Kyrgyzstan

Monitoring the situation of children and women

Multiple Indicator Cluster Survey
Kyrgyz Republic, 2006

National Statistical Commitee
of the Kyrgyz Republic

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The Kyrgyz Multiple Indicator Cluster Survey (MICS) was carried by the National Statistical Committee of the Kyrgyz Republic in collaboration with the Ministry of Health, the Ministry of Labour and Social Protection, the Ministry of Education, the representative office of the World Health Organization (WHO), the United States Agency for International Development (USAID), non-governmental organizations Project HOPE and Zdrav-PLUS. Financial and technical support was provided by the United Nations Children's Fund (UNICEF).

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 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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Multiple Indicator Cluster Survey 2006, Kyrgyz Republic. Final Report. National Statistical Committee of the Kyrgyz Republic. United Nations Children's Fund. 2007. Kyrgyzstan, Bishkek.

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Multiple Indicator Cluster Surveys (MICS) and Millennium Development Goals (MDG) Indicators, Kyrgyzstan, 2006

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value	Units
CHILD MORTALITY					
Child mortality	1	13	Under-five mortality rate	44	per thousand
	2	14	Infant mortality rate	38	per thousand
NUTRITION					
Nutritional status	6	4	Underweight prevalence (below -2 SD)	3.4	percent
	7		Stunting prevalence (below -2 SD)	13.7	percent
	8		Wasting prevalence (below -2 SD)	3.5	percent
Breastfeeding	45		Timely initiation of breastfeeding	64.9	percent
	15		Exclusive breastfeeding rate	31.5	percent
	16		Continued breastfeeding rate		percent
			at 12-15 months	67.8	
			at 20-23 months	26.2	
	17		Timely complementary feeding rate	49.3	percent
	18		Frequency of complementary feeding	44.5	percent
	19		Adequately fed infants	37.5	percent
Salt iodization	41		Iodized salt consumption	76.1	percent
Vitamin A	42		Vitamin A supplementation (under-fives)	47.0	percent
	43		Vitamin A supplementation (post-partum mothers)	50.6	percent
Low birth weight	9		Low birth weight infants	5.3	percent
	10		Infants weighed at birth	96.9	percent
CHILD HEALTH					
Care of illness	33		Use of oral rehydration therapy (ORT)	20.4	percent
	34		Home management of diarrhoea	15.4	percent
	35		Received ORT or increased fluids, and continued feeding	22.3	percent
	23		Care seeking for suspected pneumonia	62.1	percent
	22		Antibiotic treatment of suspected pneumonia	44.5	percent
Solid fuel use	24	29	Solid fuels	37.3	percent
Source and cost of supplies	96		Source of supplies (from public sources)		
			Antibiotics	16.8	percent
	97		Cost of supplies (median costs)		
			Antibiotics		
			Public sources	244.1	Som
			Private sources	100	Som
ENVIRONMENT					
Water and sanitation	11	30	Use of improved drinking water sources	88.2	percent
	13		Water treatment	34.6	percent
	12	31	Use of improved sanitation facilities	96.3	percent
	14		Disposal of child's faeces	42.7	percent
REPRODUCTIVE HEALTH					
Contraception and unmet need	21	19c	Contraceptive prevalence	47.8	percent
	98		Unmet need for family planning	1.1	percent
	99		Demand satisfied for family planning	97.7	percent
Maternal and newborn health	20		Antenatal care	96.9	percent
	44		Content of antenatal care		percent
			Blood test taken	96.8	
			Blood pressure measured	96.8	
			Urine specimen taken	96.6	
			Weight measured	96.6	
	4	17	Skilled attendant at delivery	97.6	percent
	5		Institutional deliveries	96.9	percent
Maternal mortality	3	16	Maternal mortality ratio	104	per 100,000

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value	Units
CHILD DEVELOPMENT					
Child development	46		Support for learning	71.0	percent
	47		Father's support for learning	52.8	percent
	48		Support for learning: more than 3 children's books	76.2	percent
	49		Support for learning: more than 3 non-children's books	38.2	percent
	50		Support for learning: materials for play (3 or more toys)	24.9	percent
	51		Non-adult care	10.6	percent
EDUCATION					
Education	52		Pre-school attendance	19.0	percent
	53		School readiness	20.2	percent
	54		Net intake rate in primary education	70.4	percent
	55	6	Net primary school attendance rate	92.1	percent
	56		Net secondary school attendance rate	89.2	percent
	57	7	Children reaching grade five	98.6	percent
	58		Transition rate to secondary school	99.1	percent
	59	7b	Primary completion rate	79.2	percent
	61	9	Gender parity index		
			Primary school	1.03	ratio
			Secondary school	1.04	ratio
Literacy	60	8	Adult literacy rate	99.9	percent
CHILD PROTECTION					
Birth registration	62		Birth registration	94.2	percent
Child labour	71		Child labour	3.6	percent
	72		Labourer students	75.9	percent
	73		Student labourers	3.3	percent
Child discipline	74		Any psychological/physical punishment	51.4	percent
Early marriage and polygyny	67		Early marriage		percent
			Marriage before age 15	0.8	
			Marriage before age 18	12.2	
	68		Young women aged 15-19 currently married/in union	7.7	percent
	70		Polygyny	1.7	percent
	69		Spousal age difference (>10 years)		percent
			Women of age 15-19	10.2	
			Women of age 20-24	6.0	
Domestic violence	100		Attitudes towards domestic violence	37.7	percent
HIV/AIDS, SEXUAL BEHAVIOUR, AND ORPHANED AND VULNERABLE CHILDREN					
HIV/AIDS knowledge and attitudes	82	19b	Comprehensive knowledge about HIV prevention among young people	20.3	percent
	89		Knowledge of mother- to-child transmission of HIV	58.0	percent
	86		Attitude towards people with HIV/AIDS	5.2	percent
	87		Women who know where to be tested for HIV	59.0	percent
	88		Women who have been tested for HIV	37.0	percent
	90		Counselling coverage for the prevention of mother-to-child transmission of HIV	62.6	percent
	91		Testing coverage for the prevention of mother-to-child transmission of HIV	54.6	percent
	92		Age-mixing among sexual partners	6.6	percent
Sexual behaviour	83	19a	Condom use with non-regular partners	56.0	percent
	85		Higher risk sex in the last year	7.4	percent
Orphanhood	78		Children's living arrangements	5.4	percent
	75		Prevalence of orphans	5.5	percent

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LIST OF ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
BCG	Bacillis-Cereus-Geuerin (Tuberculosis)
CDC	Center for Disease Control and Prevention, USA
CEA	Census Enumeration Areas
DPT	Diphteria Pertussis Tetanus
EPI	Expanded Programme on Immunization
GAVI	Global Alliance of Vaccines and Immunization
GPI	Gender Parity Index
HIV	Human Immunodeficiency Virus
ICPD	International Conference on Population and Development
ILBD	International Live Birth Definition
IDD	Iodine Deficiency Disorders
IMCI	Integrated Management of Childhood Illnesses
IQ	Intelligence Quotient
ITN	Insecticide Treated Net
IUD	Intrauterine Device
LAM	Lactational Amenorrhea Method
MDG	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MoH	Ministry of Health
NAR	Net Attendance Rate
NCHS	National Center for Health Statistics
ORT	Oral Rehydration Therapy
ORS	Oral Rehydration Situation
PPM	Parts Per Million
PSU	Primary Sampling Unit
SPSS	Statistical Package for Social Sciences
STI	Sexually Transmitted Infection
UNAIDS	United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
VAS	Vitamin A Supplement
WFFC	World Fit for Children
WHO	World Health Organization

TABLE REFERENCES

CD – Child Development
CH – Child Health
CM – Child Mortality
CP – Child Protection
ED – Education
HA – HIV/AIDS
HH – Household
EN – Environment
NU – Nutrition
RH – Reproductive Health

ACKNOWLEDGEMENTS

Based on international methodologies, the Multiple Indicator Cluster Survey (MICS3) provides an excellent chance to reveal a comprehensive picture of the lives of children and women in Kyrgyzstan, and to compare it with the situation in more than 70 countries also implementing MICS3. The survey supplements government statistical data on some issues, thus drawing the attention of the Government and the public to new aspects. The survey results will provide one of the most important sources of alternative information to help monitor the progress of achieving the Millennium Development Goals (MDGs).

The survey could not have been carried out without the dedication and professionalism of hundreds of people. However, we would like to express special acknowledgement to the interviewers, field editors, and drivers who completed fieldwork assignments in a timely and effective manner despite difficult winter conditions. The professionalism of the data entry specialists and statistics analysts greatly contributed to the strong foundation of high quality survey data upon which this report was built. We wish to especially extend our gratitude to the management and staff of the National Statistical Committee of the Kyrgyz Republic: Prof. Zarylbek Kudabaev and team, who initiated the preparation and launch of the survey, as well as to Mr. Orozmat Abdykalykov and team, who supported the execution of the survey. We also greatly appreciate the contributions of the specialists and experts from the Ministry of Health, the Ministry of Labour and Social Protection, the Ministry of Education, the National Statistical Committee, the representative office of the World Health Organization (WHO), the United States Agency for International Development (USAID), non-governmental organizations such as ZDRAV-Plus and Project Hope. All participated in the adaptation of questionnaires, the monitoring of fieldwork and the analysis of survey data. Special thanks also goes to Mr. Fritz van der Haar from the Center for Disease Control and Prevention (CDC, Atlanta), who has generously written several sections of the report related to the nutrition and malnutrition of children, salt iodization and Vitamin A supplementation.

Finally, we acknowledge the UNICEF staff all over the world, who diligently executed the overall management of this global survey, developed questionnaire, data entry and indications estimation software, conducted training seminars, and supplied vital equipment and materials.

SUMMARY OF FINDINGS AND CONCLUSIONS

Household Population

- The total sample volume of the survey consisted of 5,200 households where nearly 25,000 persons reside. Because the sample size by strata is approximately equal, sample weights were used for reporting national level results. Females accounted for 52.9% of this population, where a majority of females (more than 61%) was less than 30 years old. Out of the surveyed women, 55% fell into the reproductive age range of 15-49 years.
- The number of children under 15 years of age accounted for 32.7% of the population, while 12% of the population was 0-4 years. Moreover, 81.5% of the households surveyed have children less than 18 years of age.
- The percentage of households with 4-5 members accounted for 40.3% of the population, while the next largest segment of households (2-3 members) measured 23.6%. Households located in rural areas accounted for 56.8% of all households interviewed.
- Among women interviewed, 61.5% identified themselves ethnically as Kyrgyz, with 18.8% as Uzbek and 13.5% as Russian.
- In terms of the educational attainment of women in the reproductive age range (15-49), nearly 62.8% of these women completed the compulsory level (8 years), while 23.9% attained a high (university) level and 13.3% failed to complete the compulsory level of education
- In terms of household wealth, near parity existed among the number of children in each quintile group, where the 22.7% of children who lived in households in the richest quintile represented was the largest percentage among all quintiles. And while 17.4% of women of childbearing age lived in households in the poorest quintile, 25% lived in households in the richest quintile.

Infant, Child and Maternal Mortality

- Infant, child and maternal mortality rates remain relatively high in Kyrgyzstan. The mortality rate for children under five year of age was 44 per 1000 live births while the infant mortality rate was 38 per 1000 live births. It can be noticed that infant and child mortality rates are steadily decreasing with time. The maternal mortality rate was estimated to be 104 deaths per 100,000 live births, showing no sign of improvement over the previous 10-15 years.

Nutrition

- The prevalence of stunting as a result of malnourishment stands at 13.7%, where 3.7% of children are severely stunted. Not surprisingly, children from the two poorest quintile groups are more stunted (first – 18.8%; second – 14.9%) than the richest (10.2%). Stunting is most prevalent in the Talas, Batken and Issyk-kul regions.
- While nearly 90% of mothers start breast-feeding their newborn within one day of birth, less than one third of children are exclusively breastfed at six months of age, which is considered far less than optimal. Only 37.5% of infants are being appropriately fed throughout the first year of life.
- Three out of four households consume adequately iodised salt, however salt was more likely to be adequately iodised in urban (84.5%) than rural households (69.8%).
- Twice yearly the Kyrgyz Ministry of Health carries out mass distribution of high-dose vitamin A capsules for children aged 6-59 months, in addition to vitamin A supplements (VAS) that are distributed to new mothers to boost their levels during breastfeeding. Two out of three eligible children under five years old benefited form the national VAS campaign.

Child Health

- Diarrhea is one of the leading causes of illness for children under five. Children in rural areas had episodes of diarrhea 1.5 times more often than children in urban areas. The highest frequency of cases occurred in children between 6-23 months of age. Oral Rehydration Therapy (ORT) was not given to 79.6% of children with diarrhea.
- Mothers who had children with pneumonia within two weeks prior to the survey brought their children to receive antibiotic treatment at relevant medical clinics in 44.5% of cases. Mothers of children aged 0-59 months living in urban areas (50.3%) were more informed about pneumonia than mothers in rural areas (35.4%). Nearly 29% of mothers in the poorest quintiles knew of at least two symptoms of pneumonia, while almost 56% of mothers in the richest quintile knew of these.

Water and Sanitation

- Overall, 88.2% of the population has access to improved drinking water sources, where 98.7% have access in urban areas and 81.8% in rural areas. Most water is accessed by water pipelines (52.8%), which run into the dwelling or onto the property, while 27.1% use public water taps. The largest level of surface water consumption takes place in Batken (28.5%), where risk of exposure to infectious intestinal diseases is greatly increased.
- Nearly 96% of the population lives in households that use sanitary-hygienic facilities, where little difference exists between urban and rural populations. Only 73.2% of households in Batken have access to such facilities. In Bishkek, about 64% of households connected to the sewer system.

Reproductive Health

- Of the 4,195 women interviewed for this survey, only 47.8% of married women used contraception, where the IUD is the most popular with about half of the women and condom use, the second most popular method, was favored by just 5.8% of married women. The use of contraception in northern regions is significantly higher than in the south. Condoms and oral contraception use is most prevalent in the two richest quintile groups.
- Of those who gave birth within the last two years (1,209 women), 97.5% received antenatal care and 96.9% of overall births took place in hospitals. The percentage of women who were assisted during delivery by doctor is nearly 76.3%, while in the poorest and richest quintile groups, respectively, 60.1% and 96.3% of women had received such care.

Early Childhood Development

- Parental participation in early childhood development is crucial. In terms of wealth and parental participation, while 64% of preschool age children in the poorest quintile participated in four or more types of child development activities with their parents, about 84% of children in the richest quintile were exposed to the same. Along ethnic lines, Russian children participated the most (84%), while Kyrgyz (73.5%) and Uzbek parents (53.6%) ranked below them.
- Approximately 81% urban households have three or more children's books, while in rural areas just 72.9% of households have.

Education

- In terms of preschool education, nearly 19% of children aged 36-59 months attend preschool. Significant urban/rural and regional differences persist in this regard. One third of urban children (41.9% in Bishkek) attend preschool, while about 10% of children in rural areas (6.6% in Batken) do so. Mothers with less than a compulsory education do not generally

send their children to preschool, while 42.5% of mothers with a high education level send their kids to preschool.

- Out of the total number of children of primary school entrance age (6-7 years), only 70.4% of such children are attending first grade. Just 66.4% of such males attended the first form, while 75.5% of females do. The primary school net attendance ratio throughout the country is 92.1%, comprising 92.9% in urban areas and 91.7% in rural areas.
- Adult literacy rates in Kyrgyzstan among groups divided by urban/rural, region and ethnicity are all at or very close to 100%.

Child Protection

- The vast majority of children (94.2%) under five years of age have been registered, yet only 89.8% of children are registered before their first birthday. Reasons for failed registration of these children include unregistered marriage of the birth parents (32.4%), as well as the distance to the registry office (7.8%) and the costs of registering (3.8%).
- Of all children aged 5-14 years, 3.6 % of children were in involved in either economic or domestic work, while 1.5% worked outside their households and just 0.1% was paid for the labor performed.
- While 51.4% of children aged 3-14 were subjected to one form of psychological or physical punishment by mother/caretaker or other household members, 2.6% were subjected to severe physical punishment. However, just 7.7% of mothers/caretakers believed imposing physical punishment was a correct way to raise a child.
- The minimal age of marriage in the Republic is 18, yet 12.2% of women got married before they reached 18. Daughters are given away in early marriage more often in poorest households (16.5%) than in the richest (9.1%).
- Though polygyny had been effectively eliminated from the Republic by the 1930s, today 1.7% of women of reproductive age claim to be in a polygamous marriage. The largest percentage of polygamous marriages was registered among the richest quintile (nearly 2%).
- Roughly 38% of women of reproductive age surveyed said they supported violence towards women if they either left home without husband's permission (20.5%), providing inadequate care for the children (22.4%), and disagreeing with the husband (25.6%).

HIV/AIDS, Sexual Behaviour

- Further focus is needed on HIV/AIDS awareness, especially among young women in the southern regions, where awareness about prevention methods is dangerously low. Among 7,043 women of reproductive age interviewed, awareness of the disease is highest among those from Bishkek (99%) and the northern regions (approximately 96%), and lowest among women in the south (Batken – 81.8%; Osh – 86.4%; Jalalabad – 88.5%). Awareness of HIV/AIDS prevention is lowest also in the south, where 41.0% of women from Batken are not aware of any methods of prevention (Osh – 29.5%; Jalalabad – 19.1%).
- Awareness of at least two methods of prevention ranged regionally from 71.4% in Bishkek and 81.6% in Talas to just about 35% in Batken (and 38% in Osh). While 63.6% of women between 30-34 years of age know of these methods, just 50% of 15-19 year olds are aware. Just 59.0% of women knew where they could get tested for HIV infection.
- The overall percentage of interviewed women aged 20-24 who had sexual intercourse before age 18 was just 10.2% (7.2% – urban; 12.9% – rural). The percentage of women aged 15-24 who had sexual contacts with more than one partner in the previous 12 months, considered the highest risk group, was 0.7%.
- Nearly 30% of women aged 15-24 had sexual contact during the preceding 12 months. Of these, 7.4% had contact with an irregular partner, and condom use was reported in 56% of these cases.

I. INTRODUCTION

Background

The Multiple Indicator Cluster Survey (MICS) was conducted in the Kyrgyz Republic in 2006 by the National Statistical Committee of the Kyrgyz Republic with the financial and methodological support of the United Nations Children's Fund (UNICEF). The survey was undertaken to monitor progress in reaching the goals and targets stipulated in the Millennium Declaration, adopted by all 191 United Nations Member States in September 2000, and the Plan of Action for a World Fit for Children, adopted by 189 Member States at the United Nations General Assembly Special Session on Children in May 2002.

In signing these international documents, 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 (see Table 1).

Table 1.
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 contained therein:

"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."

Since beginning its work in the Kyrgyz Republic in 1994, UNICEF has paid special attention to children's health and nutrition, children living in poverty, children deprived from parental care and other related issues.

UNICEF, in cooperation with other international donor organizations, provides technical assistance to the Government for development of the state program of public health reforms, known as "MANAS TAALIMI 2006-2010." UNICEF also supports the program of Integrated Management of Childhood Illnesses (IMCI), including Care for Development Programme. Half of all maternity hospitals, maternity departments of regional hospitals, and polyclinics in the republic were certified as "baby-friendly." In contrast to previous practices a newborn is now kept with the mother from the first hours of its life so the mother can breastfeed and provide her tenderness and love.

With support from UNICEF, the Kyrgyz Parliament has developed and approved the Code for Children of the Kyrgyz Republic. As a result, there is a legal mandate for the establishment of minimum standards in protecting children's rights. UNICEF supports removing children from institutions and returning them to family or foster environments suited to the best interests of the children. For this purpose, UNICEF supported the government in creating social services designed to provide assistance to families in danger of losing custody of their children.

With the participation of UNICEF and other partners under the Global Alliance of Vaccines and Immunization (GAVI), poliomyelitis was eliminated in Kyrgyzstan, and the number of measles and rubella cases was reduced. UNICEF and GAVI, along with other donor agencies also helped to distribute significant amounts of vaccines and syringes, establish the necessary technical conditions for vaccine storage, and conduct trainings for medical personnel. It's also planned to reduce vitamin A and iron deficiencies among children by one third by 2015 from 2000 levels, and to completely eliminate iodine deficiencies by the end of 2007.

Improvement of primary school education quality is carried out jointly with governmental and non-governmental organizations and donors. These efforts include upgrading school programs and projects designed to increase local community involvement in the educational process.

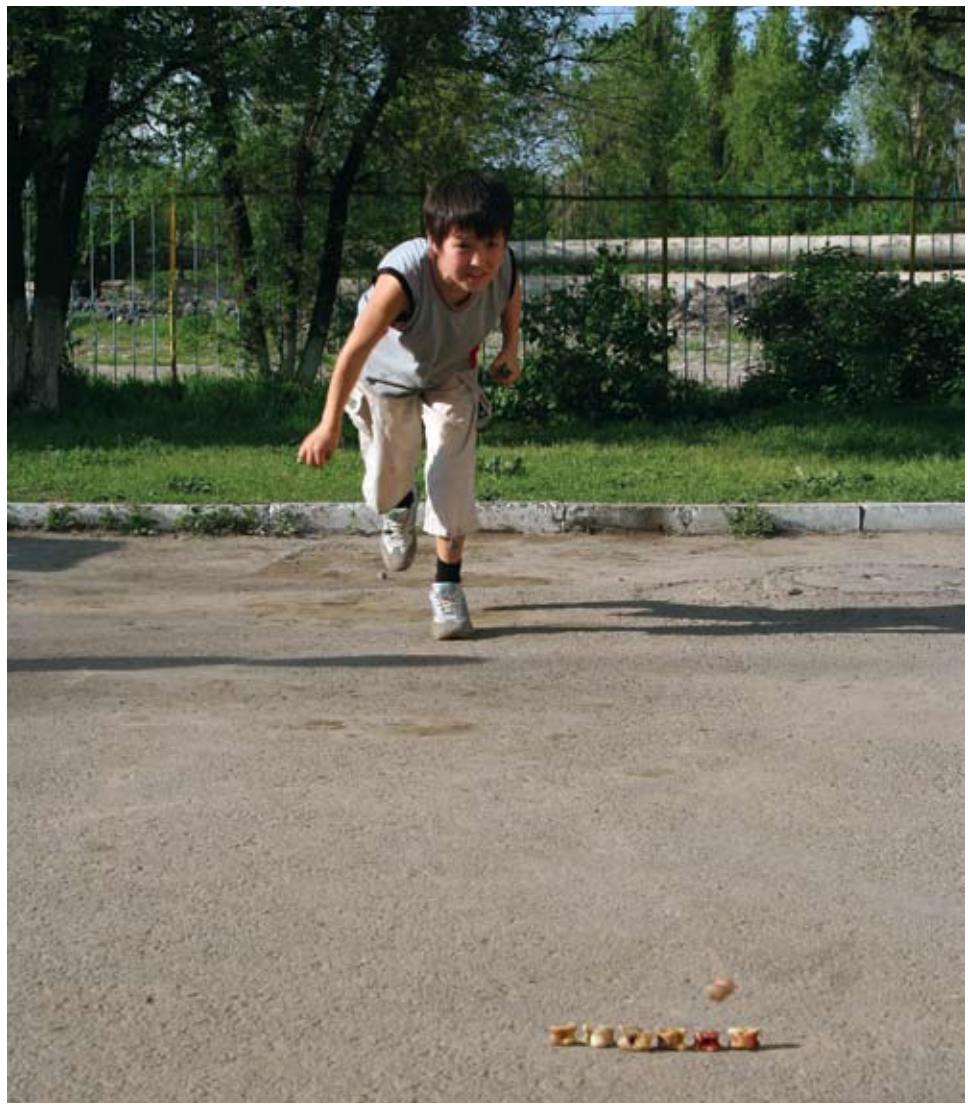
MICS3 survey was designed to evaluate the current status of various development indicators and to define priorities for future action. This survey report reflects the final results on all considered topics and indicators.

Survey Objectives

The main objectives of the Multiple Indicator Cluster Survey consist of the following:

- to provide updated information for assessing the situation of children and women in the Kyrgyz Republic;
- to collect data necessary for monitoring progress towards the Millennium Development Goals and the goals of Plan of Action for a World Fit for Children (WFFC), as a basis for future actions;
- to contribute to the improvement of data and monitoring systems in the Kyrgyz Republic and to strengthen technical expertise in the design, implementation and analysis of such systems.

II. SAMPLE AND SURVEY METHODOLOGY

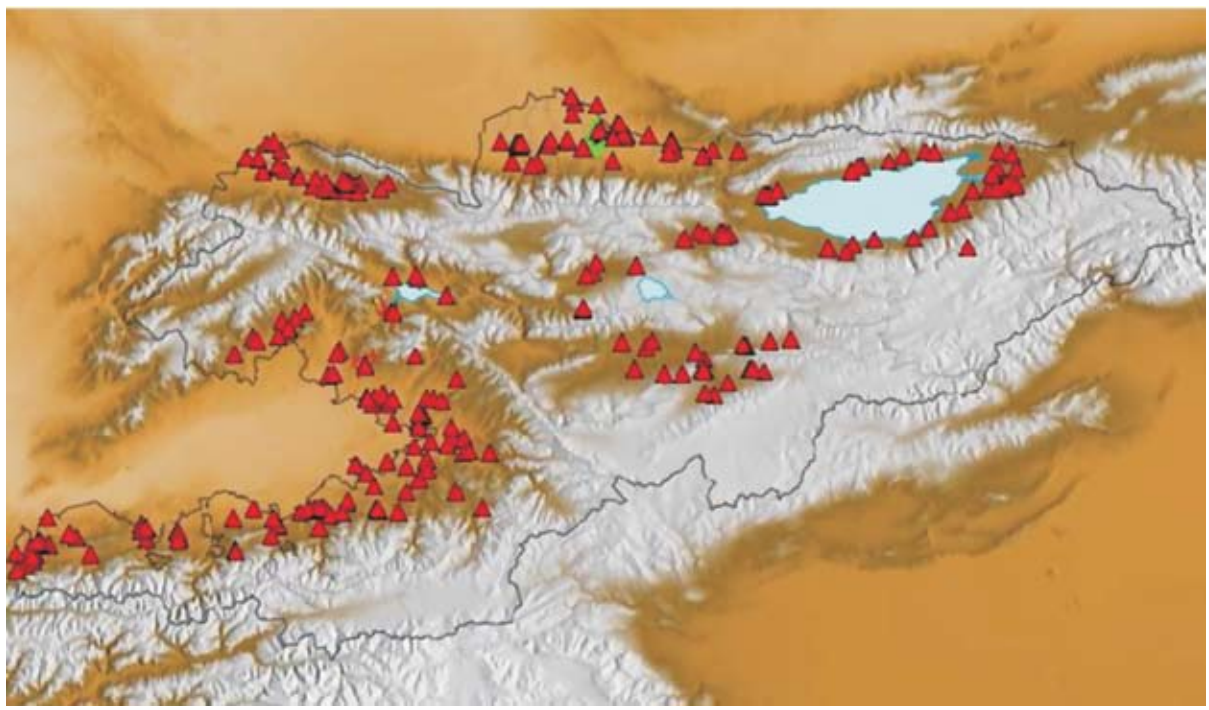


Sample Design

The sample for the Kyrgyz Multiple Indicator Cluster Survey was designed to provide representative estimates of MICS indicators at the national level, in urban and rural areas, as well as for eight regions: Batken, Jalalabad, Issyk Kul, Naryn, Osh, Talas, Chui regions, and Bishkek. The urban and rural areas of each region were used as strata, where the sample design was made in two stages.

Four hundred clusters, or Census-1999 Enumeration Areas (CEA), were selected with a probability proportional to the population size in the first stage. For rural areas, populated settlements were used as Primary Sampling Units (PSUs). For urban areas, internal territorial-administrative units were used as PSUs. For each enumeration area, a household listing was updated and used as a sample framework for the second selection stage. Later, households with an equal probability were selected, according to the up-dated lists of addresses.

Figure SD: Spatial distribution of MICS3 clusters



In defining the cluster size, a high rate of intra-cluster correlation of different indicators was taken into account. This required clusters of small size, as well as consideration of the effective use of interviewers' time, requiring a minimization of movement from one settlement to another. As a compromise between data accuracy and the efficient use of limited time and funding, a cluster size was determined to consist of 13 households.

Thus, a total sample volume consisted of 5,200 households. Given that a sample is self-weighting, and that sample size by strata is approximately equal, sample weights were used for reporting national level results.

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 Household Questionnaire included the following modules:

- Household listing
- Education
- Water and sanitation
- Household characteristics
- Child labour
- Child discipline
- Maternal mortality
- Consumption of iodized salt

The Questionnaire for Individual Women was administered to all women aged 15-49 years living in the households, and included the following modules:

- Child mortality
- Maternal and newborn health
- Marriage/union
- Contraception
- Attitude toward domestic violence
- Sexual behavior
- HIV/AIDS knowledge

The Questionnaire for Children Under Five was administered to mothers or caretakers of children under 5 years of age[1] living in the households. Normally, the questionnaire was administered to mothers of under-5 children; in cases when the mother was not listed in the household roster, a primary caretaker for the child was identified and interviewed. The questionnaire included the following modules:

- Birth registration and early learning
- Child development
- Vitamin A
- Breastfeeding
- Treatment of illness and care
- Anthropometric data

The questionnaires are based on the MICS3 model questionnaire. The English version of questionnaires was translated into Kyrgyz and Russian languages and was pre-tested in August 2005. Based on the results of the pre-test, modifications were made to the wording and translation of the questionnaires. A copy of the Kyrgyz MICS questionnaires is provided in Appendix F.

In addition to the administration of questionnaires, fieldwork teams tested the salt used for cooking in the households for iodine content, and 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.

[1] The terms "children under 5", "children age 0-4 years", and "children aged 0-59 months" are used interchangeably in this report.

Training and Fieldwork

The interviewers have been adequately trained to collect data and apply questions. Training included lectures on interviewing techniques and the contents of the questionnaires, and mock interviews between trainees to gain practice in asking questions. Training was conducted in two rounds: for northern regions from November 23-27, 2005; for southern regions from December 8-11, 2005.

The data were collected by 25 teams, each comprised of three interviewers, one driver and one editor. The editor was responsible for ensuring data quality and use of proper interview techniques, establishing initial contact with households and remaining in constant connection with a regional supervisor.

The fieldwork started in the northern regions on November 30, 2005, and was completed on December 30, 2005. The data collection in the southern regions was conducted from December 18, 2005 to February 3, 2006.

Data Processing

The data processing was centralized. The field editors checked, cleared and packed the questionnaires by clusters, then questionnaires were delivered to the central office of the National Statistical Committee for further processing. Each incoming pack was registered and simultaneously the database was created.

Data were entered on twenty computers using CSPro software. In order to ensure quality control, all questionnaires were double entered and internal consistency checks were performed. Procedures and standard programs developed under the global MICS3 project and adapted to the Kyrgyz questionnaire were used throughout. Data processing began simultaneously with data collection in December 2005, and was finished in spring of 2006. Data were analysed using the Statistical Package for Social Sciences (SPSS) software program, 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

During the course of the survey, all 400 PSUs selected at the first sampling stage were visited. A list of household addresses was made for those PSUs. Out of 5,200 sample households, 5,199 were found to be occupied (Table HH.1). Out of these populated households, 5,179 were successfully interviewed, yielding a household response rate of 99.6%. In all regions except for Naryn, the interviewers managed to carry out interviews in all selected households.

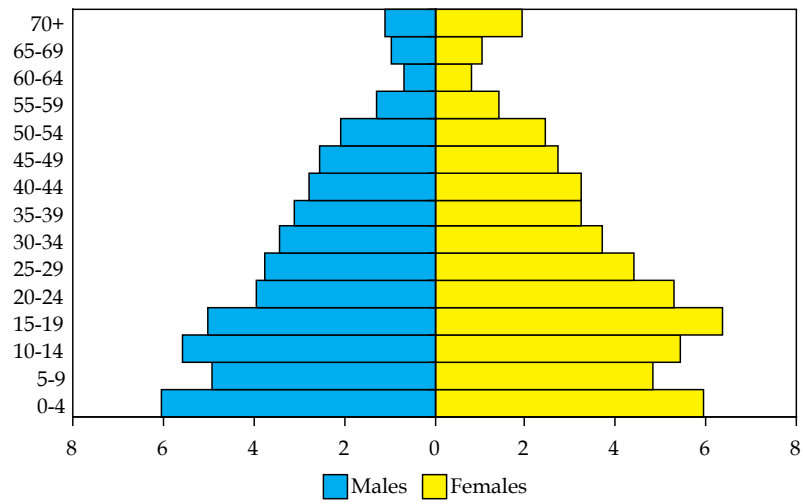
In the interviewed households 7,043 women (aged 15-49) were identified. Of these women, 6,973 were successfully interviewed, which corresponds to a response rate of 99.0%. Additionally, the household sample accounted for 3,000children under five years of age, and 2,987 questionnaires were completed on these, for a response rate of 99.6.

Characteristics of Households

There were approximately 25,000 persons residing in the households included in the sample. Of these, 52.9% were females. The number of respondents under 15 years old was 32.7%, those in the age group of 15-64 years was 62.3%, while 5% of respondents were 65 years and older.

The age structure of the population who was interviewed is described in Table HH.2. Thus, almost 40% represent the age group 0-17, while 12% were children from 0-4 years of age. The Figure HH.1 shows the pyramid of the population of the country by age and sex.

Figure HH.1: Population of households surveyed, by age and sex, Kyrgyz Republic, 2006 (%).



Households in the Kyrgyz Republic differ by size and geographical location. The size of the households surveyed ranged between 1 and 21 persons. The households with 4-5 members accounted for 40.3%, 2-3 and 6-7 person households accounted for 23.6% each, and 9.5% of households had 8 or more members. The households located in rural areas accounted for 56.8% of all those interviewed.

Almost 75% households are headed by males. The state language Kyrgyz is the mother tongue for 58.7% of the households heads (Table HH.3).

The population of the Kyrgyz Republic is young, and its considerable proportion is represented by people of working age, as well as children. This is confirmed by the survey results. Thus, 81.5% of interviewed households have children under 18, 43.9% have children under five, and women aged 15-49 reside in 89.4% of the households.

Characteristics of Respondents

Tables HH.4 and HH.5 provide information on the background characteristics of female respondents 15-49 years of age and of children under age 5. In addition to providing useful information on the background characteristics of women and children, the tables are also intended to show the numbers of observations in each background category. These categories are used in the subsequent tabulations of this report.

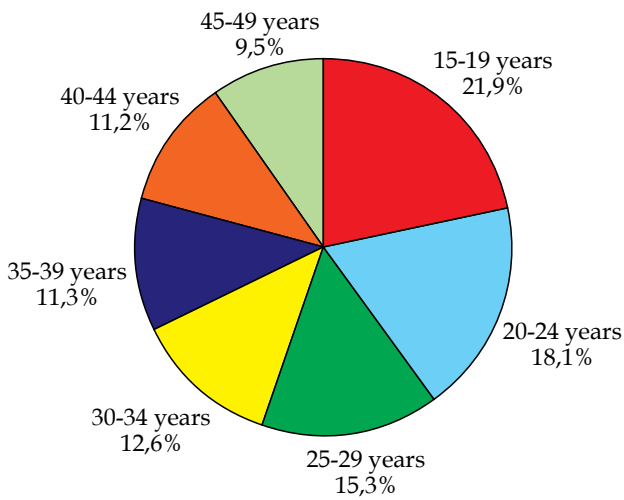
Table HH.4 provides background characteristics of female respondents 15-49 years of age. The table includes information on the distribution of women according to region, urban-rural areas, age, marital status, motherhood status, education[1], wealth index quintiles[2], and ethnicity.

When the overall number of households included in the sample is taken into account, the women numbered 7,043. Of these, 6,973 were successfully interviewed; more than half of them (56.6%) live in rural areas.

As for the distribution by ethnic groups, the majority of interviewed women were Kyrgyz (61.5%), followed by Uzbek (18.8%) and Russian (13.5%). Among interviewed women, 59.6% of respondents were married, with 64.3% of them being mothers. A majority of female respondents (more than 55%) fell into the under-30 age group (Figure HH.2).

One of the important development indicators is the level of education. The survey results show that the educational level of women in the age group 15-49 years is considerably high. Thus, 62.8% of interviewed women had attained a compulsory level of education (eight years), while 23.9% attained a high (university) level of education and only 13.3% of female respondents had an educational level below the compulsory level.

Figure HH.2: Distribution of childbearing age women by five-year age groups, Kyrgyz Republic, 2006.



As analysis has shown, with the increase of household prosperity, the proportion of women residing in them is increasing too. Thus, 17.4% of childbearing age women lived in the poorest quintile of households, while 25% of childbearing age women lived in the richest quintile.

[1] Unless otherwise stated, "education" refers to educational level attended by the respondent throughout this report when it is used as a background variable.

[2] Principal components analysis was performed by using information on the ownership of household goods and amenities (assets) to assign weights to each household asset, and obtain wealth scores for each household in the sample. Each household was then weighted by the number of household members, and the household population was divided into five groups of equal size, from the poorest quintile to the richest quintile, based on the wealth scores of households they were living in. The wealth index is assumed to capture the underlying long-term wealth through information on the household assets, and is intended to produce a ranking of households by wealth, from poorest to richest. The wealth index does not provide information on absolute poverty, current income or expenditure levels, and the wealth scores calculated are applicable for only the particular data set they are based on. Further information on the construction of the wealth index can be found in Rutstein and Johnson, 2004, and Filmer and Pritchett, 2001

Some background characteristics of children under 5 are presented in Table HH.5. These include distribution of children by several attributes: sex, region and area of residence, age in months, mother's or caretaker's education, wealth, and ethnicity.

The three thousand children in the 0-4 years group living in the interviewed households were almost equally represented by sex. The proportion of children living in rural areas was higher than those living in the urban areas by 19.2%.

Among all children surveyed, the proportion of children in the age groups 12-23 months, 24-35 months, 36-47 months and 48-59 months ranged between 18% and 22%. Children younger than 6 months old accounted for 10.9%.

The educational level of mothers (caretakers) as a whole correlates with the educational level of childbearing age women. A majority (69.1%) of mothers (caretakers) surveyed attained compulsory education, while 23.8% of mothers attained a high (university) level of education. Only 7.1% of mothers had an educational level below compulsory.

An almost even distribution of children in the households (from 19% to 20%) was observed in each quintile group in accordance with the wealth index, except 22.7% of children resided in households in the richest quintile group.

IV. INFANT, CHILD AND MATERNAL MORTALITY

Infant, Child and Maternal Mortality

The International Convention on the Rights of the Child states that member states must take adequate measures to reduce infant and child mortality levels. The reduction of infant, child and maternal mortality is one of the key goals of the Millennium Development Goals and the Plan of Action of the International Conference on Population and Development (ICPD, Cairo, 1994). Their levels are one of the basic indicators that characterize the health of a country's population.

Monitoring progress towards this goal is an important but difficult objective. Measuring childhood mortality may seem easy, but attempts using direct questions, such as "Has anyone in this household died in the last year?" give inaccurate results. Using direct measures of child mortality from birth histories is time consuming, more expensive, and requires greater attention to training and supervision. Alternatively, indirect methods developed to measure child mortality produce robust estimates that are comparable with the ones obtained from other sources. Indirect methods minimize the pitfalls of memory lapses, inexact or misinterpreted definitions, and poor interviewing technique.

Identification of the infant/child mortality level in the Kyrgyz Republic is complicated by the fact that until 2004, the live/stillbirth criteria established during the Soviet era was in use. This led to the minimization of real infant/child mortality rates. From 2004, the Kyrgyz Republic began to employ the live birth definition recommended by the World Health Organization (WHO). A comparison of classifications and pregnancy terminations in the Kyrgyz Republic prior to and after the introduction of International Live Birth Definition (ILBD) is shown below:

					Infant, born after the 28th week of pregnancy with body weight >1000 g and height >35 cm			
	No signs of life	No breathing, but there are other signs of life (palpitation, traction, pulsation of umbilical cord)	Died within the first 7 days of life	Survived within the first 7 days of life	No signs of life	No breathing, but there are other signs of life (palpitation, traction, pulsation of umbilical cord)	Died within first 7 days of life	Survived within first 7 days of life
Prior transition to WHO criteria	Miscarriage			Live birth	Intra-uterine death		Live birth	
After transition to WHO criteria	Intra-uterine death	Live birth			Intra-uterine death	Live birth		

Thus, according to the Soviet methods, newborns without breathing were qualified as "stillbirths." Infants born before 28 weeks of intra-uterine gestation with a weight of less than 1,000 gr. and a height less than 35 cm, who died within the first seven days, were qualified as "miscarriages." When women are interviewed during the household survey about a child's death, they most likely use the new definition of child mortality. It is worth noting that women who have been interviewed were using an empirical definition of "live birth" which was similar to the ILBD.

Infant mortality: the probability of dying before the first birthday. The infant mortality rate is the number of infants who die before their first birthday per 1,000 live births.

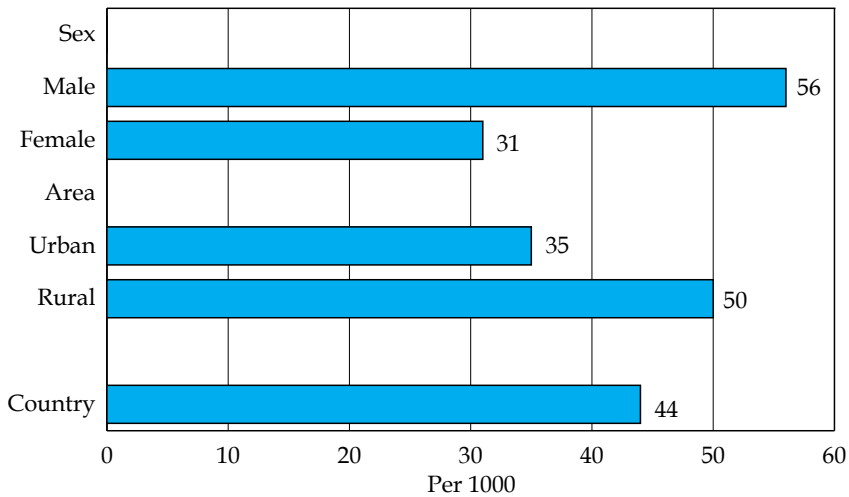
Child mortality: the probability of dying during the period between the birth and the fifth birthday. The child mortality rate is the number of deaths among children under five per 1,000 live births.

In MICS surveys, infant and under five mortality rates are calculated based on an indirect estimation technique known as the Brass method (United Nations, 1983; 1990a; 1990b). The data used in the

estimation are: the mean number of children ever born for five year age groups of women from age 15 to 49, and the proportion of these children who are dead, also for five-year age groups of women. The technique converts these data into probabilities of dying by taking into account both the mortality risks to which children are exposed and their length of exposure to the risk of dying, assuming a particular model age pattern of mortality.

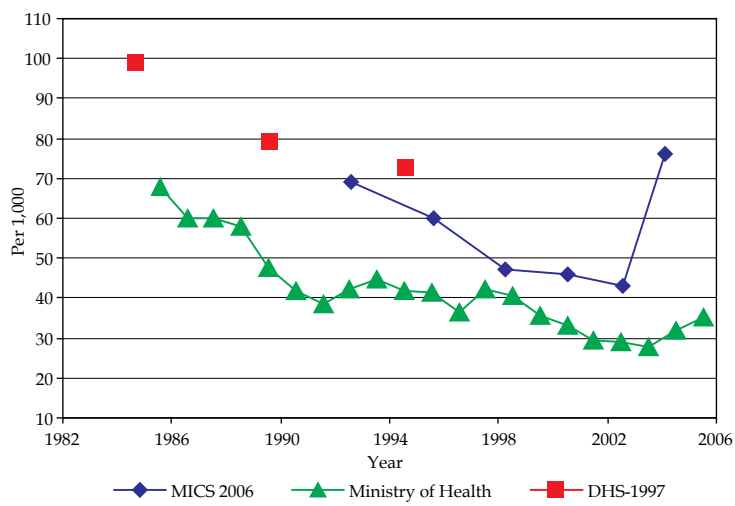
According to the survey data (see Table CM.1), infant mortality in the Kyrgyz Republic is 38, while child mortality is 44 (Figure CM.1). Male mortality both before the first birthday and under five years of age is 1.8 times higher than the female mortality, which is significantly determined by biological factors. In rural areas where the living standard is lower, the child mortality rate is 1.4 times more than in urban areas.

