private hospital31</p> <p>Private clinic32</p> <p>Private maternity home33</p> <p>Other private medical (<i>specify</i>) _____ 36</p> <p>Other (<i>specify</i>) _____ 96</p>	
<p>MN9. WHEN YOUR LAST CHILD (<i>name</i>) WAS BORN, WAS HE/SHE VERY LARGE, LARGER THAN AVERAGE, AVERAGE, SMALLER THAN AVERAGE, OR VERY SMALL?</p>	<p>Very large 1</p> <p>Larger than average2</p> <p>Average3</p> <p>Smaller than average4</p> <p>Very small.....5</p> <p>DK..... 8</p>	
<p>MN10. WAS (<i>name</i>) WEIGHED AT BIRTH?</p>	<p>Yes 1</p> <p>No.....2</p> <p>DK..... 8</p>	<p>2⇒MN12</p> <p>8⇒MN12</p>
<p>MN11. HOW MUCH DID (<i>name</i>) WEIGHT?</p> <p><i>Record weight from health card, if available.</i></p>	<p>From card (<i>grams</i>).....1 ____</p> <p>From recall (<i>grams</i>).....2 ____</p> <p>DK..... 9 9998</p>	
<p>MN12. DID YOU EVER BREASTFEED (<i>name</i>)?</p>	<p>Yes 1</p> <p>No 2</p>	<p>2 ↓ MA1</p>
<p>MN13. HOW LONG AFTER BIRTH DID YOU FIRST PUT (<i>name</i>) TO THE BREAST?</p> <p><i>If less than 1 hour, record '00' hours. If less than 24 hours, record hours. Otherwise, record days.</i></p>	<p>Immediately 0 00</p> <p>Hours 1 ____</p> <p>or</p> <p>Days 2 ____</p> <p>DK/remember 9 98</p>	

MARRIAGE/UNION MODULE		MA
MA1. ARE YOU CURRENTLY MARRIED OR LIVING TOGETHER WITH A MAN AS IF MARRIED?	Yes, currently married 1 Yes, living with a man 2 No, not in union 3	3 ⇒ MA3
MA2. HOW OLD WAS YOUR HUSBAND/PARTNER ON HIS LAST BIRTHDAY?	Age in years __ __ DK 98	⇒ MA5 98 ⇒ MA5
MA3. HAVE YOU EVER BEEN MARRIED OR LIVED TOGETHER WITH A MAN?	Yes, formerly married 1 Yes, formerly lived with a man 2 No 3	3 ↓ CP1
MA4. WHAT IS YOUR MARITAL STATUS NOW: ARE YOU WIDOWED, DIVORCED OR SEPARATED?	Widowed 1 Divorced 2 Separated 3	
MA5. HAVE YOU BEEN MARRIED OR LIVED WITH A MAN ONLY ONCE OR MORE THAN ONCE?	Only once 1 More than once 2	
MA6. IN WHAT MONTH AND YEAR DID YOU <u>FIRST</u> MARRY OR START LIVING WITH A MAN AS IF MARRIED?	Month __ __ DK month 98 Year __ __ __ __ DK year 9998	
MA7. Check MA6:	<input type="checkbox"/> Month and year of marriage/union known? ⇒ CP1 <input type="checkbox"/> Either month or year of marriage/union not known? ⇒ MA8	
MA8. HOW OLD WERE YOU WHEN YOU STARTED LIVING WITH YOUR FIRST HUSBAND/PARTNER?	Age (in years) __ __	

CONTRACEPTION MODULE		CP
CP1. I WOULD LIKE TO TALK WITH YOU ABOUT ANOTHER SUBJECT – FAMILY PLANNING – AND YOUR REPRODUCTIVE HEALTH. ARE YOU PREGNANT NOW?	Yes, currently pregnant 1 No 2 DK/unsure 8	1 ⇒ CP4B
CP2. SOME PEOPLE USE VARIOUS WAYS OR METHODS TO DELAY OR AVOID A PREGNANCY. ARE YOU CURRENTLY DOING SOMETHING OR USING ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?	Yes 1 No 2	2 ⇒ CP4A
CP3. WHICH METHOD ARE YOU USING? <i>DO NOT PROMPT. If more than one method is mentioned, circle each one.</i>	Female sterilization A Male sterilization B Pill C IUD D Injections E Implants F Condom G Female condom H Diaphragm I Foam/jelly J Lactational amenorrhoea method (LAM) K Periodic abstinence L Withdrawal M Other (specify) _____ X	