Figure CM.1: Under-5 mortality rates by background characteristics, Kyrgyz Republic, 2006



A comparison with estimates of the infant and child mortality, obtained in the course of the Demographic and Health Survey of 1997 (Table CM.A; Figure CM.2), shows that there was a steady reduction of these indicators since the 1980s. For example, infant mortality rate has appeared 1.9 times less than DHS-97 figure while under five mortality has decreased by 1.8 times. (Figure CM.2).

Figure CM.2: Trend in under-5 mortality rates, Kyrgyz Republic, 2006



Maternal mortality: According to the ILBD definition, maternal mortality is defined as a woman's death caused by pregnancy complications (irrespective of its duration and site), which occurs during the pregnancy period or during the 42 days after its termination. Thus, the rate of maternal mortality is defined by the number of women who die due to complications during the pregnancy, delivery or postpartum period per 100,000 live births.

The most common fatal complication is post-partum haemorrhage. Sepsis, complications of unsafe abortion, prolonged or obstructed labour and the hypertensive disorders of pregnancy, especially eclampsia, claim further lives. These complications, which can occur at any time during pregnancy and childbirth without forewarning, require prompt access to quality obstetric services equipped to provide lifesaving drugs, antibiotics and transfusions and to perform the caesarean sections and other surgical interventions that prevent deaths from obstructed labour, eclampsia and intractable haemorrhage.

The measurement of maternal mortality rate is a difficult task. Even countries with a developed statistical system often underestimate this rate because of incorrect use of the WHO/UNICEF/UNFPA classification of the causes of death. That is why indirect estimation techniques are often used for the indicator measurement.

The "sisterhood method" was applied in the survey for the measurement of the maternal mortality, as recommended by the UN and WHO. The method lies in recording the deaths of respondents' sisters during the pregnancy and deliveries. In contrast, using direct techniques in the application of the "sisterhood method" help estimate the probabilities of fertile age women deaths as a result of pregnancy and delivery. The method should be used with caution because of a high probability of estimation error.

According to the survey results (Table RH.6), the maternal mortality rate in the Kyrgyz Republic was 104 female deaths per 100,000 live births, which approximately corresponds to the estimations of international organizations (UNICEF, UNFPA, WHO) throughout the last 10-15 years. In contrast with infant and child mortality rates, the maternal mortality remains constant.

Thus, the infant, child and maternal mortality rates are relatively high in the Kyrgyz Republic. The infant and maternal mortalities are determined by a multitude of causes: economic, social, cultural, the situation of the public health system, the demographic structure and behavior and so on. If with regard to infant and child mortality there is a tendency to decrease, the maternal mortality rate remains constant.

It is well known that infant mortality is considered as one of the most sensitive indicators of the level of poverty in a given country or in a broader sense of the level of socio-economic and human development. Addressing the infant, child and maternal mortalities represent an urgent public affair matter and should be a priority on the agenda of public authorities.

V. NUTRITION

Nutritional Status

The nutritional status of children is a reflection of their overall health. When children consume an adequate diet, are not exposed to repeated illnesses, and are well cared for, they reach their growth potential and are considered well-nourished. Malnourished children are at higher risk of morbidity and mortality. Malnutrition during early childhood impacts on the impairment of mental development and learning ability later in life.

In a well-nourished population, there is a standard distribution of height and weight for children under the age of five. The heights and weights of malnourished children are lower than what the expected average of well-nourished children should be at the same age. Therefore, malnourishment in a population can be gauged by comparing the average heights and weights of these children to a reference distribution of children of the same age from a well-nourished, healthy population.

The reference population used in this report is the WHO/CDC/NCHS growth reference, which is recommended for use by UNICEF and the WHO. Each of the three nutritional status indicators can be expressed in Z-scores, or standard deviation units (SD), which show how the children surveyed differ from the mean of this reference. In the chosen reference population, less than 2.3 percent of children have nutritional status indicator scoring one SD unit below the mean score. Only 0.14 percent of children have nutritional status indicators scoring two SD units below the mean.

Weight for age is a measure of both acute and chronic hypotrophy. Children whose weight is more than 2SD units below the average weight of children of the same age in the reference population are considered moderately or severely underweight, while those whose weight for their age is more than 2SD units below the mean are classified as severely underweight. Measurement for the weight of infants and young children is a time-tested method in strategies to prevent child hypotrophy.

Height for age is a measure of linear growth, or stature. Children whose height is more than 2SD units below the mean height are considered short and are classified as stunted, while those whose height for age is more than 3SD units below the mean are classified as severely stunted. Stunting in children usually reflects chronic hypotrophy as a result of inadequate food consumption over a long period or a result of chronic illness.

Finally, children whose **weight for height** is more then 2SD units below the mean weight for height of children in the reference population are classified as wasted (hypotrophic), while those whose weight for height is more than 3SD units below the average are considered severely wasted. Wasting or thinness, is usually the result of a recent illness or acute nutritional deficiency.

Overfeeding of children on the other hand mostly underlies over-nutrition or fatness, which can be measured also by their weight for height. Children whose weight for height is more than 2SD units above the mean weight of children of the same height in the reference population are considered obese. Especially at the low end of the weight for height distribution of 0-59 month old children, significant seasonal shifts may be observed in this indicator in association with fluctuations in food availability or disease prevalence.

The distribution of children classified into each of these categories, based on the anthropometric measurements that were taken during the survey, is presented in Table NU.1. Children who were not weighed and measured (approximately 2%) and those whose measurements are outside a plausible range (another 1.4%) are excluded from the consideration. Overall, the information in Table NU.1 reports data from 96.5 percent of the surveyed children.

Of the children aged 0-59 months, only 3.4% are underweight and 0.3 % are severely underweight. Almost one in seven children (13.7 %), however, is stunted and 3.7 % are severely stunted. Wasting occurs in 3.5 % of children and severe wasting in 0.4%. Obesity occurs in 5.8 % of children. Therefore, the most extensive nutritional problem in the Kyrgyz Republic among the under five year-old children is stunting, or retarded growth, which reflects chronic poor nutrition.

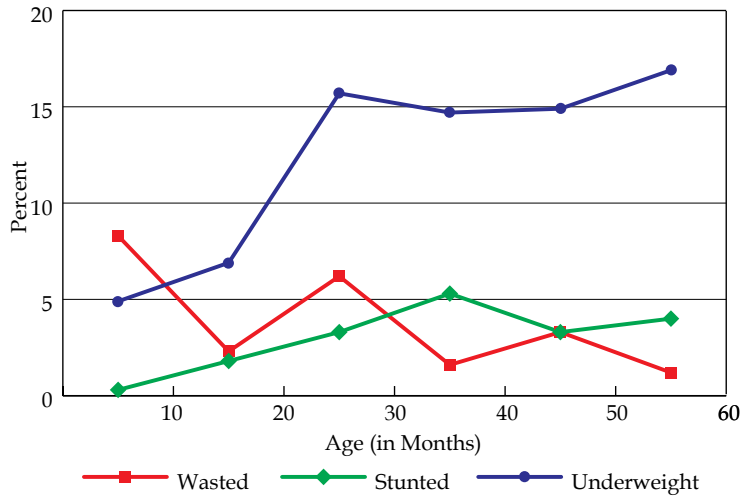
The nutritional indicators do not differ significantly by sex. In rural areas, however, more children are stunted (15.7%) and wasted (4.1%), which exceeds similar indicators in urban areas where 10.8% are stunted and 2.7% are wasted. Moreover, stunting and wasting is lower for children whose moth-

ers had completed higher education. At the same time, obesity occurred nearly twice as often in these children (8.9%) than in children of mothers who only completed a secondary education (5.2%).

These anthropometric indicators are correlated with the wealth index of the households, with children in the poorer households (first and second quintiles) being notably more stunted (18.8% and 14,9% respectively) than children in the remainder of households (10-12%). Also, more Kyrgyz children (15.6%) are stunted than children of Russian or Uzbek ethnicity.

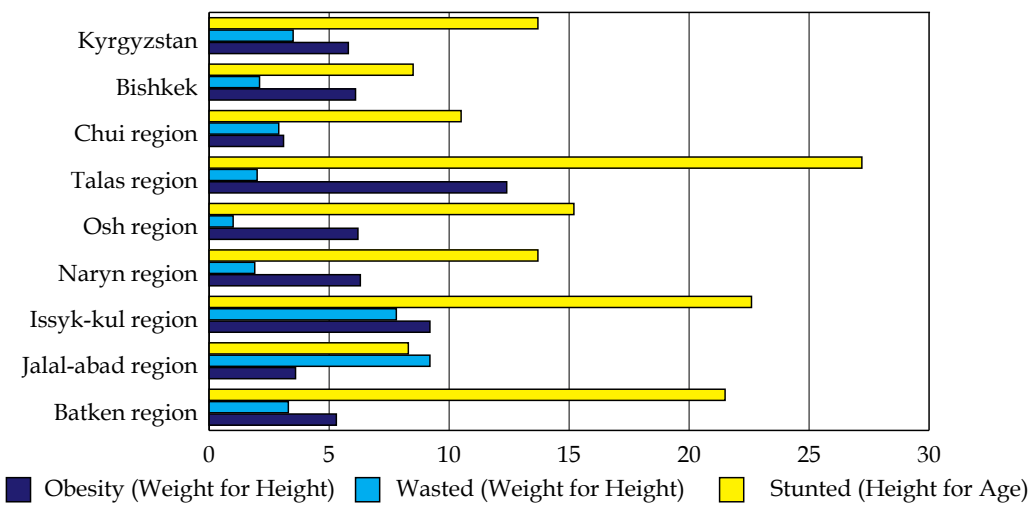
The age pattern of malnutrition (Figure NU.1) shows that childhood stunting increases to above 15 percent by 24 months of age. This is associated with a small but steady increase in wasting that extends into the third year of age. Although wasting is not of a critical level in the Kyrgyz Republic, it is higher for children below two years of age and significant in infants less than six months old (8.3%). As for children below six months, almost one percent is severely wasted, putting them at a sizably higher risk of suffering from malnutrition-related death.

Figure NU.1: Percentage of children under-5 who are undernourished, Kyrgyz Republic, 2006



As shown in Figure NU.2, substantial differences in nutritional indicators exist between regions. Stunting in children under 5 is the highest in the Talas, Issyk-kul and Batken regions (approximately 22-27%), the lowest (approximately 8-10%) in the regions of Jalalabad, Chui and Bishkek City, with the Naryn and Osh regions showing stunting levels between (14-15%). Wasting was the highest (8-9%) in Jalalabad and Issyk-kul regions. Interestingly, obesity in children is most notable in Issyk-kul and Talas regions – regions with the highest occurrence of stunting.

Figure NU.2: Regional distribution of malnutrition in 0-59 month old children, Kyrgyz Republic, 2006



Breastfeeding and Complementary Feeding

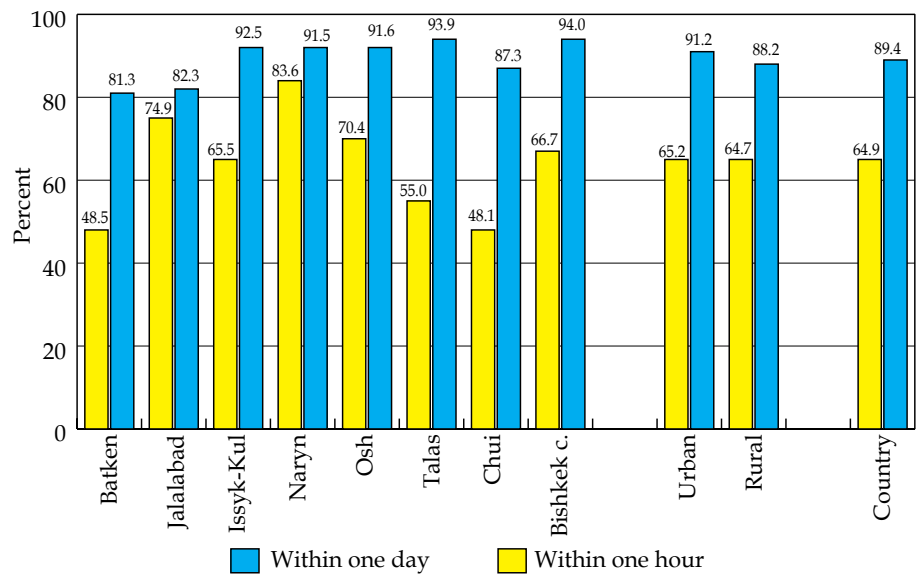
Breastfeeding for the first few years of a child's life is an economical and safe way to protect children from infection and provide an ideal source of nutrients. Lack of breastfeeding denies the infant an opportunity for early bonding and socialization. Mothers may stop breastfeeding too soon and turn to the use of infant formula, which can contribute to growth stunting and micronutrient malnutrition. Bottle feeding is unsafe in households where clean water is not readily available. At the age of six months, the nutritional needs of infants can no longer be satisfied by breastfeeding alone, that is why complementary feeding needs to start from this age onward to make sure that young children continue to grow properly and stay healthy. The World Fit for Children goal states that children should be exclusively breastfed for the first six months and that breastfeeding should continue along with safe, appropriate and adequate complementary feeding up to the second year and beyond.

In Table NU.3 breastfeeding status results are based on the reports from mothers/caretakers on 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. The table 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.

After giving birth, about 64.9% of mothers start breastfeeding their newborn within one hour and nearly 90% within one day (Table NU.2, Figure NU.3). However, only 31.5% of children up to six months of age are exclusively breastfed, a level much lower than considered optimal.

Mothers/caretaker responses indicate that exclusive breastfeeding during the first three months of life among male infants is less prevalent than among female infants (32.9% vs. 50.8% respectively). Moreover, exclusive breastfeeding for 0-5 month children is about 16 % less prevalent in urban areas than in rural areas, and about 11% among infants of higher educated mothers if compared with mothers having secondary education. More than two out of three young children are still breastfed by age 12-15 months, and 26 % continue breastfeeding until their second birthday.

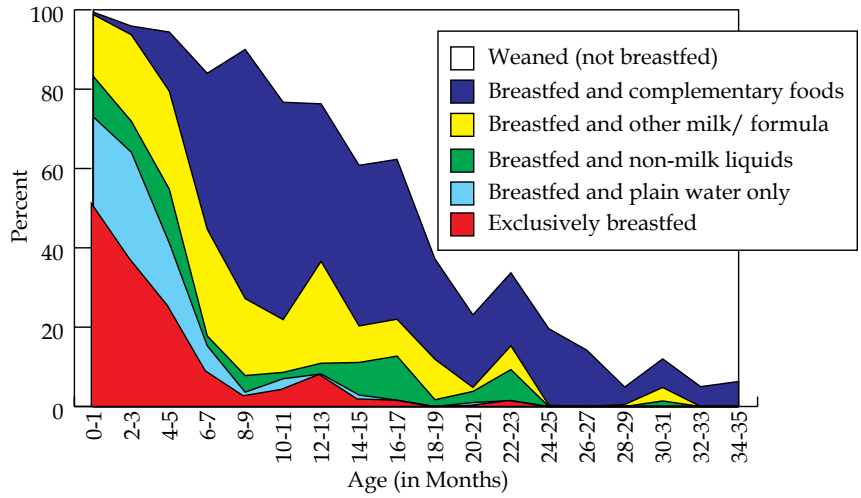
Figure NU.3: Percentage of mothers who started breastfeeding within one hour and within one day of birth, Kyrgyz Republic, 2006



After six months of age, half of the infants have started receiving solid or semi-solid foods in addition to continued breastfeeding, and after nine months, 38.8% of infants are breastfed along with complementary feeding at least three times daily (Table NU.4). The percentage of infants aged 6-11 months being breastfed and given complementary feeding in the recommended frequency is about 10% higher than infants aged 9-11 months.

Although 90% of newborns are being breastfed within one day after birth, exclusive breastfeeding into the 6th month of life is not practiced in two-thirds of infants. The occurrence of initial exclusive breastfeeding is lowest in male infants and in urban areas. The practice of complementary feeding during the second six months of life is closer to international recommendations in male infants and by mothers of higher education. Nevertheless, only 37.5% of infants are being appropriately fed throughout their first year of life, which leaves substantial room for improvements in infant and young child feeding practices. Continued breastfeeding up to two years and beyond is established among a significant proportion of young children in the Kyrgyz Republic (Figure NU.4), however, an encouraging finding of good child feeding practices.

Figure NU.4: Infant feeding patterns by age: Percent distribution of children aged under 3 years by feeding pattern by age group, Kyrgyz Republic, 2006



Consumption of Iodised Salt

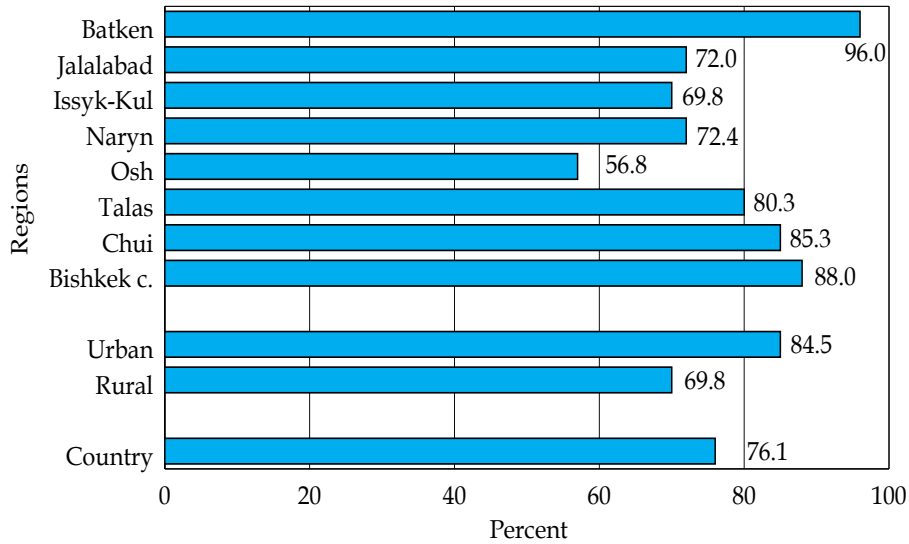
Illnesses, caused by iodine deficiency (iodine deficiency disorders or IDD) are a global concern. A diet low in iodine leads to diminished mental function and intellectual performance, thereby reducing the education performance of the future generation. Iodine deficiency during pregnancy can lead to increased miscarriages and stillbirths, and in extreme cases it causes endemic cretinism. Iodine deficiency can be prevented by the low-cost strategy of iodising all the salt for human consumption, including the salt used by food industry, and for feeding animals.

Table NU.5 shows the results of the household salt samples that were tested with a solution that detects iodine. The legislation of the Kyrgyz Republic mandates that all edible salt should be iodised with potassium iodate at 40±15mg iodine per kg, or parts per million (PPM) at the point of production and have at least 15ppm at the point of consumption.

Household salt was tested for iodine during the interviews of 5,160 households. The results of on-the-spot tests showed that three out of four households consume adequately iodised salt (15+ PPM). The salt was more likely to be adequately iodised in urban than in rural areas (84.5 and 69.8%, respectively) and in the richest households (89.9% in the fifth quintile and approximately 68.5% in the first three quintiles). In 23.6% of households, the tests showed inadequate iodine levels (<15 PPM). It might be worthy to notice that in 2.7% of households the test result showed zero level of iodization. Thus, the survey results show that practically all the salt supplied in the Kyrgyz Republic is being iodised to some extent, although the salt is iodised at a minimum level according to the national standard.

As Figure NU.5 shows, use of adequately iodized salt was lowest in the Osh (56.8%) and highest in the neighboring Batken region (96%). The notably higher occurrence of non-iodised and insufficiently iodised salt in the households in Osh region was related to an ownership dispute about the salt iodization plant in Osh town.

Figure NU.5: Percentage of households consuming adequately iodized salt, Kyrgyz Republic, 2006



Vitamin A supplements

Vitamin A shortage or deficiency impairs the immune system of infants and young children, increasing their chances of dying from common childhood illness. It can cause eye damage and blindness in children with severe or recurrent diarrhea, or in those with an inexpensive high fever from viral diseases such as measles. In a population with vitamin A deficiency, pregnant and lactating women are at a higher health risk. Yet, this deficiency can easily be prevented with an inexpensive high-dose supplements, food fortification, or otherwise improved dietary habits. Based on international guidelines endorsed by UNICEF and the WHO, twice yearly the Kyrgyz Ministry of Health carries out mass distribution of high-dose vitamin A capsules for children aged 6-59 months. In addition, vitamin A supplements (VAS) are supplied to mothers after giving birth to boost their vitamin A status during breastfeeding, which benefits the infants during their first six months of life.

In Tables NU.6 and NU.7 the status of vitamin A supplementation of children and post-partum mothers is based on the recollection by mothers/caretakers of the six-month period prior to interview. Responses about VAS receipts were obtained for 95.6% of the 6-59 month old children. Of the 6,973 women aged 15-49 years interviewed in the survey, 1,209 women who gave birth in the two years before the interview provided information about whether they received a high-dose VAS within eight weeks after giving birth.

Within the six months prior to the MICS, 47% of the 6-59 months children received VAS within 6 last months, and 18% of children never received it. In general, three out of four eligible children under five years old had benefited from the national vitamin A campaign.

The proportion of children who received a confirmed VAS within last six months were higher in urban areas (52% vs. 44%) than in rural areas. Children whose mothers had higher education received a confirmed VAS (58%) more often than those whose mothers had just a secondary education (43%).

The age pattern of confirmed vitamin A supplement receipts shows a modest decline after the age of two years. For children aged 6-11 months at the time of the survey, nearly 40% of their mothers reported that the infant had not received a supplement, but the responses for this age group are likely influenced by the timing of the last round of the national supplementation scheme.

Confirmed receipts of a VAS were highest for Russian children (58.7%), and lowest for Uzbek children (33.1%), while 49% of Kyrgyz children received a VAS. The differences in the number of non-response responses by ethnic group are insignificant.

Half of all women who gave birth in the two years prior to the survey confirmed that they received a VAS within eight weeks after giving birth. The differences between urban and rural areas, and between the respondent's educational levels are not significant.

Low Birth Weight

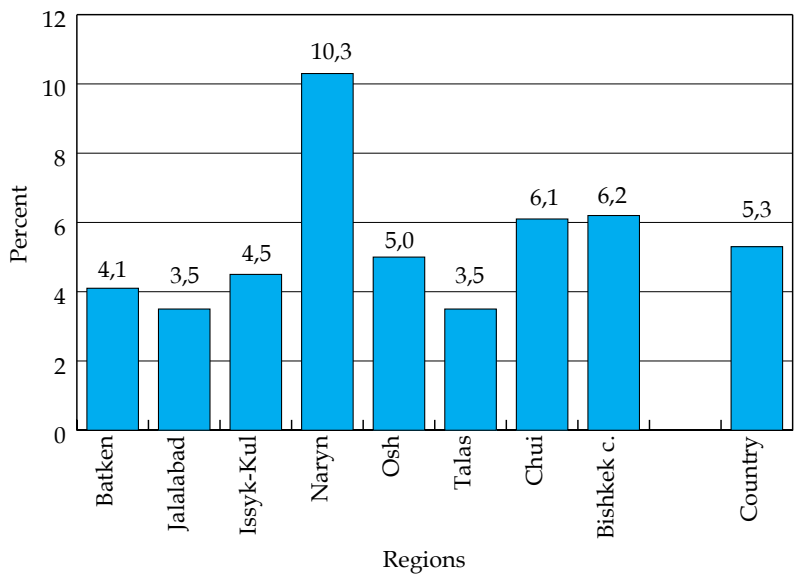
Weight at birth is a good indicator not only of a mother's health and nutritional status but also the newborn's chances for survival, growth, long-term health and psychosocial development. Low birth weight (less than 2,500 grams) carries a range of grave health risks for children. Babies who were undernourished 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; they are likely to remain undernourished, with reduced muscle strength, throughout their lives, and suffer a higher incidence of diabetes and heart disease in later life. Children born underweight also tend to have a lower IQ and cognitive disabilities, affecting their performance in school and their job opportunities as adults.

One of the major challenges in measuring the incidence of low birth weight is the fact that more than half of infants in the developing world are not weighed. In the past, most estimates of low birth weight for developing countries were based on data compiled from health facilities. However, these estimates are biased for most developing countries because the majority of newborns are not delivered in facilities, and those who are represent only a selected sample of all births.

Because many infants are not weighed at birth and those who are weighed may be a biased sample of all births, the reported birth weights usually cannot be used to estimate the prevalence of low birth weight among all children. Therefore, the percentage of births weighing below 2500 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 birth[1].

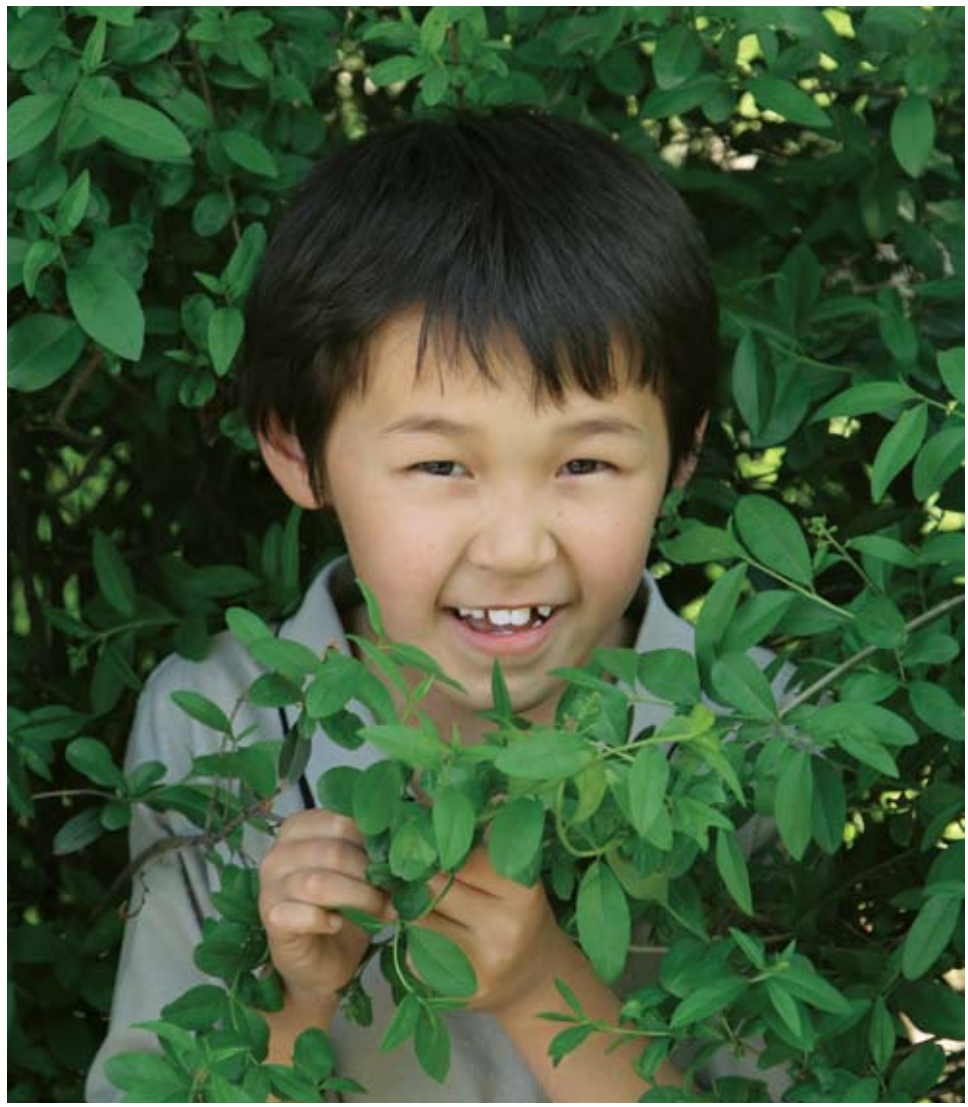
Overall, 96.9% of births were weighed at birth and approximately 5.3 percent of infants are estimated to weigh less than 2500 grams at birth (Table NU.8). There was significant variation by region with the highest rate in Naryn region (Figure NU.6). The percentage of low birth weight does not vary much by urban and rural areas or by mother's education.

Figure NU.6: Percentage of Infants Weighing Less Than 2500 Grams at Birth, Kyrgyz Republic, 2006



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

VI. CHILD HEALTH



Oral Rehydration Treatment of Children with Diarrhea

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:

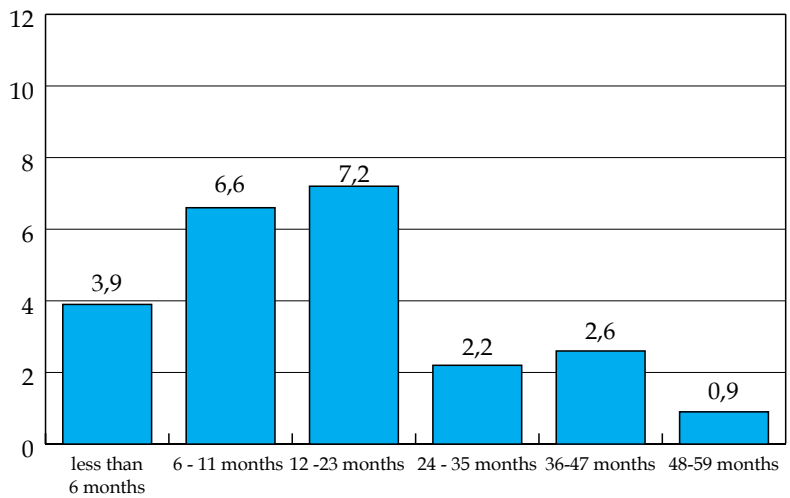
- Prevalence of diarrhoea
- Oral rehydration therapy (ORT)
- Home management of diarrhoea
- (ORT or increased fluids) ***AND*** continued feeding

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 the child had to drink and eat during the episode and whether this was more or less than the child usually ate and drank.

During the course of the survey, 2,883 children aged 0-59 months had been covered. Of these, 103 children (3.6%) had episodes of diarrhea in the two weeks preceding the survey (Table CH.4). As analysis shows, male children suffer from diarrhea more frequently than females children by 1.4 times.

Children from rural area had episodes of diarrhea 1.5 times more often than children in urban areas had. Children of 6-23 months have shown the highest frequency of diarrhea cases, occurring 1.6 times more frequently in comparison with children aged 0-6 months, and 3.5 times more than children aged 24-47 months (Figure CH.1).

Figure CH.1: Percentage of children with episodes of diarrhea by age, Kyrgyz Republic, 2006



Of those children who had diarrhea nearly 79.6% did not receive oral rehydration therapy (ORT). Home treatment was carried out only in 15.4% of cases. Home treatment was more likely for girls than for boys (29.3% vs. 17.4% respectively).

Children with diarrhea received increased volume of fluids in 25% of cases and, correspondingly, in 75% of cases they received just adequate or lower volume of fluids (Table CH.5). During the diarrhea episodes, 48.1% of children have received reduced quantities of food or did not eat at all.

Antibiotic Treatment of Children with Suspected Pneumonia

Globally pneumonia is the leading cause of death in children and the prescription of antibiotics for children under five with suspected pneumonia is one of the most effective ways of fight with it. Children with suspected pneumonia, besides having fever or cough, often suffer from rapid or difficult breathing and other symptoms linked to disorders of the respiratory system.

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. The indicators are:

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

Survey respondents were asked if they had children who suffered from pneumonia within the past two weeks prior to the survey, and whether they received antibiotics during the same period or not.

Table CH.6 presents the prevalence of suspected pneumonia and, if care was sought outside the home, the site of care. Children whose mothers had higher education were at lower risk of pneumonia (4.9%) than those whose mothers had just a secondary education (5.6%) or lower level of education (8.9%).

Nearly 5.6% of children aged 0-59 months were reported to have symptoms of pneumonia during the two weeks preceding the survey. Of these children, 62.1% were taken to an appropriate provider. Children with suspected pneumonia were taken to public hospital or health centre in 43% of cases, and to village health worker in 19.7% of cases.

Table CH.7 presents the use of antibiotics for the treatment of suspected pneumonia in under-5s during the two weeks prior to the survey. In the country, 44.5% of under-5 children with suspected pneumonia had received an antibiotic– 69.8% in urban areas and 26.8% in rural areas. The table also that antibiotic treatment of suspected pneumonia is likely to grow up with mother's education, but does not vary significantly with respect to the age of child.

Issues related to knowledge of danger signs of pneumonia are presented in Table CH.7A. Obviously, mothers' knowledge of the danger signs is an important determinant of care-seeking behaviour. Overall, 41.8% of women know of the two danger signs of pneumonia – fast and difficult breathing. The most commonly identified symptom for taking a child to a health facility is a developing fever (88.3%). About 51.5% of mothers identified fast breathing and 66.5% of mothers identified difficult breathing as symptoms for taking children immediately to a health care provider.

Mothers of children aged 0-59 months living in urban areas (50.3%) were more informed about two danger signs of pneumonia than mothers living in rural areas (35.4%). Furthermore, the higher the level of education mothers had, the higher the level of their awareness.

The level of awareness about two dangerous pneumonia symptoms is also positively related to the household wealth index. Only 28.5% of mothers in the poorest household group were informed about pneumonia symptoms, while in the middle group 43.4% of mothers and in the richest group 55.9% of mothers were informed about it.

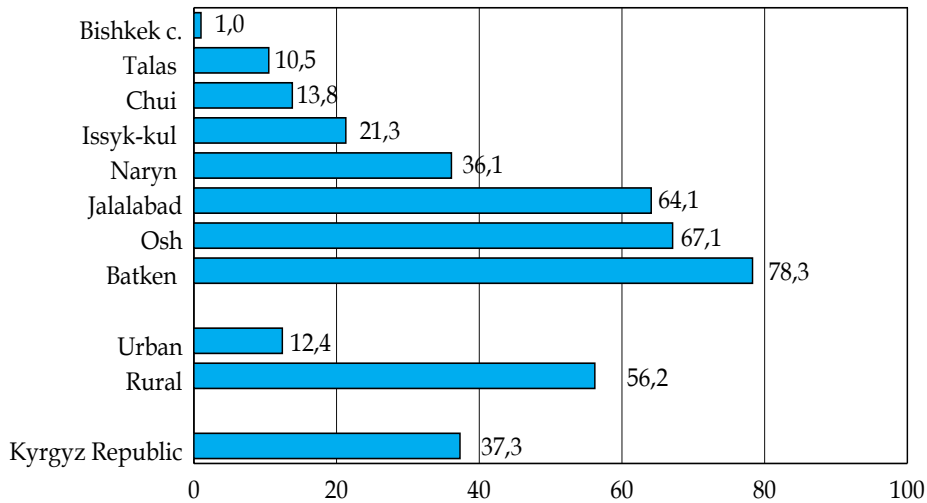
Solid Fuel Use

Cooking with solid fuels (biomass and coal) leads to high levels of indoor pollution and is a major cause of health problems that can take the form of acute respiratory illnesses, particularly among

children, as well as chronic obstructive illness of the lungs, cancer and other diseases. Use of a closed stove with a chimney decreases indoor pollution significantly.

According to the survey data, more than a third (37.3%) of all households in the Kyrgyz Republic use solid fuels for cooking (Table CH.8). Large regional differences in solid fuel use exist, as well as differences between urban and rural areas. The highest rate is recorded in the southern regions of the country: from 64.1% in the Jalalabad region, to 67.1% in the Osh region, up to 78.3% in Batken region (Figure CH.2).

Figure CH.2: Percentage of households that use solid fuels for cooking by region. Kyrgyz Republic, 2006



Solid fuel use for cooking in urban areas is not significant (12.4% of households), but widely prevails in rural areas, where more than half (56.2%) of households use solid fuel. The most common form of solid fuel used for cooking is either coal or firewood.

Depending on the level of household wealth, differences are rather significant, with 76.6% of the poorest group using solid fuel for cooking, while just 0.3% of the richest group. The same trend is observed with regard to the education level of the head of household, where 62.5% of those with education lower than secondary use solid fuels and just 15.1% of those with a high education level do so.

Differences in solid fuel use for cooking by ethnicity of the head of household are also significant. The largest use of solid fuel is made by Uzbek (67.2%) and Kyrgyz (39.8%) households, while just 4% of Russian households use solid fuels. These trends are largely due to the high number of Asian ethnic groups (Kyrgyz and Uzbek) living in rural areas, and also because of persisting cooking traditions of Asian ethnic groups, who bake bread, as a rule, in ovens heated with firewood or coal.

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 type of stove used with a solid fuel is depicted in Table CH.9.

Most households have closed stove with chimney (78.4%), while open stove or fire with chimney or hood was observed in 14.6% households. The proportion of households with open stove or fire with no chimney or hood is about 2.9%.

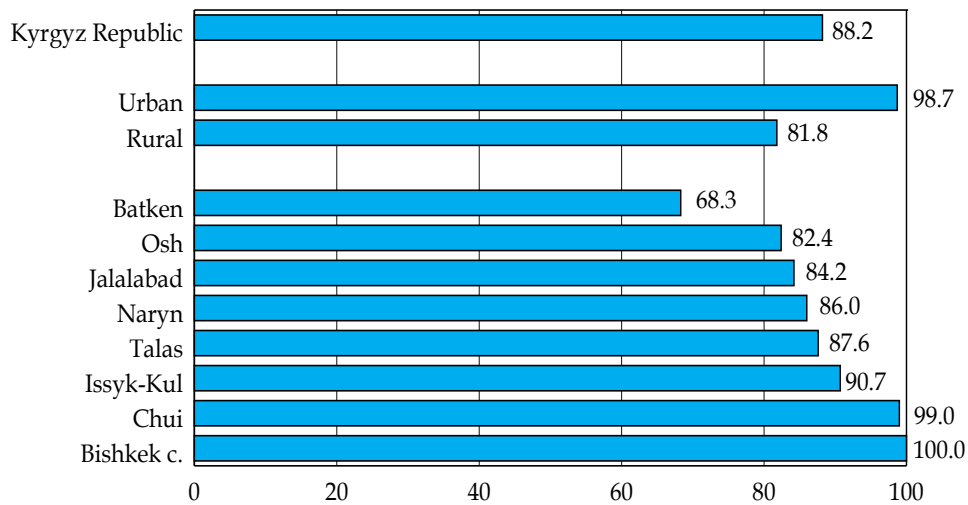
VII. WATER AND SANITATION

Access to Pure Drinking Water

Access to drinking water of high quality is a necessity for good health. Globally water from open sources is one of basic reasons for the spread of such diseases as trachoma, cholera, typhoid, hepatitis A and schistosomiasis. Organic, non-organic and radiological contaminants with harmful effects on human health may also be found in drinking water.

Piped water, public tap water, borehole/tube well water, protected well water and protected spring water are considered improved drinking water sources. Overall, 88.2% of the population (98.7% in urban areas and 81.8% in rural areas) have an access to improved drinking water sources (Table EN.1). The situation in southern regions is considerably worse than in northern regions; access to the pure drinking water is available to 68.3% of the population in the Batken region, and to 84.2% of the population in the Jalalabad region (Figure EN.1). In households in the poorest group, only 73.8% have access to improved drinking water sources, while 100% of the richest households have access to them.

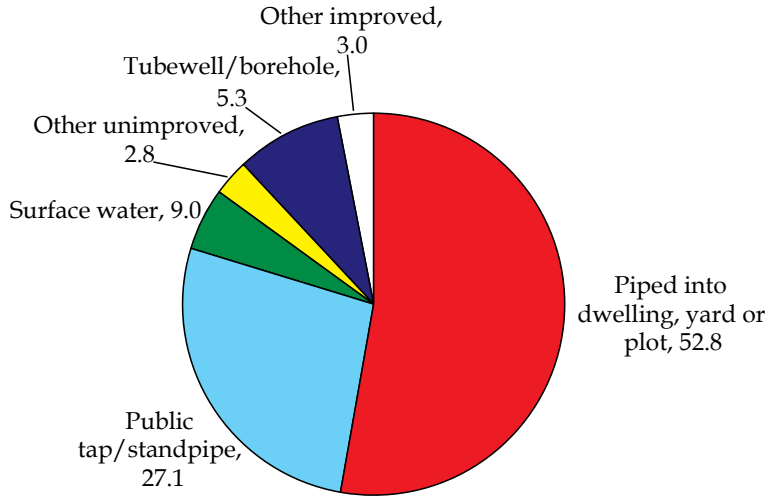
Figure EN.1: Access to improved source of drinking water. Percent of households. Kyrgyz Republic. 2006



The source of drinking water for the population varies strongly by region (Table EN.1). The most common drinking water sources in the Kyrgyz Republic are water pipelines (used by 52.8% of the population), which run into the dwelling or onto the property, and public taps (used by 27.1% of the population). Drinking water delivered into dwellings or onto property via pipelines was quite common for Bishkek City (80.3%) and the Chui region (52.7%). In the Talas region 41.3% of the population use piped wells (boreholes), and 21.8% use public taps (Figure EN.2). The people of the remaining regions mostly use public taps and water pipeline running onto the property.

According to the survey results, 11.8% of population do not have any access to clean drinking water, including just 9% who use surface water. The largest level of the surface water consumption is observed in the Batken (28.5%), Osh (14.0%) and Naryn (10.6%) regions. The people of these regions are therefore greatly exposed to the risk of infectious intestinal diseases.

Figure EN.2: Percentage distribution of household members by source of drinking water. Kyrgyz Republic, 2006



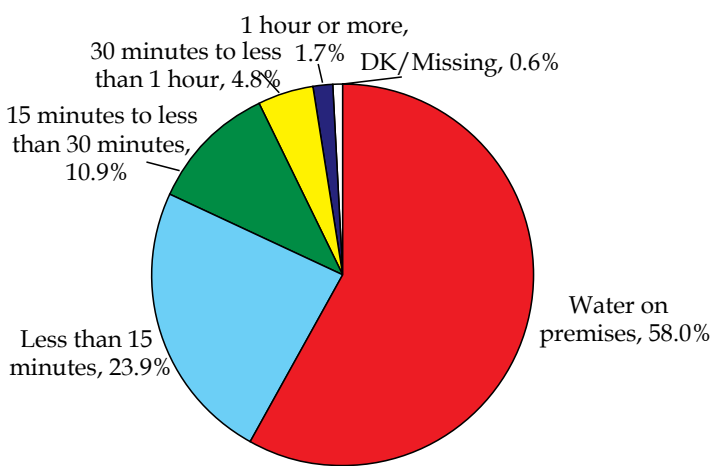
Use of in-house water treatment is presented in Table EN.2. Households were asked of ways they may be treating water at home to make it safer to drink – boiling, adding bleach or chlorine, using a water filter, and using solar disinfection were considered as proper treatment of drinking water. The table shows the percentages of household members using appropriate water treatment methods, separately for all households, for households using improved and unimproved drinking water sources.

Only 46.7% of population using unimproved water sources conduct appropriate water treatment – 53% in urban areas and 46.4% in rural areas. This percentage is the least in Jalalabad (27.1%) and Batken (31.6%) regions. In general, 34.6% of population use appropriately treated water, including 34.2% who boil water, 14% who allow it to precipitate, the remaining either chlorinate water, subject it to solar disinfection and/or use various forms of filtration.

The amount of time it takes to obtain water is presented in Table EN.3 and the person who usually collected the water in Table EN.4. Note that these results refer to one roundtrip from home to drinking water source. Information on the number of trips made in one day was not collected.

More than half of households (58.0%) use water from sources piped into their dwelling. The remaining households retrieve water from sources located outside at varying distances from their dwelling. The time spent on water retrieval among these households can vary from five minutes to more than one hour per trip. For populations living in rural areas, one of main problems is water must be retrieved from sources located far from their dwellings. For 34.8% of households, retrieval takes on average up to 30 minutes (Figure EN.3).

Figure EN.3: Distribution of time spent by household members retrieving drinking water from the source. Kyrgyz Republic, 2006



In rural areas such time is spent for water retrieval by 52.1% of households, while for 12.1% of households in urban areas it takes up to 30 minutes to retrieve water. Regional differences are also significant. More than 70% of households in Naryn and Talas spend up to 30 minutes for retrieving water from the source. Water retrieval trips of more than 30 minutes are experienced by 6.5% of households in the Kyrgyz Republic, including 1.2% of urban households and 10.6% of rural. In addition, 49.3% of women retrieve water for their household, and 10.2% of girls under 15 undertake this task.

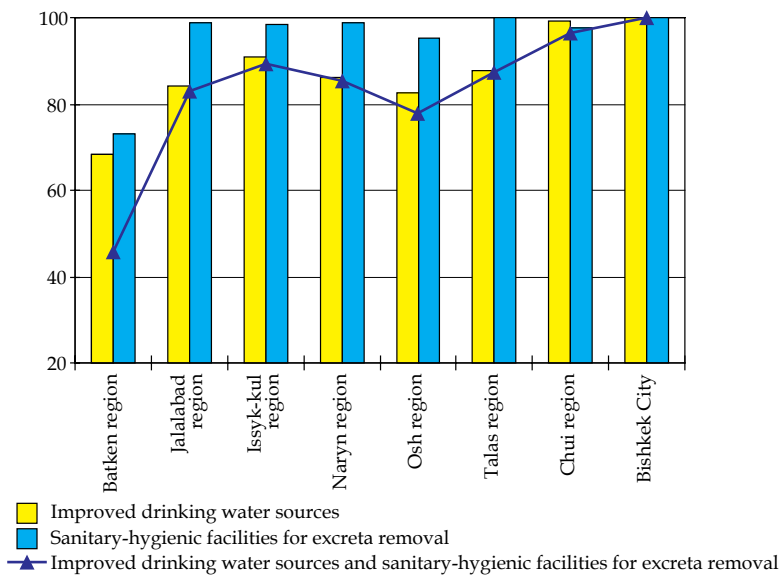
Use of Sanitary – Hygienic Facilities for Excreta Disposal

In many countries, outbreaks of several diseases, including diarrhea and poliomyelitis, are often connected with improper removal of human excreta and lack of maintenance of proper personal hygiene. Improved sanitary-hygienic facilities include toilets with water flushing, toilets connected with a sewer system or a septic tank, other types of toilets with water flushing, and improved pit-latrines with cesspools or common cesspools.

Nearly 96.3% of the population lives in households that use sanitary-hygienic facilities, including 99.1% of the urban population and 94.6% of the rural population (Table EN.5). Only 73.2% of the population of the Batken region has access to improved sanitary-hygienic facilities, and 26.3% of the population use an open pit without a slab. Some 64% of the inhabitants of Bishkek live in households with access to the sewer system (Figure EN.4). The population of the country usually use pit latrines with slabs (68.5%), whereas proportion of water-flashing toilets is equal to 27.2%. About 3.7% of population have no access to improved facilities.

The Table EN.5 indicates that use toilets with water flushing is strongly correlated with wealth and is profoundly different between urban and rural areas.

Figure EN.4: Percentage of population with access to improved drinking water sources and improved sanitary-hygienic facilities. Kyrgyz Republic, 2006



Safe disposal of a child's faeces means that the last stool by the child was disposed of by use of a toilet or rinsed into toilet or latrine. Disposal of faeces of children 0-2 years of age is presented in Table EN.6. In general, proportion of children whose stools are disposed of safely is equal to 42.7% – 56.7% in urban areas and 32.7% in rural areas.

An overview of the percentage of households with improved sources of drinking water and sanitary means of excreta disposal is presented in Table EN.7. According to the survey data, percentage of household population using improved sources of drinking water is equal to 88.2%. Nearly 96.3% of population use sanitary means of excreta disposal. In general, 84.9% of population has access to improved sources of drinking water and sanitary means of excreta disposal. Again, the situation in the Batken region is considerably worse than in other regions; only 45.8% percent of the population in this region gets its drinking water from an improved source and uses sanitary means.

VIII. REPRODUCTIVE HEALTH

Contraception

Family planning is one of the most important aspects of reproductive behaviour. The fertility control in contemporary society depends on the social position of a woman, her age, place of residence and dwelling conditions, as well as on the social and cultural climate in which she lives.

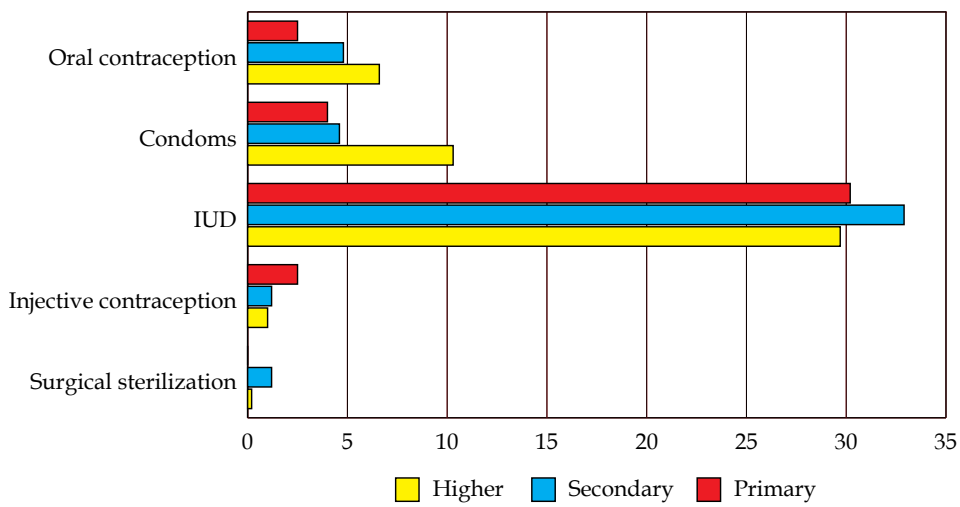
For this survey, 4,195 women currently married or in union were interviewed with regard to reproductive health. The women were asked whether they use contraception, and which methods they preferred.

The analysis showed that only 47.8% of married women use contraception (Table RH.1). Use of an Intra Uterine Device (IUD) is the most popular method chosen by the women who admitted using contraception (32%). The second most popular method is the use of condoms (5.8%). The use of oral contraceptives is preferred by 5.1 % of women.

The survey revealed a significant regional differentiation among women who admitted using contraception. The level of contraception use in northern areas is significantly higher in comparison with the national average (52.6% in the Issyk-kul region; 55.6% in the Talas region), while it is significantly lower in the Jalalabad (36.2%) and Batken (45.3%) regions.

A woman's decision to use contraceptives can be connected to a great extent with a her educational level. Female respondents who have obtained secondary and higher education use contraceptives more frequently than respondents with just a primary level education. The education level also impacts a woman's choice of contraception methods (Figure RH.1). The data show that women with higher education use oral contraception and condoms more often (by a factor of 1.5-2.0).

Figure RH.1: Preferred means of contraception for women and educational level attainment. Kyrgyz Republic, 2006

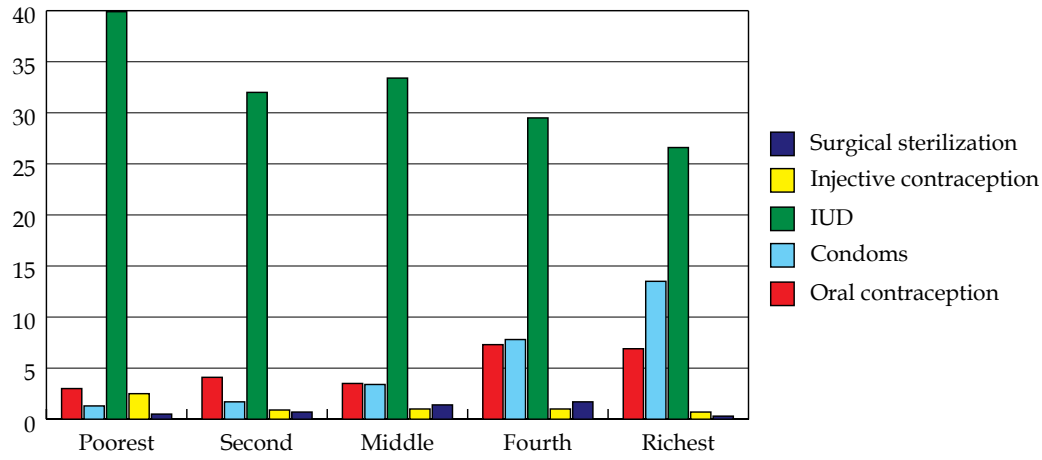


The survey also revealed that a woman's wealth influenced her choice of contraception method. The poorer the woman's household, the less she will spend on contraception. The highest level of IUD use is recorded in the poorest quintile group. Condoms and oral contraception use is most prevalent in the fourth and the richest quintile groups (Figure RH.2).

The preferred choice of contraception methods is slightly different in urban and rural areas. Women of reproductive age in rural areas use IUD 1.2 times more often than their urban counterparts. Correspondingly, in rural areas oral contraception is used rarely by almost 1.5 times and condoms – more rarely by 3 times.

In terms of ethnic groups, IUDs are more frequently used by Kyrgyz (33.4%) and Uzbek women (31.9%), Russian women were three times more likely to use condoms and twice as likely to use oral contraceptives than Kyrgyz or Uzbek women did.

Figure RH.2: Percentage of contraception methods chosen by female respondent's household wealth index. Kyrgyz Republic, 2006



Unmet Need

Unmet need[1] for contraception refers to fecund women who are not using any method of contraception, but who wish to postpone the next birth or who wish to stop childbearing altogether. Unmet need is identified in MICS by using a set of questions eliciting current behaviours and preferences pertaining to contraceptive use, fecundity, and fertility preferences.

Women in unmet need for spacing includes women who are currently married (or in union), fecund (are currently pregnant or think that they are physically able to become pregnant), currently not using contraception, and want to space their births. Pregnant women are considered to want to space their births when they did not want the child at the time they got pregnant. Women who are not pregnant are classified in this category if they want to have a(nother) child, but want to have the child at least two years later, or after marriage.

Women in unmet need for limiting are those women who are currently married (or in union), fecund ((are currently pregnant or think that they are physically able to become pregnant), currently not using contraception, and want to limit their births. The latter group includes women who are currently pregnant but had not wanted the pregnancy at all, and women who are not currently pregnant but do not want to have a(nother) child.

Total unmet need for contraception is simply the sum of unmet need for spacing and unmet need for limiting.

Using information on contraception and unmet need, the percentage of demand for contraception satisfied is also estimated from the MICS data. Percentage of demand for contraception satisfied is defined as the proportion of women currently married or in union who are currently using contraception, of the total demand for contraception. The total demand for contraception includes women who currently have an unmet need (for spacing or limiting), plus those who are currently using contraception.

Table RH.2 shows the results of the survey on unmet need and the demand for contraception satisfied. Answers of nearly 4,200 surveyed women showed that unmet need for contraception is about 1.1%. Very slight fluctuations (in terms of region, age group, education, etc.) are actually observed.

Antenatal Care

The antenatal period is a time of intrauterine development of the fetus from the time the zygote is formed until the labour process takes place. The antenatal period presents important opportunities

[1] Unmet need measurement in MICS is somewhat different than that used in other household surveys, such as the Demographic and Health Surveys (DHS). In DHS, more detailed information is collected on additional variables, such as postpartum amenorrhea, and sexual activity. Results from the two types of surveys are strictly not comparable.

for reaching pregnant women with a number of interventions that may be vital to their health and well-being and that of their infants. It is very important to adequately organize a system of antenatal care (antenatal monitoring) which includes care provided to pregnant woman to protect her health as well as the health of her unborn child, and to ensure necessary assistance for her partner or her family to ease the transition to motherhood and fatherhood.

Antenatal care envisages prophylaxis, early screening and treatment of diseases, for a mother and a fetus. Training that helps woman correctly prepare for labour and enhances her trust towards health personnel (birth attendants) plays an important role. 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. Quality health care and testing during the antenatal period allows early stage prevention and detection of the signs and symptoms of diseases or deviations and allow the mother to seek appropriate treatment. This, in its own turn, assists in reducing newborn morbidity and infant mortality.

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:

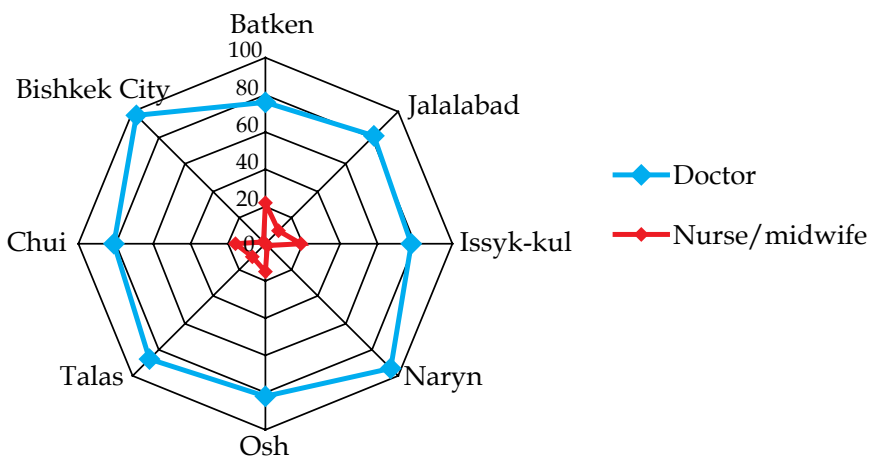
- Blood pressure measurement
- Urine testing for bateriuria and proteinuria
- Blood testing to detect syphilis and severe anemia
- Weight/height measurement (optional)

In order to determine the quality of antenatal care, 1,209 women who had given birth to children during the two preceding years were interviewed. The proportion of pregnant women who received skilled antenatal care/monitoring once or several times during the pregnancy is 96.9%. The analysis shows, there was no significant difference observed by regions. The lowest percent of those who received antenatal care services once or several times during pregnancy was in Jalalabad region (92.7%). However, there was some difference between urban and rural areas (95.4% and 99.0% respectively). In the poorest quintile group, these women accounted for 93.6%, and in the richest quintile they accounted for 99.0%.

According to the survey results, in 85.3% of these cases, doctors provided antenatal care services and in 11.3% of cases, a nurse or midwife provided these services. Of the surveyed women, 2.5% did not obtain any antenatal care services during pregnancy. It is noted that there is a difference between rural and urban areas in terms of antenatal care services provided by a physician (79.0% vs. 94.6% respectively).

The highest proportion of women who received antenatal care from medical doctor are in Bishkek (98.2%) and the Naryn region (94.6%), while in the Issyk-kul and Batken regions the percent women who received antenatal care was 78% and 75.5% respectively (Figure RH.3). Correspondingly, the highest proportion of pregnant women who received antenatal care from a nurse or midwife was observed in these regions (18.5% in the Issyk-kul region and 21.8% in the Batken region).

Figure RH.3: Coverage by antenatal care, Kyrgyz Republic, 2006



Also, there was a correlation between the household wealth index and antenatal care coverage by doctors. The lowest coverage rate is observed in the poorest and the second quintile groups (71.7% and 82.4% respectively), and the highest coverage rate is observed in the richest and the fourth quintiles (93.3% and 88.6% respectively). Additionally, blood testing and blood pressure measurements were carried out in 96.8% of cases, while in 96.6% of cases urine testing and weight measurements were performed.

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 basic goals of assistance to women during the birthing process include safe (non-traumatic) deliveries, early diagnosis and treatment of delivery complications (such as excessive bleeding, eclampsy, obstructed labor, etc.), early diagnosis and treatment of post-partum complications and effective post-partum care. No less important is the attention given to the newborn in the early neonatal period.

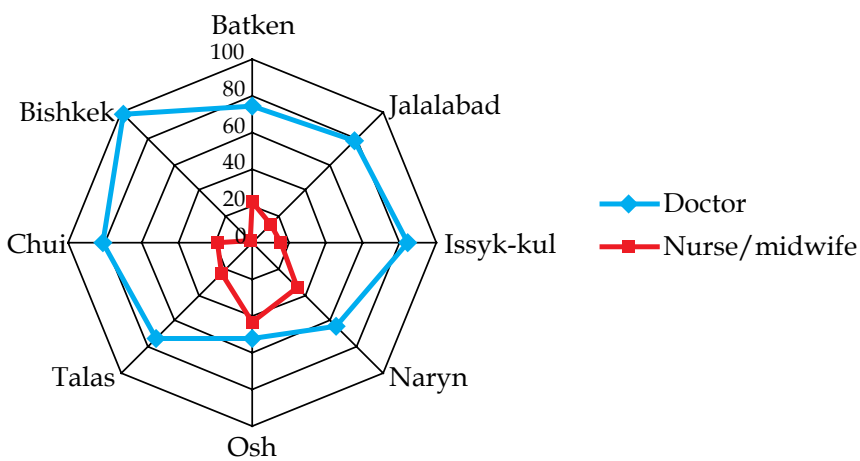
The MICS included a number of questions to assess the proportion of births attended by a skilled attendant. *A skilled attendant* includes a doctor, nurse, midwife or auxiliary midwife.

At present, delivery at the hospital is free of charge in the Kyrgyz Republic. However, in spite of this, delivery assistance in hospitals is not accessible for all women, especially those who live in remote, mountainous areas, for example, in the Naryn, Osh and Jalalabad regions.

Over the course of this survey, 1,209 women between the ages of 15-49 who gave birth within the past two years were asked where their deliveries took place (at medical institutions or otherwise), and who provided assistance at delivery.

The analysis revealed that deliveries in the overwhelming majority of cases (96.9% throughout the entire Republic) took place in medical institutions (Table RH.5). For the most part, large regional differences were not observed, except for the Batken and Jalalabad regions. In these regions, the percentage of deliveries that took place in medical institutions was 88.3%, and 92.6%, respectively.

Figure RH.4: Percentage of deliveries assisted by skilled attendant. Kyrgyz Republic. 2006

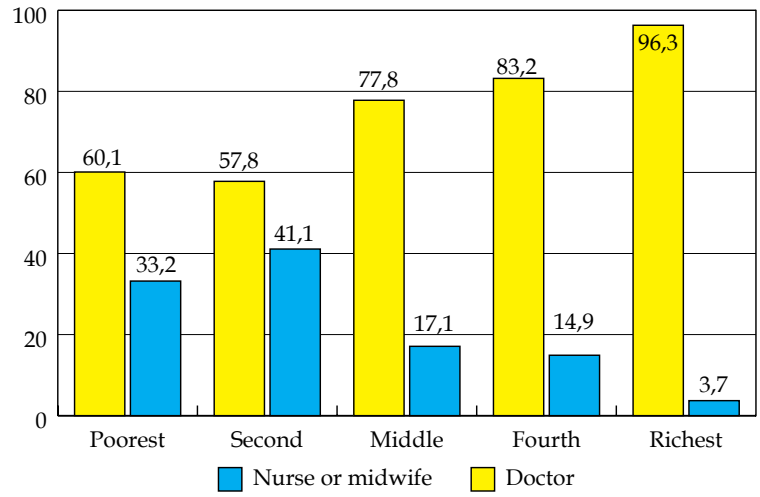


All the deliveries in the Chui and Issyk-kul regions and Bishkek city were assisted by skilled health personnel. In a majority of cases (76.3%), doctors provided delivery assistance, while in 20.9% of

cases a nurse or midwife handled the task. In just 1.8% of cases, skilled birth attendants did not attend in the delivery (Figure RH.4).

It was revealed that the percentage of deliveries assisted by doctors or nurse/midwife depended on the woman's place of residence. In urban areas, 94.2% of deliveries were assisted by doctors and only 5.7% were assisted by a nurse or midwife. In rural areas doctors administered 64.0% of births with 31.2% of births assisted by nurse/midwife.

Figure RH.5: Percentage of deliveries assisted by doctor or nurse/midwife according to household wealth index. Kyrgyz Republic. 2006



The survey results by ethnic group showed that the percentage of deliveries assisted by doctors is a little higher for Russian respondents (86.4%) compared to other groups, and they have 100% of their deliveries in medical institutions. The percentage of deliveries assisted by doctors for Kyrgyz women reached 74.0%, while 22.7% of births were assisted by nurse or midwife. For Uzbek women the percentages were 72.6 % and 23.6%, respectively.

According to the survey results, the higher the educational level of woman, the higher is the likelihood her delivery was assisted by doctors, while a higher percentage of women with just a primary education received delivery assistance from a nurse or midwife.

The wealth index level of a household also has an impact on the type of medical assistance at delivery. As Figure RH.5 shows, nearly 60% of women from the poorest quintile group of households had their deliveries assisted by doctors, while 33.2% of women from these households received assistance from a nurse or midwife. For the richest quintile groups these indicators are equal to 96.3% and 3.7%, respectively.

IX. EARLY CHILDHOOD DEVELOPMENT AND EDUCATION

One of the most important periods of a child's development is the first five years of life. Care provided by adults in this critical period establishes the basis and conditions for more successful child development in the future. Parents and adults involve the child in the various activities such as reading books with text or pictures available at home, and playing games that help develop mental and physical capacities. Especially within the preschool period a child's physical health, character, attitude towards other people, and drive to learn and study are formed.

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.

During the three days preceding the survey, around 70% of children under the age of five, participated in four or more types of activities that promoted training and preparation for school (Table CD.1).

It was discovered that the level of the parents' education influences their children's development and predicts a high level of interaction with their children. For example, the higher the educational level of the mother and father, the more frequently and more qualitatively they interact with their child.

The survey revealed gender parity, where parents paid equal attention to females and males in activities such as reading books, going for walks, developing games, etc.

At the same time, the social status of a family and its wealth index score makes a noticeable influence on the level of parental participation in their child's development. While 64% of children under five in the poorest quintile participated in four or more types of child development activities, more than 83.6% of children in the richest quintile were involved in such activities. Also, a number of child development activities positively correlate with well-being index.

Differences were also observed among surveyed ethnic groups. The highest degree of parental participation in the early childhood development was observed among Russians, where 84% of children were involved in such activities. In Kyrgyz families, the rate is equal to 73.5% and it is equal to 53.6% in Uzbek families. Difference of the percentage of families where the father participated in early childhood education was insignificant among each ethnic group (5.1% of Russian families, 4.5% of Kyrgyz families, and 3.8% of Uzbek families).

Differences in the attitudes of parents toward early childhood development among urban and rural families were recorded, where parents in rural areas participated slightly less than urban parents (65.0% vs. 79.7%). This is connected partially with the lower level of education of rural populations, where according to the results of the 1999 Census, the proportion of young people who attain higher education has steadily decreased.

Exposure to books in early years not only provides the child with greater understanding of the nature of print, but may also give the child opportunities to see others reading, such as older siblings doing school work. Presence of books is important for later school performance and IQ scores.

In general, throughout the Republic more than 76% of children live in households that have three or more children's books (Table CD.2). In addition, the number of available books for children exceeds the number for adults. Both boys and girls are equally provided with books.

As the survey testifies, children in urban areas have greater access to books than in rural areas. Nearly 81% of urban children under five years of age have three or more books, while 72.9% of children under five in rural areas have three or more books. Apparently, the resulting difference was influenced by the lower level of rural household incomes, as well as by the difficulties of purchasing of books in rural areas. At the regional level, the difference in the availability of books for children is insignificant (from 73% to 86%), except for the Jalalabad region (58%).

Also, the availability of three or more books for children and adults with regard to the household wealth index reveals little difference between the richest and poorest households.

Along with books, toys provide a defining influence on early childhood development. The survey showed that approximately 25% of children between the ages of 0-59 months had three or more types of objects designed for games at home. These include objects found around the house, self-made toys, toys

bought at a shop, and objects and toys found outside the house. It was noted that 95.1% of children in urban households and 86.4% of children in rural households use toys purchased from a shop. As for self-made toys, they are more frequently used in the Talas region (46.7%) and the Issyk-kul region (40.5%). Rural children play more often with self-made toys than urban children (33.1% vs. 15.5%, respectively).

Leaving children alone or in the presence of other young children is known to increase the risk of accidents. In MICS, two questions were asked to find out whether children aged 0-59 months were left alone during the week preceding the interview, and whether children were left in the care of other children under 10 years of age.

Table CD.3 shows that 10% of children aged 0-59 months were left in the care of other children, while 1.6% were left alone during the week preceding the interview. Generally, it was estimated that 10.6% of children were left with inadequate care during the week preceding the survey. This happened more often for rural inhabitants than for urban ones (12.5 % vs. 7.8%, respectively), and more common for children at age 24-59 months (13.9%) than for children under 2 years old (5.7%). Also, the higher income parents have, the lower is the risk for their children to be left alone.

Preschool Attendance and School Readiness

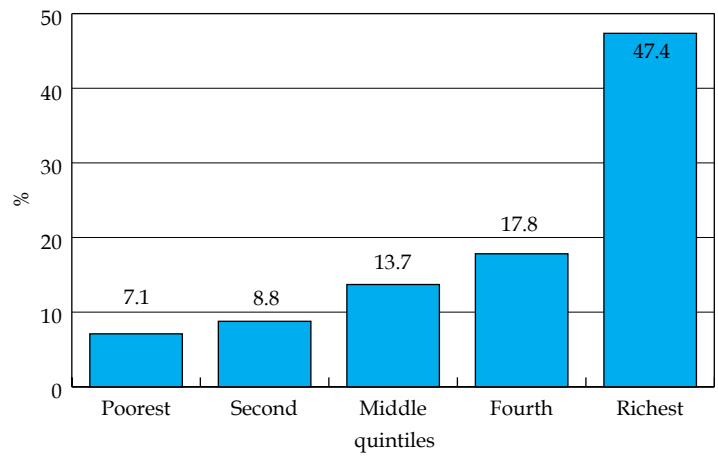
Attendance to preschool education in an organized learning or child education program is important for the readiness of children to school. One of the World Fit for Children goals is the promotion of early childhood education.

Participation in preschool and primary school plays a vital role both in a child's subsequent development and the identification of his/her role in society. It is generally known that participation in preschool and similar school preparation programs at an early age greatly enhance to a child's success in school. The development of the child at this stage also directly depends on the parents' influence and on the amount of attention they pay to the child's education.

Preschool institutions were always significant within the framework of children preparation for school, taking into account professional skills of the staff and appropriateness of educational methods. But as the survey results show, preschool institutions are attended by 19% of children aged 36-59 months (Table ED.1). Rather significant differences are available in respect of this indicator between urban and rural areas, as well as between regions. One third of children attend preschool institutions in towns, while this indicator is around 10% for rural areas. The highest attendance percentage (41.9%) falls in Bishkek city, the lowest – in Batken region at 6.6%.

The analysis of the ethnic composition of children shows that Russian children have the highest rate of preschool education during preschool age (42.6%.) For Kyrgyz children this indicator is 17.3%, for Uzbek children the percentage is 14.9%. Wealthy people (47.4% in the richest quintile) more often than others (7.1% in the poorest quintile) expose their children to preschool education (Figure ED.1).

Figure ED.1: Percentage of children aged 36-59 months currently attending early childhood education by household wealth index. Kyrgyz Republic. 2006



Within the coverage of children with educational programs again mothers' educational level is a decisive factor. Thus, 13.5% of children aged 36-59 months, whose mothers have secondary education, attend educational programs at the early age, while 42.5% of children whose mothers have higher education received preschool education. Most of children (91.1%) whose mothers have gained only primary education don't attend preschool educational programs.

The Table ED.1 also shows the proportion of children in the first grade of primary school who attended pre-school the previous year, an important indicator of school readiness. Overall, 20.2% of children who are currently age 7 and attending the first grade of primary school were attending pre-school the previous year. The proportion among males is slightly higher (20.7%) than females (19.6%), while almost two out of five urban children (39.5%) had attended pre-school the previous year compared to 8.8% among 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 (GPI)

The indicators of school progression include:

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

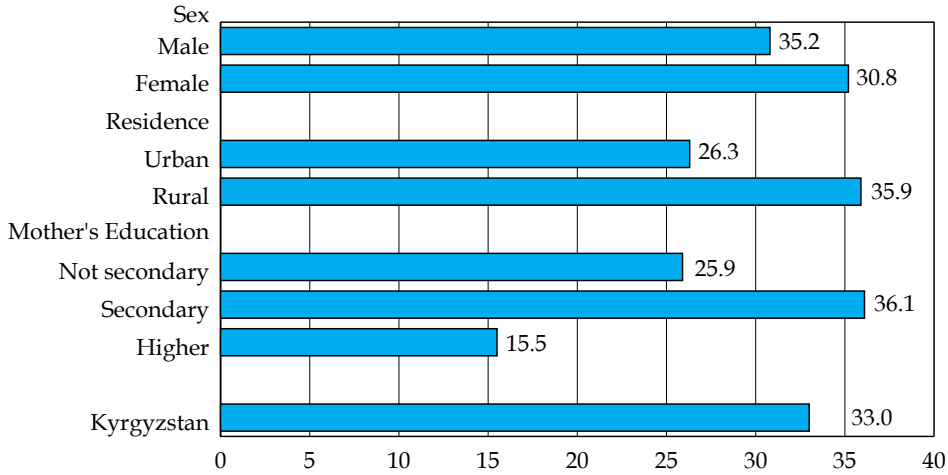
As the survey results showed, throughout the Kyrgyz Republic only 72.6% of children attend primary school out of the total number of children at the primary school entrance age of 7 years (Table ED.2). Moreover, the percentage of males who entered primary school made up 68.5%, while the percentage of females entering totalled 77.9%. At the regional level, the highest percentage of children entering the first form came from the Osh region (94.5%).

The influence of the parents' educational level on their children's attendance at primary school was notable. Nearly 71% of seven year olds, whose mothers have a secondary education, attended primary school, and nearly 76.1% of children whose mothers had higher education attended primary school.

The primary school net attendance ratio[1] throughout the country is 92.1%, comprising 92.9% in urban areas and 91.7% in rural areas (Table ED.3). Differences according to gender are insignificant, except for the Chui region, where a gap between males and females exceeds 10%, with females' rate being higher. The first grade net attendance ratio is the highest among Uzbeks (95.4%) and Kyrgyz (91.9%) who timely send their children to primary school.

Interestingly, one third of children of age six already attend the 1-st grade (Figure ED.2). As for children at the primary school entrance age of 7 years, about 50.5% of them attend primary first grade, while 20.0% of them attend second grade already and nearly 2.2% of children of age seven attend primary third grade.

Figure ED.2: Percentage of children of 6 years age attending grade 1, Kyrgyz Republic, 2006



The primary school net attendance ratio of children of secondary school age is presented in Table ED.4W. Nearly 17.1% of the 11 years old children are attending primary school when they should be attending secondary school. The percentage doesn't vary much with regard to region, residence or mother's education.

Throughout the Republic 98.6% of schoolchildren complete their primary school education and pass to the fifth form (Table ED 5). The primary school completion net ratio on average throughout the country is 79.2%, and the ratio of transfer to the secondary school level is 99.1% (Table ED 6). The primary school completion net ratio for males is 78.1%, and for females – 80.3%. The primary school completion net ratio in urban areas is nearly 81%, and 78.4% in rural areas.

As for the wealth index, transition rate to secondary education is the highest in the richest quintile, which measure 100%. Meanwhile, if the ratio of transfer to the secondary school level for all nationalities is rather high, then the primary school completion net ratio is, on the contrary, rather low (for Kyrgyz - 78.8%, for Russians - 64.2%, for Uzbeks - 85.3%). Such indicators are often explained by internal and external migration processes.

Some 89.2% of children at the relevant age attend the middle or senior stages of secondary school in the country (Table ED.4). In urban areas this includes 90.9% of children of relevant age, at 88.4% in rural areas.

As the survey results showed, the ratio of school completion decreases with the increase of age. And, it is observed both among males and among females. It is explained, first, by the increasing burden of education related expenses on the family, when the poorest strata are not able to cover education expenses at the middle and especially at the senior stage. Expenses include: textbooks and writing materials, books, clothes, footwear and food. Not having sufficient income, poorer families are forced to decrease their demand for their children's education. In addition, same families do not see

[1] *The primary school net attendance ratio – Percentage* of children at the age of the primary school (7-11 years), who at present attend primary school in the total number of surveyed children at the age of primary school.

the importance for their children to continue education at the senior stage because of the impossibility of their children continuing their education at the institutions of higher learning.

As the analysis reveals, according to the secondary school net attendance ratio, the Kyrgyz Republic has nearly closed the gender gap in basic education (Table ED.7). Females are not only unimpeded in obtaining educational services, but according to several indicators, they surpass indicators related to males (Table ED.3, Table ED.4).

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 age 15-24. . Literacy was assessed on the ability of women to read a short simple statement or on school attendance.

It is generally known that the literacy rate in Kyrgyzstan is sufficiently high, and approaching to the total literacy coverage. Results of the survey show that the percentage of female literacy in the age group 15-24 years is practically equal to 100% (Table ED.8) with a few very low regional and ethnical variations.

X. CHILD PROTECTION

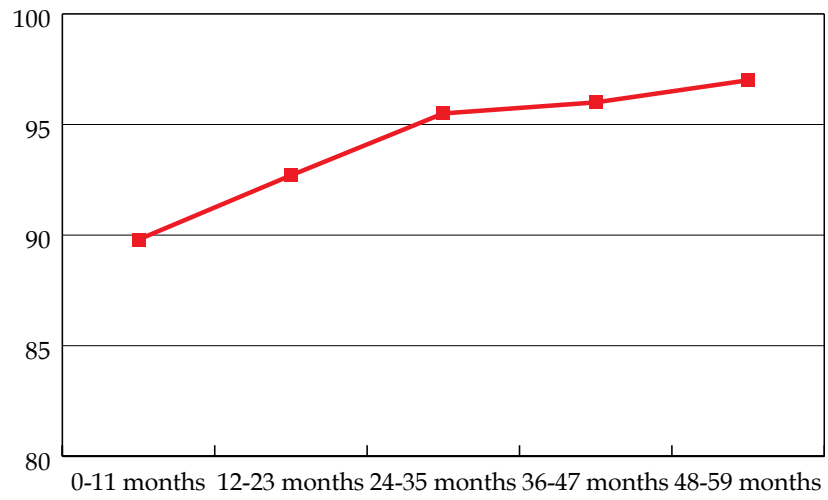
Birth Registration

The International Convention on the Rights of the Child states that every child has the right from birth to have a name, a nationality and to have the right to protection of his or her identity. Birth registration is a fundamental means of securing these rights for children.

According to the survey data, the births of the vast majority of children under five years of age in the Kyrgyz Republic (94.2%) have been registered (Table CP.1). Birth registration in urban areas (95.9%) is a little higher than in rural areas (93.1%). The highest registration rate exists among the children of the Batken region, where 97.9% of newborns have a birth certificate. Gender disparities are rather insignificant; the percentage of registered males (94.8%) is only slightly higher than that of females (93.6%).

According to Kyrgyz Republic legislation, an application for the birth registration of a child should be submitted to the registry office not later than one month after the birth. However, as the survey results showed, the number of registered newborns during the first year of their lives made up only 89.8% (Figure CP.1).

Figure CP.1: Birth registration by age group. Kyrgyz republic, 2006



An unregistered marriage (32.4% of respondents) is one of main reasons for the missing registrations of newborns. The second reason for no-registration of their child is the distance to the registry office. Kyrgyzstan is a mountainous country, and it is often necessary for parents of a newborn to cross high, mountainous passes during their travels to the local registry office.

It was revealed that for 3.8% of parents, the cost of the child birth registration is too high. A small portion of respondents (1.3%) did not know where they can obtain the child birth certificate. Half of one percent of respondents did not wish to pay a fine because of their delay in registering, though according to the legislation of the country, there is no system of fines in this case. It is most likely that parents did not know about this fact.

It should be pointed out that nevertheless, the majority of respondents (53.1%) did not register their children's birth due to so-called "other reasons" (an open question of the Questionnaire, where a reply was written by the interviewer) which included the parents lacking passports. As is well known, passport issuance was practically stopped in the country for a while, and the situation has only improved somewhat beginning in 2006.

A mother's educational level does not play a significant role in the receipt of the child's birth certificate. While 96. 3% of newborns were registered with mother's who attained higher education, some 93.4% of newborns were registered with mothers with education less than secondary. Thus, it is possible to state that the improvement of a newborn registration system at registry offices directly depends on population awareness.

The frequency of children living with neither parent, mother only, and father only is presented in Table HA.10. Nearly 82% out of 9,923 surveyed children live in both parents. This percentage doesn't much vary by ethnicity except Russian population where this figure is equal to 66% only. Children living with neither biological parent comprised 5.4% of cases while there were only 0.5% of children having both parents dead. Nearly 12% of children are living with one parent; mostly with mothers (10.8%).

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 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 questionnaire, 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 differentiating child labour from child work to identify the type of work that should be eliminated.

In the Kyrgyz Republic, child labour is determined by social and cultural structure of the Kyrgyz society. Some parents raise their children from an early age without taking into account wishes of the child as well as perspectives of child development in order to serve family interests. Over time these children fail to learn how to make decisions on their own, let alone know what kind of rights they have as a child. The process of suppressing a child's personality when its own identity is being formed occurs painlessly and, perhaps, unnoticed by the children themselves. The fact that often heavy child labour is contraindicated to children from the viewpoint of its safety and health protection is not taken seriously.

In accordance with the survey data, out of all children of 5-14 years of age 3.6% were child laborers. The gender breakdown shows that 4.3% of male children and 2.9% of female children are working children. Among them 1.5% were children working outside their households and only 0.1% of them were paid for the work they performed. Domestic work (28 hours per week) was done by 1.2% of children (1.4% of male children and 0.9% of female children). About 1.3% of children were engaged in the family business.

It was revealed that the majority of working children reside in rural households (4.5%) as they perform the role of bread-winners with consent from their parents, relatives or participants in the family business. Only 1.9% of children in urban areas are working.

At the time of the survey, 84% of children aged 5-14 years attended school. More specifically, 75.9% of them were also involved in child labour activities (Table CP.3).

Parents influence their children in terms of their life values and beliefs, character formation, especially at an early age. Children prefer to be engaged in the similar types of activities and life style as their parents. This fact confirms that early engagement in the labour activities is perceived as normal way of living. Even when families stop experiencing a shortage of resources, these children may continue working.

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 MICS survey, mother/caretakers of children 3-14 years were asked a series of questions on the ways parents tend to discipline their children when they misbehave. Note that for the child discipline module, one child aged 3-14 years per household was selected randomly during fieldwork. Out of these questions, three indicators used to describe aspects of child discipline are:

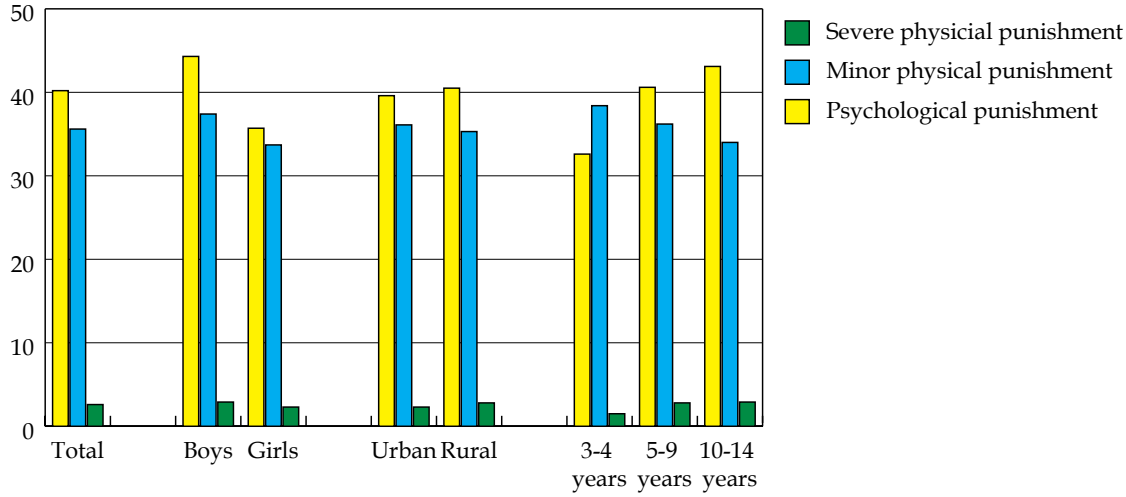
- Psychological aggression as punishment.
- Minor physical punishment.
- Severe physical punishment.

One of the important facts was to know the number of parents/caretakers of children 3-14 years of age that believe that in order to raise their children properly, they need to physically punish them.

In the Kyrgyz Republic, about half of children (51.4%) in the age group 3-14 years were subjected to at least one form of psychological or physical punishment by their mothers/caretakers or other household members. More importantly, 2.6% of children were subjected to severe physical punishment. The survey found that 7.7% of mothers and caretakers think that imposing physical punishment on a child is a correct way of raising a child.

It was revealed that male children were subjected to both minor and severe physical discipline (37.4% and 2.9% respectively) more than female children (33.7% and 2.3% respectively) (Figure CP.2). It is interesting that differences with respect to many of the background variables (rural/urban, child age, mother's education, etc.) were not observed. Only a small percentage of parents/caretakers stated they believe that in order to raise their children properly, they need to physically punish them (7.7%), when 38.3% of parents indicated the opposite.

Figure CP.2: Percentage of types of punishment used with regard to children 3-14 years of age, Kyrgyz Republic, 2006



Early Marriage and Polygyny

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. 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..."

Child and juvenile marriage is a violation of human rights, as it impedes the development of girls, and often results in early pregnancy and social isolation reduces the changes of the girl receiving a proper education or vocational training. They reinforce the gendered nature of poverty. Women married at younger ages are more likely to dropout of school, experience higher levels of fertility, have larger probability of mortality related to maternity, and are more likely to become victims of domestic violence. 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.

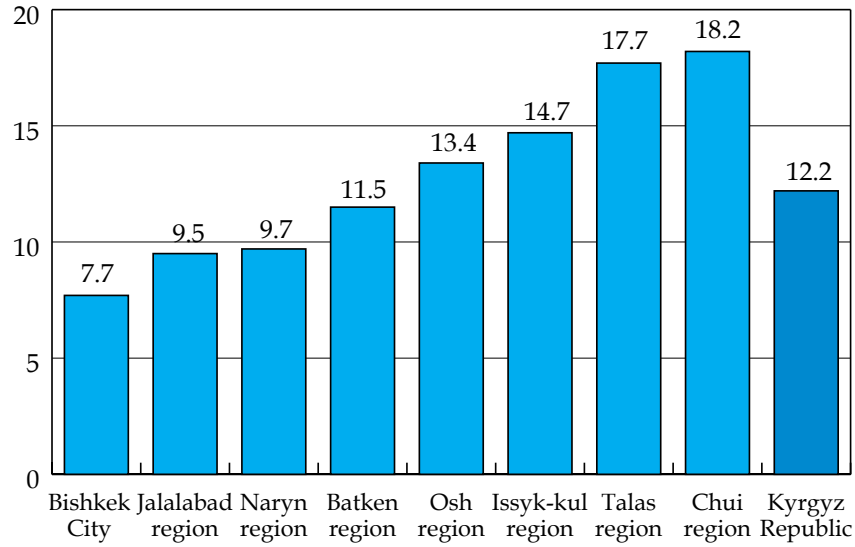
The minimal age for marriage in the Kyrgyz Republic for both men and women is 18, as established by the Family Code. In certain circumstances, (more often, it is the bride's pregnancy), local state bodies are authorized to give permits to persons upon reaching 16 years, who wish to get married.

Approximately 12.2% of women in the Kyrgyz Republic get married before their 18th birthday (Table CP.5 and Figure CP.3). Marriages before age 18 are more often in rural areas than in urban areas (14.2% vs. 9.7% for women aged 20-49 years). In addition, percentage of married (or in union) women aged 15-19 years is also higher in rural areas than in urban areas (10.1% vs. 4.1% respectively).

Among women having less than secondary education a proportion of those who married prior reaching their 18th birthday is equal to 28.4%. The rate is more than 2 times less for women with secondary education (13.1%) and more than 4.5 lower for women with higher education.

According to the survey results, daughters are given away in marriage at an early nuptial age more often in the poorest (16.5%), than in the richest (9.1%) households. Thus, it is possible to mention poverty as on of the main reasons of early marriages.

Figure CP.3: Percentage of women who married before 18 years of age by region. Kyrgyz Republic. 2006



The largest percentage of women, who indicated their early marriage, falls into the 30-34 age group (17.5%), followed by the 25-29 age group (13.8%), and the 45-49 age group (12.0%). Thus, a tendency for women to marry early was more likely to happen in the last decade and than 30 years ago. Here it is appropriate to remind that a distinctive feature of the Kyrgyz population at the end of the 19th century was an early marriage age for women. According to the census data of 1897, 35% of 15-16 year old women were married, and in the 20-24 age group, practically all women were married. The struggle against early marriages gained momentum after the establishment of the Soviet Union, when most young girls entered the public educational system.

In the 1920s and 1930s, a movement against polygyny also gained acceptance. By the 1930s a polygyny among the Kyrgyz population had virtually been eliminated. However, according to the survey data, around 1.7% of respondents of fertile age (15-49) stated that they were in a polygamous marriage or union. Such a social position depends on the location and on the wealth level. Polygamous marriages were registered more often in the Batken (3. 6%) and Chui (3.1%) regions. The reason for this could be attributed to a high level of young unmarried male labourers in Batken region who migrated, to a relatively low level of poverty in the Chui region. The largest percentage of polygamous marriages was observed among representatives of the richer strata of population (1.9% and 2.0) and the least number recorded among the poorest population strata (1.2%).