<p>CP4A. NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE FUTURE. WOULD YOU LIKE TO HAVE (A/ANOTHER) CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY (MORE) CHILDREN?</p> <p>CP4B. <i>If currently pregnant:</i> NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE FUTURE. AFTER THE CHILD YOU ARE NOW EXPECTING, WOULD YOU LIKE TO HAVE ANOTHER CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY (MORE) CHILDREN?</p>	<p>Have (a/another) child 1</p> <p>No more/none..... 2</p> <p>Says she cannot get pregnant 3</p> <p>DK/undecided..... 8</p>	<p>2 ⇓ HA1</p> <p>3 ⇓ HA1</p> <p>8 ⇓ HA1</p>
<p>CP4C. HOW LONG WOULD YOU LIKE TO WAIT BEFORE THE BIRTH OF (A/ANOTHER) CHILD?</p>	<p>Months..... 1 ___</p> <p>Years 2 ___</p> <p>Soon/now 993</p> <p>Says she cannot get pregnant 994</p> <p>After marriage..... 995</p> <p>Other 996</p> <p>DK..... 998</p>	

HIV/AIDS MODULE		HA
<p>HA1. NOW I WOULD LIKE TO TALK WITH YOU ABOUT SOMETHING ELSE.</p> <p>HAVE YOU EVER HEARD OF THE VIRUS HIV OR AN ILLNESS CALLED AIDS?</p>	<p>Yes 1</p> <p>No..... 2</p>	<p>2⇒ HA19</p>
<p>HA2. CAN PEOPLE PROTECT THEMSELVES FROM GETTING INFECTED WITH THE AIDS VIRUS BY HAVING ONE SEX PARTNER WHO IS NOT INFECTED AND ALSO HAS NO OTHER PARTNERS?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA3. CAN PEOPLE GET INFECTED WITH THE AIDS VIRUS BECAUSE OF WITCHCRAFT OR OTHER SUPERNATURAL MEANS?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA4. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE AIDS VIRUS BY USING A CONDOM EVERY TIME THEY HAVE SEX?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA5. CAN PEOPLE GET THE AIDS VIRUS FROM MOSQUITO BITES?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA6. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING INFECTED WITH THE AIDS VIRUS BY NOT HAVING SEX AT ALL?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA7. CAN PEOPLE GET THE AIDS VIRUS BY SHARING FOOD WITH A PERSON WHO HAS AIDS?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA7A. CAN PEOPLE GET THE AIDS VIRUS BY GETTING INJECTIONS WITH A NEEDLE THAT WAS ALREADY USED BY SOMEONE ELSE?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	
<p>HA8. IS IT POSSIBLE FOR A HEALTHY-LOOKING PERSON TO HAVE THE AIDS VIRUS?</p>	<p>Yes 1</p> <p>No..... 2</p> <p>DK 8</p>	

HA9. CAN THE AIDS VIRUS BE TRANSMITTED FROM A MOTHER TO A BABY?	Yes	No	DK	
HA9A. DURING PREGNANCY?	1	2	8	
HA9B. DURING DELIVERY?	1	2	8	
HA9C. BY BREASTFEEDING?	1	2	8	
HA10. IF A FEMALE TEACHER HAS THE AIDS VIRUS BUT IS NOT SICK, SHOULD SHE BE ALLOWED TO CONTINUE TEACHING IN SCHOOL?	Yes 1 No 2 DK/not sure/depends..... 8			
HA11. WOULD YOU BUY FRESH VEGETABLES FROM A SHOPKEEPER OR VENDOR IF YOU KNEW THAT THIS PERSON HAD THE AIDS VIRUS?	Yes 1 No 2 DK/not sure/depends..... 8			
HA12. IF A MEMBER OF YOUR FAMILY BECAME INFECTED WITH THE AIDS VIRUS, WOULD YOU WANT IT TO REMAIN A SECRET?	Yes 1 No 2 DK/not sure/depends..... 8			
HA13. IF A MEMBER OF YOUR FAMILY BECAME SICK WITH THE AIDS VIRUS, WOULD YOU BE WILLING TO CARE FOR HIM OR HER IN YOUR HOUSEHOLD?	Yes 1 No 2 DK/not sure/depends..... 8			
HA14. <i>Check MN5: Tested for HIV during antenatal care?</i>	<input type="checkbox"/> Yes. ⇒ HA18A <input type="checkbox"/> No. ⇒ HA15			
HA15. I DO NOT WANT TO KNOW THE RESULTS, BUT HAVE YOU EVER BEEN TESTED TO SEE IF YOU HAVE HIV, THE VIRUS THAT CAUSES AIDS?	Yes 1 No 2			2⇒HA18
HA16. I DO NOT WANT YOU TO TELL ME THE RESULTS OF THE TEST, BUT HAVE YOU BEEN TOLD THE RESULTS?	Yes 1 No 2			
HA17. DID YOU, YOURSELF, ASK FOR THE TEST, WAS IT OFFERED TO YOU AND YOU ACCEPTED, OR WAS IT REQUIRED?	Asked for the test 1 Offered and accepted..... 2 Required 3			1↓ HA19 2↓ HA19 3↓ HA19
HA18. AT THIS TIME, DO YOU KNOW OF A PLACE WHERE YOU CAN GO TO GET SUCH A TEST TO SEE IF YOU HAVE THE AIDS VIRUS? HA18A. <i>If tested for HIV during antenatal care: OTHER THAN AT THE ANTENATAL CLINIC, DO YOU KNOW OF A PLACE WHERE YOU CAN GO TO GET A TEST TO SEE IF YOU HAVE THE AIDS VIRUS?</i>	Yes 1 No 2			
HA19. <i>Do any children under 5 years of age reside in this household, for whom the respondent is mother/caretaker (see column HL8 of Household Listing Form).</i> <input type="checkbox"/> Yes. ⇒ Pass on to the Questionnaire for children under 5 years of age. <input type="checkbox"/> No. ⇒ Finish the interview with the respondent, having thanked her for her co-operation.				



QUESTIONNAIRE FOR CHILDREN UNDER FIVE

UNDER-FIVE CHILD INFORMATION PANEL		UF
<p><i>This questionnaire is to be administered to all mothers or caretakers (see Household Listing Form, column HL8) who care for a child that lives with them and is under the age of 5 years (see Household Listing Form, column HL5). A separate questionnaire should be used for each eligible child.</i></p>		
UF1. Cluster number: _____	UF2. Household number: _____	
UF3. Child's Name: _____	UF4. Child's Line Number: _____	
UF5. Mother's/Caretaker's Name: _____	UF6. Mother's/Caretaker's Line Number: _____	
UF7. Interviewer number: _____	UF8. Day/Month/Year of interview: _____ / _____ / _____	
UF9. Result of interview for children under 5: (Codes refer to mother/caretaker.)	Completed 1 Not at home 2 Refused 3 Partly completed 4 Incapacitated 5 Other (<i>specify</i>) 6	
UF10. Now I would like to ask you some questions about the health of each child under the age of 5 in your care, who lives with you now. Now I want to ask you about (<i>name</i>). In what day, month and year was (<i>name</i>) born? (What is his/her birthday?)	Date of birth: Day DK day 98 Month Year	
UF11. How old was (<i>name</i>) at his/her last birthday?	AGE IN COMPLETED YEARS _____	