With regard to the average age difference of the married couple, it is quite common for 20-24 year old women to have husbands (partners) who are 0-4 years older (57.0%) or 5-9 years older (35.6%). Rarely these women have husbands who are younger (1.4%) or considerably older (more than 10 years – 6.0%) (Table CP.6).

In conclusion, the early marriage of women is characteristic for the Kyrgyz Republic, just as it had been previously. The occurrence of polygamous marriages (unions) has also failed to disappear. On the one hand, it is caused by a significant poverty level of population, and on the other hand, it is due to a preservation of folk traditions.

Domestic Violence

The UN Declaration on the Elimination of Violence against Women of 1993 defined a violence against women as "… any act of gender-based violence that result in, or is likely to result in, physical, sexual of psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" and called for eradication of violence with regard to women.

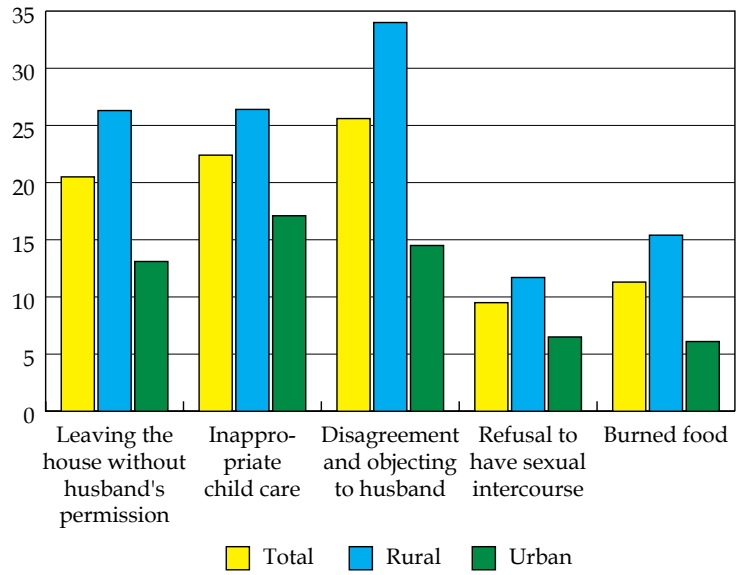
Violence towards women includes the following forms: violence committed by a partner and rape, including spousal rape. Domestic violence, or violence committed by a close partner, is a type of aggres-

sive behaviour including the use of forceful actions both physical and sexual. The forms of physical violence include slapping, shaking, beating by the hand or by an object, suffocating, hitting with the legs, etc. Forms of sexual violence include forced sexual relations through threats or use of physical force.

A number of questions were asked of women aged 15-49 years to assess their attitudes towards whether husbands or partners are justified when hitting or beating their wives in a variety of scenarios.

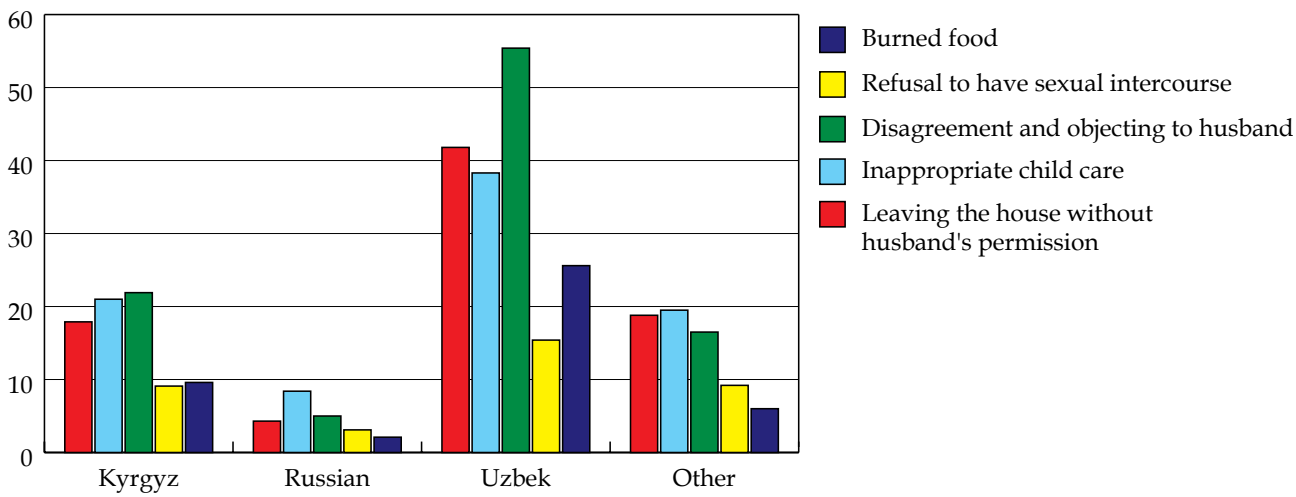
On average, nearly one of the five women who participated in the interview expressed support for the possibility of violence towards women for such reasons as leaving the house without husband's permission (20.5%), inappropriate or inadequate care provided to the children (22.4%), disagreeing with and/or objecting to the husband (25,6%) (Figure CP.4). However, the percentage of such support decreases if the cause of violence is refusal to have unwanted sexual intercourse (9.5%) or burned food (11.3%). In general, about 38% of women accepted domestic violence due to any of above reasons, at that rural women accepted domestic violence as justified twice as often as urban women.

Figure CP.4: Percentage of women who supported domestic violence for selected reasons by residence, Kyrgyz Republic, 2006



The respondents' answers vary by ethnic group and this variation may be connected with the degree of domestic violence episodes committed by the husbands or partners against the women. The main assumption here is that women that agree with the statements indicating that husbands/partners are justified to beat their wives/partners in reality tend to be abused by their own husbands/partners. Uzbek women tended to agree with the justification for punishment in the situations described above considerably more than Kyrgyz and Russian women (Figure CP.5).

Figure CP.5: Percentage of women who supported domestic violence for selected reasons by ethnicity, Kyrgyz Republic, 2006



XI. HIV/AIDS, SEXUAL BEHAVIOUR, AND ORPHANED CHILDREN

Knowledge of HIV Transmission and Condom Use

The availability of correct information about HIV/AIDS transmission and prevention, especially among young people, is a major factor in controlling infection rates. Incorrect information, on the contrary, reduces the effectiveness of preventive activities and leads to higher infection rates.

In order to identify their level of awareness of HIV/AIDS and its prevention, the subjects interviewed were asked whether they knew how HIV is transmitted and how it is possible to protect themselves.

There were 7,043 women interviewed on the subject. The survey results showed that the level of HIV/AIDS awareness among women aged 15-49 varied regionally (Table HA.1). While 99% of female respondents in Bishkek had heard about HIV/AIDS, around 96% of women in the northern regions knew of the disease, just 81.8% in Batken, 86.4% in Osh, and 88.5% in Jalalabad had knowledge of HIV/AIDS.

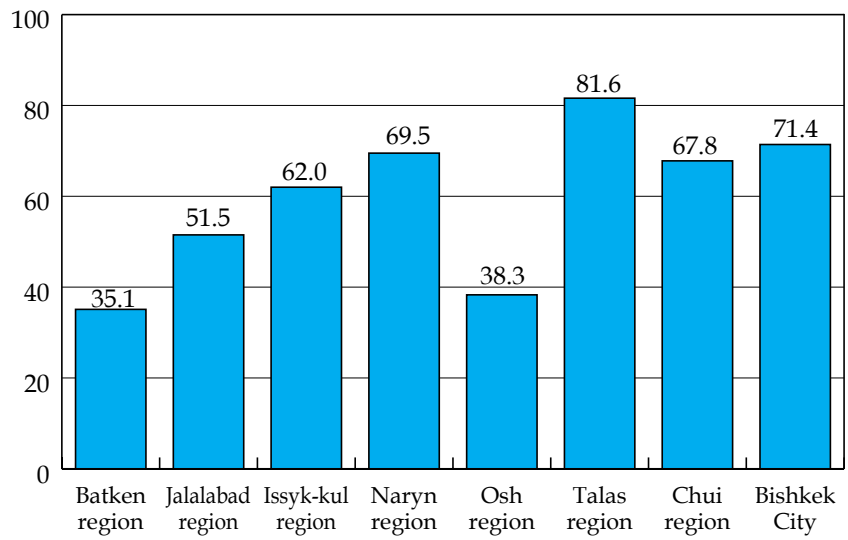
The lowest levels of awareness among the respondents regarding preventing HIV/AIDS transmission was recorded in the Batken (41.0%), Osh (29.5%) and Jalalabad (19.1%) regions; where the respondents did not know even one method of HIV/AIDS prevention.

Table HA.2 presents the percent of women who can correctly identify misconceptions concerning HIV. The indicator is based on the two most common and relevant misconceptions in Kyrgyzstan, that HIV can be transmitted by sharing food and by mosquito bites. The table also provides information on whether women know that HIV cannot be transmitted by supernatural means, and that HIV can be transmitted by sharing needles. Of the interviewed women, only 27.3% reject the two most common misconceptions and know that a healthy-looking person can be infected. Nearly 56% of women know that HIV cannot be transmitted by sharing food, and 47.8% of women know that HIV cannot be transmitted by mosquito bites, while 64.8% of women know that a healthy-looking person can be infected.

Again, the lowest levels of awareness regarding HIV/AIDS transmission was recorded in the Batken and Osh regions (respectively, 10.8% and 7.8% as for rejecting two most common misconceptions and knowing that healthy-looking people can be infected). As expected, the percent of women with comprehensive knowledge increases with the woman's education level. Awareness level is positively correlated with household well-being index.

The survey showed that percentage of women informed about at least two methods of preventing HIV/AIDS transmission differed by regions (Table HA.3). In Bishkek, 71.4% of respondents knew two methods while in the Naryn and Chui regions was 69.5% and 67.8% respectively. The percentage of respondents knowing two methods of prevention in Talas is 81, 6 %, in Jalalabad is 51,5 % and in Batken and Osh is less than 40% (Figure HA.1).

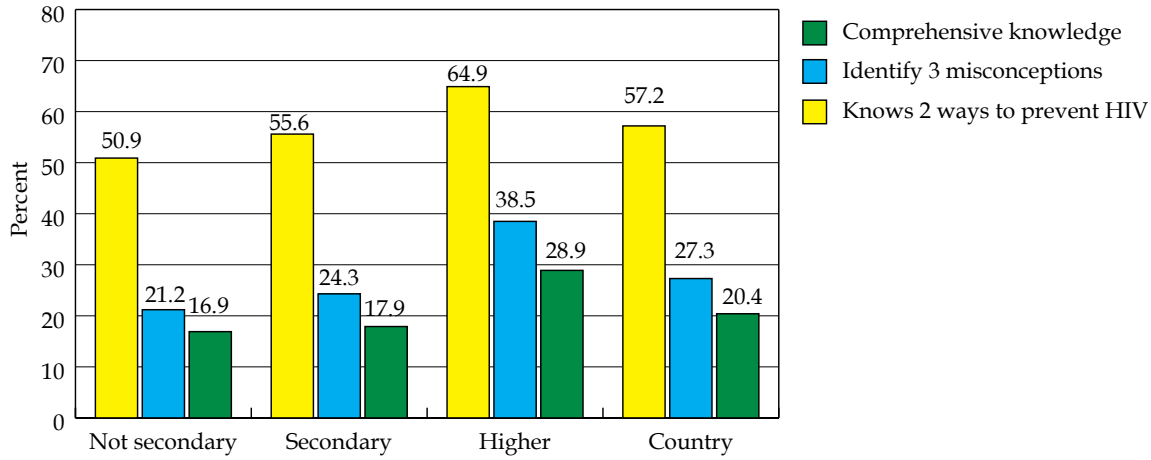
Figure HA.1: Percentage of women aware of two methods of preventing the spread of HIV/AIDS, by region. Kyrgyz Republic. 2006



Significant differences are revealed in the level of respondents' knowledge about two ways of HIV/AIDS transmission prevention between urban (61.9%) and rural areas (53.6%). The largest awareness was manifested with respondents 30-34 years old respondents (63.6%) and 40-44 year old respondents (61.7%), while just 50% of 15-19 aged respondents were aware of two methods of prevention.

The survey revealed a correlation between education level and awareness among 15-49 year old women (Figure HA.2). Among women with primary education, just 50.9% were aware of two prevention methods, while almost 55.6% who were aware had a secondary education level, and some 65% of those with higher education backgrounds were aware.

Figure HA.2: Percent of women who have comprehensive knowledge of HIV/AIDS transmission, Kyrgyzstan, 2006



The higher is the quintile by the household wealth index the higher is a level of women's awareness. Kyrgyz (21.7%) and Russian (32.9%) women more likely have comprehensive knowledge then Uzbek women (6.4%) (Table HA.3).

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, 86% of women know that HIV can be transmitted from mother to child. The percentage of women who know all three ways of mother-to-child transmission is 58%, while 6.1% of women did not know of any specific way.

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; and 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. According to the survey 94.8% of respondents agree with at least one discriminatory statement. This percentage does not vary much with regard to age group and education of respondents.

Another important indicator is the knowledge of where to be tested for HIV and use of such services. Questions related to knowledge among women of a facility for HIV testing and whether they have ever been tested is presented in Table HA.6. Only 59% of women know where to be tested, while 37% have actually been tested. Of these, a large proportion has been told the result (79.2%). Women in Bishkek and Chui region are most informed on where to be tested for HIV (80.6% and 79.1% respectively).

Among 1,209 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. About 97% of the above women were covered by antenatal care, but only 62.6% of them were informed of HIV/AIDS prevention methods by any medical staff.

Less than 50% of pregnant women received information on HIV/AIDS prevention methods from any medical staff in Jalalabad region, Naryn region and Chui region. In rural areas, health staff showed information on HIV/AIDS with 53.9% of women, while in urban area the percentage was as high as 75.4%.

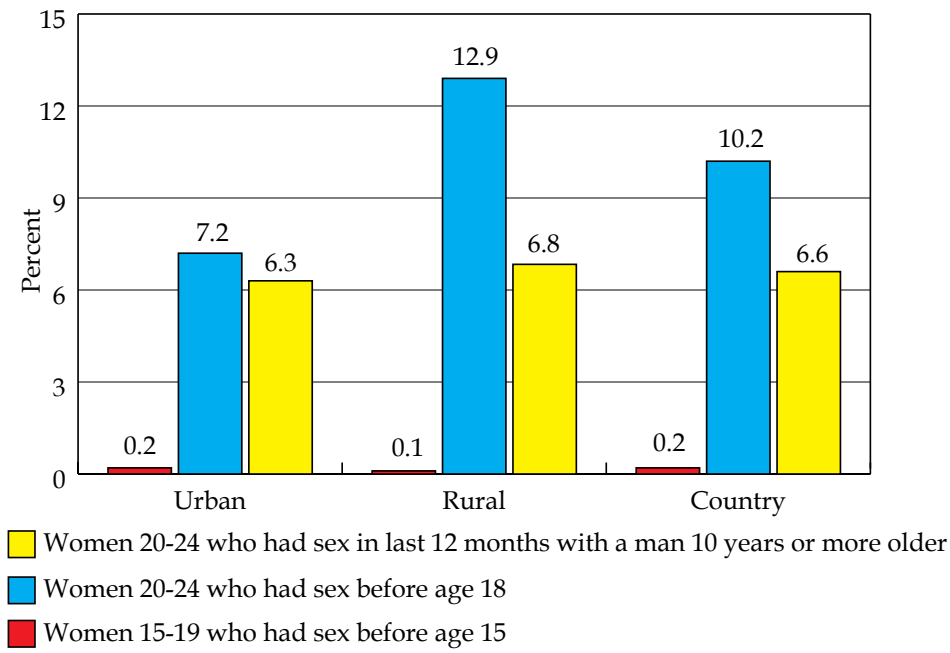
Sexual Behaviour Related to HIV Transmission

Promoting safer sexual behaviour is critical for reducing HIV prevalence. The use of condoms during sex, especially with non-regular partners, is especially important for reducing the spread of HIV. In most countries over half of new HIV infections are among young people 15-24 years thus a change in behaviour among this age group will be especially important to reduce new infections.

The survey assessed the use of condoms as one of the main methods to prevent HIV-infection. A module of questions was administered to women 15-24 years of age to assess their risk of HIV infection (Table HA.8). Risk factors for HIV include sex at an early age, sex with older men, sex with a non-marital non-cohabitating partner, and failure to use a condom.

In accordance with the survey results, almost no sex at early age (before 15 years of age) was reported among interviewed rural and urban women aged 15-19 years. The percentage of the women who had sex before age 15 was about 0.2%. The proportion of women aged 20-24 years, who had sexual intercourse before 18 years of age, was 10.2%. It was equal to 12.9% in rural areas and 7.2% in urban areas. This corresponds roughly to the percentage of women aged 20-24 who were married before the age of 18 (10.4%).

Figure HA.3: Sexual behaviour that increases risk of HIV infection, Kyrgyz Republic, 2006



The frequency of sexual behaviour that increase the risk of HIV infection among women who had a sexual intercourse within the last 12 months with older men (10 years), does not considerably differ both in urban and in rural areas (6.3% and 6.8% respectively) (Figure HA.3).

The proportion of young women 15-24 years of age who had sexual contacts with more than one partner within the previous 12 months was 0.7% (Table HA.9). These women are considered to be high risk group population.

It is noted that out of 29.6% of 15-24 year old women who had sexual contact with non-cohabiting partners during the 12 months preceding the survey, only 7.4% had contacts with an irregular partner, therefore, exposing themselves to higher risk of HIV infection. Only 56% of them used condoms.

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SELECTED TABLES

Table HH.1: Results of household and individual interviews

Numbers 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, Kyrgyzstan, 2006

	Residence		Region								
	Urban	Rural	Bat-ken	Jalala-bad	Issyk-Kul	Naryn	Osh	Talas	Chui	Bish-kek c.	Total
Number of households											
Sampled households	2 990	2 210	624	624	624	624	832	624	624	624	5 200
Occupied households	2 990	2 209	624	624	624	623	832	624	624	624	5 199
Interviewed households	2 985	2 194	624	624	624	603	832	624	624	624	5 179
Household response rate	99.8	99.3	100.0	100.0	100.0	96.8	100.0	100.0	100.0	100.0	99.6
Number of women											
Eligible women	4 062	2 981	802	925	773	690	1 148	898	848	959	7 043
Interviewed women	4 040	2 933	797	908	769	671	1 139	893	838	958	6 973
Women response rate	99.5	98.4	99.4	98.2	99.5	97.2	99.2	99.4	98.8	99.9	99.0
Women's overall response rate	99.3	97.7	99.4	98.2	99.5	94.1	99.2	99.4	98.8	99.9	98.6
Number of children under 5											
Eligible children under 5	1 568	1 432	342	325	348	320	539	465	276	385	3 000
Mother/Caretaker Interviewed	1 565	1 422	340	324	348	316	539	463	272	385	2 987
Child response rate	99.8	99.3	99.4	99.7	100.0	98.8	100.0	99.6	98.6	100.0	99.6
Children's overall response rate	99.6	98.6	99.4	99.7	100.0	95.6	100.0	99.6	98.6	100.0	99.2

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, Kyrgyzstan, 2006

	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Age						
0-4	1 511	12.8	1 494	11.3	3 005	12.0
5-9	1 228	10.4	1 210	9.1	2 438	9.7
10-14	1 391	11.8	1 359	10.3	2 750	11.0
15-19	1 255	10.6	1 593	12.0	2 848	11.4
20-24	990	8.4	1 322	10.0	2 312	9.2
25-29	940	8.0	1 106	8.3	2 046	8.2
30-34	855	7.3	925	7.0	1 781	7.1
35-39	778	6.6	813	6.1	1 591	6.4
40-44	692	5.9	811	6.1	1 503	6.0
45-49	641	5.4	689	5.2	1 330	5.3
50-54	515	4.4	614	4.6	1 129	4.5
55-59	323	2.7	355	2.7	677	2.7
60-64	164	1.4	210	1.6	374	1.5
65-69	240	2.0	263	2.0	503	2.0
70+	272	2.3	481	3.6	753	3.0
Dependency age groups						
< 15	4 129	35.0	4 063	30.7	8 192	32.7
15-64	7 153	60.6	8 438	63.7	15 591	62.3
65 +	512	4.3	744	5.6	1 256	5.0
Children aged 0-17	4 962	42.1	4 960	37.4	9 923	39.6
Adults 18+	6 832	57.9	8 285	62.6	15 117	60.4
Total	11 794	100.0	13 246	100.0	25 040	100.0

Table HH.3: Household composition

Percent distribution of households by selected characteristics, Kyrgyzstan, 2006

	Weighted percent	Number of households	
		Weighted	Unweighted
Sex of household head			
Male	74.7	3 884	3 931
Female	25.3	1 316	1 248
Region			
Batken	7.5	388	624
Jalalabad	16.0	832	624
Issyk-Kul	8.6	447	624
Naryn	4.9	254	603
Osh	21.7	1 131	832
Talas	3.7	191	624
Chui	17.4	902	624
Bishkek c.	20.3	1 055	624
Residence			
Urban	43.2	2 247	2 985
Rural	56.8	2 953	2 194
Number of household members			
1	3.0	158	164
2-3	23.6	1 228	1 185
4-5	40.3	2 093	2 162
6-7	23.6	1 228	1 254
8-9	6.4	333	307
10+	3.1	159	107
Ethnicity/Language			
Kyrgyz	58.7	3 052	3 507
Russian	18.3	953	712
Uzbek	16.9	879	675
Other	6.1	316	285
Total	100.0	5 200	5 179
At least one child aged < 18 years	81.5	5 200	5 179
At least one child aged < 5 years	43.9	5 200	5 179
At least one woman aged 15-49 years	89.4	5 200	5 179

Table HH.4: Women's background characteristics

Percent distribution of women aged 15-49 years by background characteristics, Kyrgyzstan, 2006

	Weighted percent	Number of women	
		Weighted	Unweighted
Region			
Batken	6.9	489	797
Jalalabad	17.7	1 245	908
Issyk-Kul	7.4	523	769
Naryn	4.0	281	671
Osh	21.8	1 536	1 139
Talas	4.0	282	893
Chui	16.0	1 130	838
Bishkek c.	22.1	1 556	958
Residence			
Urban	43.4	3 055	4 040
Rural	56.6	3 988	2 933
Age			
15-19	21.9	1 542	1 554
20-24	18.1	1 276	1 218
25-29	15.3	1 077	1 014
30-34	12.6	887	873
35-39	11.3	799	799
40-44	11.2	791	812
45-49	9.5	671	703
Marital/Union status			
Currently married/in union	59.6	4 195	4 156
Formerly married/in union	9.6	674	698
Never married/in union	30.9	2 174	2 119
Motherhood status			
Ever gave birth	64.3	4 529	4 478
Never gave birth	35.7	2 514	2 495
Education			
Not secondary	13.3	939	960
Secondary	62.8	4 422	4 449
Higher	23.9	1 682	1 564
Wealth index quintiles			
Poorest	17.4	1 228	1 464
Second	19.0	1 337	1 405
Middle	18.2	1 279	1 316
Fourth	20.4	1 436	1 367
Richest	25.0	1 763	1 421
Ethnicity/Language			
Kyrgyz	61.5	4 333	4 865
Russian	13.5	950	716
Uzbek	18.8	1 324	999
Other	5.9	417	377
Total	100.0	7 043	6 973

Table HH.5: Children's background characteristics

Percent distribution of children under five years of age by background characteristics, Kyrgyzstan, 2006

	Weighted percent	Number of under-5 children	
		Weighted	Unweighted
Sex			
Male	50.3	1 509	1 540
Female	49.7	1 491	1 447
Region			
Batken	8.0	239	340
Jalalabad	14.7	440	324
Isyk-Kul	8.0	239	348
Naryn	4.2	127	316
Osh	24.3	728	539
Talas	5.1	154	463
Chui	14.2	425	272
Bishkek c.	21.6	648	385
Residence			
Urban	40.4	1 211	1 556
Rural	59.6	1 789	1 431
Age			
< 6 months	10.9	327	286
6-11 months	8.9	266	285
12-23 months	21.1	633	589
24-35 months	19.6	587	598
36-47 months	17.9	537	551
48-59 months	21.7	650	678
Mother's education			
Not secondary	7.1	214	177
Secondary	69.1	2 074	2 132
High	23.8	713	678
Wealth index quintiles			
Poorest	20.4	613	742
Second	19.1	573	631
Middle	18.9	567	572
Fourth	18.8	566	516
Richest	22.7	682	526
Ethnicity/Language*			
Kyrgyz	66.6	1 998	2 269
Russian	9.8	295	204
Uzbek	17.8	533	375
Other	5.7	171	133
Total	100.0	3 000	2 987

Note: * – 6 unweighted cases with missing ethnicity not shown.

Table CM.1: Child mortality

Infant and under-five mortality rates, Kyrgyzstan, 2006

	Infant mortality rate*	Under-five mortality rate**
Sex		
Male	48	56
Female	27	31
Residence		
Urban	31	35
Rural	43	50
Total	38	44

*** MICS indicator 2; MDG indicator 14**

**** MICS indicator 1; MDG indicator 13**

Table NU.1: Child malnourishment

Percentage of children aged 0-59 months who are severely or moderately malnourished, Kyrgyzstan, 2006

	Weight for age		Height for age		Weight for height			Number of children aged 0-59 months
	% below - 2 SD*	% below - 3 SD	% below - 2 SD**	% below - 3 SD	% below – 2 SD***	% below - 3 SD	% above + 2 SD	
Sex								
Male	3.9	0.2	14.0	3.5	2.8	0.4	5.8	1 450
Female	2.9	0.3	13.3	3.8	4.3	0.3	5.8	1 434
Region								
Batken	5.5	0.2	21.5	6.9	3.3	…	5.3	233
Jalalabad	2.5	0.2	8.3	3.3	9.2	0.1	3.6	422
Isyk-Kul	6.9	0.9	22.6	8.6	7.8	3.4	9.2	229
Naryn	9.0	0.5	13.7	2.2	1.9	0.1	6.3	110
Osh	2.7	0.4	15.2	1.6	1.0	0.1	6.2	699
Talas	4.8	0.6	27.3	10.8	2.0	1.2	12.4	144
Chui	2.3	…	10.5	3.3	2.9	…	3.1	415
Bishkek c.	2.1	…	8.5	2.1	2.1	…	6.1	632
Residence								
Urban	3.4	0.4	10.8	2.7	2.7	0.2	5.9	1 172
Rural	3.4	0.1	15.7	4.3	4.1	0.5	5.8	1 711
Age								
< 6 months	0.3	0.1	4.9	2.1	8.3	0.9	6.5	302
6-11 months	1.8	0.3	6.9	2.1	2.3	0.2	8.4	261
12-23 months	3.3	0.2	15.7	4.9	6.2	0.2	8.8	597
24-35 months	5.3	…	14.7	4.0	1.6	0.6	3.6	562
36-47 months	3.3	0.5	14.9	3.5	3.3	0.3	2.9	527
48-59 months	4.0	0.4	16.9	3.9	1.2	0.3	6.1	633
Mother's education								
Not secondary	6.4	0.1	21.7	6.7	11.8	1.5	2.0	210
Secondary	3.6	0.3	14.2	3.6	3.0	0.3	5.2	1990
High	1.9	0.2	9.7	3.0	2.4	0.2	8.9	684
Wealth index quintiles								
Poorest	3.0	0.2	18.8	3.5	3.0	0.2	6.1	584
Second	3.4	0.1	14.9	3.9	3.2	0.3	4.9	556
Middle	4.2	0.5	12.5	4.8	6.1	0.6	4.3	535
Fourth	4.1	0.4	12.4	4.5	2.8	0.7	6.9	544
Richest	2.6	0.2	10.2	2.1	2.9	0.2	6.8	664
Ethnicity/Language								
Kyrgyz	3.5	0.3	15.6	3.9	2.5	0.5	6.9	1 906
Russian	0.6	0.2	4.6	3.5	1.3	…	5.1	288
Uzbek	3.7	0.3	9.3	1.4	7.7	0.1	3.4	518
Other	6.3	0.5	20.7	8.6	6.9	0.3	2.9	169
Missing	(*)	(*)	(*)	(*)	(*)	(*)	(*)	4
Total	3.4	0.3	13.7	3.7	3.5	0.4	5.8	2 883

*** MICS indicator 6; MDG indicator 4**
**** MICS indicator 7**
***** MICS indicator 8**
(*) – Figures that are based on less then 25 unweighted cases
… – No reported cases

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, Kyrgyzstan, 2006

	Percentage who started breastfeeding within one hour of birth*	Percentage who started breastfeeding within one day of birth	Number of women with a live birth in the two years preceding the survey
Region			
Batken	48.5	81.3	91
Jalalabad	74.9	82.3	189
Isyk-Kul	65.5	92.5	81
Naryn	83.6	91.5	51
Osh	70.4	91.6	298
Talas	55.0	93.9	45
Chui	48.1	87.3	182
Bishkek c.	66.7	94.0	273
Residence			
Urban	65.2	91.2	490
Rural	64.7	88.2	719
Months since birth			
< 6 months	63.9	89.2	322
6-11 months	67.6	84.4	261
12-23 months	64.3	91.6	626
Mother's education			
Not secondary	57.7	81.4	115
Secondary	67.3	90.5	777
High	61.7	89.5	318
Wealth index quintiles			
Poorest	63.3	89.1	228
Second	67.4	89.4	219
Middle	66.8	88.0	252
Fourth	63.1	87.7	220
Richest	64.0	92.3	290
Ethnicity/Language			
Kyrgyz	69.4	90.1	793
Russian	45.4	86.5	121
Uzbek	66.4	88.5	226
Other	41.6	89.5	68
Total	64.9	89.4	1 209

*** MICS indicator 45**

Table NU.3: Breastfeeding

Percentage of living children according to breastfeeding status at each age group. Kyrgyzstan, 2006

	Children 0-3 months		Children 0-5 months		Children 6-9 months		Children 12-15 months		Children 20-23 months	
	Percent exclusively breastfed	Number of children	Percent exclusively breastfed*	Number of children	% receiving breast milk & solid/ mushy food**	Number of children	Percent breastfed***	Number of children	Percent breastfed***	Number of children
Sex										
Male	32.9	96	30.1	145	58.3	90	63.4	97	46.3	85
Female	50.8	73	32.8	157	39.0	79	70.7	143	8.1	94
Residence										
Urban	34.5	67	22.3	124	47.9	87	60.9	82	19.6	65
Rural	44.7	102	38.0	178	50.8	82	71.4	158	30.1	114
Mother's education										
Not secondary	(*)	7	(21.4)	30	(*)	9	(*)	17	(*)	14
Secondary	42.3	127	35.9	195	43.5	96	69.0	163	29.3	107
High	(34.3)	35	24.5	77	56.9	65	59.4	61	9.9	59
Wealth index quintiles										
Poorest	(30.5)	27	(30.3)	49	43.1	36	(68.7)	47	(41.2)	34
Second	(70.0)	37	47.9	59	(*)	15	85.3	53	(61.5)	28
Middle	(43.5)	28	38.2	64	48.1	40	64.9	60	(20.1)	40
Fourth	(35.8)	34	29.1	57	(60.2)	26	(52.2)	37	(12.4)	29
Richest	(23.4)	43	15.4	74	51.2	52	(62.7)	43	(8.4)	49
Ethnicity/Language										
Kyrgyz	40.6	116	32.0	193	50.5	129	63.8	161	18.5	95
Russian	(*)	16	(8.2)	26	(*)	16	(*)	16	(*)	15
Uzbek	(69.9)	27	47.4	63	(*)	17	(93.4)	50	(57.9)	43
Other	(*)	10	(*)	20	(*)	7	(*)	13	4.1	26
Total	40.7	169	31.5	302	49.3	169	67.8	241	26.2	180

*** MICS indicator 15**
**** MICS indicator 17**
***** MICS indicator 16**
(…) – Figures that are based on 25-49 unweighted cases
(*) – Figures that are based on less then 25 unweighted cases

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, Kyrgyzstan, 2006

	Percent of infants					
	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**	Number of infants aged 0-11 months
Sex						
Male	30.1	54.7	53.5	54.2	41.7	278
Female	32.8	41.9	26.2	34.3	33.5	285
Region						
Batken	46.0	67.5	72.3	69.9	54.9	51
Jalalabad	41.5	…	33.0	11.1	34.2	73
Isyk-Kul	(31.1)	(18.6)	(18.7)	(18.6)	(24.4)	40
Naryn	(27.9)	(28.9)	(33.3)	(32.2)	(30.0)	27
Osh	51.6	50.4	18.5	37.3	44.8	128
Talas	(*)	(*)	(*)	(*)	(*)	22
Chui	2.5	70.3	49.8	57.6	34.1	75
Bishkek c.	15.9	58.1	38.5	52.3	34.1	148
Residence						
Urban	22.3	49.9	37.3	45.2	33.5	244
Rural	38.0	48.0	39.7	43.9	40.6	320
Mother's education						
Not secondary	(21.4)	(48.3)	(58.6)	(51.7)	(29.4)	41
Secondary	35.9	42.6	41.5	42.1	38.7	360
High	24.5	58.5	29.1	48.1	36.9	163
Wealth index quintiles						
Poorest	30.3	42.4	26.2	35.4	33.1	108
Second	47.9	19.4	44.1	29.9	42.6	84
Middle	38.2	52.7	54.1	53.4	45.6	125
Fourth	29.1	64.2	42.8	53.7	40.1	102
Richest	15.4	52.5	29.0	43.4	29.2	145
Ethnicity/Language						
Kyrgyz	32.0	47.9	44.7	46.5	39.4	393
Russian	8.2	35.5	16.0	23.5	16.3	56
Uzbek	47.4	50.5	29.4	42.9	46.2	86
Other	(9.2)	(82.7)	(15.2)	(74.6)	(28.4)	28
Total	31.5	48.9	38.8	44.5	37.5	564

*** MICS indicator 18**

**** MICS indicator 19**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table NU.5: Iodized salt consumption

Percentage of households consuming adeuqately iodized salt, Kyrgyzstan, 2006

	Percent of households in which salt was tested	Number of households interviewed	Percent of households with salt test result				Number of households in which salt was tested or with no salt
			Percent of households with no salt	<15 PPM	15+ PPM*	Total	
Region							
Batken	99.3	388	0.3	3.7	96.0	100.0	387
Jalalabad	99.2	832	0.2	27.8	72.0	100.0	827
Issyk-Kul	99.7	447	0.2	30.0	69.8	100.0	446
Naryn	98.7	254	…	27.6	72.4	100.0	251
Osh	99.6	1 131	0.4	42.8	56.8	100.0	1 130
Talas	99.9	191	…	19.7	80.3	100.0	190
Chui	99.8	902	0.2	14.5	85.3	100.0	902
Bishkek c.	97.0	1 055	0.3	11.7	88.0	100.0	1 026
Residence							
Urban	98.1	2 247	0.5	15.0	84.5	100.0	2 216
Rural	99.6	2 953	0.1	30.1	69.8	100.0	2 944
Wealth index quintiles							
Poorest	99.1	917	0.2	31.4	68.5	100.0	911
Second	99.4	918	0.3	30.9	68.8	100.0	915
Middle	99.7	960	0.3	32.1	67.6	100.0	960
Fourth	99.5	1 106	0.1	20.0	79.9	100.0	1 102
Richest	97.6	1 299	0.4	9.7	89.9	100.0	1 272
Total	99.0	5 200	0.3	23.6	76.1	100.0	5 160

***MICS indicator 41**

… – No reported cases

Table NU.6: Children's vitamin A supplementation

Percent distribution of children aged 6-59 months by whether they have received a high dose vitamin A supplement in the last 6 months, Kyrgyzstan, 2006

	Percent of children who received vitamin A:			Not sure if received vitamin A	Never received vitamin A	Total	Number of children aged 6-59 months
	Within last 6 months*	Prior to last 6 months	Not sure when				
Sex							
Male	45.2	20.0	9.4	5.8	19.6	100.0	1 305
Female	48.7	17.8	12.1	4.9	16.4	100.0	1 276
Region							
Batken	38.4	34.6	14.9	3.9	8.3	100.0	201
Jalalabad	26.8	11.2	35.7	20.0	6.3	100.0	367
Isyk-Kul	54.1	22.6	7.8	0.3	15.2	100.0	211
Naryn	70.4	16.4	1.6	0.5	11.1	100.0	96
Osh	43.8	12.9	6.3	6.2	30.7	100.0	632
Talas	46.8	35.4	5.7	1.1	10.9	100.0	135
Chui	54.5	25.6	8.1	3.0	8.8	100.0	383
Bishkek c.	55.0	15.7	3.6	0.6	25.1	100.0	558
Residence							
Urban	51.7	16.6	7.8	4.3	19.5	100.0	1 084
Rural	43.7	20.5	12.7	6.0	17.0	100.0	1 589
Age							
6-11 months	51.2	1.1	5.6	2.6	39.4	100.0	261
12-23 months	52.4	17.3	10.4	3.8	16.1	100.0	597
24-35 months	49.5	27.2	7.6	2.6	13.2	100.0	562
36-47 months	43.4	21.3	14.9	7.7	12.6	100.0	527
48-59 months	40.8	18.5	12.6	8.4	19.7	100.0	633
Mother's education							
Not secondary	49.3	23.8	12.4	7.6	6.8	100.0	180
Secondary	42.9	19.6	11.1	6.3	20.1	100.0	1 795
High	58.4	15.4	9.1	1.8	15.3	100.0	607
Wealth index quintiles							
Poorest	35.9	21.2	12.6	8.3	22.0	100.0	535
Second	42.1	18.8	17.5	2.8	18.8	100.0	497
Middle	49.7	17.4	10.0	9.0	14.0	100.0	471
Fourth	46.5	23.0	10.0	5.1	15.4	100.0	488
Richest	59.2	14.9	4.6	2.1	19.1	100.0	590
Ethnicity/Language							
Kyrgyz	48.9	19.6	8.9	3.8	18.8	100.0	1 712
Russian	58.7	16.9	5.7	4.1	14.6	100.0	262
Uzbek	33.1	14.3	19.5	13.4	19.7	100.0	455
Other	46.6	30.0	13.4	0.9	9.1	100.0	149
Missing	(*)	(*)	(*)	(*)	(*)	100.0	3
Total	47.0	18.9	10.7	5.3	18.0	100.0	2 581

*** MICS indicator 42**

(*) – Figures that are based on less then 25 unweighted cases

Table NU.7: Post-partum mothers' vitamin A supplementation

Percentage of women aged 15-49 years with a live birth in the 2 years preceding the survey by whether they received a high dose vitamin A supplement before the infant was 8 weeks old, Kyrgyzstan, 2006

	Received vitamin A supplement*	Not sure if received vitamin A	Number of women aged 15-49 years
Region			
Batken	70.9	4.4	91
Jalalabad	42.4	10.7	189
Isyk-Kul	58.6	0.6	81
Naryn	19.6	…	51
Osh	57.4	2.8	298
Talas	64.4	5.1	45
Chui	48.4	0.6	182
Bishkek c.	44.6	…	273
Residence			
Urban	50.4	0.8	490
Rural	50.7	4.5	719
Education			
Not secondary	38.6	1.5	115
Secondary	52.6	2.6	777
High	49.9	4.6	318
Wealth index quintiles			
Poorest	61.9	5.2	228
Second	49.7	3.8	219
Middle	45.1	3.8	252
Fourth	48.8	2.4	220
Richest	48.5	0.6	290
Ethnicity/Language			
Kyrgyz	53.5	3.3	793
Russian	52.3	…	121
Uzbek	36.3	4.7	226
Other	61.8	…	68
Total	50.6	3.0	1 209

***MICS indicator 43**

… – No reported cases

Table NU.8: Low birth weight infants

Percentage of live births in the 2 years preceding the survey that weighed below 2500 grams at birth, Kyrgyzstan, 2006

	Percent of live births:		
	Below 2500 grams*	Weighed at birth**	Number of live births
Region			
Batken	4.1	97.2	91
Jalalabad	3.5	89.9	189
Isyk-Kul	4.5	99.5	81
Naryn	10.3	98.3	51
Osh	5.0	96.8	298
Talas	3.5	95.0	45
Chui	6.1	99.5	182
Bishkek c.	6.2	99.4	273
Residence			
Urban	5.8	98.9	490
Rural	4.9	95.5	719
Mother's education			
Not secondary	5.5	95.4	115
Secondary	5.0	97.5	777
High	5.8	96.1	318
Wealth index quintiles			
Poorest	4.7	94.9	228
Second	4.2	95.7	219
Middle	4.8	96.6	252
Fourth	5.3	97.0	220
Richest	6.8	99.6	290
Ethnicity/Language			
Kyrgyz	5.4	97.1	793
Russian	7.5	99.4	121
Uzbek	2.9	94.1	226
Other	7.6	100.0	68
Total	5.3	96.9	1 209

*** MICS indicator 9**
**** MICS indicator 10**

Table CH.4: 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), Kyrgyzstan, 2006

	Had diarrhoea in last two weeks	Number of children aged 0-59 months	Children with diarrhoea who received: Fluid from ORS packet	Recom-mended homemade fluid	Pre-packaged ORS fluid	No treatment	ORT Use Rate *	Number of children aged 0-59 months with diarrhoea
Sex								
Male	4.2	1 450	19.4	1.5	2.1	79.9	20.1	60
Female	3.1	1 434	(20.3)	(10.4)	(9.8)	(79.1)	(20.9)	43
Region								
Batken	4.2	233	(*)	…	…	(*)	(*)	10
Jalalabad	2.3	422	(*)	(*)	(*)	(*)	(*)	10
Isyk-Kul	3.5	229	(*)	…	…	(*)	(*)	8
Naryn	1.7	110	…	…	…	(*)	…	2
Osh	2.1	699	(*)	…	…	(*)	(*)	14
Talas	6.7	144	…	…	…	(*)	…	10
Chui	6.8	415	(15.8)	…	(1.4)	(82.8)	(17.2)	28
Bishkek c.	3.5	632	(*)	…	…	(*)	(*)	22
Residence								
Urban	2.8	1 172	(16.8)	(2.7)	(2.7)	(83.2)	(16.8)	32
Rural	4.2	1 711	21.1	6.3	6.4	78.0	22.0	71
Age								
< 6 months	3.9	302	(*)	…	…	(*)	(*)	12
6-11 months	6.6	261	(*)	(*)	…	(*)	(*)	17
12-23 months	7.2	597	(16.4)	…	…	(83.6)	(16.4)	43
24-35 months	2.2	562	(*)	…	(*)	(*)	(*)	12
36-47 months	2.6	527	(*)	(*)	(*)	(*)	(*)	14
48-59 months	0.9	633	(*)	…	…	(*)	(*)	6
Mother's education								
Not secondary	4.1	210	…	…	…	(*)	…	9
Secondary	2.9	1 990	21.8	9.3	9.5	77.1	22.9	57
High	5.5	684	(21.2)	…	…	(78.8)	(21.2)	38
Wealth index quintiles								
Poorest	2.7	584	(*)	(*)	(*)	(*)	(*)	16
Second	3.2	556	(*)	(*)	(*)	(*)	(*)	18
Middle	3.9	535	(*)	(*)	(*)	(*)	(*)	21
Fourth	4.0	544	(*)	…	…	(*)	(*)	22
Richest	4.0	664	(12.5)	…	…	(87.5)	12.5	27
Ethnicity/Language								
Kyrgyz	3.4	1 906	24.7	1.7	1.9	74.3	25.7	66
Russian	4.0	288	…	…	…	(*)	…	11
Uzbek	2.0	518	(*)	(*)	(*)	(*)	(*)	10
Other	9.3	169	(*)	…	…	(*)	…	16
Total	3.6	2 883	19.8	5.2	5.3	79.6	20.4	103

*** MICS indicator33**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table CH.5: 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,Kyrgyzstan, 2006

	Had diarrhoea in last two weeks	Number of children aged 0-59 months	Children with diarrhoea who:				Home management of diarrhoea*	Received ORT or increased fluids AND continued feeding**	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			
Sex									
Male	4.2	1 450	23.9	76.1	49.5	50.5	13.4	17.2	60
Female	3.0	1 434	26.5	73.5	55.3	44.7	19.2	29.3	43
Residence									
Urban	2.8	1 172	25.2	(74.8)	(66.1)	(33.9)	(24.8)	(26.4)	32
Rural	4.2	1 711	24.9	75.1	45.5	54.5	11.2	20.5	71
Ethnicity/Language									
Kyrgyz	3.4	1 906	33.8	66.2	51.6	48.4	19.1	23.5	66
Russian	4.0	288	(*)	(*)	(*)	(*)	(*)	(*)	11
Uzbek	2.0	518	(*)	(*)	(*)	(*)	(*)	(*)	10
Other	9.3	169	(*)	(*)	(*)	(*)	(*)	(*)	16
Total	3.6	2 883	25.0	75.0	51.9	48.1	15.4	22.3	103