BIRTH REGISTRATION AND EARLY LEARNING MODULE		BR			
BR5. Check age of child in UF11: Child is 3 or 4 years old?	<input type="checkbox"/> Yes. ⇒ BR6 <input type="checkbox"/> No. ⇒ BR8				
BR6. DOES (<i>name</i>) ATTEND ANY ORGANIZED LEARNING OR EARLY CHILDHOOD EDUCATION PROGRAMME, SUCH AS A PRIVATE OR GOVERNMENT FACILITY, INCLUDING KINDERGARTEN OR COMMUNITY CHILD CARE?	Yes.....1 No2 DK.....8	2⇒BR8 8⇒BR8			
BR7. WITHIN THE LAST SEVEN DAYS, ABOUT HOW MANY HOURS DID (<i>name</i>) ATTEND?	No. of hours ____				
BR8. IN THE PAST 3 DAYS, DID YOU OR ANY HOUSEHOLD MEMBER OVER 15 YEARS OF AGE ENGAGE IN ANY OF THE FOLLOWING ACTIVITIES WITH (<i>name</i>):					
<i>If 'Yes', ask: WHO ENGAGED IN THIS ACTIVITY WITH THE CHILD - THE MOTHER, THE CHILD'S FATHER OR ANOTHER ADULT MEMBER OF THE HOUSEHOLD (INCLUDING THE CARETAKER/RESPONDENT)?</i> <i>Circle all that apply.</i>					
	Mother	Father	Other	No one	
BR8A. READ BOOKS OR LOOK AT PICTURE BOOKS WITH (<i>name</i>)?	A	B	X	Y	
BR8B. TELL STORIES TO (<i>name</i>)?	A	B	X	Y	
BR8C. SING SONGS WITH (<i>name</i>)?	A	B	X	Y	
BR8D. TAKE (<i>name</i>) OUTSIDE THE HOME, COMPOUND, YARD OR ENCLOSURE?	A	B	X	Y	
BR8E. PLAY WITH (<i>name</i>)?	A	B	X	Y	
BR8F. SPEND TIME WITH (<i>name</i>) NAMING, COUNTING, AND/OR DRAWING THINGS?	A	B	X	Y	

BREASTFEEDING MODULE		BF		
BF1. HAS (<i>name</i>) EVER BEEN BREASTFED?	Yes.....1 No2 DK.....8			
	2⇒BF3 8⇒BF3			
BF2. IS HE/SHE STILL BEING BREASTFED?	Yes.....1 No2 DK.....8			
BF3. SINCE THIS TIME YESTERDAY, DID HE/SHE RECEIVE ANY OF THE FOLLOWING:				
<i>Read each item aloud and record response before proceeding to the next item.</i>				
	Yes	No	DK	
BF3A. VITAMIN, MINERAL SUPPLEMENTS OR MEDICINE?	1	2	8	
BF3B. PLAIN WATER?	1	2	8	
BF3C. SWEETENED, FLAVOURED WATER OR FRUIT JUICE OR TEA OR INFUSION?	1	2	8	
BF3D. ORAL REHYDRATION SOLUTION (ORS)?	1	2	8	
BF3E. INFANT FORMULA?	1	2	8	
BF3F. TINNED, POWDERED OR FRESH MILK?	1	2	8	
BF3G. ANY OTHER LIQUIDS?	1	2	8	
BF3H. SOLID OR SEMI-SOLID (MUSHY) FOOD?	1	2	8	
BF4. Check BF3H: CHILD RECEIVED SOLID OR SEMI-SOLID (MUSHY) FOOD?	<input type="checkbox"/> Yes. ⇒ BF5 <input type="checkbox"/> No or DK. ⇒ CA1			

BF5. SINCE THIS TIME YESTERDAY, HOW MANY TIMES DID (<i>name</i>) EAT SOLID, SEMISOLID, OR SOFT FOODS OTHER THAN LIQUIDS?	No. of times DK.....8	
<i>If 7 or more times, record '7'.</i>		