*** MICS indicator34**

**** MICS Indicator 35**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table CH.6: 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, Kyrgyzstan, 2006

	Had acute respiratory infection	No. of children aged 0-59 months	Children with suspected pneumonia who were taken to:								Any appro-priate provider*	No. of children 0-59 mos with suspected pneumo-nia
			Public sources						Private sources			
			Govt. Hospital	Govt. health centre	Govt. health post	Village health worker	Mobile/ outreach clinic	Other public	Private physicn.	Pharmacy		
Sex												
Male	5.9	1 450	25.6	10.8	0.5	20.5	1.5	4.7	…	2.5	63.4	86
Female	5.4	1 434	26.0	24.3	1.3	18.7	…	9.1	9.4	3.7	60.7	77
Residence												
Urban	5.7	1 172	38.9	13.5	2.2	…	0.7	13.1	…	6.8	68.1	67
Rural	5.6	1 711	16.6	19.8	…	33.4	0.9	2.4	7.6	0.5	57.9	96
Mother's education												
Not secondary	8.9	210	(*)	(*)	…	(*)	…	(*)	(*)	…	(*)	19
Secondary	5.6	1 990	16.3	13.3	1.4	21.6	0.7	3.1	…	3.0	56.2	110
High	4.9	684	(36.2)	(17.4)	…	(2.8)	(1.5)	(17.3)	…	(5.0)	(75.1)	34
Ethnicity/Language												
Kyrgyz	5.5	1 906	18.9	14.5	0.1	9.9	1.3	7.2	…	2.2	51.6	104
Russian	4.0	288	(*)	(*)	(*)	…	…	(*)	…	(*)	(*)	11
Uzbek	6.7	518	(38.4)	(31.8)	(0.9)	(63.1)	…	…	(21.0)	…	(92.1)	34
Other	7.4	169	(*)	(*)	…	…	…	(*)	…	…	(*)	12
Total	5.6	2883	25.8	17.2	0.9	19.7	0.8	6.8	4.4	3.1	62.1	163

*** MICS indicator 23**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table CH.7: Antibiotic treatment of pneumonia

Percentage of children aged 0-59 months with suspected pneumonia who received antibiotic treatment, Kyrgyzstan, 2006

	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	40.4	86
Female	49.0	77
Residence		
Urban	69.8	67
Rural	26.8	96
Age		
0-11 months	(45.1)	30
12-23 months	(52.7)	33
24-35 months	(41.7)	34
36-47 months	(41.7)	40
48-59 months	(41.0)	26
Mother's education		
Not secobdary	(*)	19
Secondary	39.0	110
High	(74.5)	34
Ethnicity/Language		
Kyrgyz	49.7	104
Russian	(*)	11
Uzbek	(16.7)	34
Other	(*)	12
Total	44.5	163

*** MICS indicator 22**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table CH.7A: 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, Kyrgyzstan, 2006

	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 breastfeed	Becomes sicker	Develops a fever	Has fast breathing	Has difficult breathing	Has blood in stool	Is drinking poorly	Has other symptoms		
Region										
Batken	49.7	55.4	90.4	61.5	63.8	77.4	23.7	23.6	46.8	233
Jalalabad	29.5	54.3	81.1	44.9	46.2	38.4	28.2	1.5	36.6	422
Isyk-Kul	41.3	65.7	91.0	63.5	69.5	40.7	38.8	1.0	46.5	229
Naryn	65.6	91.5	78.6	62.9	89.6	92.4	13.0	3.8	60.1	110
Osh	47.9	22.5	96.3	21.3	53.3	56.9	8.2	7.0	9.8	699
Talas	22.8	62.7	76.2	43.2	75.1	63.8	6.5	1.6	31.2	144
Chui	29.6	62.7	82.0	63.9	81.2	78.4	21.1	17.5	58.8	415
Bishkek c.	42.9	65.3	91.7	71.2	78.9	53.1	19.7	1.9	63.7	632
Residence										
Urban	41.9	58.8	90.0	58.8	69.1	55.8	22.2	6.9	50.3	1 172
Rural	39.6	49.1	87.3	45.9	64.7	60.4	17.3	7.1	35.4	1 711
Mother's education										
Not secondary	35.0	49.2	89.6	43.4	66.8	63.8	13.8	7.0	34.7	210
Secondary	40.8	51.2	89.2	50.2	65.9	57.2	19.5	6.9	40.4	1 990
High	41.3	59.7	85.9	56.2	68.0	60.6	20.5	7.4	46.6	684
Wealth index quintiles										
Poorest	35.7	40.1	85.3	45.3	60.8	56.9	18.1	3.9	28.5	584
Second	42.1	41.6	88.4	37.8	61.9	58.8	15.8	8.5	27.0	556
Middle	46.8	58.9	91.1	50.2	65.6	59.6	17.7	5.4	43.4	535
Fourth	39.7	63.5	87.6	56.2	68.1	61.9	25.4	9.5	50.6	544
Richest	39.1	60.6	89.7	64.0	74.7	56.0	19.5	7.9	55.9	664
Ethnicity/Language										
Kyrgyz	42.0	54.2	87.5	52.5	65.4	57.5	18.8	5.4	41.4	1 906
Russian	41.4	68.8	86.3	66.0	81.2	64.2	18.7	7.4	61.6	288
Uzbek	42.7	42.0	93.2	36.9	62.9	56.1	23.6	5.1	29.1	518
Other	15.4	47.4	89.5	54.3	64.4	67.4	11.5	30.7	46.2	169
Total	40.9	53.1	88.3	51.5	66.5	58.9	19.2	6.9	41.8	2 883

Table CH.8: Solid fuel use

Percent distribution of households according to type of cooking fuel. and percentage of households using solid fuels for cooking, Kyrgyzstan, 2006

	Percentage of households using:												
	Electricity	Liquified Petroleum Gas (LPG)	Natural Gas	Coal. lignite	Charcoal	Wood	Straw. shrubs. grass	Animal dung	Agri-cul-tural crop residue	Other source	Total	Solid fuels for cooking*	Number of house-holds
Region													
Batken	10.2	9.0	1.4	1.8	13.9	31.7	…	12.1	18.8	1.2	100.0	78.3	388
Jalalabad	26.2	0.9	8.2	22.8	12.7	26.3	…	2.0	0.2	0.1	100.0	64.1	832
Issyk-Kul	71.5	7.2	…	9.7	1.0	7.3	…	3.3	…	…	100.0	21.3	447
Naryn	62.2	1.6	0.1	0.6	0.9	7.0	0.8	26.9	…	…	100.0	36.1	254
Osh	9.8	4.8	17.7	40.3	2.6	18.3	0.0	5.3	0.6	0.2	100.0	67.1	1 131
Talas	85.9	3.5	…	0.2	1.5	8.6	…	0.1	…	…	100.0	10.5	191
Chui	42.4	26.4	17.4	4.1	0.4	8.5	…	0.8	…	…	100.0	13.8	902
Bishkek c.	18.4	8.3	72.1	…	…	1.0	…	…	…	0.2	100.0	1.0	1 055
Residence													
Urban	28.7	9.3	49.2	6.2	2.4	2.7	0.0	0.4	0.6	0.2	100.0	12.4	2 247
Rural	32.0	8.7	2.9	20.2	5.0	21.7	0.1	6.9	2.3	0.2	100.0	56.2	2 953
Education													
Not secondary	15.9	11.4	9.2	19.3	10.4	20.3	…	7.5	4.9	0.9	100.0	62.5	238
Secondary	32.2	8.5	16.5	16.0	4.2	15.6	0.0	5.0	1.7	0.2	100.0	42.4	3 804
High	27.9	9.8	46.9	6.9	1.7	5.3	0.1	0.6	0.4	0.1	100.0	15.1	1 157
Wealth index quintiles													
Poorest	22.7	0.3	…	21.7	4.1	33.8	0.1	16.6	0.3	0.4	100.0	76.6	917
Second	35.4	4.6	…	19.3	8.4	25.5	0.1	5.4	1.1	0.0	100.0	59.8	918
Middle	38.8	8.2	0.8	25.7	7.0	12.5	0.1	0.9	5.3	0.4	100.0	51.5	960
Fourth	40.5	21.9	20.4	9.9	1.8	3.5	…	0.2	1.5	0.2	100.0	17.0	1 106
Richest	18.1	7.7	73.8	0.2	…	0.0	…	0.1	…	…	100.0	0.3	1 299
Ethnicity/Language													
Kyrgyz	35.4	5.4	19.1	14.0	3.5	13.8	0.1	6.1	2.4	0.1	100.0	39.8	3 052
Russian	34.6	19.5	41.3	2.2	0.2	1.7	…	0.0	…	0.4	100.0	4.0	953
Uzbek	14.3	5.5	12.8	29.9	9.6	24.6	0.0	2.3	0.8	…	100.0	67.2	879
Other	16.1	21.3	31.8	7.2	3.5	16.4	…	2.3	0.3	1.0	100.0	29.7	316
Total	30.5	9.0	22.9	14.1	3.9	13.5	0.0	4.1	1.6	0.2	100.0	37.3	5 200

*** MICS indicator 24; MDG Indicator 29**

… – No reported cases

Table CH.9: Solid fuel use by type of stove or fire

Percentage of households using solid fuels for cooking by type of stove or fire, Kyrgyzstan, 2006

	Percentage of households using solid fuels for cooking:					Number of households using solid fuels for cooking
	Closed stove with chimney	Open stove or fire with chimney or hood	Open stove or fire with no chimney or hood	Other stove	Total	
Region						
Batken	31.9	40.2	8.1	18.8	100.0	304
Jalalabad	83.5	10.1	3.2	…	100.0	533
Issyk-Kul	81.6	13.3	4.3	…	100.0	95
Naryn	68.1	27.4	4.3	0.2	100.0	92
Osh	93.2	6.3	0.5	…	100.0	759
Talas	(*)	(*)	(*)	…	100.0	20
Chui	83.4	14.9	1.6	…	100.0	124
Bishkek c.	(*)	(*)	…	…	100.0	10
Residence						
Urban	78.6	15.6	4.3	0.6	100.0	278
Rural	78.4	14.5	2.7	3.4	100.0	1 660
Education						
Not secondary	78.8	14.1	4.8	2.4	100.0	148
Secondary	77.6	15.1	2.9	3.2	100.0	1 614
High	85.8	10.5	1.7	1.1	100.0	174
Wealth index quintiles						
Poorest	77.6	14.2	2.0	4.1	100.0	702
Second	73.7	17.6	3.5	4.9	100.0	549
Middle	83.3	12.8	3.0	0.2	100.0	495
Fourth	81.8	12.5	4.7	0.2	100.0	188
Richest	(*)	…	…	…	100.0	3
Ethnicity/Language						
Kyrgyz	75.3	16.1	4.2	2.6	100.0	1 215
Russian	(97.2)	…	(2.8)	…	100.0	38
Uzbek	87.8	10.0	0.6	1.5	100.0	591
Other	51.4	30.4	0.5	17.7	100.0	94
Total	78.4	14.6	2.9	3.0	100.0	1938

(…) – Figures that are based on 25-49 unweighted cases
(*) – Figures that are based on less then 25 unweighted cases
… – No reported cases

Table CH.16: Source and cost of supplies for antibiotics

Percent distribution of children aged 0-59 months with suspected pneumonia during the two weeks preceding the survey by source of antibiotics for treatment of pneumonia percentage of children aged 0-59 months with suspected pneumonia during the two weeks preceding the survey for whom antibiotics were obtained for free and median cost of antibiotics for those paying for the antibiotics by type of source of antibiotics, Kyrgyzstan, 2006

	Source of antibiotics				Number of children with suspected pneumonia in prior 2 weeks who received antibiotics	Percentage free		Median cost for those not free	
	Public*	Private	Other	Total		Public	Private	Public**	Private**
Sex									
Male	(19.6)	(75.6)	(4.8)	100.0	35	(15.2)	…	(123.0)	(100.0)
Female	(14.2)	(85.0)	(0.8)	100.0	38	(43.5)	…	(290.9)	(100.0)
Residence							…		
Urban	(23.3)	(72.4)	(4.3)	100.0	47	(27.9)	…	(246.1)	(108.2)
Rural	(5.0)	(95.0)	…	100.0	26	(25.6)	…	…	(100.0)
Mother's education									
Not secondary	(*)	(*)	…	100.0	4	…	…	(*)	(*)
Secondary	(16.6)	(78.8)	(4.6)	100.0	44	(23.4)	…	(250.0)	(250.0)
High	(18.2)	(81.8)	…	100.0	25	(37.2)	…	(137.4)	(137.4)
Total	16.8	80.5	2.7	100.0	73	27.7	…	244.1	100.0

*** MICS indicator 96**
**** MICS indicator 97**
(…) – Figures that are based on 25-49 unweighted cases
(*) – Figures that are based on less then 25 unweighted cases
… – No reported cases

Table EN.1: Use of improved water sources

Percent distribution of household population according to main source of drinking water and percentage of household members using improved drinking water sources, Kyrgyzstan, 2006

	Main source of drinking water														
	Improved sources							Unimproved sources							
	Piped into dwelling	Piped into yard or plot	Public tap / stand-pipe	Tube well / bore-hole	Dug protected well	Protected spring	Bottled water	Dug unprotected well	Unprotected spring	Tanker-truck	Surface water (river. stream. lake. etc.)	Other	Total	Improved source of drinking water*	Number of household members
Region															
Batken	1.0	18.2	45.8	1.9	0.9	0.4	…	0.4	2.8	0.0	28.5	…	100.0	68.3	2 021
Jalalabad	6.0	33.3	34.2	1.5	9.1	…	…	0.2	3.8	0.3	9.9	1.7	100.0	84.2	4 649
Issyk-Kul	17.2	39.1	32.3	1.5	0.3	0.3	…	0.3	0.8	…	8.1	0.1	100.0	90.7	1 954
Naryn	6.4	7.4	59.3	6.8	4.4	1.5	…	0.2	3.1	…	10.6	0.1	100.0	86.0	1 170
Osh	14.4	30.0	36.2	0.2	1.2	0.4	…	0.5	0.4	…	14.0	2.6	100.0	82.4	6 095
Talas	6.9	10.2	21.8	41.3	6.0	1.4	…	3.0	4.8	…	4.6	…	100.0	87.6	1 018
Chui	52.7	19.4	8.8	17.3	0.5	0.3	…	0.1	0.1	0.1	0.7	…	100.0	99.0	3 840
Bishkek c.	80.3	15.0	4.2	…	…	0.1	0.4	…	…	…	…	…	100.0	100	4 295
Residence															
Urban	56.5	28.3	11.0	2.4	0.2	0.1	0.2	0.3	0.5	…	0.6	0.0	100.0	98.7	9 469
Rural	11.5	21.9	36.9	7.0	4.1	0.5	…	0.4	2.1	0.1	14.1	1.5	100.0	81.8	15 571
Mother's education															
Not secondary	9.8	23.0	31.2	3.4	13.0	…	…	…	1.2	0.9	16.2	1.4	100.0	80.4	1 268
Secondary	22.7	25.4	30.8	5.6	1.9	0.4	0.0	0.5	1.7	0.0	9.2	1.0	100.0	86.9	18 828
High	55.3	20.4	11.7	4.3	2.8	0.4	0.2	…	0.7	…	4.1	0.2	100.0	95.0	4 936
Wealth index quintiles															
Poorest	…	10.4	56.8	4.7	1.4	0.4	…	0.4	2.0	…	22.5	1.3	100.0	73.8	5 010
Second	…	32.2	37.5	5.8	1.6	0.5	…	0.8	4.1	…	16.0	1.5	100.0	77.6	5 026
Middle	5.8	36.9	30.6	10.5	7.6	0.6	…	0.5	1.1	0.1	4.4	1.9	100.0	92.1	4 989
Fourth	40.9	39.3	9.5	5.2	2.5	0.1	…	…	0.2	0.2	2.0	0.0	100.0	97.5	5 008
Richest	95.7	2.8	1.0	0.0	…	0.1	0.3	…	…	…	…	…	100.0	100.0	5 007
Ethnicity/Language															
Kyrgyz	27.5	19.7	31.1	5.1	1.8	0.4	…	0.4	2.1	0.1	10.8	1.1	100.0	85.6	15 359
Russian	66.5	16.0	4.6	10.2	1.2	0.5	0.3	0.3	0.2	…	0.1	…	100.0	99.4	3 146
Uzbek	5.3	44.2	31.8	1.5	7.5	0.0	…	0.3	0.8	…	8.0	1.5	100.0	89.3	5 085
Other	38.2	21.0	17.0	9.7	0.1	0.9	0.5	…	…	…	12.6	…	100.0	87.4	1 450
Total	28.5	24.3	27.1	5.3	2.6	0.4	0.1	0.3	1.5	0.1	9.0	1.0	100.0	88.2	25 040

*** MICS indicator 11; MDG indicator 30**

… – No reported cases

Table EN.2: Household water treatment

Percentage distribution of household population according to drinking water treatment method used in the household and percentage of household members that applied an appropriate water treatment method, Kyrgyzstan, 2006

	Water treatment method used in the household								All drinking water sources		Improved drinking water sources:		Unimproved drinking water sources:	
	None	Boil	Add bleach / chlo-rine	Strain through a cloth	Use water filter	Solar disin-fect-tion	Let it stand and settle	Other	Appropri-ate water treatment method *	Number of household members	Appropri-ate water treatment method	Number of household members	Appropri-ate water treatment method	Number of household members
Region														
Batken	50.2	27.4	…	…	…	…	30.7	0.2	27.4	2.021	25.4	1 380	31.6	641
Jalalabad	78.5	16.6	…	…	…	…	20.0	…	16.6	4 649	14.6	3 913	27.1	736
Issyk-Kul	46.8	47.3	…	0.4	0.3	0.7	23.5	…	47.4	1 954	44.7	1 772	74.4	181
Naryn	44.9	51.4	0.0	1.3	0.1	…	25.6	…	51.4	1 186	48.5	1 006	69.8	164
Osh	48.9	49.6	0.8	…	…	…	9.1	…	49.6	6 095	47.9	5 023	57.5	1 072
Talas	70.2	26.1	3.0	2.5	…	…	10.8	…	28.1	1 018	22.3	892	68.6	126
Chui	73.8	25.3	…	0.1	0.5	0.0	2.4	…	25.5	3 840	25.1	3 803	(70.0)	37
Bishkek c.	62.8	33.8	0.2	…	1.2	2.2	10.4	0.1	35.2	4 295	35.2	4 295	…	0
Residence														
Urban	58.9	37.0	0.1	0.0	0.6	1.1	13.3	0.1	37.7	9 469	37.4	9 341	53.0	128
Rural	62.6	32.5	0.5	0.3	0.1	0.1	14.5	…	32.7	15 571	29.6	12 742	46.4	2 829
Mother's education														
Not secondary	58.8	31.2	…	0.2	…	…	21.3	…	31.2	1 268	31.4	1 019	(30.3)	249
Secondary	61.7	33.7	0.2	0.2	0.1	0.3	14.1	0.0	33.9	18 828	32.0	16 367	46.5	2 461
High	59.9	36.8	1.1	0.1	1.1	1.3	12.1	…	37.9	4 936	36.5	4 689	64.9	247
Wealth index quintiles														
Poorest	54.1	38.8	0.1	0.5	…	0.0	22.5	…	38.8	5 010	34.9	3 696	49.9	1 314
Second	56.6	34.9	1.2	0.3	…	…	18.3	0.1	35.0	5 026	31.8	3 902	46.2	1 124
Middle	67.6	30.9	0.3	0.1	…	…	7.6	…	31.2	4 989	30.3	4 593	41.4	396
Fourth	67.3	30.7	…	0.1	0.5	0.4	9.6	0.1	31.0	5 008	31.0	4 885	(33.6)	124
Richest	60.6	35.6	0.2	0.0	1.0	1.8	12.2	…	36.7	5 007	36.7	5 007	…	0
Ethnicity/Language														
Kyrgyz	58.7	37.0	0.2	0.3	0.1	0.5	14.0	0.0	37.2	15 359	35.4	13 145	47.9	2 213
Russian	70.3	26.5	0.2	0.1	1.5	1.3	9.2	…	27.9	3 146	27.7	3 128	(*)	19
Uzbek	63.1	31.4	…	…	…	…	17.2	…	31.4	5 085	30.4	4 543	40.2	542
Other	61.9	31.2	3.1	…	0.5	…	14.0	0.2	31.6	1 450	29.0	1 267	(*)	183
Total	61.2	34.2	0.3	0.2	0.3	0.4	14.0	0.0	34.6	25 040	32.9	22 084	46.7	2 957

*** MICS indicator 13**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

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, Kyrgyzstan, 2006

	Time to source of drinking water							Mean time to source of drinking water*	Number of households
	Water on premises	Less than 15 minutes	15 minutes to less than 30 minutes	30 minutes to less than 1 hour	1 hour or more	Don't know or missing	Total		
Region									
Batken	22.0	40.9	21.2	11.1	4.3	0.5	100.0	17.2	388
Jalalabad	44.5	35.0	13.7	3.0	0.9	2.9	100.0	12.4	832
Issyk-Kul	60.2	18.9	14.9	4.2	1.2	0.6	100.0	16.0	447
Naryn	14.6	52.6	18.4	11.8	2.5	0.1	100.0	14.5	254
Osh	47.5	20.2	18.8	9.7	3.5	0.3	100.0	22.1	1.131
Talas	16.8	62.9	9.7	7.7	2.4	0.6	100.0	12.0	191
Chui	74.1	21.0	2.8	1.0	1.0	0.1	100.0	10.7	902
Bishkek c.	96.5	3.2	0.2	…	0.2	…	100.0	10.5	1.055
Residence									
Urban	86.3	8.7	3.4	1.0	0.2	0.4	100.0	12.9	2.247
Rural	36.5	35.4	16.7	7.7	2.9	0.9	100.0	16.5	2.953
Education									
Not secondary	38.5	35.1	12.9	11.8	1.0	0.7	100.0	16.6	238
Secondary	52.7	26.8	12.5	5.2	2.0	0.8	100.0	15.9	3.804
High	79.4	12.0	5.2	2.2	1.1	0.0	100.0	16.2	1.157
Wealth index quintiles									
Poorest	10.3	48.6	23.7	13.0	3.9	0.7	100.0	17.5	917
Second	32.5	36.2	19.7	7.9	2.8	0.9	100.0	16.6	918
Middle	47.0	31.3	12.9	5.6	1.5	1.7	100.0	14.1	960
Fourth	80.2	13.8	4.2	0.4	1.1	0.3	100.0	12.7	1.106
Richest	99.1	0.7	0.1	0.1	0.1	…	100.0	16.7	1.299
Ethnicity/Language									
Kyrgyz	50.9	26.9	12.5	6.7	2.6	0.4	100.0	17.5	3.052
Russian	85.0	12.4	1.6	0.2	0.6	0.3	100.0	10.1	953
Uzbek	51.0	24.7	17.5	4.4	0.4	2.0	100.0	13.8	879
Other	65.0	26.4	5.8	1.9	0.8	0.2	100.0	11.2	316
Total	58.0	23.9	10.9	4.8	1.7	0.7	100.0	16.0	5.200

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

… – No reported cases

Table EN.4: Person collecting water

Percent distribution of households according to the person collecting water used in the household, Kyrgyzstan, 2006

	Person collecting drinking water							
	Adult woman	Adult man	Girls under age 15	Boys under age 15	Don't know	Missing	Total	Number of households
Region								
Batken	61.7	17.1	11.1	7.2	0.2	2.7	100.0	303
Jalalabad	61.5	10.6	16.7	6.0	…	5.2	100.0	462
Issyk-Kul	28.2	47.4	6.8	13.4	2.1	2.1	100.0	178
Naryn	27.5	46.2	8.5	13.2	…	4.7	100.0	217
Osh	49.1	29.3	11.5	9.5	…	0.7	100.0	593
Talas	37.9	47.0	5.3	8.2	0.6	1.0	100.0	159
Chui	52.4	35.7	1.5	9.5	…	0.9	100.0	234
Bishkek c.	(59.1)	(27.3)	(4.5)	(9.1)	…	…	100.0	37
Residence								
Urban	52.7	25.7	7.3	7.8	0.4	6.0	100.0	307
Rural	48.8	29.2	10.7	9.2	0.2	1.9	100.0	1 875
Education								
Not secondary	66.2	16.2	7.0	8.0	…	2.6	100.0	146
Secondary	47.9	29.4	10.7	9.2	0.3	2.4	100.0	1 798
High	49.5	31.2	8.6	7.9	…	2.8	100.0	237
Wealth index quintiles								
Poorest	50.5	28.3	9.6	8.5	0.5	2.5	100.0	823
Second	46.3	27.7	13.1	10.4	0.2	2.4	100.0	620
Middle	47.3	33.2	7.3	9.4	0.0	2.7	100.0	509
Fourth	59.9	21.2	11.1	5.7	…	2.2	100.0	219
Richest	(*)	(*)	(*)	(*)	…	…	100.0	12
Ethnicity/Language								
Kyrgyz	43.0	31.7	11.9	10.6	0.2	2.7	100.0	1 499
Russian	62.4	28.0	0.2	6.9	1.6	1.0	100.0	142
Uzbek	64.4	18.2	9.0	5.9	…	2.6	100.0	431
Other	59.2	30.6	5.6	3.0	0.5	1.2	100.0	110
Total	49.3	28.7	10.2	9.0	0.2	2.5	100.0	2 182

(…) – Figures that are based on 25-49 unweighted cases
(*) – Figures that are based on less then 25 unweighted cases
… – No reported cases

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

Percent distribution of household population according to type of toilet used by the household and the percentage of household members using sanitary means of excreta disposal, Kyrgyzstan, 2006

	Type of toilet facility used by household												
	Improved sanitation facility						Unimproved sanitation facility						
	Flush to piped sewer system	Flush to septic tank	Flush to pit	Ventilated Improved Pit latrine	Pit latrine with slab	Compost-ing toilet	Pit latrine without slab/open pit	Hanging toilet / latrine	No fa-cilities or bush or field	Other	Total	Percentage of popula-tion using sanitary means of excreta disposal*	Number of house-holds members
Region													
Batken	1.6	…	0.3	2.9	65.9	2.6	26.3	0.5	…	…	100.0	73.2	2 021
Jalalabad	3.6	…	29.8	…	66.0	…	…	0.6	0.0	…	100.0	99.0	4 649
Issyk-Kul	8.9	0.2	…	0.2	89.3	…	1.1	0.4	…	…	100.0	98.2	1 954
Naryn	5.2	…	…	…	93.6	…	0.3	0.6	0.2	…	100.0	97.6	1 170
Osh	8.5	0.0	3.5	0.2	84.1	…	3.4	0.1	0.2	…	100.0	95.2	6 095
Talas	3.2	…	…	…	96.8	…	…	0.1	…	…	100.0	99.9	1 018
Chui	15.9	0.2	0.3	0.5	80.8	…	1.7	…	…	0.6	100.0	97.6	3 840
Bishkek c.	63.9	…	19.6	…	16.5	0.1	…	…	…	…	100.0	100.0	4 295
Residence													
Urban	42.1	0.1	14.8	0.6	41.2	0.1	0.8	0.1	0.0	…	100.0	99.1	9 469
Rural	2.3	…	6.7	0.2	85.1	0.3	4.8	0.3	0.1	0.2	100.0	94.6	15 571
Mother's education													
Not secondary	2.7	…	12.3	0.0	77.9	…	6.5	0.5	…	…	100.0	93.0	1 268
Secondary	11.9	0.0	9.2	0.4	74.1	0.3	3.6	0.3	0.1	0.6	100.0	95.9	18 828
High	41.8	0.2	11.3	0.4	44.9	…	1.3	0.0	…	…	100.0	98.6	4 936
Wealth index quintiles													
Poorest	…	…	…	…	99.9	…	0.1	…	…	…	100.0	99.9	5 010
Second	…	…	7.0	0.3	88.6	0.6	3.2	0.2	0.0	…	100.0	96.6	5 026
Middle	…	…	14.1	0.3	75.1	0.3	9.3	0.5	0.0	1.1	100.0	89.7	4 989
Fourth	2.3	0.1	19.6	1.2	72.3	0.1	4.0	0.3	0.2	…	100.0	95.5	5 008
Richest	84.4	0.1	8.4	0.2	6.6	0.1	0.0	0.1	…	…	100.0	99.8	5 007
Ethnicity/Language													
Kyrgyz	18.6	0.0	8.0	0.4	66.8	0.3	5.2	0.4	0.1	0.6	100.0	94.2	15 359
Russian	38.2	…	6.6	0.3	54.8	0.1	…	…	0.0	…	100.0	100	3 146
Uzbek	1.2	0.1	17.2	0.1	80.6	0.1	0.6	…	…	…	100.0	99.4	5 085
Other	15.3	0.3	9.7	0.9	73.7	…	0.0	…	…	…	100.0	100	1 450
Total	17.3	0.1	9.8	0.4	68.5	0.2	3.3	0.2	0.1	0.1	100.0	96.3	25 040

*** MICS indicator 12; MDG indicator 31**

… – No reported cases

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, Kyrgyzstan, 2006

	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 or latrine	Put/rinsed into drain or ditch	Thrown into garbage	Buried	Left in the open	Other	Don't know/ Missing	Total		
Region											
Batken	4.9	24.8	22.7	3.5	30.8	5.0	8.2	0.1	100.0	29.8	142
Jalalabad	3.7	32.5	34.2	14.3	14.3	0.4	0.4	…	100.0	36.3	235
Isyk-Kul	10.7	16.6	34.5	20.3	13.0	3.8	0.8	0.1	100.0	27.4	139
Naryn	1.7	27.5	42.1	24.3	0.5	1.3	2.4	0.2	100.0	29.2	66
Osh	16.3	9.8	41.2	9.5	10.3	5.0	8.0	…	100.0	26.1	400
Talas	15.1	51.1	22.9	2.8	7.7	0.5	…	…	100.0	66.2	74
Chui	15.2	32.5	41.8	4.8	2.7	0.3	2.8	…	100.0	47.7	270
Bishkek c.	1.7	65.4	25.0	5.8	…	2.1	…	…	100.0	67.1	405
Residence											
Urban	6.6	50.0	29.9	8.1	3.1	1.8	0.5	0.0	100.0	56.7	722
Rural	10.7	21.9	36.5	9.9	12.7	3.1	5.1	0.0	100.0	32.7	1 009
Mother's education											
Not secondary	15.4	30.6	30.7	5.6	6.9	1.4	9.4	…	100.0	46.1	132
Secondary	10.0	28.1	35.0	10.1	10.7	3.3	2.7	0.0	100.0	38.2	1 146
High	4.5	48.5	31.5	8.0	4.1	0.9	2.4	0.0	100.0	53.1	453
Wealth index quintiles											
Poorest	6.4	15.9	34.8	10.0	22.1	4.3	6.4	0.0	100.0	22.3	330
Second	9.5	20.6	35.2	15.5	9.8	3.6	5.8	…	100.0	30.1	306
Middle	15.5	18.3	42.6	9.9	8.6	2.0	3.0	0.0	100.0	33.8	349
Fourth	12.5	15.4	51.8	11.0	4.0	3.6	1.7	0.0	100.0	28.0	323
Richest	2.7	83.5	10.7	2.1	1.0	…	…	…	100.0	86.2	423
Ethnicity/Language											
Kyrgyz	8.0	34.7	32.9	11.1	7.7	3.6	1.8	0.0	100.0	42.8	1144
Russian	19.2	56.4	18.3	2.5	2.5	0.4	0.8	…	100.0	75.6	177
Uzbek	8.1	20.2	41.8	7.0	14.0	0.0	8.8	…	100.0	28.3	305
Other	5.0	23.1	45.7	4.8	13.9	1.1	6.3	…	100.0	28.1	104
Total	9.0	33.7	33.8	9.2	8.7	2.5	3.2	0.0	100.0	42.7	1731

*** MICS indicator 14**

… – No reported cases

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, Kyrgyzstan, 2006

	Percentage of household population:			
	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	Number of household members
Region				
Batken	68.3	73.3	45.8	2 021
Jalalabad	84.2	99.4	83.6	4 649
Issyk-Kul	90.7	98.5	89.4	1 954
Naryn	86.0	98.8	84.9	1 170
Osh	82.4	96.4	79.0	6 095
Talas	87.6	99.9	87.5	1 018
Chui	99.0	97.6	96.7	3 840
Bishkek c.	100	100	100	4 295
Residence				
Urban	98.7	99.1	97.8	9 469
Rural	81.8	94.6	77.1	15 571
Mother's education				
Not secondary	80.4	93.0	73.9	1 268
Secondary	86.9	95.9	83.3	18 828
High	95.0	98.6	93.7	4 936
Wealth index quintiles				
Poorest	73.8	99.9	73.8	5 010
Second	77.6	96.6	74.6	5 026
Middle	92.1	89.7	82.9	4 989
Fourth	97.5	95.5	93.5	5 008
Richest	100	99.8	99.8	5 007
Ethnicity/Language				
Kyrgyz	85.6	94.2	80.4	15 359
Russian	99.4	100	99.4	3 146
Uzbek	89.3	99.4	88.8	5 085
Other	87.4	100	87.4	1 450
Total	88.2	96.3	84.9	25 040

*** MICS indicator 11; MDG indicator 30**
**** MICS indicator 12; MDG indicator 31**

Table RH.1: Use of contraception

Percentage of women aged 15-49 years married or in union who are using (or whose partner is using) a contraceptive method, Kyrgyzstan, 2006

	Percent of women (currently married or inunion) who are using:																
	Not using any method	Female steril-ization	Pill	IUD	Injections	Implants	Condom	Female con-dom	Diaphragm/ foam/jelly	LAM	Periodic abstinence	Withdrawal	Other	Total	Any modern method	Any traditional method	Any method*	Number of women currently married or in union
Region																	
Batken	54.7	0.2	6.8	30.9	2.4	0.0	2.2	…	…	…	…	0.3	2.4	100.0	42.6	2.7	45.3	314
Jalalabad	63.8	0.1	2.9	29.4	1.6	…	1.1	…	…	0.3	0.5	0.2	0.1	100.0	35.1	1.2	36.2	739
Issyk-Kul	47.4	0.1	5.2	40.1	3.8	…	1.3	0.2	…	0.6	0.1	0.9	0.4	100.0	50.7	1.9	52.6	325
Naryn	46.6	1.5	5.9	43.1	0.6	…	2.0	…	…	…	0.1	…	0.2	100.0	53.2	0.3	53.4	169
Osh	54.3	0.6	2.2	31.8	0.6	…	4.7	0.3	0.6	…	1.8	1.7	1.5	100.0	40.7	5.0	45.7	995
Talas	44.4	5.0	3.6	43.7	0.5	…	2.6	0.2	…	…	…	…	…	100.0	55.6	…	55.6	167
Chui	47.8	2.2	8.2	33.8	0.2	…	6.3	…	0.5	0.4	0.5	0.1	0.1	100.0	51.1	1.1	52.2	706
Bishkek c.	46.7	0.6	7.5	25.4	1.2	…	16.2	0.2	0.2	0.6	0.4	…	0.8	100.0	51.5	1.9	53.3	780
Residence																	
Urban	50.8	0.7	6.5	28.1	1.4	0.0	9.9	0.1	0.1	0.4	0.5	0.8	0.7	100.0	46.8	2.4	49.2	1 666
Rural	53.2	1.1	4.2	34.6	1.1	…	3.1	0.1	0.4	0.2	0.8	0.4	0.8	100.0	44.6	2.2	46.8	2 529
Age																	
15-19	85.3	…	4.0	6.6	…	…	2.2	…	1.9	…	…	…	…	100.0	14.7	…	14.7	118
20-24	68.9	0.2	4.6	18.8	0.6	…	5.2	0.0	…	0.5	0.4	0.0	0.8	100.0	29.3	1.7	31.1	667
25-29	48.3	0.3	6.6	31.3	1.7	…	8.3	0.2	0.6	0.5	1.2	0.6	0.3	100.0	49.2	2.5	51.7	806
30-34	43.0	1.0	6.6	37.6	1.9	…	7.4	…	…	0.5	0.4	0.5	1.1	100.0	54.5	2.5	57.0	757
35-39	37.3	3.4	6.9	43.0	1.7	0.0	5.4	0.5	0.0	0.0	0.1	0.9	0.6	100.0	61.0	1.6	62.7	653
40-44	43.2	0.6	2.3	44.1	0.1	…	5.4	…	0.5	0.2	0.9	1.1	1.6	100.0	53.0	3.8	56.8	650
45-49	71.9	0.2	2.6	19.5	1.2	…	2.6	0.1	…	…	1.3	0.2	0.3	100.0	26.3	1.8	28.1	545
Number of living children																	
0	89.6	0.5	4.5	2.2	…	…	2.5	0.0	0.6	…	…	…	…	100.0	10.4	…	10.4	306
1	65.2	0.2	7.0	16.9	0.8	…	8.7	0.2	0.2	0.1	0.4	0.0	0.4	100.0	34.0	0.8	34.8	864
2	47.5	0.4	4.6	36.4	1.0	…	7.2	…	0.7	0.4	0.4	0.3	1.2	100.0	50.2	2.2	52.5	1 045
3	39.1	1.8	5.6	42.4	2.6	0.0	6.0	…	0.0	0.6	0.9	0.5	0.5	100.0	58.4	2.6	60.9	926
4+	47.0	1.4	3.8	39.6	1.0	…	2.9	0.4	…	0.1	1.2	1.4	1.2	100.0	49.0	3.9	53.0	1 054
Education																	
Not sec-ondary	56.4	…	2.5	30.2	2.5	…	4.0	…	0.7	0.5	2.9	0.2	…	100.0	40.0	3.6	43.6	270
Secondary	52.6	1.2	4.8	32.9	1.2	0.0	4.6	0.1	0.3	0.3	0.4	0.6	1.0	100.0	45.1	2.2	47.4	2 988
High	49.9	0.2	6.6	29.7	1.0	…	10.3	0.2	0.2	0.2	0.8	0.6	0.4	100.0	48.1	2.0	50.1	936

	Percent of women (currently married or inunion) who are using:																
	Not using any method	Female sterilization	Pill	IUD	Injections	Implants	Condom	Female condom	Diaphragm/ foam/jelly	LAM	Periodic abstinence	Withdrawal	Other	Total	Any modern method	Any traditional method	Any method*	Number of women currently married or in union
Wealth index quintiles																		
Poorest	49.8	0.5	3.0	39.9	2.5	…	1.3	…	…	0.3	1.7	0.1	0.8	100.0	47.3	2.9	50.2	768
Second	58.1	0.7	4.1	32.0	0.9	…	1.7	0.4	0.0	0.2	0.5	0.7	0.8	100.0	39.7	2.2	41.9	791
Middle	54.0	1.4	3.5	33.4	1.0	…	3.4	0.1	0.4	0.2	0.5	1.1	0.9	100.0	43.3	2.7	46.0	826
Fourth	50.5	1.7	7.3	29.5	1.0	0.0	7.8	…	0.6	0.1	0.3	0.5	0.6	100.0	48.0	1.5	49.5	889
Richest	49.3	0.3	6.9	26.6	0.7	…	13.5	0.2	0.2	0.6	0.4	0.3	0.9	100.0	48.5	2.2	50.7	920
Ethnicity/Language																		
Kyrgyz	53.7	0.6	4.4	33.4	1.3	0.0	4.3	0.2	0.3	0.2	0.5	0.5	0.5	100.0	44.5	1.8	46.3	2 519
Russian	45.9	1.8	9.6	26.7	0.4	…	12.8	0.0	0.7	0.7	0.3	…	1.0	100.0	52.0	2.0	54.1	542
Uzbek	53.2	1.5	3.1	31.9	1.4	…	4.6	…	0.1	0.2	1.4	1.1	1.5	100.0	42.4	4.3	46.8	862
Other	47.4	0.1	8.7	30.8	1.5	…	10.4	…	…	…	0.3	0.6	0.2	100.0	51.5	1.1	52.6	263
Total	52.2	0.9	5.1	32.0	1.2	0.0	5.8	0.1	0.3	0.3	0.7	0.5	0.8	100.0	45.5	2.3	47.8	4 195

*** MICS indicator 21; MDG indicator 19C**

… – No reported cases

Table RH.2: Unmet need for contraception

Percentage of women aged 15-49 years currently married or in union with an unmet need for family planning and percentage of demand for contraception satisfied, Kyrgyzstan, 2006

	Current use of contra-ception*	Unmet need for contraception			Number of women currently married or in union	Percentage of demand for con-traception satisfied***	Number of women currently married or in union with need for contra-ception
		For spacing	For limiting	Total**			
Region							
Batken	45.3	0.3	0.5	0.8	314	98.2	145
Jalalabad	36.2	1.1	0.1	1.2	739	96.7	277
Issyk-Kul	52.6	1.1	0.1	1.2	325	97.7	175
Naryn	53.4	0.4	0.2	0.6	169	99.0	91
Osh	45.7	0.9	0.0	0.9	995	98.1	464
Talas	55.6	0.6	0.2	0.9	167	98.4	94
Chui	52.2	1.1	…	1.1	706	97.9	377
Bishkek c.	53.3	1.5	…	1.5	780	97.3	427
Residence							
Urban	49.2	1.0	0.1	1.1	1 666	97.8	839
Rural	46.8	1.0	0.1	1.1	2 529	97.7	1 211
Age							
15-19	14.7	…	…	…	118	(*)	17
20-24	31.1	3.3	0.1	3.4	667	90.2	230
25-29	51.7	1.1	0.0	1.1	806	97.9	426
30-34	57.0	1.5	0.2	1.7	757	97.2	443
35-39	62.7	0.2	0.0	0.2	653	99.7	411
40-44	56.8	…	0.1	0.1	650	99.8	370
45-49	28.1	…	0.1	0.1	545	99.7	153
Mother's education							
Not secondary	43.6	3.1	…	3.1	270	93.4	126
Secondary	47.4	0.8	0.1	0.9	2 988	98.1	1 443
High	50.1	1.1	0.1	1.1	936	97.8	480
Wealth index quintiles							
Poorest	50.2	2.1	0.0	2.2	768	95.9	402
Second	41.9	0.7	0.2	0.9	791	97.9	339
Middle	46.0	0.1	0.1	0.2	826	99.6	382
Fourth	49.5	0.7	0.1	0.8	889	98.5	447
Richest	50.7	1.5	…	1.5	920	97.1	480
Ethnicity/Language							
Kyrgyz	46.3	1.1	0.1	1.2	2 519	97.5	1.196
Russian	54.1	0.5	…	0.5	542	99.1	296
Uzbek	46.8	1.2	0.1	1.3	862	97.3	414
Other	52.6	0.3	…	0.3	263	99.4	139
Total	47.8	1.0	0.1	1.1	4 195	97.7	2 050

*** MICS indicator 21; MDG indicator 19C**
**** MICS indicator 98**
***** MICS indicator 99**
… – No reported cases
(*) – Figures that are based on less then 25 unweighted cases

Table RH.3: 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, Kyrgyzstan, 2006