CARE OF ILLNESS MODULE			CA
CA1. HAS (<i>name</i>) HAD DIARRHOEA IN THE LAST TWO WEEKS, THAT IS, SINCE (<i>day of the week</i>) OF THE WEEK BEFORE LAST?	Yes 1 No 2 DK..... 8		2⇒CA5 8⇒CA5
<i>Diarrhoea is determined as perceived by mother or caretaker, or as three or more loose or watery stools per day, or blood in stool.</i>			
CA2. DURING THIS LAST EPISODE OF DIARRHOEA, DID (<i>name</i>) DRINK ANY OF THE FOLLOWING:			
<i>Read each item aloud and record response before proceeding to the next item.</i>			
	Yes	No	DK
CA2A. A FLUID MADE FROM A SPECIAL PACKET CALLED (<i>e.g. gastrolit, eralit, etc.</i>)?	1	2	8
CA2B. GOVERNMENT-RECOMMENDED HOMEMADE FLUID?	1	2	8
CA2C. A PRE-PACKAGED ORS FLUID FOR DIARRHOEA?	1	2	8
CA3. DURING (<i>name's</i>) ILLNESS, DID HE/SHE DRINK MUCH LESS, ABOUT THE SAME, OR MORE THAN USUAL?	Much less or none 1 About the same (or somewhat less)..... 2 More 3 DK..... 8		
CA4. DURING (<i>name's</i>) ILLNESS, DID HE/SHE EAT LESS, ABOUT THE SAME, OR MORE FOOD THAN USUAL?	None 1 Much less 2 Somewhat less 3 About the same 4 More 5 DK..... 8		
<i>If 'Less, probe: MUCH LESS OR A LITTLE LESS?</i>			
CA5. HAS (<i>name</i>) HAD AN ILLNESS WITH A COUGH AT ANY TIME IN THE LAST TWO WEEKS, THAT IS, SINCE (<i>day of the WEEK</i>) OF THE WEEK BEFORE LAST?	Yes 1 No 2 DK..... 8		2⇒CA12 8⇒CA12
CA6. WHEN (<i>name</i>) HAD AN ILLNESS WITH A COUGH, DID HE/SHE BREATHE FASTER THAN USUAL WITH SHORT, QUICK BREATHS OR HAVE DIFFICULTY BREATHING?	Yes 1 No 2 DK..... 8		2⇒CA12 8⇒CA12
CA7. WERE THE SYMPTOMS DUE TO A PROBLEM IN THE CHEST OR A BLOCKED NOSE?	Problem in chest..... 1 Blocked nose 2 Both 3 Other (<i>specify</i>) 6 DK..... 8		2⇒CA12 6⇒CA12
CA8. DID YOU SEEK ADVICE OR TREATMENT FOR THE ILLNESS OUTSIDE THE HOME?	Yes 1 No 2 DK..... 8		2⇒CA10 8⇒CA10

<p>CA9. FROM WHERE DID YOU SEEK CARE? ANYWHERE ELSE?</p> <p><i>Circle all providers mentioned, but DO NOT PROMPT with any suggestions.</i></p> <p><i>If source is hospital, health center, or clinic, write the name of the place below. Probe to identify the type of source and circle the appropriate code.</i></p> <p>_____</p> <p>(Name of place)</p>	<p>Public sector</p> <p>Gov. hospital A</p> <p>Gov. health centre B</p> <p>Gov. health post..... C</p> <p>Village health worker D</p> <p>Mobile/outreach clinic E</p> <p>Other public (specify) _____ H</p> <p>Private medical sector</p> <p>Private hospital/clinic I</p> <p>Private physician..... J</p> <p>Private pharmacy K</p> <p>Mobile clinic L</p> <p>Other private medical (specify) _____ O</p> <p>Other source</p> <p>Relative or friend..... P</p> <p>Traditional practitioner R</p> <p>Other (specify) _____ X</p>	
<p>CA10. WAS (name) GIVEN MEDICINE TO TREAT THIS ILLNESS?</p>	<p>Yes..... 1</p> <p>No 2</p> <p>DK..... 8</p>	<p>2⇒CA12</p> <p>8⇒CA12</p>
<p>CA11. WHAT MEDICINE WAS (name) GIVEN?</p> <p><i>Circle all medicines given.</i></p>	<p>Antibiotic A</p> <p>Paracetamol/Panadol/Acetaminophen P</p> <p>Aspirin..... Q</p> <p>Ibuprofen..... R</p> <p>Other (specify) _____ X</p> <p>DK..... Z</p>	
<p>CA12. Check UF11: Child aged under 3?</p>	<p><input type="checkbox"/> Yes. ⇒ CA13</p> <p><input type="checkbox"/> No. ⇒ CA14</p>	
<p>CA13. THE LAST TIME (name) PASSED STOOLS, WHAT WAS DONE TO DISPOSE OF THE STOOLS?</p>	<p>Child used toilet/latrine 01</p> <p>Put/rinsed into toilet or latrine 02</p> <p>Put/rinsed into drain or ditch 03</p> <p>Thrown into garbage (solid waste) 04</p> <p>Buried 05</p> <p>Left in the open..... 06</p> <p>Other (specify) _____ 96</p> <p>DK..... 98</p>	
<p><i>Ask the following question (CA14) only once for each mother/caretaker.</i></p> <p>CA14. SOMETIMES CHILDREN HAVE SEVERE ILLNESSES AND SHOULD BE TAKEN IMMEDIATELY TO A HEALTH FACILITY. WHAT TYPES OF SYMPTOMS WOULD CAUSE YOU TO TAKE YOUR CHILD TO A HEALTH FACILITY RIGHT AWAY?</p> <p><i>Keep asking for more signs or symptoms until the mother/caretaker cannot recall any additional symptoms.</i></p> <p><i>Circle all symptoms mentioned, but DO NOT PROMPT with any suggestions.</i></p>	<p>Child not able to drink or breastfeed..... A</p> <p>Child becomes sicker B</p> <p>Child develops a fever C</p> <p>Child has fast breathing..... D</p> <p>Child has difficult breathing E</p> <p>Child has blood in stool F</p> <p>Child is drinking poorly G</p> <p>Other (specify) _____ X</p> <p>Other (specify) _____ Y</p> <p>Other (specify) _____ Z</p>	