	Person providing antenatal care							
	Medical doctor	Nurse/ midwife	Auxiliary midwife	Community health worker	No antenatal care received	Total	Any skilled personnel *	Number of women who gave birth in the preceding two years
Region								
Batken	75.5	21.8	…	…	2.6	100.0	97.4	91
Jalalabad	82.1	10.4	0.1	…	7.3	100.0	92.7	189
Issyk-Kul	78.0	18.5	2.9	…	0.6	100.0	99.4	81
Naryn	94.6	1.8	…	0.8	2.8	100.0	96.4	51
Osh	81.5	15.2	…	…	3.2	100.0	96.8	298
Talas	(87.5)	(10.4)	…	…	(2.1)	100.0	(97.9)	45
Chui	80.5	15.5	…	3.9	0.1	100.0	96.0	182
Bishkek c.	98.2	1.2	…	…	0.6	100.0	99.4	273
Residence								
Urban	94.6	4.4	…	…	1.0	100.0	99.0	490
Rural	79.0	16.1	0.4	1.0	3.5	100.0	95.4	719
Age								
15-19	(90.5)	(9.5)	…	…	…	100.0	(100.0)	33
20-24	85.7	9.7	0.5	1.6	2.5	100.0	96.0	454
25-29	87.3	10.0	…	0.1	2.6	100.0	97.3	376
30-34	79.5	17.4	…	…	3.1	100.0	96.9	213
35-39	84.8	13.3	…	…	1.9	100.0	98.1	98
40-44	(93.9)	(6.1)	…	…	…	100.0	(100.0)	33
45-49	(*)	…	(*)	…	(*)	100.0	(*)	3
Mother's education								
Not secondary	90.0	4.9	2.1	3.1	…	100.0	96.9	115
Secondary	82.8	14.1	0.0	0.5	2.6	100.0	96.9	777
High	89.8	6.8	…	0.1	3.2	100.0	96.6	318
Wealth index quintiles								
Poorest	71.7	22.0	…	0.2	6.2	100.0	93.6	228
Second	82.4	14.0	0.1	1.8	1.7	100.0	96.5	219
Middle	88.0	9.8	…	…	2.2	100.0	97.8	252
Fourth	88.6	6.9	1.1	1.5	1.9	100.0	96.6	220
Richest	93.3	5.7	…	…	1.0	100.0	99.0	290
Ethnicity/Language								
Kyrgyz	83.9	12.5	0.3	0.5	2.7	100.0	96.8	793
Russian	87.1	9.8	…	2.9	0.2	100.0	96.8	121
Uzbek	86.9	9.3	…	…	…	100.0	96.2	226
Other	94.0	6.0	…	…	…	100.0	100	68
Total	85.3	11.3	0.2	0.6	2.5	100.0	96.9	1 209

*** MICS indicator 20**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table RH.4: 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, Kyrgyzstan, 2006

	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*	
Region						
Batken	97.4	97.1	97.1	97.1	97.1	91
Jalalabad	92.7	92.4	92.6	92.0	90.0	189
Issyk-Kul	99.4	99.4	97.7	99.4	99.2	81
Naryn	97.2	97.2	97.2	97.2	96.7	51
Osh	96.8	94.4	96.3	94.2	95.5	298
Talas	(97.9)	(96.8)	(97.9)	(96.8)	(97.9)	45
Chui	99.9	99.7	97.4	99.7	99.4	182
Bishkek c.	99.4	99.4	99.4	99.4	99.4	273
Residence						
Urban	99.0	98.9	98.6	98.9	98.3	490
Rural	96.5	95.3	95.6	95.1	95.4	719
Age						
15-19	(100.0)	(100.0)	(100.0)	(98.6)	(98.6)	33
20-24	97.5	95.9	95.8	95.8	96.3	454
25-29	97.4	97.3	97.4	97.3	96.7	376
30-34	96.9	96.8	96.9	96.5	96.4	213
35-39	98.1	98.1	98.1	98.1	97.8	98
40-44	(100.0)	(100.0)	(100.0)	(100.0)	(100.0)	33
45-49	(*)	(*)	(*)	(*)	(*)	3
Mother's education						
Not secondary	100.0	100.0	96.1	100.0	99.6	115
Secondary	97.4	96.3	97.3	96.1	96.5	777
High	96.8	96.7	95.9	96.7	95.8	318
Wealth index quintiles						
Poorest	93.8	93.7	93.7	93.7	93.0	228
Second	98.3	94.6	96.0	94.1	96.8	219
Middle	97.8	97.7	97.8	97.7	96.7	252
Fourth	98.1	98.1	97.8	97.9	97.5	220
Richest	99.0	99.0	98.4	99.0	98.5	290
Ethnicity/Language						
Kyrgyz	97.3	97.1	96.8	96.9	96.1	793
Russian	99.8	99.8	99.8	99.8	99.2	121
Uzbek	96.2	93.1	96.2	93.1	96.1	226
Other	100.0	100.0	93.7	100.0	100.0	68
Total	97.5	96.8	96.8	96.6	96.6	1 209

*** MICS indicator 44**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table RH.5: 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, Kyrgyzstan, 2006

	Person assisting at delivery											
	Medical doctor	Nurse/ midwife	Auxiliary midwife	Traditional birth attendant	Community health worker	Relative/ friend	Other / missing	No attendant	Total	Any skilled personnel *	Delivered in health facility **	Number of women who gave birth in preceding two years
Region												
Batken	74.5	21.9	…	…	0.7	…	…	2.9	100.0	96.4	88.3	91
Jalalabad	78.7	14.0	…	0.1	…	…	…	7.2	100.0	92.7	92.6	189
Issyk-Kul	84.8	15.2	…	…	…	…	…	…	100.0	100	99.5	81
Naryn	62.7	35.6	…	1.1	…	0.6	…	…	100.0	98.3	98.3	51
Osh	52.0	43.2	1.4	…	0.8	…	1.0	1.6	100.0	96.6	96.7	298
Talas	(74.2)	(21.8)	(1.9)	…	…	…	…	(2.1)	100.0	(97.9)	(97.9)	45
Chui	81.0	18.5	0.5	…	…	…	…	…	100.0	100	99.4	182
Bishkek c.	98.8	1.2	…	…	…	…	…	…	100.0	100	100	273
Residence												
Urban	94.2	5.7	0.1	…	0.1	…	…	…	100.0	99.9	99.8	490
Rural	64.0	31.2	0.8	0.1	0.4	0.0	0.4	3.0	100.0	96.0	94.9	719
Age												
15-19	(68.5)	(22.8)	(8.7)	…	…	…	…	…	100.0	100	(95.6)	33
20-24	78.6	18.9	0.4	…	…	…	…	2.1	100.0	97.9	97.5	454
25-29	74.8	22.0	0.3	0.1	0.7	…	0.8	1.2	100.0	97.2	96.3	376
30-34	73.2	24.1	…	…	0.1	0.2	…	2.4	100.0	97.3	97.5	213
35-39	81.9	16.4	…	…	…	…	…	1.7	100.0	98.3	96.3	98
40-44	(73.6)	(26.4)	…	…	…	…	…	…	100.0	(100)	(98.7)	33
45-49	(*)	…	…	(*)	…	…	…	(*)	100.0	(*)	(*)	3
Mother's education												
Not secondary	74.3	23.9	1.7	…	…	…	…	…	100.0	100.0	100.0	115
Secondary	71.6	25.4	0.4	0.1	0.4	0.0	0.4	1.7	100.0	97.4	96.4	777
High	88.4	8.5	0.3	…	…	…	…	2.8	100.0	97.2	97.1	318
Wealth index quintiles												
Poorest	60.1	33.2	0.1	0.2	…	0.1	1.3	4.9	100.0	93.4	93.3	228
Second	57.8	41.1	…	0.1	…	…	…	1.0	100.0	98.8	98.7	219
Middle	77.8	17.1	2.3	…	1.2	…	…	1.6	100.0	97.2	94.6	252
Fourth	83.2	14.9	…	…	…	…	…	1.9	100.0	98.1	97.5	220
Richest	96.3	3.7	…	…	…	…	…	…	100.0	100.0	99.9	290

	Person assisting at delivery											
	Medical doctor	Nurse/ midwife	Auxiliary midwife	Traditional birth attendant	Community health worker	Relative/ friend	Other / missing	No attendant	Total	Any skilled personnel *	Delivered in health facility **	Number of women who gave birth in preceding two years
Ethnicity/Language												
Kyrgyz	74.0	22.7	0.7	0.1	0.3	0.0	0.4	1.7	100.0	97.4	96.3	793
Russian	86.4	13.4	…	…	0.2	…	…	…	100.0	99.8	100	121
Uzbek	72.6	23.6	0.1	…	…	…	…	3.7	100.0	96.3	96.3	226
Other	97.0	3.0	…	…	…	…	…	…	100.0	100.0	100.0	68
Total	76.3	20.9	0.5	0.1	0.2	0.0	0.3	1.8	100.0	97.6	96.9	1 209

*** MICS indicator 4; MDG indicator 17**

**** MICS indicator 5**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table RH.6: Maternal mortality ratio

Lifetime risk of maternal death and proportion of dead sisters dying of maternal causes, Kyrgyzstan, 2006

	Number of adult household respondents	Sisters who reached age 15	Sisters who reached age 15 (adjusted)	Sisters who reached age 15 and who died	Maternal deaths	Adjustment factor	Sister units of risk exposure	Lifetime risk of maternal death	Percent of dead sisters dying of maternal causes	Total fertility rate 10-14 years ago	Maternal mortality ratio *
15-19	2 848	4 097	9 480	52	1	0.107	1 014	0.001	2.4	.	.
20-24	2 312	4 073	9 425	42	2	0.206	1 942	0.001	5.8	.	.
25-29	2 046	4 345	10 053	44	4	0.343	3 448	0.001	9.7	.	.
30-34	1 781	4 163	4 163	75	14	0.503	2 094	0.007	18.9	.	.
35-39	1 591	4 144	4 144	74	11	0.664	2 752	0.004	14.9	.	.
40-44	1 503	4 075	4 075	123	7	0.802	3 268	0.002	6.1	.	.
45-49	1 330	3 348	3 348	135	4	0.900	3 013	0.001	2.7	.	.
50-54	1 129	2 535	2 535	171	5	0.958	2 428	0.002	3.2	.	.
55-59	677	1 445	1 445	152	4	0.986	1 425	0.003	2.5	.	.
60+	1 631	2 604	2 604	794	17	1.000	2 604	0.007	2.2	.	.
Total	16 848	34 828	51 272	1 662	71	.	23 988	0.003	4.3	2.85	104

*** MICS Indicator 3; MDG Indicator 16**

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, Kyrgyzstan, 2006

	Percentage of children aged 0-59 months					
	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	72.1	4.4	52.5	1.4	14.8	1 450
Female	69.8	4.4	53.0	1.3	14.3	1 434
Region						
Batken	73.6	4.4	33.4	0.6	12.4	233
Jalalabad	50.8	3.7	25.5	0.6	12.7	422
Isyk-Kul	78.3	4.6	62.6	1.3	18.3	229
Naryn	51.9	3.5	36.3	0.8	17.2	110
Osh	69.6	4.2	38.6	0.8	15.4	699
Talas	75.8	4.6	71.8	1.7	13.0	144
Chui	68.1	4.4	66.3	1.9	15.0	415
Bishkek c.	86.4	5.2	79.7	2.4	13.9	632
Residence						
Urban	79.7	4.8	65.8	1.9	15.2	1 172
Rural	65.0	4.1	43.8	1.0	14.1	1 711
Age of child						
0-23 months	48.9	3.4	47.8	1.1	10.4	1 161
24-59 months	85.9	5.1	56.1	1.5	17.3	1 722
Mother's education						
Not secobdary	55.8	4.0	44.8	1.1	20.7	210
Secondary	70.0	4.3	49.1	1.2	14.2	1 990
High	78.5	4.8	65.9	1.9	13.6	684
Father's education						
Not secondary	55.3	3.5	51.7	1.1	na	109
Secondary	67.2	4.3	55.4	1.3	na	1 786
High	80.6	4.7	77.0	2.2	na	570
Father not in HH	78.2	4.8	na	na	na	419
Wealth index quintiles						
Poorest	64.0	4.1	46.0	1.0	12.7	584
Second	66.1	4.2	43.6	0.9	15.5	556
Middle	66.6	4.1	34.9	0.8	14.6	535
Fourth	72.3	4.4	59.5	1.5	13.6	544
Richest	83.6	5.0	75.3	2.2	16.0	664
Ethnicity/Language						
Kyrgyz	73.5	4.5	55.0	1.4	14.5	1.906
Russian	84.0	5.1	70.8	2.2	20.0	288
Uzbek	53.6	3.8	31.5	0.6	12.4	518
Other	73.1	4.5	63.0	1.4	12.3	169
Total	71.0	4.4	52.8	1.3	14.5	2 883

*** MICS indicator 46**
**** MICS Indicator 47**
na – Not applicable

Table CD.2: Learning materials

Percentage of children aged 0-59 months living in households containing learning materials, Kyrgyzstan, 2006

	Children living in households with:		Child has:		Child plays with:						
	3 or more non-child-ren's books*	Median number of non-child-ren's books	3 or more child-ren's books **	Median number of child-ren's books	House-hold objects	Objects and materials found outside the home	Home-made toys	Toys that came from a store	No play-things mentioned	3 or more types of play-things ***	Number of children aged 0-59 months
Sex											
Male	40.3	2	76.1	10	23.6	43.1	29.2	90.7	6.7	27.1	1 450
Female	36.1	1	76.3	10	31.7	32.2	22.7	89.2	7.7	22.6	1 434
Region											
Batken	23.8	0	85.8	10	42.1	47.1	32.3	73.7	10.1	31.9	233
Jalalabad	27.0	0	58.3	5	20.1	18.9	32.1	84.9	12.1	13.2	422
Isyk-Kul	31.2	0	81.0	10	30.4	50.0	40.5	89.1	6.9	37.3	229
Naryn	22.5	0	75.3	10	20.6	28.2	21.5	82.1	13.6	10.5	110
Osh	17.9	0	73.1	10	21.4	26.7	32.9	91.5	7.1	23.3	699
Talas	53.8	3	83.0	10	28.7	36.5	46.7	91.1	7.4	32.5	144
Chui	39.1	1	74.7	10	49.9	60.7	18.8	92.9	5.9	41.4	415
Bishkek c.	74.7	6	85.9	10	19.7	41.1	7.5	97.1	2.7	17.1	632
Residence											
Urban	59.5	4	81.0	10	26.4	41.0	15.5	95.1	4.1	23.5	1 172
Rural	23.7	0	72.9	10	28.5	35.4	33.1	86.4	9.3	25.8	1 711
Age of child											
0-23 months	29.8	0	74.9	10	25.1	17.8	16.9	81.0	16.4	15.3	1 161
24-59 months	43.9	2	77.0	10	29.4	51.1	32.1	96.0	1.0	31.3	1 722
Mother's education											
Not secondary	19.9	0	53.9	4	36.8	32.6	26.5	90.8	7.1	23.6	210
Secondary	32.7	1	74.7	10	27.2	39.6	29.1	88.3	8.1	26.5	1 990
High	60.0	4	87.2	10	26.2	33.5	16.9	94.4	4.5	20.5	684
Wealth index quintiles											
Poorest	21.9	0	68.2	10	25.9	30.3	34.1	89.8	6.0	23.3	584
Second	21.1	1	76.0	10	25.6	36.6	38.0	85.2	8.7	26.2	556
Middle	27.9	0	75.5	10	30.2	37.1	33.6	86.9	9.5	29.1	535
Fourth	43.6	2	75.2	10	30.4	45.2	15.5	89.7	9.3	25.7	544
Richest	70.9	5	84.7	10	26.6	39.3	11.2	96.8	3.2	21.0	664

	Children living in households with:		Child has:		Child plays with:						
	3 or more non-child-ren's books*	Median number of non-child-ren's books	3 or more child-ren's books **	Median number of child-ren's books	House-hold objects	Objects and materials found outside the home	Home-made toys	Toys that came from a store	No play-things mentioned	3 or more types of play-things ***	Number of children aged 0-59 months
Ethnicity/Language											
Kyrgyz	39.8	2	79.5	10	22.8	36.3	25.9	90.2	7.2	22.3	1 906
Russian	72.3	6	78.6	10	43.7	55.0	15.3	96.7	3.1	39.7	288
Uzbek	12.8	0	60.5	6	32.9	30.6	33.3	88.0	9.1	26.1	518
Other	39.2	1	82.8	10	38.6	43.9	23.4	81.7	7.5	23.3	169
Total	38.2	1	76.2	10	27.7	37.7	26.0	89.9	7.2	24.9	2 883

*** MICS indicator 49**
**** MICS indicator 48**
***** MICS indicator 50**

Table CD.3: Children left alone or w.ith other children

Percentage of children aged 0-59 months left in the care of other children under the age of 10 years or left alone in the past week, Kyrgyzstan, 2006

	Percentage of children aged 0-59 months			
	Left in the care of children under the age of 10 years	Left alone	Left with inadequate care *	Number of children aged 0-59 months
Sex				
Male	11.6	1.7	12.3	1 450
Female	8.4	1.5	8.8	1 434
Region				
Batken	19.4	3.5	20.5	233
Jalalabad	6.8	3.8	7.2	422
Isyk-Kul	18.9	2.5	19.2	229
Naryn	12.4	2.9	14.8	110
Osh	8.8	0.9	9.6	699
Talas	11.6	0.3	11.6	144
Chui	10.8	0.7	11.1	415
Bishkek c.	5.6	0.5	5.9	632
Residence				
Urban	7.4	0.9	7.8	1 172
Rural	11.8	2.1	12.5	1 711
Age of child				
0-23 months	5.6	0.6	5.7	1 161
24-59 months	13.0	2.3	13.9	1 722
Mother's education				
Not secondary	12.6	…	12.6	210
Secondary	11.2	2.1	11.9	1 990
High	5.8	0.7	6.1	684
Wealth index quintiles				
Poorest	10.4	2.8	10.8	584
Second	14.8	2.2	15.4	556
Middle	12.4	2.2	13.9	535
Fourth	8.0	0.5	8.2	544
Richest	5.3	0.4	5.7	664
Ethnicity/Language				
Kyrgyz	9.8	2.0	10.6	1 906
Russian	6.3	0.5	6.6	288
Uzbek	12.0	0.7	12.3	518
Other	11.2	0.1	11.3	169
Total	10.0	1.6	10.6	2 883

*** MICS indicator 51**

… – No reported cases

Table ED.1: Early childhood education

Percentage of children aged 36-59 months who are attending some form of organized early childhood education programme and percentage of first graders who attended pre-school, Kyrgyzstan, 2006

	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	21.1	574	20.7	121
Female	17.0	591	19.6	113
Region				
Batken	6.6	92	(*)	15
Jalalabad	8.8	189	(5.0)	35
Issyk-Kul	10.6	90	(*)	24
Naryn	6.7	50	(*)	11
Osh	16.6	298	10.0	71
Talas	22.9	71	(*)	7
Chui	16.4	147	(27.4)	38
Bishkek c.	41.9	229	(73.7)	32
Residence				
Urban	33.2	457	39.5	87
Rural	9.8	708	8.8	147
Age				
36-47 months	16.2	530	na	na
48-59 months	21.3	636	na	na
7 years	na	na	20.2	233
Mother's education				
Not secondary	8.9	78	(*)	22
Secondary	13.5	854	15.5	170
Higher	42.5	234	(38.7)	42
Wealth index quintiles				
Poorest	7.1	258	0.0	51
Second	8.8	252	(12.0)	44
Middle	13.7	188	(1.7)	45
Fourth	17.8	223	34.6	51
Richest	47.4	243	(55.3)	42
Ethnicity/Language				
Kyrgyz	17.3	774	20.4	171
Russian	42.6	111	(*)	15
Uzbek	14.9	213	(9.7)	38
Other	(13.5)	65	(*)	9
Total	19.0	1 165	20.2	233

*** MICS indicator 52**
**** MICS indicator 53**
(…) – Figures that are based on 25-49 unweighted cases
(*) – Figures that are based on less then 25 unweighted cases
na – Not applicable

Table ED.2: Primary school entry

Percentage of children of primary school entry age attending grade 1, Kyrgyzstan,2006

	Percentage of children of primary school entry age currently attending grade 1*	Number of children of primary school entry age
Sex		
Male	66.4	260
Female	75.5	203
Region		
Batken	58.5	42
Jalalabad	64.6	79
Issyk-Kul	74.9	41
Naryn	48.5	26
Osh	91.7	124
Talas	64.8	16
Chui	(58.3)	73
Bishkek c.	(64.9)	63
Residence		
Urban	71.7	159
Rural	69.6	304
Age		
7	70.4	463
Mother's education		
Not secondary	(79.8)	29
Secondary	68.8	357
Higher	73.9	77
Wealth index quintiles		
Poorest	75.6	102
Second	70.7	92
Middle	64.2	85
Fourth	66.8	114
Richest	75.4	71
Ethnicity/Language		
Kyrgyz	71.2	320
Russian	(54.5)	40
Uzbek	80.8	78
Other	(52.6)	25
Total	70.4	463

*** MICS indicator 54**

(…) – Figures that are based on 25-49 unweighted cases

Table ED.3: Primary school net attendance ratio

Percentage of children of primary school age** attending primary or secondary school (NAR), Kyrgyzstan, 2006

	Male		Female		Total	
	Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio*	Number of children
Region						
Batken	85.2	92	94.2	84	89.5	175
Jalalabad	92.4	205	91.1	222	91.7	427
Issyk-Kul	95.1	83	87.0	90	90.8	173
Naryn	83.4	64	91.7	58	87.4	122
Osh	98.7	291	97.6	236	98.2	527
Talas	90.5	35	93.6	41	92.2	76
Chui	79.6	151	93.2	125	85.8	276
Bishkek c.	90.0	135	93.5	130	91.7	265
Residence						
Urban	93.0	341	92.7	320	92.9	661
Rural	90.0	714	93.5	667	91.7	1 381
Age						
7	68.5	260	77.9	203	72.6	463
8	98.5	240	97.8	268	98.1	508
9	100.0	279	98.3	247	99.2	526
10	96.5	276	95.7	269	96.1	544
Mother's education						
Not secondary	82.1	65	(96.9)	40	87.7	104
Secondary	91.0	809	93.7	768	92.3	1 577
Higher	93.8	181	90.5	179	92.1	360
Wealth index quintiles						
Poorest	92.6	239	94.6	242	93.6	482
Second	88.6	225	95.1	233	91.9	458
Middle	89.7	200	92.6	161	91.0	361
Fourth	90.1	225	90.1	202	90.1	427
Richest	94.5	165	93.3	148	93.9	313
Ethnicity/Language						
Kyrgyz	90.7	657	93.0	647	91.9	1 304
Russian	79.1	90	95.0	83	86.7	172
Uzbek	97.6	244	92.8	208	95.4	452
Other	83.9	60	(95.3)	49	89.0	109
Total	91.0	1 055	93.3	986	92.1	2 041

*** MICS Indicator 55; MDG Indicator 6**

(…) – Figures that are based on 25-49 unweighted cases

Table ED.4: Secondary school net attendance ratio

Percentage of children of secondary school age* attending secondary school or higher (NAR), Kyrgyzstan, 2006

	Male		Female		Total	
	Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio*	Number of children
Region						
Batken	93.8	203	93.6	161	93.7	365
Jalalabad	82.7	389	84.4	399	83.6	789
Issyk-Kul	92.8	147	93.8	176	93.4	323
Naryn	92.3	108	97.8	105	95.0	213
Osh	85.2	608	85.2	442	85.2	1 049
Talas	88.9	66	95.9	90	92.9	156
Chui	85.6	243	93.8	331	90.4	573
Bishkek c.	94.5	184	97.0	284	96.0	468
Residence						
Urban	89.7	566	91.9	688	90.9	1 254
Rural	86.8	1 382	90.2	1 299	88.4	2 682
Age						
11	82.6	264	76.5	241	79.6	506
12	93.4	292	97.8	290	95.6	582
13	93.7	320	99.3	288	96.3	608
14	96.2	239	98.8	272	97.6	510
15	90.9	317	95.5	324	93.2	641
16	86.2	260	86.5	278	86.4	538
17	68.3	257	78.7	294	73.8	551
Mother's education						
Not secondary	78.5	97	81.2	49	79.4	146
Secondary	86.7	1 497	91.0	1 487	88.9	2 984
Higher	95.7	292	95.0	320	95.3	612
Mother not in household	85.9	64	81.3	131	82.8	195
Wealth index quintiles						
Poorest	86.9	452	90.3	429	88.5	881
Second	88.8	454	90.9	450	89.8	904
Middle	84.0	449	86.9	370	85.3	819
Fourth	87.9	352	90.4	383	89.2	735
Richest	93.3	241	95.6	356	94.7	597
Ethnicity/Language						
Kyrgyz	91.1	1 293	93.7	1 311	92.4	2 604
Russian	88.3	133	91.8	189	90.3	322
Uzbek	78.4	436	80.4	378	79.3	813
Other	82.0	87	88.2	102	85.3	189
Total	87.6	1 949	90.8	1 987	89.2	3 936

*** MICS indicator 56**

Table ED.5: Children reaching grade 5

Percentage of children entering first grade of primary school who eventually reach grade 5, Kyrgyzstan, 2006

	Percent attending 2 grade who were in 1 grade last year	Percent attending 3 grade who were in 2 grade last year	Percent attending 4 grade who were in 3 grade last year	Percent attending 5 grade who were in 4 grade last year	Percent who reach grade 5 of those who enter 1 grade*
Sex					
Male	100.0	100.0	99.7	98.9	98.7
Female	100.0	100.0	99.0	99.4	98.5
Region					
Batken	100.0	100.0	100.0	100.0	100.0
Jalalabad	100.0	100.0	100.0	97.0	97.0
Issyk-Kul	100.0	100.0	100.0	100.0	100.0
Naryn	100.0	100.0	100.0	100.0	100.0
Osh	100.0	100.0	99.1	100.0	99.1
Talas	100.0	100.0	100.0	96.3	96.3
Chui	100.0	100.0	96.5	100.0	96.5
Bishkek c.	100.0	100.0	100.0	100.0	100.0
Residence					
Urban	100.0	100.0	98.7	100.0	98.7
Rural	100.0	100.0	99.7	98.7	98.4
Mother's education					
Not secondary	100.0	100.0	100.0	100.0	100.0
Secondary	100.0	100.0	99.3	98.9	98.2
Higher	100.0	100.0	100.0	100.0	100.0
Wealth index quintiles					
Poorest	100.0	100.0	99.0	97.3	96.4
Second	100.0	100.0	98.9	100.0	98.9
Middle	100.0	100.0	100.0	99.1	99.1
Fourth	100.0	100.0	99.3	100.0	99.3
Richest	100.0	100.0	100.0	100.0	100.0
Ethnicity/Language					
Kyrgyz	100.0	100.0	99.3	98.8	98.1
Russian	100.0	100.0	97.9	100.0	97.9
Uzbek	100.0	100.0	100.0	100.0	100.0
Other	100.0	100.0	100.0	100.0	100.0
Total	100.0	100.0	99.4	99.2	98.6

*** MICS indicator 57; MDG indicator 7**

Table ED.6: Primary school completion and transition to secondary education

Primary school completion rate and transition rate to secondary education, Kyrgyzstan, 2006

	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	78.1	276	98.8	295
Female	80.3	269	99.4	249
Region				
Batken	90.6	51	100.0	37
Jalalabad	70.6	125	97.0	121
Issyk-Kul	80.3	51	100.0	45
Naryn	80.0	41	100.0	25
Osh	90.7	112	100.0	126
Talas	(*)	18	96.3	25
Chui	65.7	73	99.6	86
Bishkek c.	(81.4)	73	(100.0)	78
Residence				
Urban	80.9	176	100.0	184
Rural	78.4	368	98.6	360
Mother's education				
Not secondary	(61.6)	35	(*)	22
Secondary	81.0	409	98.8	420
Higher	77.9	100	100.0	101
Wealth index quintiles				
Poorest	80.9	130	97.3	135
Second	82.8	138	100.0	122
Middle	73.9	107	99.1	101
Fourth	73.7	89	99.7	96
Richest	83.3	81	100.0	90
Ethnicity/Language				
Kyrgyz	78.8	360	98.7	380
Russian	(64.2)	43	(*)	34
Uzbek	85.3	124	100.0	116
Other	(*)	17	(*)	14
Total	79.2	544	99.1	544

*** MICS indicator 59; MDG indicator 7b**

**** MICS indicator 58**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table ED.7: Education gender parity

Ratio of girls to boys attending primary education and ratio of girls to boys attending secondary education,Kyrgyzstan, 2006

	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*
Region						
Batken	94.2	85.2	1.11	93.6	93.8	1.00
Jalalabad	91.1	92.4	0.99	84.4	82.7	1.02
Issyk-Kul	87.0	95.1	0.92	93.8	92.8	1.01
Naryn	91.7	83.4	1.10	97.8	92.3	1.06
Osh	97.6	98.7	0.99	85.2	85.2	1.00
Talas	93.6	90.5	1.03	95.9	88.9	1.08
Chui	93.2	79.6	1.17	93.8	85.6	1.10
Bishkek c.	93.5	90.0	1.04	97.0	94.5	1.03
Residence						
Urban	92.7	93.0	1.00	91.9	89.7	1.02
Rural	93.5	90.0	1.04	90.2	86.8	1.04
Mother's education						
Not secondary	96.9	82.1	1.18	81.2	78.5	1.03
Secondary	93.7	91.0	1.03	91.0	86.7	1.05
Higher	90.5	93.8	0.96	95.0	95.7	0.99
Mather not in HH	…	…	…	81.3	85.9	0.95
Wealth index quintiles						
Poorest	94.6	92.6	1.02	90.3	86.9	1.04
Second	95.1	88.6	1.07	90.9	88.8	1.02
Middle	92.6	89.7	1.03	86.9	84.0	1.03
Fourth	90.1	90.1	1.00	90.4	87.9	1.03
Richest	93.3	94.5	0.99	95.6	93.3	1.02
Ethnicity/Language						
Kyrgyz	93.0	90.7	1.03	93.7	91.1	1.03
Russian	95.0	79.1	1.20	91.8	88.3	1.04
Uzbek	92.8	97.6	0.95	80.4	78.4	1.03
Other	95.3	83.9	1.14	88.2	82.0	1.08
Total	93.3	91.0	1.03	90.8	87.6	1.04

*** MICS Indicator 61; MDG Indicator 9**

… – No reported cases

Table ED.8: Adult literacy

Percentage of women aged 15-24 years that are literate, Kyrgyzstan, 2006

	Percentage literate*	Number of women aged 15-24 years
Region		
Batken	99.8	205
Jalalabad	99.9	551
Issyk-Kul	99.7	177
Naryn	99.6	101
Osh	100.0	636
Talas	99.9	112
Chui	99.9	384
Bishkek c.	100.0	653
Residence		
Urban	99.9	1 231
Rural	99.9	1 588
Education		
Not secondary	99.7	743
Secondary	100.0	1 399
Higher	100.0	676
Age		
15-19	99.9	1 542
20-24	99.9	1 276
Wealth index quintiles		
Poorest	99.8	514
Second	100.0	572
Middle	99.8	518
Fourth	99.9	503
Richest	100.0	711
Ethnicity/Language		
Kyrgyz	99.9	1 798
Russian	100.0	306
Uzbek	100.0	543
Other	99.9	161
Total	99.9	2 819

*** MICS indicator 60; MDG indicator 8**

Table CP.1: Birth registration

Percent distribution of children aged 0-59 months by whether birth is registered and reasons for non-registration, Kyrgyzstan,2006

	Birth is registered*	Don't know if birth is registered	No. of children in the age of 0–59 months	Birth is not registered because:							Total	Number of children aged 0-59 months without birth registration
				Costs too much	Must travel too far	Late. didn't want to pay fine	Doesn't know where to register	Other	No marriage registration	Don't know		
Sex												
Male	94.8	1.2	1 450	7.7	…	…	3.0	50.9	38.4	…	100.0	58
Female	93.6	0.9	1 434	1.0	13.6	0.9	…	54.8	28.1	1.7	100.0	78
Region												
Batken	97.9	1.4	233	(*)	…	…	…	(*)	(*)	…	100.0	2
Jalalabad	88.6	1.8	422	(1.5)	…	…	…	(93.8)	(2.2)	(2.5)	100.0	40
Isyk-Kul	95.2	3.0	229	…	…	…	…	(*)	(*)	…	100.0	4
Naryn	90.1	0.3	110	(*)	(*)	…	…	9.9	(*)	…	100.0	10
Osh	96.4	0.1	699	(1.2)	…	…	(7.0)	(1.2)	(89.2)	(1.2)	100.0	25
Talas	97.2	2.0	144	…	…	…	…	(*)	(*)	…	100.0	1
Chui	93.6	…	415	…	(32.0)	(2.6)	…	(56.4)	(9.0)	…	100.0	26
Bishkek c.	94.4	1.3	632	(12.5)	(6.3)	…	…	(50.0)	(31.3)	…	100.0	27
Residence												
Urban	95.9	0.9	1 172	(11.0)	(7.4)	(1.8)	…	(41.3)	(37.7)	(0.8)	100.0	38
Rural	93.1	1.2	1 711	1.1	8.0	…	1.8	57.7	30.4	1.0	100.0	98
Age												
0-11 months	89.8	0.5	564	3.7	14.6	…	…	59.9	21.9	…	100.0	54
12-23 months	92.7	1.5	597	(1.8)	(3.0)	…	…	(28.4)	(63.0)	(3.9)	100.0	34
24-35 months	95.5	1.4	562	…	…	…	…	…	…	…	100.0	18
36-47 months	96.0	1.2	527	(*)	(*)	(*)	…	(*)	(*)	…	100.0	15
48-59 months	97.0	0.6	633	(*)	…	…	(*)	(*)	(*)	…	100.0	15
Mother's education												
Not secondary	93.4	0.1	210	(*)	(*)	…	…	(*)	(*)	…	100.0	14
Secondary	93.6	1.3	1 990	4.4	6.7	0.7	1.7	55.1	30.1	1.3	100.0	101
High	96.3	0.5	684	…	(*)	…	…	(*)	(*)	…	100.0	21
Wealth index quintiles												
Poorest	94.1	2.3	584	(*)	(*)	…	(*)	(*)	(*)	(*)	100.0	21
Second	95.1	0.5	556	(*)	(*)	…	…	(*)	(*)	…	100.0	24
Middle	90.3	0.7	535	…	(2.2)	…	…	(66.6)	(31.3)	…	100.0	48
Fourth	96.3	0.3	544	…	(*)	…	…	(*)	(*)	…	100.0	18
Richest	95.1	1.3	664	(*)	…	(*)	…	(*)	(*)	…	100.0	24

	Birth is registered*	Don't know if birth is registered	No. of children in the age of 0–59 months	Birth is not registered because:							Total	Number of children aged 0-59 months without birth registration
				Costs too much	Must travel too far	Late. didn't want to pay fine	Doesn't know where to register	Other	No marriage registration	Don't know		
Ethnicity/Language												
Kyrgyz	94.3	1.4	1 906	4.6	11.5	0.8	2.1	30.3	49.4	1.2	100.0	83
Russian	96.6	1.2	288	…	(*)	…	…	(*)	(*)	…	100.0	6
Uzbek	91.8	0.1	518	(3.4)	…	…	…	(91.1)	(4.8)	(0.7)	100.0	42
Other	97.3	…	169	…	…	…	…	(*)	(*)	…	100.0	5
Total	94.2	1.0	2 883	3.8	7.8	0.5	1.3	53.1	32.4	1.0	100.0	136

*** MICS Indicator 62**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table CP.2: Child labour

Percentage of children aged 5-14 years who are involved in child labour activities by type of work, Kyrgyzstan, 2006

	Working outside household		Household chores for 28+ hours/ week	Working for family business	Total child labour*	Number of children aged 5-14 years
	Paid work	Unpaid work				
Sex						
Male	0.0	1.6	1.4	1.9	4.3	2 618
Female	0.1	1.2	0.9	0.7	2.9	2 569
Region						
Batken	0.2	2.3	0.0	3.0	5.1	451
Jalalabad	…	2.6	0.1	1.1	3.8	1 051
Issyk-Kul	0.2	0.7	…	2.3	3.3	434
Naryn	…	…	2.9	0.2	3.1	278
Osh	…	0.2	0.1	0.1	0.4	1 362
Talas	0.4	1.1	…	0.2	1.6	199
Chui	…	3.1	5.8	3.2	10.1	801
Bishkek c.	…	0.3	0.8	1.1	2.2	612
Residence						
Urban	0.0	0.6	0.6	0.7	1.9	1 648
Rural	0.1	1.8	1.5	1.6	4.5	3 540
Age						
5-11 years	0.1	2.0	0.9	1.8	4.3	3 487
12-14 years	…	0.1	1.8	0.3	2.2	1 700
School participation						
Yes	0.1	1.2	0.9	1.5	3.3	4 356
No	…	2.6	2.6	0.3	5.5	832
Mother's education						
Not secondary	…	0.4	6.4	0.5	7.3	256
Secondary	0.1	1.2	0.8	1.3	2.9	4 082
Higher	…	2.4	1.7	2.0	6.1	850
Wealth index quintiles						
Poorest	0.0	1.2	0.2	0.6	1.9	1 170
Second	0.2	0.4	1.9	1.4	3.7	1 143
Middle	0.1	2.1	0.8	3.3	4.7	1 030
Fourth	…	2.9	1.6	0.6	5.0	1 070
Richest	…	0.3	1.6	0.9	2.8	775
Ethnicity/Language						
Kyrgyz	0.1	1.3	1.0	1.8	3.7	3 347
Russian	…	0.3	5.1	0.3	5.4	429
Uzbek	…	1.8	0.1	0.5	2.4	1 142
Other	…	…	1.8	0.8	2.6	257
Total	0.1	1.4	1.2	1.3	3.6	5 187

*** MICS indicator 71**

… – No reported cases

Table CP.3: Labourer students and student labourers

Percentage of children aged 5-14 years who are labourer students and student labourers, Kyrgyzstan, 2006

	Percentage of children in child labour	Percentage of children attending school	Number of children 5-14 years of age	Percentage of child labourers who are also attending school*	Number of child labourers aged 5-14	Percentage of students who are also involved in child labour**	Number of students aged 5-14
Sex							
Male	4.3	83.7	2 618	83.6	114	4.3	2 192
Female	2.9	84.2	2 569	64.4	75	2.2	2 164
Region							
Batken	5.1	78.4	451	(94.2)	23	6.2	353
Jalalabad	3.8	81.4	1 051	(51.7)	40	2.4	856
Issyk-Kul	3.3	84.5	434	(*)	14	3.7	367
Naryn	3.1	80.8	278	(*)	9	3.8	225
Osh	0.4	87.2	1 362	(*)	6	0.5	1 188
Talas	1.6	79.6	199	(*)	3	2.0	158
Chui	10.1	82.9	801	74.7	81	9.1	664
Bishkek c.	2.2	89.2	612	(*)	14	1.9	546
Residence							
Urban	1.9	86.1	1 648	(80.3)	31	1.8	1 418
Rural	4.5	83.0	3 540	75.1	158	4.0	2 937
Age							
5-11 years	4.3	77.4	3 487	74.9	152	4.2	2 698
12-14 years	2.2	97.5	1 700	(80.2)	37	1.8	1 658
Mother's education							
Not secondary	7.3	74.5	256	(*)	19	2.1	190
Secondary	2.9	83.8	4 082	90.3	118	3.1	3 420
Higher	6.1	87.7	850	63.0	52	4.4	745
Wealth index quintiles							
Poorest	1.9	84.1	1 170	(*)	23	2.1	984
Second	3.7	82.0	1 143	(60.7)	43	2.8	937
Middle	4.7	82.7	1 030	(99.5)	48	5.6	852
Fourth	5.0	83.2	1 070	57.8	54	3.5	890
Richest	2.8	89.5	775	(*)	22	2.7	693
Ethnicity/Language							
Kyrgyz	3.7	83.1	3 347	91.7	123	4.1	2 780
Russian	5.4	87.3	429	(*)	23	2.1	375
Uzbek	2.4	86.0	1 142	(35.5)	27	1.0	982
Other	2.6	81.6	257	(*)	7	3.2	210
Total	3.6	84.0	5 187	75.9	189	3.3	4 356

*** MICS indicator 72**

**** MICS indicator 73**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

Table CP.4: Child discipline

Percentage of children aged 3-14 years according to method of disciplining the child, Kyrgyzstan, 2006

	Percentage of children 3-14 years of age who experience:						Mother/care taker believes that the child needs to be physically punished	Number of children aged 3-14 years
	Only non-violent discipline	Psychological punishment	Minor physical punishment	Severe physical punishment	Any psychological or physical punishment*	No discipline or punishment		
Sex								
Male	34.7	44.3	37.4	2.9	55.0	7.9	7.9	1718
Female	42.1	35.7	33.7	2.3	47.5	7.6	7.6	1593
Region								
Batken	27.7	50.0	47.5	5.0	67.1	3.3	7.6	265
Jalalabad	42.9	37.4	35.3	3.3	46.4	5.6	3.2	601
Issyk-Kul	19.3	47.2	40.2	3.3	61.6	15.5	12.0	278
Naryn	22.9	29.2	57.9	1.9	62.5	12.0	3.0	172
Osh	57.3	26.8	20.0	1.6	32.5	7.2	3.7	778
Talas	48.5	30.0	38.3	3.7	47.4	3.2	3.3	144
Chui	23.1	60.0	40.5	3.2	67.2	9.6	14.2	520
Bishkek c.	37.6	41.3	37.6	1.2	53.5	7.3	12.8	553
Residence								
Urban	39.2	39.6	36.1	2.3	51.0	7.5	8.7	1250
Rural	37.8	40.5	35.3	2.8	51.7	8.0	7.2	2061
Age								
3-4 years	36.2	32.6	38.4	1.5	48.5	10.9	5.3	640
5-9 years	39.4	40.6	36.2	2.8	51.5	7.4	10.1	1177
10-14 years	38.4	43.1	34.0	2.9	52.6	6.7	6.9	1494
Mother's education								
Not secondary	29.7	40.0	40.2	2.0	57.7	10.3	3.4	177
Secondary	38.8	39.8	35.6	2.5	50.9	7.6	8.0	2482
Higher	38.6	41.9	34.3	3.3	51.7	7.8	7.9	652
Wealth index quintiles								
Poorest	38.8	38.4	35.6	1.0	50.7	7.4	3.9	681
Second	40.1	38.4	34.7	4.4	49.6	8.1	7.6	652
Middle	38.7	41.8	37.1	3.8	53.0	6.3	7.3	643
Fourth	37.6	37.8	34.2	2.5	49.0	9.6	9.3	672
Richest	36.3	44.7	36.4	1.4	54.8	7.4	10.6	664

	Percentage of children 3-14 years of age who experience:						Mother/care taker believes that the child needs to be physically punished	Number of children aged 3-14 years
	Only non-violent discipline	Psychological punishment	Minor physical punishment	Severe physical punishment	Any psychological or physical punishment*	No discipline or punishment		
Ethnicity/Language								
Kyrgyz	37.3	39.6	39.0	2.9	52.7	7.8	7.1	2132
Russian	30.1	52.6	33.8	1.7	60.6	6.4	10.2	366
Uzbek	51.4	31.4	23.0	2.3	38.0	7.0	6.4	626
Other	22.9	51.9	42.0	1.8	63.6	12.8	15.4	182
Total	38.3	40.2	35.6	2.6	51.4	7.8	7.7	3311

*** MICS indicator 74**

Table CP.5: Early marriage and polygyny

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 in a polygynous marriage or union, Kyrgyzstan, 2006

	Percentage married before age 15*	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	Percentage of women aged 15-49 years in polygynous marriage/ union***	Number of women aged 15-49 years currently married/in union
Region								
Batken	0.2	489	11.5	367	12.6	123	3.6	314
Jalalabad	1.3	1 245	9.5	942	6.4	304	1.3	739
Issyk-Kul	0.7	523	14.7	422	5.9	102	2.6	325
Naryn	0.2	281	9.7	217	1.0	64	…	169
Osh	1.2	1 536	13.4	1 191	11.1	346	1.5	995
Talas	0.9	282	17.7	213	8.8	69	1.9	167
Chui	0.7	1 130	18.2	924	11.8	206	3.1	706
Bishkek c.	0.3	1 556	7.7	1 226	2.5	330	0.4	780
Residence								
Urban	0.6	3 055	9.7	2 423	4.1	633	1.9	1 666
Rural	0.9	3 988	14.2	3 078	10.1	909	1.6	2 529
Age								
15-19	0.3	1 542	na	na	7.7	1 542	0.6	118
20-24	0.5	1 276	10.4	1 276	na	na	0.8	667
25-29	2.2	1 077	13.8	1 077	na	na	2.3	806
30-34	0.7	887	17.5	887	na	na	1.8	757
35-39	0.1	799	9.6	799	na	na	1.3	653
40-44	0.9	791	10.3	791	na	na	1.8	650
45-49	0.9	671	12.0	671	na	na	2.4	545
Education								
Not secondary	1.9	939	28.4	344	5.3	595	0.2	270
Secondary	0.7	4 422	13.1	3 715	9.9	707	2.1	2 988
Higher	0.4	1 682	6.1	1 442	6.9	240	1.1	936
Wealth index quintiles								
Poorest	0.9	1 228	16.5	931	7.2	296	1.2	768
Second	1.0	1 337	13.4	998	6.8	339	1.6	791
Middle	0.6	1 279	12.9	1 019	12.1	261	1.8	826
Fourth	1.0	1 436	11.0	1 162	11.1	274	2.0	889
Richest	0.5	1 763	9.1	1 391	3.3	372	1.9	920