IMMUNIZATION MODULE			IM
<p>If an immunization card is available, copy the dates in IM2-IM6 for each type of immunization recorded on the card. IM10-IM18 are for recording vaccinations that are not recorded on the card. IM10-IM18 will only be asked when a card is not available.</p>			
IM1. IS THERE A VACCINATION CARD FOR (name)?	Yes, seen1 Yes, not seen2 No.....3		2⇒IM10 3⇒IM10
<p>(a) Copy dates for each vaccination from the card. (b) Write '44' in day column if card shows that vaccination was given but no date recorded.</p>			
	Date of Immunization		
	Day	Month	Year
IM2. BCG	_ _ _	_ _	_ _ _ _ _
IM3B. POLIO 1	_ _ _	_ _	_ _ _ _ _
IM3C. POLIO 2	_ _ _	_ _	_ _ _ _ _
IM3D. POLIO 3	_ _ _	_ _	_ _ _ _ _
IM4A. DPT1	_ _ _	_ _	_ _ _ _ _
IM4B. DPT2	_ _ _	_ _	_ _ _ _ _
IM4C. DPT3	_ _ _	_ _	_ _ _ _ _
IM5A. HEPB1 (OR DPTHEPB1)	_ _ _	_ _	_ _ _ _ _
IM5B. HEPB2 (OR DPTHEPB2)	_ _ _	_ _	_ _ _ _ _
IM5C. HEPB3 (OR DPTHEPB3)	_ _ _	_ _	_ _ _ _ _
IM6. MMR	_ _ _	_ _	_ _ _ _ _
IM9. IN ADDITION TO THE VACCINATIONS AND VITAMIN A CAPSULES SHOWN ON THIS CARD, DID (name) RECEIVE ANY OTHER VACCINATIONS – INCLUDING VACCINATIONS RECEIVED IN CAMPAIGNS OR IMMUNIZATION DAYS?	Yes1		1⇒IM19
	<i>Probe for vaccinations and write '66' in the corresponding day column on IM2 to IM6.</i>		
<i>Record 'Yes' only if respondent mentions BCG, Polio 1-3, DPT 1-3, HepB 1-3 or MMR</i>	No.....2 DK.....8		2⇒IM19 8⇒IM19
IM10. HAS (name) EVER RECEIVED ANY VACCINATIONS TO PREVENT HIM/HER FROM GETTING DISEASES, INCLUDING VACCINATIONS RECEIVED IN A CAMPAIGN OR IMMUNIZATION DAY?	Yes1 No2 DK.....8		2⇒IM19 8⇒IM19
IM11. HAS (name) EVER BEEN GIVEN A BCG VACCINATION AGAINST TUBERCULOSIS – THAT IS, AN INJECTION IN THE ARM OR SHOULDER THAT CAUSED A SCAR?	Yes1 No2 DK.....8		
IM12. HAS (name) EVER BEEN GIVEN ANY "VACCINATION DROPS IN THE MOUTH" TO PROTECT HIM/HER FROM GETTING DISEASES – THAT IS, POLIO?	Yes1 No2 DK.....8		2⇒IM15 8⇒IM15
IM13. HOW OLD WAS HE/SHE WHEN THE FIRST DOSE WAS GIVEN – JUST AFTER BIRTH (WITHIN TWO WEEKS) OR LATER?	Just after birth (within two weeks)1 Later2		
IM14. HOW MANY TIMES HAS HE/SHE BEEN GIVEN THESE DROPS?	No. of times _ _		