	Percentage married before age 15*	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	Percentage of women aged 15-49 years in polygynous marriage/ union***	Number of women aged 15-49 years currently married/in union
Ethnicity/Language								
Kyrgyz	0.7	4 333	12.5	3 306	7.7	1 027	1.7	2 519
Russian	0.9	950	16.1	794	7.8	156	3.4	542
Uzbek	1.1	1 324	9.1	1 063	3.9	262	0.4	862
Other	0.6	417	11.0	327	18.5	90	2.8	263
Total	0.8	7 043	12.2	5 501	7.7	1 542	1.7	4 195

*** MICS indicator 67**
**** MICS indicator 68**
***** MICS indicator 70**
na – Not applicable
… – No reported cases

Table CP.6: Spousal age difference

Percent distribution of currently married/in union women aged 15-19 and 20-24 according to the age difference with their husband or partner, Kyrgyzstan, 2006

	Percentage of currently married/in union women aged 15-19 whose husband or partner is:					Number of women aged 15-19 years currently married/in union	Percentage of currently married/in union women aged 20-24 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*	Total		Younger	0-4 years older	5-9 years older	10+ years older*	Total	
Region												
Batken	…	(*)	(*)	…	100.0	15	0.3	60.7	35.3	3.7	100.0	51
Jalalabad	…	(*)	(*)	(*)	100.0	19	0.6	44.5	52.7	2.1	100.0	133
Issyk-Kul	…	(*)	(*)	(*)	100.0	6	1.9	60.7	28.3	9.1	100.0	42
Naryn	…	(*)	…	…	100.0	1	1.5	36.8	47.1	14.6	100.0	23
Osh	…	(*)	(*)	(*)	100.0	38	1.8	62.6	31.9	3.7	100.0	170
Talas	…	(*)	(*)	…	100.0	6	…	58.9	32.9	8.3	100.0	23
Chui	(*)	(*)	(*)	(*)	100.0	24	0.6	62.6	22.9	14.0	100.0	97
Bishkek c.	…	(*)	(*)	…	100.0	8	2.6	59.0	33.3	5.1	100.0	127
Residence												
Urban	…	(62.4)	(31.1)	(6.5)	100.0	26	2.3	56.7	34.7	6.3	100.0	267
Rural	3.9	40.9	44.0	11.3	100.0	92	0.7	57.2	36.3	5.8	100.0	399
Education												
Not secondary	…	(*)	(*)	(*)	100.0	31	…	51.4	37.3	11.2	100.0	89
Secondary	…	44.8	47.0	8.2	100.0	70	0.6	52.8	41.0	5.6	100.0	401
Higher	(*)	(*)	(*)	(*)	100.0	17	3.7	69.5	22.5	4.3	100.0	176
Wealth index quintiles												
Poorest	…	(47.3)	(52.7)	…	100.0	21	1.7	59.0	35.6	3.8	100.0	125
Second	…	(*)	(*)	(*)	100.0	23	0.7	40.5	47.4	11.4	100.0	123
Middle	…	(53.1)	(20.6)	(26.3)	100.0	31	0.5	66.4	30.7	2.4	100.0	161
Fourth	(*)	(*)	(*)	(*)	100.0	30	0.1	60.8	32.4	6.7	100.0	116
Richest	…	(*)	(*)	…	100.0	12	3.6	55.8	33.7	6.9	100.0	142
Ethnicity/Language												
Kyrgyz	…	46.5	39.7	13.8	100.0	79	1.8	55.9	36.0	6.3	100.0	398
Russian	(*)	(*)	(*)	…	100.0	12	(3.5)	(63.4)	(23.6)	(9.5)	100.0	59
Uzbek	…	(*)	(*)	(*)	100.0	10	…	55.4	43.2	1.4	100.0	164
Other	…	(*)	(*)	(*)	100.0	17	…	(64.9)	(19.3)	(15.8)	100.0	44
Total	3.0	45.6	41.1	10.2	100.0	118	1.4	57.0	35.6	6.0	100.0	667

*** MICS Indicator 69**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table CP.9: Attitudes toward domestic violence

Percentage of women aged 15-49 years who believe a husband is justified in beating his wife/partner in various circumstances, Kyrgyzstan, 2006

	Percentage of women aged 15-49 years who believe a husband is justified in beating his wife/partner:						
	When she goes out without telling him	When she neglects the children	When she argues with him	When she refuses sex with him	When she burns the food	For any of these reasons*	Number of women aged 15-49 years
Region							
Batken	26.5	21.1	27.2	10.0	9.2	46.0	489
Jalalabad	34.7	35.8	40.4	10.7	27.1	54.2	1 245
Issyk-Kul	16.2	14.0	24.0	16.6	15.7	33.0	523
Naryn	26.8	32.5	19.1	15.1	12.6	46.0	281
Osh	35.1	33.2	47.6	16.1	15.0	59.0	1 536
Talas	10.6	17.8	15.4	4.4	1.7	25.5	282
Chui	8.3	13.9	10.9	4.0	3.6	22.6	1 130
Bishkek c.	3.9	9.4	5.6	3.1	1.5	14.0	1 556
Residence							
Urban	13.1	17.1	14.5	6.5	6.1	25.5	3 055
Rural	26.3	26.4	34.0	11.7	15.4	47.0	3 988
Age							
15-19	13.3	16.1	16.3	4.8	7.6	27.5	1 542
20-24	22.3	21.4	26.0	7.7	10.6	37.0	1 276
25-29	23.0	26.8	30.4	13.3	12.7	41.9	1 077
30-34	25.3	22.4	28.1	11.5	10.3	43.1	887
35-39	23.2	25.9	31.0	12.8	15.5	44.6	799
40-44	22.5	26.9	26.5	10.4	14.6	40.7	791
45-49	18.0	22.3	27.5	9.5	11.6	36.3	671
Marital status							
Now I am married	25.9	26.9	32.4	12.4	13.7	45.3	4 195
Was married	17.4	20.2	16.1	10.1	9.4	29.4	674
Wasn't married	11.2	14.4	15.4	3.6	7.4	25.5	2 174
Education							
Not secondary	20.0	21.1	24.8	7.8	10.7	34.7	939
Secondary	24.3	26.1	30.1	11.3	13.9	43.5	4 422
Higher	10.9	13.4	14.2	5.5	4.9	24.0	1 682
Wealth index quintiles							
Poorest	21.5	26.2	31.4	10.5	15.7	45.0	1 228
Second	28.9	27.3	35.6	11.7	16.8	48.2	1 337
Middle	33.6	29.8	38.9	14.1	16.2	51.7	1 279
Fourth	18.8	22.0	21.1	9.8	9.2	34.6	1 436
Richest	5.5	11.0	7.8	3.5	2.4	16.9	1 763

	Percentage of women aged 15-49 years who believe a husband is justified in beating his wife/partner:						
	When she goes out without telling him	When she neglects the children	When she argues with him	When she refuses sex with him	When she burns the food	For any of these reasons*	Number of women aged 15-49 years
Ethnicity/Language							
Kyrgyz	17.9	21.0	21.9	9.1	9.6	34.8	4 333
Russian	4.3	8.4	5.0	3.1	2.1	13.0	950
Uzbek	41.8	38.3	55.4	15.4	25.6	67.5	1 324
Other	18.8	19.5	16.5	9.2	6.0	29.5	417
Total	20.5	22.4	25.6	9.5	11.3	37.7	7 043

*** MICS indicator 100**

Table HA.1: Knowledge of preventing HIV transmission

Percentage of women aged 15-49 years who know the main ways of preventing HIV transmission, Kyrgyzstan, 2006

		Percentage who know transmission can be prevented by:						
	Heard of AIDS	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	Number of women aged 15-49 years
Region								
Batken	81.8	42.3	46.7	33.2	22.3	59.0	41.0	489
Jalalabad	88.5	63.5	63.2	58.8	39.8	80.9	19.1	1 245
Issyk-Kul	96.7	73.4	77.2	66.8	49.6	93.3	6.7	523
Naryn	93.5	79.5	79.7	62.9	52.5	90.4	9.6	281
Osh	86.4	59.4	45.9	42.1	27.9	70.5	29.5	1 536
Talas	97.7	89.5	87.6	65.7	56.4	96.9	3.1	282
Chui	95.4	80.9	76.3	51.6	40.3	90.9	9.1	1 130
Bishkek c.	99.0	83.0	82.1	64.3	52.7	95.9	4.1	1 556
Residence								
Urban	96.7	74.1	73.9	59.0	44.9	89.5	10.5	3 055
Rural	88.7	68.0	62.1	51.0	37.7	79.8	20.2	3 988
Age								
15-19	86.8	62.5	60.3	51.8	37.1	77.0	23.0	1 542
20-24	94.9	71.0	67.4	56.8	42.1	85.3	14.7	1 276
25-29	95.0	72.5	70.8	50.3	40.8	86.1	13.9	1 077
30-34	95.4	77.2	75.0	54.8	42.3	90.3	9.7	887
35-39	92.8	74.7	68.7	57.4	41.2	87.5	12.5	799
40-44	90.6	73.6	69.1	57.8	46.3	84.3	15.7	791
45-49	91.5	68.6	63.0	55.3	37.9	81.1	18.9	671
Education								
Not secondary	87.1	65.2	58.2	49.1	36.1	76.1	23.9	939
Secondary	90.8	68.1	66.2	53.6	39.8	82.3	17.7	4 422
Higher	98.6	80.3	75.0	59.7	46.2	92.9	7.1	1 682
Wealth index quintiles								
Poorest	87.3	63.0	60.8	49.9	37.2	76.0	24.0	1 228
Second	85.7	61.9	59.1	50.8	37.3	76.3	23.7	1 337
Middle	90.6	67.3	60.5	52.4	37.1	80.0	20.0	1 279
Fourth	95.3	75.9	73.2	55.6	41.5	89.1	10.9	1 436
Richest	99.1	80.7	78.0	61.1	48.2	94.1	5.9	1 763
Ethnicity/Language								
Kyrgyz	92.3	74.3	69.9	57.3	44.3	85.5	14.5	4 333
Russian	99.4	84.2	81.2	59.5	49.3	95.7	4.3	950
Uzbek	86.1	50.2	47.5	43.1	24.5	70.7	29.3	1 324
Other	94.0	65.8	70.0	49.3	37.4	82.9	17.1	417
Total	92.2	70.6	67.2	54.5	40.8	84.0	16.0	7 043

Table HA.2: Identifying misconceptions about HIV/AIDS

Percentage of women aged 15-49 years who correctly identify misconceptions about HIV/AIDS, Kyrgyzstan, 2006

	Percent who know that: HIV cannot be transmitted by:			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
	Option 1: HIV cannot be transmitted by sharing food	Option 2: Mosquito bites	A healthy looking person can be infected		Option 3: HIV cannot be transmitted by supernatural means	Option 4: HIV can be transmitted by sharing needles	
Region							
Batken	58.0	24.4	37.4	10.8	35.6	79.7	489
Jalalabad	50.2	56.5	62.5	33.3	52.2	83.6	1 245
Issyk-Kul	61.7	50.1	71.0	18.7	82.3	94.3	523
Naryn	48.0	39.7	60.4	18.3	50.7	91.4	281
Osh	36.7	29.7	39.0	7.8	54.1	77.7	1 536
Talas	68.6	74.0	84.8	46.0	83.7	93.6	282
Chui	68.3	50.8	80.5	36.6	80.3	94.4	1 130
Bishkek c.	67.3	59.8	84.3	41.2	69.8	97.9	1 556
Residence							
Urban	62.4	50.9	72.9	31.3	68.8	94.4	3 055
Rural	51.1	45.5	58.6	24.2	59.1	83.9	3 988
Age							
15-19	51.9	46.6	58.4	27.0	58.7	81.2	1 542
20-24	61.1	51.2	63.7	29.1	64.7	91.7	1 276
25-29	56.7	48.0	69.2	28.5	65.5	91.9	1 077
30-34	56.8	50.9	72.2	30.8	64.2	91.8	887
35-39	55.3	46.2	65.8	26.0	65.2	89.7	799
40-44	55.9	47.7	61.6	24.3	62.4	88.8	791
45-49	54.3	41.8	67.2	22.9	65.1	87.1	671
Education							
Not secondary	48.1	40.5	57.5	21.2	53.4	78.7	939
Secondary	52.2	45.6	61.6	24.3	61.3	87.3	4 422
Higher	70.4	57.6	77.1	38.5	74.0	96.9	1 682
Wealth index quintiles							
Poorest	49.3	44.2	49.0	20.9	57.0	82.5	1 228
Second	47.7	43.3	53.8	20.2	57.4	81.2	1 337
Middle	49.2	40.1	60.2	21.0	57.6	85.0	1 279
Fourth	59.2	52.7	74.3	32.3	66.8	92.1	1 436
Richest	69.3	55.3	79.6	37.5	73.3	97.7	1 763
Ethnicity/Language							
Kyrgyz	55.4	48.3	64.8	27.8	65.1	88.7	4 333
Russian	77.5	56.8	85.1	41.8	83.2	98.6	950
Uzbek	39.1	39.2	47.5	14.3	42.4	78.9	1 324
Other	66.2	47.8	72.6	27.9	64.6	92.3	417
Total	56.0	47.8	64.8	27.3	63.3	88.5	7 043

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

Percentage of women aged 15-49 years who have comprehensive knowledge of HIV/AIDS transmission, Kyrgyzstan, 2006

	Know 2 ways to prevent HIV transmission	Correctly identify 3 misconceptions about HIV transmission	Have comprehensive knowledge (identify 2 prevention methods and 3 misconceptions)*	Number of women
Region				
Batken	35.1	10.8	5.7	489
Jalalabad	51.5	33.3	23.5	1 245
Issyk-Kul	62.0	18.7	12.8	523
Naryn	69.5	18.3	13.8	281
Osh	38.3	7.8	5.1	1 536
Talas	81.6	46.0	39.8	282
Chui	67.8	36.6	28.7	1 130
Bishkek c.	71.4	41.2	31.9	1 556
Residence				
Urban	61.9	31.3	23.4	3 055
Rural	53.6	24.2	18.1	3 988
Age				
15-19	49.9	27.0	19.1	1 542
20-24	57.4	29.1	21.9	1 276
15-24	53.3	27.9	20.3	2 819
25-29	58.9	28.5	20.5	1 077
30-34	63.6	30.8	25.1	887
35-39	58.9	26.0	20.6	799
40-44	61.7	24.3	17.8	791
45-49	54.9	22.9	17.2	671
Education				
Not secondary	50.9	21.2	16.9	939
Secondary	55.6	24.3	17.9	4 422
Higher	64.9	38.5	28.9	1 682
Wealth index quintiles				
Poorest	51.4	20.9	17.0	1 228
Second	49.3	20.2	14.7	1 337
Middle	50.9	21.0	12.7	1 279
Fourth	62.3	32.3	25.1	1 436
Richest	67.6	37.5	28.8	1 763
Ethnicity/Language				
Kyrgyz	61.3	27.8	21.7	4 333
Russian	71.9	41.8	32.9	950
Uzbek	33.2	14.3	6.4	1 324
Other	56.4	27.9	21.1	417
Total	57.2	27.3	20.4	7 043

*** MICS indicator 82; MDG indicator 19b**

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, Kyrgyzstan,2006

	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
		During pregnancy	At delivery	Through breastmilk	All three ways*		
Region							
Batken	75.4	58.1	59.2	37.9	31.4	6.4	489
Jalalabad	78.8	78.4	76.4	76.5	74.7	9.7	1 245
Issyk-Kul	94.8	94.5	89.9	73.8	71.9	1.9	523
Naryn	89.8	84.7	71.7	63.1	50.8	3.7	281
Osh	76.5	75.6	70.7	68.7	65.9	10.0	1 536
Talas	93.5	75.5	71.8	56.8	44.1	4.2	282
Chui	91.8	89.6	81.0	55.2	48.9	3.6	1 130
Bishkek c.	95.4	94.5	80.9	55.2	50.8	3.5	1 556
Residence							
Urban	92.6	90.8	81.1	62.2	57.4	4.0	3 055
Rural	81.0	77.1	72.7	62.7	58.4	7.8	3 988
Age							
15-19	75.9	72.9	63.6	52.7	47.1	10.9	1 542
20-24	88.1	85.3	78.3	63.8	58.9	6.9	1 276
25-29	88.7	85.3	79.1	63.9	60.1	6.3	1 077
30-34	90.9	88.9	82.8	67.1	64.1	4.5	887
35-39	90.9	88.5	82.7	67.4	63.1	1.9	799
40-44	87.4	83.1	78.2	64.9	59.4	3.2	791
45-49	87.4	84.3	79.1	65.4	62.0	4.2	671
Education							
Not secondary	74.0	71.9	64.9	56.8	52.0	13.1	939
Secondary	85.3	82.1	75.9	63.3	59.0	5.5	4 422
Higher	94.8	91.7	83.7	63.5	58.5	3.9	1 682
Wealth index quintiles							
Poorest	78.7	74.7	68.9	62.6	58.4	8.6	1 228
Second	77.5	73.2	71.7	62.0	58.7	8.2	1 337
Middle	82.9	80.2	76.6	65.1	61.9	7.7	1 279
Fourth	91.2	89.3	80.4	66.0	60.1	4.1	1 436
Richest	95.7	93.4	81.5	58.0	52.5	3.4	1 763
Ethnicity/Language							
Kyrgyz	87.8	85.1	76.5	63.1	58.3	4.5	4 333
Russian	95.4	93.1	85.5	56.3	51.2	3.9	950
Uzbek	72.1	70.9	68.7	67.3	65.8	14.0	1 324
Other	89.9	77.2	76.8	52.9	43.4	4.1	417
Total	86.0	83.1	76.3	62.5	58.0	6.1	7 043

*** MICS indicator 89**

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, Kyrgyzstan, 2006

	Percent of women who:						
	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*	Number of women who have heard of AIDS
Region							
Batken	36.7	30.2	67.8	83.6	92.2	7.8	400
Jalalabad	37.0	38.2	68.4	75.2	85.4	14.6	1 102
Issyk-Kul	30.8	52.8	78.8	96.1	99.1	0.9	506
Naryn	50.1	33.7	68.2	92.6	98.8	1.2	263
Osh	40.4	41.9	74.0	82.9	94.4	5.6	1 328
Talas	21.7	79.1	85.9	95.1	99.5	0.5	275
Chui	23.1	60.0	63.1	84.3	97.2	2.8	1 078
Bishkek c.	22.8	78.3	71.5	81.2	98.1	1.9	1 540
Residence							
Urban	24.0	65.8	72.2	84.7	97.1	2.9	2 954
Rural	37.5	44.7	69.9	82.4	93.0	7.0	3 538
Age							
15-19	34.4	53.3	69.8	80.1	93.7	6.3	1 339
20-24	33.1	52.5	67.2	81.6	93.7	6.3	1 212
25-29	29.7	56.7	70.5	82.0	96.3	3.7	1 023
30-34	28.2	57.6	74.5	86.1	95.7	4.3	847
35-39	33.1	53.6	75.3	91.4	97.5	2.5	741
40-44	27.9	55.1	69.8	82.1	93.5	6.5	717
45-49	30.8	51.2	72.5	84.9	94.3	5.7	614
Education							
Not secondary	33.7	53.2	72.8	82.9	94.0	6.0	818
Secondary	34.3	49.9	72.5	84.4	94.7	5.3	4 015
Higher	23.3	65.3	66.2	81.3	95.6	4.4	1 659
Wealth index quintiles							
Poorest	37.0	39.4	68.0	77.6	89.0	11.0	1 072
Second	40.1	44.2	72.1	83.7	92.7	7.3	1 145
Middle	41.3	44.6	73.4	86.8	96.0	4.0	1 159
Fourth	24.9	60.7	72.5	86.3	96.9	3.1	1 368
Richest	20.8	71.4	69.1	82.3	97.4	2.6	1 748

	Percent of women who:						
	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*	Number of women who have heard of AIDS
Ethnicity/Language							
Kyrgyz	34.1	52.3	74.0	85.4	94.6	5.4	3 998
Russian	14.6	71.8	60.2	80.4	96.8	3.2	944
Uzbek	38.7	44.4	71.8	81.8	94.1	5.9	1 140
Other	23.0	63.1	62.2	75.7	94.0	6.0	392
Total	31.4	54.3	70.9	83.4	94.8	5.2	6 492

*** MICS indicator 86**

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, Kyrgyzstan, 2006

	Know a place to get tested*	Have been tested**	Number of women	If tested. have been told result	Number of women who have been tested for HIV
Region					
Batken	36.0	24.6	489	38.3	120
Jalalabad	47.1	13.7	1 245	15.1	171
Issyk-Kul	66.3	39.1	523	67.1	205
Naryn	48.3	32.2	281	80.8	90
Osh	39.5	28.2	1 536	75.6	433
Talas	56.9	32.7	282	74.5	92
Chui	79.1	53.9	1 130	87.8	609
Bishkek c.	80.6	56.8	1 556	96.3	883
Residence					
Urban	72.5	47.6	3 055	85.0	1 454
Rural	48.7	28.8	3 988	71.9	1 150
Age					
15-19	43.1	10.9	1 542	74.1	168
20-24	63.3	41.4	1 276	74.3	528
25-29	69.6	52.9	1 077	83.2	570
30-34	65.8	51.5	887	81.2	457
35-39	62.6	44.3	799	80.0	354
40-44	60.5	36.9	791	76.0	292
45-49	55.9	35.0	671	83.5	235
Education					
Not secondary	44.8	19.2	939	74.3	181
Secondary	55.5	35.5	4 422	76.1	1 568
Higher	76.3	50.9	1 682	86.1	856
Wealth index quintiles					
Poorest	46.2	22.0	1 228	51.6	270
Second	44.2	27.1	1 337	58.1	363
Middle	47.7	31.6	1 279	82.6	404
Fourth	70.5	43.0	1 436	80.0	617
Richest	78.1	53.9	1 763	93.2	950
Ethnicity/Language					
Kyrgyz	60.5	37.5	4 333	78.8	1 623
Russian	83.2	59.0	950	90.3	560
Uzbek	36.6	19.4	1 324	55.6	257
Other	61.0	39.1	417	82.6	163
Total	59.0	37.0	7 043	79.2	2 604

*** MICS indicator 87**
**** MICS indicator 88**

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, Kyrgyzstan, 2006

	Percent of women who:				
	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**	Number of women who gave birth in the 2 years preceding the survey
Region					
Batken	97.4	50.9	53.3	29.3	91
Jalalabad	92.7	43.2	33.0	8.5	189
Issyk-Kul	99.4	75.0	70.5	51.6	81
Naryn	96.4	47.0	65.0	50.9	51
Osh	96.8	65.3	61.2	44.1	298
Talas	97.9	72.2	80.0	69.6	45
Chui	96.0	47.0	79.7	68.4	182
Bishkek c.	99.4	85.1	97.0	96.4	273
Residence					
Urban	99.0	75.4	85.0	76.1	490
Rural	95.4	53.9	57.3	39.9	719
Age					
15-19	(100.0)	(85.7)	(74.6)	(46.5)	33
20-24	96.0	56.9	65.0	46.8	454
25-29	97.3	65.5	69.8	60.6	376
30-34	96.9	62.8	71.6	60.5	213
35-49	97.8	68.0	70.7	57.1	133
Education					
Not secondary	96.9	50.1	55.2	39.6	115
Secondary	96.9	62.1	65.9	49.6	777
Higher	96.6	68.3	79.9	72.2	318
Wealth index quintiles					
Poorest	93.6	65.2	48.1	27.6	228
Second	96.5	51.2	57.3	33.7	219
Middle	97.8	58.1	62.1	50.8	252
Fourth	96.6	59.2	76.7	62.9	220
Richest	99.0	75.8	92.4	88.6	290
Ethnicity/Language					
Kyrgyz	96.8	68.2	70.9	57.5	793
Russian	96.8	68.6	91.9	86.7	121
Uzbek	96.2	51.2	46.3	25.7	226
Other	100.0	24.1	73.5	60.5	68
Total	96.9	62.6	68.5	54.6	1 209

*** MICS indicator 90**

**** MICS indicator 91**

(…) – Figures that are based on 25-49 unweighted cases

Table HA.8: Sexual behaviour that increases risk of HIV infection

Percentage of young women aged 15-19 years who had sex before age 15, percentage of young women aged 20-24 who had sex before age 18, and percentage of young women aged 15-24 who had sex with a man 10 or more years older, Kyrgyzstan, 2006

	Percentage of women aged 15-19 who had sex before age 15*	Number of women aged 15-19 years	Percentage of women aged 20-24 who had sex before age 18	Number of women aged 20-24 years	Percentage who had sex in the 12 months preceding the survey with a man 10 or more years older**	Number of women who had sex in the 12 months preceding the survey
Region						
Batken	…	123	6.2	83	2.8	67
Jalalabad	…	304	3.9	248	4.9	149
Issyk-Kul	…	102	12.2	75	13.5	53
Naryn	…	64	5.6	37	13.9	24
Osh	…	346	11.4	290	4.9	206
Talas	1.9	69	20.7	43	5.5	35
Chui	0.7	206	26.0	178	10.4	149
Bishkek c.	…	330	5.0	323	5.4	151
Residence						
Urban	0.2	633	7.2	598	6.3	329
Rural	0.1	909	12.9	679	6.8	504
Age						
15-19	0.2	1 542	na	na	8.9	135
20-24	na	na	10.2	1 276	6.2	698
Education						
Not secondary	0.2	595	17.3	148	13.4	136
Secondary	0.2	707	12.3	692	5.9	485
Higher	…	240	4.6	436	3.8	212
Wealth index quintiles						
Poorest	0.1	296	14.3	217	3.2	147
Second	0.2	339	6.3	234	9.3	146
Middle	0.4	261	10.5	257	5.9	205
Fourth	…	274	14.5	229	8.0	160
Richest	0.2	372	7.2	339	6.9	176
Ethnicity/Language						
Kyrgyz	0.1	1 027	10.4	771	7.9	494
Russian	0.9	156	21.1	150	5.4	103
Uzbek	…	262	5.0	281	1.8	170
Other	…	90	6.4	71	11.6	64
Total	0.2	1 542	10.2	1 276	6.6	833

*** MICS indicator 84**
**** MICS indicator 92**
(*) – Figures that are based on less then 25 unweighted cases
… – No reported cases
na – not applicable

Table HA.9: Condom use at last high-risk sex

Percentage of young women aged 15-24 years who had high risk sex in the previous year and who used a condom at last high risk sex, Kyrgyzstan, 2006

	Ever had sex	Had sex in the last 12 months	Had sex with more than one partner in the last 12 months	Number of women aged 15-24	Percent who had sex with non-marital. non-cohabiting partner *	Number of women aged 15-24 years who had sex in last 12 months	Percent who used a condom at last sex with a non-marital. non-cohabiting partner **	Number of women aged 15-24 years who had sex in last 12 months with a non-marital, non-cohabiting partner
Region								
Batken	36.1	32.9	…	205	1.5	67	(*)	1
Jalalabad	28.6	26.9	2.3	551	0.6	149	(*)	1
Issyk-Kul	33.5	30.1	…	177	6.3	53	(*)	3
Naryn	27.1	24.2	…	101	…	24	…	0
Osh	34.9	32.3	…	636	0.7	206	(*)	1
Talas	31.9	31.0	5.1	112	13.6	35	(*)	5
Chui	41.1	38.7	0.2	384	20.7	149	(56.5)	31
Bishkek c.	24.6	23.1	0.2	653	12.9	151	(*)	19
Residence								
Urban	28.7	26.7	1.0	1 231	11.8	329	(48.9)	39
Rural	34.1	31.8	0.5	1 588	4.5	504	(*)	23
Age								
15-19	8.8	8.8	0.2	1 542	11.0	135	(*)	15
20-24	59.4	54.7	1.4	1 276	6.7	698	(59.6)	47
Education								
Not secondary	20.0	18.3	0.6	743	12.1	136	(44.8)	16
Secondary	37.6	34.7	1.0	1 399	4.8	485	(*)	23
Higher	32.4	31.4	0.3	676	10.2	212	(*)	22
Wealth index quintiles								
Poorest	31.7	28.6	0.6	514	3.2	147	(*)	5
Second	27.7	25.5	0.1	572	1.2	146	(*)	2
Middle	41.7	39.5	0.9	518	8.2	205	(*)	17
Fourth	33.4	31.8	1.9	503	7.2	160	(*)	12
Richest	26.5	24.7	0.5	711	15.2	176	(*)	27

	Ever had sex	Had sex in the last 12 months	Had sex with more than one partner in the last 12 months	Number of women aged 15-24	Percent who had sex with non-marital. non-cohabiting partner *	Number of women aged 15-24 years who had sex in last 12 months	Percent who used a condom at last sex with a non-marital. non-cohabiting partner **	Number of women aged 15-24 years who had sex in last 12 months with a non-marital, non-cohabiting partner
Ethnicity/Language								
Kyrgyz	29.6	27.5	0.7	1 798	4.1	494	(*)	20
Russian	37.0	33.8	0.3	306	35.3	103	(61.1)	37
Uzbek	33.4	31.3	1.2	543	…	170	…	0
Other	40.9	39.6	1.1	161	7.2	64	(*)	5
Total	31.7	29.6	0.7	2 819	7.4	833	56.0	62

*** MICS Indicator 85**

**** MICS Indicator 83; MDG Indicator 19a**

(…) – Figures that are based on 25-49 unweighted cases

(*) – Figures that are based on less then 25 unweighted cases

… – No reported cases

Table HA.10: Children's living arrangements and orphanhood

Percent distribution of children aged 0-17 years according to living arrangements, percentage of children aged 0-17 years in households not living with a biological parent and percentage of children who are orphans, Kyrgyzstan, 2006

	Living with both parents	Living with neither parent				Living with mother only		Living with father only		Impossible to determine	Total	Not living with a biological parent *	One or both parents dead **	Number of children
		Only father alive	Only mother alive	Both are alive	Both are dead	Father alive	Father dead	Mother alive	Mother dead					
Sex														
Male	82.8	0.1	0.3	4.4	0.3	6.9	3.6	0.6	0.8	0.3	100.0	5.0	5.0	4 962
Female	81.5	0.2	0.3	4.6	0.7	7.0	3.9	0.5	0.9	0.4	100.0	5.8	6.0	4 960
Region														
Batken	83.5	…	0.5	4.3	0.4	6.5	3.3	0.8	0.6	0.2	100.0	5.2	4.8	867
Jalalabad	85.2	0.1	0.2	3.6	0.3	4.7	3.9	0.3	1.7	0.2	100.0	4.1	6.2	1 856
Issyk-Kul	80.7	0.5	0.2	4.9	0.2	7.5	4.7	0.7	0.2	0.4	100.0	5.8	5.9	800
Naryn	79.5	0.2	1.1	6.3	0.2	6.2	4.5	0.8	1.0	0.2	100.0	7.9	7.0	503
Osh	84.5	…	0.2	6.0	0.4	4.8	2.5	0.8	0.3	0.4	100.0	6.6	3.4	2 563
Talas	84.1	0.0	0.1	5.1	0.8	4.3	3.8	0.8	0.8	0.3	100.0	6.0	5.4	425
Chui	76.6	0.2	0.2	3.2	1.0	12.4	5.4	0.1	0.6	0.3	100.0	4.6	7.3	1 437
Bishkek c.	79.9	0.2	0.2	3.3	0.9	9.4	3.7	0.3	1.1	0.8	100.0	4.7	6.2	1 472
Residence														
Urban	77.6	0.2	0.3	4.5	0.7	9.6	4.9	0.3	1.1	0.7	100.0	5.7	7.2	3 429
Rural	84.5	0.1	0.3	4.5	0.4	5.6	3.2	0.6	0.6	0.2	100.0	5.3	4.6	6 493
Age														
0-4 years	85.3	…	0.1	3.5	0.5	7.9	2.3	0.1	0.1	0.2	100.0	4.1	3.1	3 005
5-9 years	83.2	0.1	0.3	4.4	0.2	7.8	2.4	0.8	0.5	0.2	100.0	5.0	3.6	2 438
10-14 years	81.4	0.3	0.4	4.3	0.3	6.0	4.8	0.6	1.7	0.2	100.0	5.3	7.5	2 750
15-17 years	76.3	0.1	0.4	6.7	1.2	5.9	6.6	0.8	1.0	1.0	100.0	8.4	9.3	1 730
Wealth index quintiles														
Poorest	86.1	0.2	0.3	5.1	0.1	3.5	3.2	0.8	0.5	0.3	100.0	5.7	4.3	2 160
Second	84.1	0.0	0.2	4.3	0.4	5.6	3.6	0.4	1.2	0.2	100.0	4.9	5.5	2 163
Middle	82.8	0.1	0.4	5.5	0.5	6.3	3.2	0.5	0.4	0.3	100.0	6.5	4.6	1 956
Fourth	80.9	0.4	0.0	3.9	0.7	7.9	4.7	0.5	0.9	0.1	100.0	5.0	6.7	1 914
Richest	75.5	…	0.4	3.5	1.0	12.8	4.2	0.5	1.0	1.0	100.0	4.9	6.7	1 729
Ethnicity/Language														
Kyrgyz	82.3	0.1	0.3	5.7	0.4	5.5	3.8	0.7	0.8	0.4	100.0	6.5	5.3	6 485
Russian	66.0	0.4	1.0	2.5	1.4	20.8	5.9	0.5	0.8	0.5	100.0	5.4	9.6	865
Uzbek	89.6	…	0.1	1.8	0.4	4.8	2.2	0.0	1.0	0.1	100.0	2.3	3.8	2 036
Other	77.0	0.0	…	3.1	1.0	11.3	6.5	0.6	0.3	0.2	100.0	4.1	7.8	517
Total	82.1	0.1	0.3	4.5	0.5	7.0	3.8	0.5	0.8	0.4	100.0	5.4	5.5	9 923

*** MICS Indicator 78**
**** MICS Indicator 75**
… – No reported cases

APPENDIX A. SAMPLE DESIGN

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

The primary objective of the sample design for the Kyrgyz Multiple Indicator Cluster Survey was to produce statistically reliable estimates of most indicators at the national level and for urban and rural areas of the country. Some of indicators are estimated at the region level. Urban and rural areas in each of the seven regions (Batken, Chui, Jalalabat, Issykkul, Osh, Naryn, Talas regions) and city Bishkek, comprising 15 territories, 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 Kyrgyz MICS was calculated as 5200 households. For the calculation of the sample size, the key indicator used was the stunting prevalence among children aged 0-4 years. The following formula was used to estimate the required sample size for these indicators:

$$n = \frac{[4(r)(1-r)(f)(1.1)]}{[(0.12r)^2(p)\cdot n_h]}$$

where

- n is the required sample size, expressed as number of households
- *4* is a factor to achieve the 95 per cent level of confidence
- r is the predicted or anticipated prevalence (coverage rate) of the indicator
- *1.1* is the factor necessary to raise the sample size by 10 per cent for non-response
- f is the shortened symbol for *deff* (design effect)
- *0.12r* is the margin of error to be tolerated at the 95 per cent level of confidence, defined as 12 per cent of r (relative sampling error of r)
- p is the proportion of the total population upon which the indicator, r, is based
- n_h is the average household size.

For the calculation, r (stunting prevalence) was assumed to be 0.25 (25 percent). The value of *deff* (design effect) was taken as 1.25 based on estimates from previous surveys, p (percentage of children aged 0-4 years in the total population) was taken as 9.74 percent, and n_h (average household size) was taken as 4.6 households.

The resulting number of households from this exercise was 2557 households which is the sample size needed in each area (urban/rural) – thus yielding about 5115 in total. Based on a number of considerations including the budget available and the time that would be needed per team to complete one cluster, the sample size was determined as 5200 households with cluster size equal to 13. Dividing the total number of households (5200) by the number of households per cluster (13), it was calculated that the selection of a total number of 400 clusters would be needed.

Approximately equal allocation of the total sample size to the eight regions (7 oblasts and city of Bishkek) was targeted. Therefore, 48 clusters were allocated to each region, with the additional 16 clusters allocated to the city of Osh, comprising 400 clusters in total. In each region, the clusters (primary sampling units) were distributed to urban and rural domains. The table below shows the allocation of clusters to the sampling domains.

Table SD.1: Allocation of Sample Clusters (Primary Sampling Units) to Sampling Domains

Region	Population (2005 Estimates)			Number of Clusters		
	Total	Urban	Rural	Urban	Rural	Total
Batken	413722	105167	308555	24	24	48
Jalalabad	947608	225361	722247	24	24	48
Issyk-Kul	426406	122175	304231	24	24	48
Naryn	265515	47375	218140	24	24	48
Osh	1283918	338755	945163	40	24	64
Talas	212098	35493	176605	24	24	48
Chui	752804	155473	597331	24	24	48
Bishkek c.	790731	790731	-	48	-	48
Total	5092802	1820530	3272272	232	168	400

Sampling Frame and Selection of Clusters

The 1999 Population Census frame was used for the selection of clusters. Census enumeration areas were defined as primary sampling units (PSUs), and were selected from each of the sampling domains by using systematic pps (probability proportional to size) sampling procedures, based on the estimated sizes of the enumeration areas from the 1999 Census. The first stage of sampling was thus completed by selecting the required number of enumeration areas from each of the 8 regions by urban and rural areas separately.

Listing Activities

Since the sample frame (the 1999 Census) was not up to date, household lists in all selected enumeration areas were updated prior to the selection of households. For this purpose, listing teams were formed, who visited each enumeration area, and listed the occupied households. Listing exercise had been conducted by implementing agency in August-September of 2005.

Selection of Households

Lists of households were prepared by the listing teams in the field for each enumeration area. The households were then sequentially numbered from 1 to n (the total number of households in each enumeration area) at the National Statistics Committee, where selection of 13 households in each enumeration area was carried out using systematic selection procedures.

Calculation of Sample Weights

The Kyrgyz 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:

$$W_h = 1 / f_h$$

The term f_h, the sampling fraction at the *h-th* stratum, is the product of probabilities of selection at every stage in each sampling domain:

$$f_h = P_{1h} * P_{2h} * P_{3h}$$

where P_{ih} is the probability of selection of the sampling unit in the *i-th* stage for the *h-th* sampling domain.

Since the estimated numbers of households per enumeration area prior to the first stage selection (selection of primary sampling units) and the updated number of households per enumeration area were different, individual sampling fractions for households in each enumeration area (cluster) were calculated. The sampling fractions for households in each enumeration area (cluster) therefore included the probability of selection of the enumeration area in that particular sampling domain and the probability of selection of a household in the sample enumeration area (cluster).

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 = Number of interviewed households / 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 Kyrgyz Multiple Indicator Cluster Survey are shown in Table HH.1 in this report.

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

RR = Completed women's (or under-5's) questionnaires / 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. A similar standardization procedure was followed in obtaining standardized weights for the women's and under-5's questionnaires. Adjusted (normalized) household weights normally varied between 0.037 and 4.167 with the exception of one very small PSU encountering only 15 households (out of which 13 have been selected).

Sample weights were appended to all data sets and analyses were performed by weighting each household, woman or under-5 with these sample weights.

APPENDIX B. LIST OF PERSONNEL INVOLVED IN THE SURVEY

MICS3 Field Staff

№	Naryn region		№	Issyk-kul region	
1	Usupov. T.S.	Coordinator	1	Saaliev S.K.	Coordinator
2	Aralbaeva. J	Supervisor	2	Mamadalieva B.	Supervisor
3	Jumakadirov. N..	Field editor	3	Kadirova A.	Field editor
4	Zarkunov A.	Field editor	4	Sidikbaeva A.	Field editor
5	Orozobaeva. G.	Field editor	5	Ismailova G.	Field editor
6	Nasirimbekova. G.	interviewer	6	Kaptagaeva M.	interviewer
7	Kojogeldieva. M.	interviewer	7	Mambetalieva G.	interviewer
8	Sharshenaliev. J.	interviewer	8	Bagreva A.	interviewer
9	Moldokabilova. N.	interviewer	9	Bekturganova U.	interviewer
10	Mambetalieva A.	interviewer	10	Bayaliva K.	interviewer
11	Bakasov. I.	interviewer	11	Irsaliev M.	interviewer
12	Karimshakova J.	interviewer	12	Kadirova F.	interviewer
13	Jumadilova Ch.	interviewer	13	Ezembaeva K.	interviewer
14	Jumaev. A	interviewer	14	Bakasheva T.	interviewer
№	**Bishkek**		**№**	**Talas region**	
1	Seitbekov S.S.	Coordinator	1	Satkanalieva S. J.	Coordinator
2	Sainidinova A.	Supervisor	2	Hitskova T.	Supervisor
3	Ridirmaeva J.	Field editor	3	Aitaliev S.	Field editor
4	Abdiraeva S.	Field editor	4	Jumaliev Ch.	Field editor
5	Ayupova P.	Field editor	5	Egorova A.	Field editor
6	Abdiraeva S.	interviewer	6	Eralieva S.	interviewer
7	Loshihina I.	interviewer	7	Sadimova K	interviewer
8	Mambetahunova Z.	interviewer	8	Kokoev Z.	interviewer
9	Tabaldieva A.	interviewer	9	Kim. T.	interviewer
10	Jumadekova N	interviewer	10	Bokoeva N.	interviewer
11	Koboeva .K.	interviewer	11	Abdibaev M.	interviewer
12	Kachkinbaeva A.	interviewer	12	Sayakbaev J.	interviewer
13	Temirova S.	interviewer	13	Kabilbekova L.	interviewer
14	Маатова Т.	interviewer	14	Kerimbaeva M.	interviewer
№	**Batken region**		**№**	**Jalalabd region**	
1	Ergeshov M.	Coordinator	1	Aitiev. I. M.	Coordinator
2	Baibubaeva B.	Supervisor	2	Kannazarova A.	Supervisor
3	Turakulov B.	Field editor	3	Uzakov B..	Field editor
4	Boronov A.	Field editor	4	Arakulova A.	Field editor
5	Abdisalamova S.	Field editor	5	Asanov A.	Field editor
6	Akmarov R.	interviewer	6	Turdumatov.A.	interviewer
7	Turakulov B.	interviewer	7	Arstanbekova G.	interviewer
8	Jankaraeva Ch.	interviewer	8	Turganbaeva G.	interviewer
9	Kochkorov D.	interviewer	9	Mamasaliev. K.	interviewer
10	Momutova Ch.	interviewer	10	Mendigulova B.	interviewer
11	Gaparova F.	interviewer	11	Ergeshova S.	interviewer
12	Kalbaeva B.	interviewer	12	Sarbalaeva Ch.	interviewer
13	Saitova Sh.	interviewer	13	Uraumova U.	interviewer
14	Rahmanjanova M.	interviewer	14	Jeenaliev B.	interviewer

№	Osh region		№	Chui region	
1	Amanova Sh. A.	Coordinator	1	Ishenov. J.I.	Coordinator
2	Demidenko L.	Supervisor	2	Usanova. L.	Supervisor
3	Denisenko V.	Field editor	3	Mishenko. L.	Field editor
4	Djaanbaeva. G.	Field editor	4	Shevchenko L.	Field editor
5	Karimova M.	Field editor	5	Saltanova T.	Field editor
6	Karaeva Z.	Field editor	6	Shestelyuk L.	interviewer
7	Ismailova S.	interviewer	7	Kirichenko S.	interviewer
8	Shakirova N	interviewer	8	Sherbinina O	interviewer
9	Momdekova B.	interviewer	9	Dusha L.	interviewer
10	Mamadinova Z.	interviewer	10	Arilbekova L.	interviewer
11	Zakirova K	interviewer	11	Ursalov I.	interviewer
12	Sartmamatova K.	interviewer	12	Kidiraliev A.	interviewer
13	Djumanova G.	interviewer	13	Penkina M.	interviewer
14	Kambarova G.	interviewer	14	Hvoina O.	interviewer
15	Artikova T	interviewer	15	Bakarova N.	interviewer
16	En'keeva A.	interviewer	16	Asharapova Z.	interviewer
17	Abdullaeva K.	interviewer	17	Botokanova G.	interviewer
18	Israilova N.	interviewer			
19	Bakieva G.	interviewer			
20	Mamarasulov M.	interviewer			

MICS3 Data Processing Personnel

Supervisor	A.Kolomeets	
Operators		
L.Selezneva	L.Sheviakova	V.Pershina
T.Kuznetsova	E.Piatkevich	A.Almazbekova
G.Beishekeeva	B.Samudinova	N.Karasheva
N.Lipatrova	S.Baltabaev	L.Samohvalova
N.Velikasova	S.Berjibaeva	N.Pechereeva
B.Mukeeva	T.Martyniuk	L.Obuhova

MICS3 Administration Staff

O. Abdykalykov	Chairman of the National Statistics Committee
D.Baijumanov	Deputy Chairman
G.Samohleb	Head of Dept., National Statistics Committee, MICS3 Focal Point
L. Praslova	National Statistics Committee, Data Entry and Data Analysis Focal Point
A. Kim	Head of Computing Center
A. Ryskulova	Accountant

APPENDIX C. ESTIMATES OF SAMPLING ERRORS

The sample of respondents selected in the Kyrgyz 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 (*deft*) is used to show the efficiency of the sample design. A *deft* value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a *deft* 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. Two of the selected indicators are based on households, 7 are based on household members, 12 are based on women, and 12 are based on children under 5. 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.12 show the calculated sampling errors.