<p>IM15. HAS (<i>name</i>) EVER BEEN GIVEN INJECTIONS OF DPT – THAT IS, AN INJECTION IN THE THIGH OR BUTTOCKS – TO PREVENT HIM/HER FROM GETTING TETANUS, WHOOPING COUGH, DIPHTHERIA? (SOMETIMES GIVEN AT THE SAME TIME AS POLIO)</p>	<p>Yes.....1 No2 DK.....8</p>	<p>2⇒IM17 8⇒IM17</p>																
<p>IM16. HOW MANY TIMES?</p>	<p>No. of times.....__ __</p>																	
<p>IM17. HAS (<i>name</i>) EVER BEEN GIVEN INJECTIONS OF MMR – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING MEASLES?</p>	<p>Yes.....1 No2 DK.....8</p>																	
<p>IM19. PLEASE TELL ME IF (<i>name</i>) HAS PARTICIPATED IN ANY OF THE FOLLOWING CAMPAIGNS, NATIONAL IMMUNIZATION DAYS AND/OR VITAMIN A OR CHILD HEALTH DAYS:</p> <p>IM19A. _____ (Date/type of campaign)</p> <p>IM19B. _____ (Date/type of campaign)</p> <p>IM19C. _____ (Date/type of campaign)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>IM19A.</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>IM19B.</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>IM19C.</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		Yes	No	DK	IM19A.	1	2	8	IM19B.	1	2	8	IM19C.	1	2	8	
	Yes	No	DK															
IM19A.	1	2	8															
IM19B.	1	2	8															
IM19C.	1	2	8															
<p>IM20. Does another eligible child reside in the household for whom this respondent is mother/caretaker? (See Household Listing Form, column HL8).</p> <p><input type="checkbox"/> Yes. ⇒ End the current questionnaire and then go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE to administer the questionnaire for the next eligible child.</p> <p><input type="checkbox"/> No. ⇒ End the interview with this respondent by thanking him/her for his/her cooperation.</p> <p>If this is the last eligible child in the household, go on to ANTHROPOMETRY MODULE.</p>																		

<p>ANTHROPOMETRY MODULE AN</p>	
<p>After questionnaires for all children are complete, the measurer weighs and measures each child. Record weight and length/height below, taking care to record the measurements on the correct questionnaire for each child. Check the child's name and line number on the Household Listing Form before recording measurements.</p>	
<p>AN1. CHILD'S WEIGHT.</p>	<p>Kilograms __ . __</p>
<p>AN2. CHILD'S LENGTH OR HEIGHT. Check age of child in UF11: <input type="checkbox"/> Child under 2 years old. ⇒ Measure length (lying down). <input type="checkbox"/> Child age 2 or more years. ⇒ Measure height (standing up).</p>	<p>Length (cm) Lying down1 ____ . ____</p> <p>Height (cm) Standing up2 ____ . ____</p>
<p>AN3. MEASURER'S IDENTIFICATION CODE.</p>	<p>Code.....__ __</p>
<p>AN4. RESULT OF MEASUREMENT.</p>	<p>Measured 1 Not present..... 2 Refused..... 3 Other (specify) _____ 6</p>
<p>AN5. Is there another child in the household who is eligible for measurement? <input type="checkbox"/> Yes. ⇒ Record measurements for next child. <input type="checkbox"/> No. ⇒ End the interview with this household by thanking all participants for their cooperation.</p>	
<p>Gather together all questionnaires for this household and check that all identification numbers are inserted on each page. Record on the Household Information Panel the number of interviews completed.</p>	