MICS Indicator		Base Population
HOUSEHOLDS		
41	Iodized salt consumption	All households
74	Child discipline	Children aged 3-14 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
75	Prevalence of orphans	Children aged under 18
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
60	Adult literacy	Women aged 15-24 years
67	Marriage before age 18	Women aged 20-49 years
70	Polygyny	Women aged 15-49 years currently married or in union
82	Comprehensive knowledge about HIV prevention among young people	Women aged 15-24 years
83	Condom use with non-regular partners	Women aged 15-24 years that had a non-marital, non-cohabiting partner in the last 12 months
84	Age at first sex 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-5s		
6	Underweight prevalence	Children under age 5
25	Tuberculosis immunization coverage	Children aged 12-23 months
26	Polio immunization coverage	Children aged 12-23 months
27	Immunization coverage for DPT	Children aged 12-23 months
28	Measles immunization coverage	Children aged 12-23 months
31	Fully immunized children	Children aged 12-23 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
62	Birth registration	Children under age 5

Table SE.2: Sampling errors: Total sample

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,761	0,016	0,021	7,059	2,657	5160	5147	0,730	0,793
Child discipline	CP.4	0,514	0,017	0,033	4,013	2,003	3312	3393	0,480	0,548
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,882	0,017	0,020	15,032	3,877	25040	5179	0,847	0,917
Use of improved sanitation facilities	EN.5	0,963	0,010	0,011	15,130	3,890	25040	5179	0,943	0,983
Net primary school attendance rate	ED.3	0,921	0,010	0,011	2,883	1,698	2041	2013	0,900	0,941
Net secondary school attendance rate	ED.4	0,892	0,011	0,013	5,463	2,337	3936	4021	0,869	0,915
Primary completion rate	ED.6	0,792	0,024	0,031	1,928	1,389	544	544	0,744	0,840
Child labour	CP.2	0,036	0,008	0,207	8,467	2,910	5187	5229	0,021	0,052
Prevalence of orphans	HA.10	0,055	0,005	0,097	5,499	2,345	9923	10015	0,044	0,066
WOMEN										
Skilled attendant at delivery	RH.5	0,976	0,011	0,012	6,418	2,533	1209	1152	0,953	0,999
Antenatal care	RH.3	0,969	0,012	0,012	5,510	2,347	1209	1152	0,944	0,993
Contraceptive prevalence	RH.1	0,478	0,013	0,027	2,812	1,677	4195	4156	0,452	0,504
Adult literacy	ED.8	0,999	0,000	0,000	0,500	0,707	2819	2772	0,998	1,000
Marriage before age 18	CP.5	0,122	0,006	0,051	1,969	1,403	5501	5419	0,110	0,135
Polygyny	CP.5	0,017	0,003	0,170	2,103	1,450	4195	4156	0,011	0,023
Comprehensive knowledge about HIV prevention among young people	HA.3	0,204	0,013	0,063	7,044	2,654	7043	6973	0,178	0,230
Condom use with non-regular partners	HA.9	0,560	0,057	0,102	0,739	0,859	62	57	0,446	0,674
Age at first sex among young people	HA.8	0,002	0,001	0,528	0,743	0,862	1542	1554	0,000	0,004
Attitude towards people with HIV/AIDS	HA.5	0,052	0,006	0,117	4,839	2,200	6492	6493	0,040	0,064
Women who have been tested for HIV	HA.6	0,370	0,019	0,053	11,288	3,360	7043	6973	0,331	0,409
Knowledge of mother- to-child transmission of HIV	HA.4	0,580	0,017	0,029	7,958	2,821	7043	6973	0,546	0,613
UNDER-5s										
Underweight prevalence	NU.1	0,034	0,005	0,150	2,265	1,505	2883	2862	0,024	0,044
Acute respiratory infection in last two weeks	CH.6	0,056	0,008	0,145	3,577	1,891	2883	2862	0,040	0,073
Antibiotic treatment of suspected pneumonia	CH.7	0,445	0,046	0,104	1,428	1,195	163	165	0,352	0,537
Diarrhoea in last two weeks	CH.4	0,036	0,005	0,129	1,767	1,329	2883	2862	0,027	0,045
Received ORT or increased fluids and continued feeding	CH.5	0,223	0,065	0,289	2,545	1,595	103	107	0,094	0,352
Support for learning	CD.1	0,710	0,023	0,032	7,138	2,672	2883	2862	0,664	0,755
Birth registration	CP.1	0,942	0,012	0,013	7,817	2,796	2883	2862	0,918	0,967

Table SE.3: Sampling errors: Urban areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,845	0,008	0,009	1,429	1,195	2216	2961	0,829	0,861
Child discipline	CP.4	0,509	0,021	0,041	3,141	1,772	1262	1790	0,467	0,551
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,987	0,003	0,003	2,201	1,484	9469	2985	0,980	0,993
Use of improved sanitation facilities	EN.5	0,991	0,002	0,002	0,820	0,905	9469	2985	0,988	0,994
Net primary school attendance rate	ED.3	0,929	0,013	0,014	2,275	1,508	661	957	0,904	0,954
Net secondary school attendance rate	ED.4	0,909	0,009	0,009	1,749	1,323	1254	1975	0,892	0,926
Primary completion rate	ED.6	0,809	0,027	0,034	1,276	1,130	176	267	0,755	0,864
Child labour	CP.2	0,019	0,004	0,214	2,190	1,480	1648	2478	0,011	0,027
Prevalence of orphans	HA.10	0,072	0,007	0,099	3,781	1,944	3429	4935	0,058	0,087
WOMEN										
Skilled attendant at delivery	RH.5	0,999	0,001	0,001	0,376	0,613	490	621	0,998	1,001
Antenatal care	RH.3	0,990	0,005	0,005	1,272	1,128	490	621	0,980	0,999
Contraceptive prevalence	RH.1	0,492	0,014	0,029	1,867	1,366	1666	2291	0,464	0,521
Adult literacy	ED.8	0,999	0,001	0,001	0,745	0,863	1231	1598	0,997	1,000
Marriage before age 18	CP.5	0,097	0,007	0,069	1,633	1,278	2423	3179	0,084	0,111
Polygyny	CP.5	0,019	0,003	0,178	1,433	1,197	1666	2291	0,012	0,026
Comprehensive knowledge about HIV prevention among young people	HA.3	0,234	0,019	0,080	7,902	2,811	3055	4040	0,196	0,271
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	39	44	(*)	(*)
Age at first sex among young people	HA.8	0,002	0,002	0,710	0,922	0,960	633	861	-0,001	0,005
Attitude towards people with HIV/AIDS	HA.5	0,029	0,004	0,141	2,291	1,514	2954	3825	0,021	0,037
Women who have been tested for HIV	HA.6	0,476	0,016	0,034	4,213	2,052	3055	4040	0,444	0,508
Knowledge of mother- to-child transmission of HIV	HA.4	0,574	0,016	0,028	4,271	2,067	3055	4040	0,542	0,606
UNDER-5s										
Underweight prevalence	NU.1	0,034	0,006	0,160	1,372	1,171	1172	1495	0,023	0,045
Acute respiratory infection in last two weeks	CH.6	0,057	0,008	0,141	1,811	1,346	1172	1495	0,041	0,073
Antibiotic treatment of suspected pneumonia	CH.7	0,698	0,009	0,013	0,035	0,186	67	95	0,680	0,716
Diarrhoea in last two weeks	CH.4	0,028	0,005	0,179	1,358	1,165	1172	1495	0,018	0,037
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	32	41	(*)	(*)
Support for learning	CD.1	0,797	0,017	0,021	2,589	1,609	1172	1495	0,763	0,830
Birth registration	CP.1	0,959	0,007	0,008	2,079	1,442	1172	1495	0,944	0,974

Table SE.4: Sampling errors: Rural areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,698	0,026	0,038	7,173	2,678	2944	2186	0,646	0,751
Child discipline	CP.4	0,517	0,025	0,048	3,871	1,968	2049	1603	0,468	0,566
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,818	0,028	0,034	11,672	3,416	15571	2194	0,762	0,875
Use of improved sanitation facilities	EN.5	0,946	0,017	0,017	11,747	3,427	15571	2194	0,913	0,979
Net primary school attendance rate	ED.3	0,917	0,014	0,015	2,681	1,637	1381	1056	0,889	0,945
Net secondary school attendance rate	ED.4	0,884	0,016	0,018	5,090	2,256	2682	2046	0,852	0,916
Primary completion rate	ED.6	0,784	0,033	0,042	1,790	1,338	368	277	0,717	0,850
Child labour	CP.2	0,045	0,011	0,239	7,337	2,709	3540	2751	0,023	0,066
Prevalence of orphans	HA.10	0,046	0,007	0,154	5,800	2,408	6493	5080	0,032	0,060
WOMEN										
Skilled attendant at delivery	RH.5	0,960	0,019	0,020	5,081	2,254	719	531	0,922	0,999
Antenatal care	RH.3	0,954	0,020	0,021	4,871	2,207	719	531	0,914	0,994
Contraceptive prevalence	RH.1	0,468	0,019	0,041	2,772	1,665	2529	1865	0,429	0,506
Adult literacy	ED.8	0,999	0,000	0,000	0,281	0,530	1588	1174	0,999	1,000
Marriage before age 18	CP.5	0,142	0,010	0,070	1,822	1,350	3078	2240	0,122	0,162
Polygyny	CP.5	0,016	0,004	0,271	2,189	1,479	2529	1865	0,007	0,024
Comprehensive knowledge about HIV prevention among young people	HA.3	0,181	0,017	0,094	5,788	2,406	3988	2933	0,147	0,216
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	23	13	(*)	(*)
Age at first sex among young people	HA.8	0,001	0,001	0,784	0,608	0,780	909	693	-0,001	0,004
Attitude towards people with HIV/AIDS	HA.5	0,070	0,011	0,150	4,556	2,134	3538	2668	0,049	0,092
Women who have been tested for HIV	HA.6	0,288	0,031	0,108	13,956	3,736	3988	2933	0,226	0,351
Knowledge of mother- to-child transmission of HIV	HA.4	0,584	0,027	0,046	8,596	2,932	3988	2933	0,530	0,637
UNDER-5s										
Underweight prevalence	NU.1	0,034	0,008	0,227	2,479	1,574	1711	1367	0,018	0,049
Acute respiratory infection in last two weeks	CH.6	0,056	0,013	0,225	4,096	2,024	1711	1367	0,031	0,081
Antibiotic treatment of suspected pneumonia	CH.7	0,268	0,082	0,307	2,373	1,540	96	70	0,103	0,432
Diarrhoea in last two weeks	CH.4	0,042	0,007	0,170	1,711	1,308	1711	1367	0,027	0,056
Received ORT or increased fluids and continued feeding	CH.5	0,205	0,090	0,440	3,245	1,801	71	66	0,024	0,385
Support for learning	CD.1	0,650	0,034	0,052	6,968	2,640	1711	1367	0,582	0,718
Birth registration	CP.1	0,931	0,020	0,021	8,150	2,855	1711	1367	0,892	0,970

Table SE.5: Sampling errors: Batken

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,960	0,015	0,016	3,828	1,957	387	620	0,929	0,991
Child discipline	CP.4	0,669	0,050	0,075	4,624	2,150	266	412	0,570	0,769
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,683	0,085	0,125	20,985	4,581	2021	624	0,512	0,854
Use of improved sanitation facilities	EN.5	0,733	0,085	0,116	22,911	4,787	2021	624	0,563	0,903
Net primary school attendance rate	ED.3	0,895	0,017	0,019	0,877	0,936	175	275	0,860	0,930
Net secondary school attendance rate	ED.4	0,937	0,013	0,014	1,489	1,220	365	546	0,911	0,962
Primary completion rate	ED.6	0,906	0,042	0,047	1,667	1,291	51	80	0,821	0,991
Child labour	CP.2	0,051	0,015	0,299	3,435	1,853	451	712	0,021	0,082
Prevalence of orphans	HA.10	0,048	0,012	0,256	4,346	2,085	867	1318	0,023	0,072
WOMEN										
Skilled attendant at delivery	RH.5	0,964	0,019	0,020	1,463	1,210	91	135	0,925	1,003
Antenatal care	RH.3	0,974	0,017	0,017	1,513	1,230	91	135	0,940	1,008
Contraceptive prevalence	RH.1	0,453	0,044	0,098	4,006	2,002	314	508	0,364	0,541
Adult literacy	ED.8	0,998	0,002	0,002	0,826	0,909	205	332	0,993	1,002
Marriage before age 18	CP.5	0,115	0,017	0,149	1,726	1,314	367	604	0,080	0,149
Polygyny	CP.5	0,036	0,011	0,293	1,637	1,279	314	508	0,015	0,058
Comprehensive knowledge about HIV prevention among young people	HA.3	0,057	0,020	0,354	6,066	2,463	489	797	0,017	0,098
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	1	2	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	123	193	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,078	0,039	0,501	14,739	3,839	400	694	0,000	0,156
Women who have been tested for HIV	HA.6	0,246	0,029	0,119	3,689	1,921	489	797	0,187	0,305
Knowledge of mother- to-child transmission of HIV	HA.4	0,314	0,058	0,184	12,304	3,508	489	797	0,199	0,430
UNDER-5s										
Underweight prevalence	NU.1	0,055	0,014	0,251	1,212	1,101	233	330	0,028	0,083
Acute respiratory infection in last two weeks	CH.6	0,066	0,024	0,361	3,035	1,742	233	330	0,018	0,114
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	15	21	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,042	0,013	0,305	1,350	1,162	233	330	0,017	0,068
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	10	10	(*)	(*)
Support for learning	CD.1	0,736	0,036	0,049	2,205	1,485	233	330	0,664	0,808
Birth registration	CP.1	0,979	0,009	0,009	1,271	1,127	233	330	0,961	0,997

na – Not applicable

Table SE.6: Sampling errors: Jalalabad

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,720	0,044	0,062	6,049	2,459	827	620	0,631	0,808
Child discipline	CP.4	0,464	0,022	0,048	0,913	0,955	601	450	0,419	0,509
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,842	0,051	0,061	12,339	3,513	4649	624	0,739	0,944
Use of improved sanitation facilities	EN.5	0,994	0,006	0,006	3,937	1,984	4649	624	0,982	1,006
Net primary school attendance rate	ED.3	0,917	0,021	0,023	1,821	1,350	427	308	0,875	0,960
Net secondary school attendance rate	ED.4	0,836	0,027	0,032	3,028	1,740	789	576	0,782	0,890
Primary completion rate	ED.6	0,706	0,049	0,069	0,873	0,934	125	77	0,609	0,804
Child labour	CP.2	0,038	0,015	0,384	4,467	2,114	1051	767	0,009	0,067
Prevalence of orphans	HA.10	0,062	0,017	0,270	6,494	2,548	1856	1348	0,029	0,096
WOMEN										
Skilled attendant at delivery	RH.5	0,927	0,064	0,070	7,914	2,813	189	130	0,798	1,056
Antenatal care	RH.3	0,927	0,064	0,070	7,914	2,813	189	130	0,798	1,056
Contraceptive prevalence	RH.1	0,362	0,031	0,086	2,201	1,483	739	524	0,300	0,425
Adult literacy	ED.8	0,999	0,001	0,001	0,507	0,712	551	397	0,996	1,001
Marriage before age 18	CP.5	0,095	0,011	0,115	0,946	0,973	942	684	0,073	0,117
Polygyny	CP.5	0,013	0,005	0,389	1,048	1,024	739	524	0,003	0,023
Comprehensive knowledge about HIV prevention among young people	HA.3	0,235	0,03057795	0,1302585	4,72082201	2,17274527	1245	908	0,174	0,296
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	1	1	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	304	224	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,146	0,034	0,233	7,470	2,733	1102	809	0,078	0,214
Women who have been tested for HIV	HA.6	0,137	0,025	0,180	4,662	2,159	1245	908	0,088	0,187
Knowledge of mother- to-child transmission of HIV	HA.4	0,747	0,036	0,048	6,122	2,474	1245	908	0,676	0,819
UNDER-5s										
Underweight prevalence	NU.1	0,025	0,018	0,721	4,138	2,034	422	309	-0,011	0,062
Acute respiratory infection in last two weeks	CH.6	0,013	0,006	0,454	0,842	0,918	422	309	0,001	0,025
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	6	6	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,023	0,010	0,433	1,341	1,158	422	309	0,003	0,042
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	10	9	(*)	(*)
Support for learning	CD.1	0,508	0,083	0,163	8,468	2,910	422	309	0,342	0,674
Birth registration	CP.1	0,886	0,062	0,070	11,778	3,432	422	309	0,762	1,010

na – Not applicable

Table SE.7: Sampling errors: Issykkul

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,698	0,020	0,028	1,151	1,073	446	623	0,659	0,738
Child discipline	CP.4	0,616	0,036	0,059	2,197	1,482	278	395	0,544	0,689
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,907	0,035	0,039	9,329	3,054	1954	624	0,836	0,978
Use of improved sanitation facilities	EN.5	0,985	0,007	0,007	2,308	1,519	1954	624	0,971	1,000
Net primary school attendance rate	ED.3	0,908	0,020	0,022	1,022	1,011	173	224	0,869	0,947
Net secondary school attendance rate	ED.4	0,934	0,020	0,022	2,909	1,705	323	437	0,893	0,974
Primary completion rate	ED.6	0,803	0,105	0,130	3,812	1,952	51	56	0,593	1,012
Child labour	CP.2	0,033	0,015	0,466	4,300	2,074	434	588	0,002	0,063
Prevalence of orphans	HA.10	0,059	0,012	0,200	2,786	1,669	800	1110	0,035	0,082
WOMEN										
Skilled attendant at delivery	RH.5	1,000	0,000	0,000	na	na	81	126	1,000	1,000
Antenatal care	RH.3	0,994	0,006	0,006	0,773	0,879	81	126	0,982	1,006
Contraceptive prevalence	RH.1	0,526	0,028	0,054	1,545	1,243	325	476	0,469	0,583
Adult literacy	ED.8	0,997	0,003	0,003	0,718	0,847	177	270	0,992	1,003
Marriage before age 18	CP.5	0,147	0,027	0,181	3,506	1,872	422	623	0,093	0,200
Polygyny	CP.5	0,026	0,009	0,370	1,699	1,303	325	476	0,007	0,044
Comprehensive knowledge about HIV prevention among young people	HA.3	0,128	0,015	0,118	1,563	1,250	523	769	0,098	0,158
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	3	3	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	102	146	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,009	0,004	0,422	1,155	1,075	506	744	0,001	0,016
Women who have been tested for HIV	HA.6	0,391	0,051	0,130	8,276	2,877	523	769	0,290	0,493
Knowledge of mother- to-child transmission of HIV	HA.4	0,719	0,030	0,042	3,438	1,854	523	769	0,658	0,779
UNDER-5s										
Underweight prevalence	NU.1	0,069	0,016	0,230	1,308	1,144	229	333	0,038	0,101
Acute respiratory infection in last two weeks	CH.6	0,022	0,007	0,300	0,675	0,822	229	333	0,009	0,035
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	5	10	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,035	0,013	0,374	1,667	1,291	229	333	0,009	0,061
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	8	13	(*)	(*)
Support for learning	CD.1	0,783	0,035	0,044	2,335	1,528	229	333	0,714	0,852
Birth registration	CP.1	0,952	0,019	0,020	2,493	1,579	229	333	0,914	0,989

na – Not applicable

Table SE.8: Sampling errors: Naryn

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,724	0,066	0,092	13,262	3,642	251	600	0,592	0,857
Child discipline	CP.4	0,625	0,060	0,095	6,104	2,471	172	405	0,506	0,744
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,860	0,028	0,033	3,960	1,990	1170	603	0,803	0,916
Use of improved sanitation facilities	EN.5	0,988	0,006	0,006	1,942	1,393	1170	603	0,976	1,001
Net primary school attendance rate	ED.3	0,874	0,042	0,048	4,120	2,030	122	262	0,790	0,957
Net secondary school attendance rate	ED.4	0,950	0,021	0,022	4,818	2,195	213	500	0,907	0,993
Primary completion rate	ED.6	0,800	0,040	0,050	0,730	0,854	41	75	0,720	0,879
Child labour	CP.2	0,031	0,005	0,168	0,595	0,771	278	655	0,021	0,042
Prevalence of orphans	HA.10	0,070	0,015	0,215	4,127	2,032	503	1193	0,040	0,100
WOMEN										
Skilled attendant at delivery	RH.5	0,983	0,013	0,013	1,171	1,082	51	120	0,957	1,009
Antenatal care	RH.3	0,964	0,016	0,017	0,872	0,934	51	120	0,932	0,996
Contraceptive prevalence	RH.1	0,534	0,030	0,055	1,406	1,186	169	400	0,475	0,594
Adult literacy	ED.8	0,996	0,004	0,004	1,079	1,039	101	249	0,987	1,004
Marriage before age 18	CP.5	0,097	0,016	0,170	1,623	1,274	217	524	0,064	0,130
Polygyny	CP.5	0,000	0,000	0,000	na	na	169	400	0,000	0,000
Comprehensive knowledge about HIV prevention among young people	HA.3	0,138	0,031	0,224	5,422	2,328	281	671	0,076	0,200
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	0	0	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	64	147	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,012	0,007	0,570	2,499	1,581	263	624	-0,002	0,026
Women who have been tested for HIV	HA.6	0,322	0,045	0,141	6,347	2,519	281	671	0,231	0,413
Knowledge of mother- to-child transmission of HIV	HA.4	0,508	0,043	0,084	4,913	2,216	281	671	0,423	0,594
UNDER-5s										
Underweight prevalence	NU.1	0,090	0,027	0,302	2,738	1,655	110	304	0,036	0,145
Acute respiratory infection in last two weeks	CH.6	0,027	0,008	0,292	0,721	0,849	110	304	0,011	0,043
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	3	19	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,017	0,006	0,342	0,622	0,788	110	304	0,005	0,029
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	2	9	(*)	(*)
Support for learning	CD.1	0,519	0,091	0,176	10,150	3,186	110	304	0,336	0,701
Birth registration	CP.1	0,901	0,040	0,045	5,557	2,357	110	304	0,821	0,982

na – Not applicable

Table SE.9: Sampling errors: Osh

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,568	0,044	0,077	6,418	2,533	1130	830	0,481	0,655
Child discipline	CP.4	0,325	0,033	0,101	2,785	1,669	778	572	0,260	0,390
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,824	0,049	0,060	13,840	3,720	6095	832	0,726	0,922
Use of improved sanitation facilities	EN.5	0,964	0,022	0,023	11,580	3,403	6095	832	0,920	1,008
Net primary school attendance rate	ED.3	0,982	0,009	0,009	1,647	1,283	527	373	0,964	1,000
Net secondary school attendance rate	ED.4	0,852	0,027	0,032	4,357	2,087	1049	735	0,798	0,907
Primary completion rate	ED.6	0,907	0,040	0,044	1,748	1,322	112	94	0,828	0,987
Child labour	CP.2	0,004	0,002	0,405	0,653	0,808	1362	970	0,001	0,007
Prevalence of orphans	HA.10	0,034	0,008	0,240	3,749	1,936	2563	1837	0,018	0,051
WOMEN										
Skilled attendant at delivery	RH.5	0,966	0,020	0,020	2,570	1,603	298	215	0,927	1,006
Antenatal care	RH.3	0,968	0,019	0,020	2,588	1,609	298	215	0,929	1,007
Contraceptive prevalence	RH.1	0,457	0,029	0,063	2,409	1,552	995	727	0,400	0,515
Adult literacy	ED.8	1,000	0,000	0,000	.	.	636	472	1,000	1,000
Marriage before age 18	CP.5	0,134	0,016	0,117	1,878	1,370	1191	882	0,103	0,166
Polygyny	CP.5	0,015	0,004	0,261	0,733	0,856	995	727	0,007	0,022
Comprehensive knowledge about HIV prevention among young people	HA.3	0,051	0,012	0,243	3,565	1,888	1536	1139	0,026	0,075
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	1	1	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	346	257	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,056	0,012	0,210	2,631	1,622	1328	1000	0,033	0,080
Women who have been tested for HIV	HA.6	0,282	0,036	0,126	7,130	2,670	1536	1139	0,211	0,353
Knowledge of mother- to-child transmission of HIV	HA.4	0,659	0,034	0,052	6,008	2,451	1536	1139	0,590	0,728
UNDER-5s										
Underweight prevalence	NU.1	0,027	0,012	0,438	2,741	1,656	699	513	0,003	0,051
Acute respiratory infection in last two weeks	CH.6	0,094	0,025	0,267	3,802	1,950	699	513	0,044	0,145
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	66	44	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,021	0,005	0,233	0,588	0,767	699	513	0,011	0,030
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	(*)	16	(*)	(*)
Support for learning	CD.1	0,696	0,041	0,059	4,133	2,033	699	513	0,613	0,779
Birth registration	CP.1	0,964	0,014	0,015	2,910	1,706	699	513	0,936	0,992

na – Not applicable

Table SE.10: Sampling errors: Talas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,803	0,027	0,034	2,939	1,714	190	623	0,748	0,858
Child discipline	CP.4	0,474	0,045	0,096	3,790	1,947	144	459	0,383	0,565
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,876	0,039	0,045	8,772	2,962	1018	624	0,798	0,954
Use of improved sanitation facilities	EN.5	0,999	0,001	0,001	0,467	0,684	1018	624	0,998	1,001
Net primary school attendance rate	ED.3	0,922	0,017	0,018	0,878	0,937	76	229	0,888	0,955
Net secondary school attendance rate	ED.4	0,929	0,012	0,013	1,118	1,057	156	509	0,905	0,953
Primary completion rate	ED.6	0,763	0,042	0,055	0,625	0,790	18	64	0,678	0,848
Child labour	CP.2	0,016	0,007	0,419	1,851	1,361	199	637	0,003	0,030
Prevalence of orphans	HA.10	0,054	0,015	0,271	5,591	2,365	425	1326	0,025	0,084
WOMEN										
Skilled attendant at delivery	RH.5	0,979	0,013	0,013	1,149	1,072	45	145	0,954	1,005
Antenatal care	RH.3	0,979	0,013	0,013	1,149	1,072	45	145	0,954	1,005
Contraceptive prevalence	RH.1	0,556	0,032	0,057	2,206	1,485	167	539	0,492	0,620
Adult literacy	ED.8	0,999	0,001	0,001	0,334	0,578	112	349	0,997	1,001
Marriage before age 18	CP.5	0,177	0,023	0,132	2,545	1,595	213	681	0,130	0,223
Polygyny	CP.5	0,019	0,008	0,440	1,971	1,404	167	539	0,002	0,035
Comprehensive knowledge about HIV prevention among young people	HA.3	0,398	0,042	0,105	6,515	2,552	282	893	0,314	0,481
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	5	10	(*)	(*)
Age at first sex among young people	HA.8	0,019	0,015	0,804	2,626	1,621	69	212	-0,011	0,049
Attitude towards people with HIV/AIDS	HA.5	0,005	0,003	0,640	1,701	1,304	275	875	-0,001	0,011
Women who have been tested for HIV	HA.6	0,327	0,026	0,078	2,654	1,629	282	893	0,276	0,378
Knowledge of mother- to-child transmission of HIV	HA.4	0,441	0,041	0,093	6,129	2,476	282	893	0,359	0,523
UNDER-5s										
Underweight prevalence	NU.1	0,048	0,010	0,220	1,040	1,020	144	430	0,027	0,069
Acute respiratory infection in last two weeks	CH.6	0,080	0,023	0,291	3,128	1,769	144	430	0,033	0,126
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	11	31	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,067	0,013	0,190	1,114	1,055	144	430	0,042	0,093
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	10	23	(*)	(*)
Support for learning	CD.1	0,758	0,031	0,041	2,283	1,511	144	430	0,696	0,821
Birth registration	CP.1	0,972	0,018	0,018	5,108	2,260	144	430	0,937	1,008

Table SE.11: Sampling errors: Chui

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,853	0,043	0,050	9,174	3,029	902	624	0,767	0,939
Child discipline	CP.4	0,672	0,051	0,075	4,348	2,085	520	373	0,571	0,774
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0,990	0,006	0,006	2,681	1,637	3840	624	0,978	1,003
Use of improved sanitation facilities	EN.5	0,976	0,011	0,011	3,096	1,759	3840	624	0,955	0,998
Net primary school attendance rate	ED.3	0,858	0,048	0,056	3,461	1,860	276	185	0,762	0,953
Net secondary school attendance rate	ED.4	0,904	0,026	0,029	3,408	1,846	573	441	0,852	0,956
Primary completion rate	ED.6	0,657	0,068	0,103	1,096	1,047	73	55	0,522	0,793
Child labour	CP.2	0,101	0,035	0,351	7,421	2,724	801	538	0,030	0,172
Prevalence of orphans	HA.10	0,073	0,019	0,259	5,388	2,321	1437	1012	0,035	0,111
WOMEN										
Skilled attendant at delivery	RH.5	1,000	0,000	0,000	na	na	182	113	1,000	1,000
Antenatal care	RH.3	0,960	0,026	0,027	1,964	1,401	182	113	0,908	1,012
Contraceptive prevalence	RH.1	0,522	0,019	0,037	0,745	0,863	706	502	0,483	0,560
Adult literacy	ED.8	0,999	0,001	0,001	0,288	0,537	384	301	0,997	1,001
Marriage before age 18	CP.5	0,182	0,019	0,104	1,594	1,263	924	666	0,144	0,219
Polygyny	CP.5	0,031	0,013	0,423	2,836	1,684	706	502	0,005	0,057
Comprehensive knowledge about HIV prevention among young people	HA.3	0,287	0,032	0,113	4,290	2,071	1130	838	0,222	0,352
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	31	28	(*)	(*)
Age at first sex among young people	HA.8	0,007	0,005	0,715	0,574	0,757	206	172	-0,003	0,016
Attitude towards people with HIV/AIDS	HA.5	0,028	0,007	0,253	1,477	1,215	1078	799	0,014	0,042
Women who have been tested for HIV	HA.6	0,539	0,065	0,120	14,019	3,744	1130	838	0,410	0,668
Knowledge of mother- to-child transmission of HIV	HA.4	0,489	0,036	0,073	4,278	2,068	1130	838	0,417	0,560
UNDER-5s										
Underweight prevalence	NU.1	0,023	0,012	0,494	1,566	1,252	415	268	0,000	0,047
Acute respiratory infection in last two weeks	CH.6	0,059	0,015	0,257	1,104	1,051	415	268	0,029	0,089
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	24	15	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,068	0,022	0,333	2,142	1,464	415	268	0,023	0,112
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	28	14	(*)	(*)
Support for learning	CD.1	0,681	0,051	0,075	3,196	1,788	415	268	0,579	0,783
Birth registration	CP.1	0,936	0,021	0,023	2,055	1,434	415	268	0,894	0,979

Table SE.12: Sampling errors: Bishkek t.

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft) and confidence intervals for selected indicators, Kyrgyz Republic, 2006

	Table	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
									r – 2se	r + 2se
HOUSEHOLDS										
Iodized salt consumption	NU.5	0,880	0,012	0,014	0,838	0,915	1026	607	0,856	0,904
Child discipline	CP.4	0,535	0,040	0,075	2,087	1,445	553	327	0,455	0,615
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	1,000	0,000	0,000	na	na	4295	2541	1,000	1,000
Use of improved sanitation facilities	EN.5	1,000	0,000	0,000	na	na	4295	2541	1,000	1,000
Net primary school attendance rate	ED.3	0,917	0,027	0,029	1,494	1,222	265	157	0,863	0,971
Net secondary school attendance rate	ED.4	0,960	0,010	0,011	0,781	0,884	468	277	0,940	0,981
Primary completion rate	ED.6	(*)	(*)	(*)	(*)	(*)	73	43	(*)	(*)
Child labour	CP.2	0,022	0,009	0,418	1,422	1,193	612	362	0,004	0,041
Prevalence of orphans	HA.10	0,062	0,013	0,203	2,368	1,539	1472	871	0,037	0,087
WOMEN										
Skilled attendant at delivery	RH.5	1,000	0,000	0,000	na	na	273	168	1,000	1,000
Antenatal care	RH.3	0,994	0,006	0,006	1,038	1,019	273	168	0,982	1,006
Contraceptive prevalence	RH.1	0,533	0,024	0,045	1,130	1,063	780	480	0,485	0,582
Adult literacy	ED.8	1,000	0,000	0,000	na	na	653	402	1,000	1,000
Marriage before age 18	CP.5	0,077	0,011	0,140	1,236	1,112	1226	755	0,055	0,098
Polygyny	CP.5	0,004	0,003	0,705	0,995	0,998	780	480	-0,002	0,010
Comprehensive knowledge about HIV prevention among young people	HA.3	0,319	0,030	0,095	4,056	2,014	1556	958	0,258	0,380
Condom use with non-regular partners	HA.9	(*)	(*)	(*)	(*)	(*)	19	12	(*)	(*)
Age at first sex among young people	HA.8	0,000	0,000	0,000	na	na	330	203	0,000	0,000
Attitude towards people with HIV/AIDS	HA.5	0,019	0,004	0,211	0,816	0,903	1540	948	0,011	0,027
Women who have been tested for HIV	HA.6	0,568	0,031	0,054	3,712	1,927	1556	958	0,506	0,629
Knowledge of mother- to-child transmission of HIV	HA.4	0,508	0,027	0,052	2,715	1,648	1556	958	0,454	0,561
UNDER-5s										
Underweight prevalence	NU.1	0,021	0,008	0,361	1,062	1,031	632	375	0,006	0,037
Acute respiratory infection in last two weeks	CH.6	0,051	0,011	0,216	0,930	0,964	632	375	0,029	0,073
Antibiotic treatment of suspected pneumonia	CH.7	(*)	(*)	(*)	(*)	(*)	32	19	(*)	(*)
Diarrhoea in last two weeks	CH.4	0,035	0,008	0,225	0,683	0,826	632	375	0,019	0,050
Received ORT or increased fluids and continued feeding	CH.5	(*)	(*)	(*)	(*)	(*)	22	13	(*)	(*)
Support for learning	CD.1	0,864	0,025	0,029	1,971	1,404	632	375	0,814	0,914
Birth registration	CP.1	0,944	0,013	0,014	1,220	1,104	632	375	0,918	0,970

na – Not applicable

APPENDIX D. DATA QUALITY TABLES

Table DQ.1: Age distribution of household population

Single-year age distribution of household population by sex (weighted), Kyrgyzstan, 2006

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
0	309	2.6	337	2.5	41	123	1.0	154	1.2
1	298	2.5	327	2.5	42	151	1.3	182	1.4
2	318	2.7	235	1.8	43	143	1.2	163	1.2
3	262	2.2	306	2.3	44	130	1.1	143	1.1
4	323	2.7	289	2.2	45	139	1.2	144	1.1
5	200	1.7	240	1.8	46	143	1.2	127	1.0
6	249	2.1	252	1.9	47	128	1.1	160	1.2
7	260	2.2	203	1.5	48	154	1.3	147	1.1
8	240	2.0	268	2.0	49	76	0.6	110	0.8
9	279	2.4	247	1.9	50	110	0.9	164	1.2
10	276	2.3	269	2.0	51	103	0.9	127	1.0
11	264	2.2	241	1.8	52	122	1.0	135	1.0
12	292	2.5	290	2.2	53	105	0.9	108	0.8
13	320	2.7	288	2.2	54	75	0.6	81	0.6
14	239	2.0	272	2.1	55	88	0.7	82	0.6
15	317	2.7	324	2.4	56	71	0.6	76	0.6
16	260	2.2	278	2.1	57	65	0.6	82	0.6
17	257	2.2	294	2.2	58	63	0.5	66	0.5
18	212	1.8	366	2.8	59	34	0.3	49	0.4
19	210	1.8	330	2.5	60	46	0.4	31	0.2
20	207	1.8	281	2.1	61	24	0.2	29	0.2
21	154	1.3	311	2.3	62	23	0.2	37	0.3
22	208	1.8	232	1.7	63	45	0.4	62	0.5
23	223	1.9	264	2.0	64	26	0.2	52	0.4
24	199	1.7	234	1.8	65	67	0.6	67	0.5
25	188	1.6	247	1.9	66	31	0.3	44	0.3
26	204	1.7	226	1.7	67	43	0.4	54	0.4
27	183	1.5	220	1.7	68	46	0.4	48	0.4
28	161	1.4	198	1.5	69	53	0.5	50	0.4
29	204	1.7	214	1.6	70	27	0.2	52	0.4
30	192	1.6	201	1.5	71	19	0.2	28	0.2
31	164	1.4	193	1.5	72	27	0.2	36	0.3
32	207	1.8	178	1.3	73	26	0.2	52	0.4
33	170	1.4	198	1.5	74	17	0.1	26	0.2
34	123	1.0	155	1.2	75	33	0.3	38	0.3
35	162	1.4	184	1.4	76	22	0.2	35	0.3
36	194	1.6	127	1.0	77	17	0.1	29	0.2
37	151	1.3	178	1.3	78	20	0.2	23	0.2
38	140	1.2	160	1.2	79	6	0.0	27	0.2
39	131	1.1	164	1.2	80+	57	0.5	135	1.0
40	145	1.2	169	1.3	DK/Missing	1	0.0	1	0.0
					Total	11 794	100.0	13 246	100.0

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, Kyrgyzstan, 2006

	Household population of women age 10-54	Interviewed women age 15-49		Percentage of eligible women interviewed
	Number	Number	Percent	
Age				
10-14	1 359	na	na	na
15-19	1 593	1 575	21.9	98.9
20-24	1 322	1 303	18.1	98.6
25-29	1 106	1 101	15.3	99.6
30-34	925	906	12.6	97.9
35-39	813	811	11.3	99.9
40-44	811	810	11.3	99.9
45-49	689	683	9.5	99.1
50-54	614	na	na	na
15-49	7 258	7 190	100.0	99,1

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 nterviewed (weighted), by five-year age group, Kyrgyzstan, 2006

	Household population of children age 0-7	Interviewed children age 0-4		Percentage of eligible children interviewed
	Number	Number	Percent	
Age				
0	609	611	21.2	100.3
1	593	584	20.3	98.5
2	584	534	18.5	91.4
3	572	557	19.3	97.4
4	646	595	20.7	92.2
5	467	na	na	na
6	510	na	na	na
7	476	na	na	na
0-4	3 004	2 881	100,0	95.9

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), Kyrgyzstan, 2006

	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Age in months						
0-2	66	4.5	54	3.8	120	4.1
3-5	79	5.5	103	7.2	183	6.3
6-8	81	5.6	66	4.6	147	5.1
9-11	53	3.6	62	4.3	114	4.0
12-14	66	4.5	105	7.3	171	5.9
15-17	76	5.2	81	5.6	157	5.4
18-20	64	4.4	77	5.4	141	4.9
21-23	72	4.9	57	4.0	129	4.5
24-26	73	5.0	73	5.1	146	5.1
27-29	93	6.4	52	3.6	145	5.0
30-32	80	5.5	56	3.9	136	4.7
33-35	77	5.3	59	4.1	136	4.7
36-38	67	4.6	78	5.4	145	5.0
39-41	68	4.7	63	4.4	131	4.5
42-44	73	5.0	56	3.9	129	4.5
45-47	43	3.0	79	5.5	122	4.2
48-50	75	5.2	56	3.9	131	4.5
51-53	67	4.7	73	5.1	141	4.9
54-56	94	6.5	94	6.5	188	6.5
57-59	84	5.8	90	6.3	173	6.0
Total	1 450	100.0	1 434	100.0	2 883	100.0

Table DQ.5: Heaping on ages and periods

Age and period ratios at boundaries of eligibility by type of information collected (weighted), Kyrgyzstan, 2006

	Age and period ratios*			Eligibility boundary (lower-upper)	Module or questionnaire
	Males	Females	Total		
Age in household questionnaire					
1	0.96	1.09	1.03		
2	1.09	0.81	0.95	Lower	Child discipline and child disability
3	0.87	1.11	0.98		
4	1.24	1.04	1.13	Upper	Under-5 questionnaire
5	0.78	0.92	0.85	Lower	Child labour and education
6	1.05	1.09	1.07		
	.	.	.		
8	0.92	1.12	1.02		
9	1.05	0.95	1.00	Upper	Child disability
10	1.01	1.06	1.04		
	.	.	.		
13	1.13	1.02	1.07		
14	0.82	0.92	0.87	Upper	Child labour and child discipline
15	1.17	1.11	1.14	Lower	Women's questionnaire
16	0.94	0.93	0.93		
17	1.06	0.94	0.99	Upper	Orphaned children
18	1.14	0.89	0.99		
	.	.	.		
23	1.06	1.09	1.08		
24	0.98	0.94	0.96	Upper	Education
25	0.96	1.05	1.01		
	.	.	.		
48	1.29	1.06	1.16		
49	0.67	0.79	0.73	Upper	Women's questionnaire
50	1.14	1.23	1.19		
Age in women's questionnaire					
23	na	1.09	na		
24	na	0.94	na	Upper	Sexual behaviour
25	na	1.04	na		
Months since last birth in women's questionnaire					
6-11	na	0.85	na		
12-17	na	1.18	na		
18-23	na	0.91	na	Upper	Tetanus toxoid and maternal and child health
24-29	na	1.05	na		
30-35	na	1.00	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), Kyrgyzstan, 2006

Questionnaire and Subject	Reference group	Percent with missing information*	Number of cases
Household			
Salt testing	All households surveyed	0.3	5 200
Women			
Date of Birth	All women age 15-49		
Month only		0.2	7 043
Month and year missing		0.0	7 043
Date of first birth	All women age 15-49 with at least one live birth		
Month only		0.4	4 529
Month and year missing		0.0	4 529
Completed years since first birth	All women age 15-49 with at least one live birth	0.0	1
Date of last birth	All women age 15-49 with at least one live birth		
Month only		0.3	4 529
Month and year missing		0.2	4 529
Date of first marriage/union	All ever married women age 15-49		
Month only		1.1	4 869
Month and year missing		1.5	4 869
Age at first marriage/union	All ever married women age 15-49	0.0	4 869
Age at first intercourse	All women age 15-24 who have ever had sex	0.0	2 819
Time since last intercourse	All women age 15-24 who have ever had sex	0.0	894
Under-5			
Date of Birth	All under five children surveyed		
Month only		0.0	2 883
Month and year missing		0.0	2 883
Anthropometry	All under five children surveyed		
Height		0.0	2 883
Weight		0.0	2 883
Height or Weight		0.0	2 883

* 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), Kyrgyzstan, 2006

	Mother in the household				Mother not in the household				Number of children aged 0-4 years
	Mother interviewed	Father interviewed	Other adult female interviewed	Other adult male interviewed	Father interviewed	Other adult female interviewed	Other adult male interviewed	Total	
Age									
0	97.4	0.0	0.0	0.0	0.0	2.6	0.0	100.0	647
1	97.1	0.0	0.4	0.0	0.0	2.5	0.0	100.0	625
2	95.8	0.0	0.0	0.0	0.0	4.2	0.0	100.0	554
3	96.5	0.0	0.0	0.0	0.0	3.3	0.2	100.0	568
4	90.7	0.0	0.0	0.0	0.1	9.2	0.0	100.0	612
Total	95.5	0.0	0.1	0.0	0.0	4.3	0.0	100.0	3 005

Table DQ.8: School attendance by single age

Distribution of household population age 5-24 by educational level and grade attended in the current year (weighted), Kyrgyzstan, 2006

	Pre-school	Primary				Secondary school							Higher	Non-standard curriculum	Not attending school	Total	Number
		Grade 1	Grade 2	Grade 3	Grade 4	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7					
Age																	
5	17,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	82,9	100,0	440
6	9,1	32,0	0,8	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	58,2	100,0	501
7	9,8	50,5	20,0	2,2	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	17,5	100,0	463
8	0,0	4,0	66,5	26,1	1,6	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	1,9	100,0	508
9	0,0	0,0	16,9	54,4	25,6	2,2	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,8	100,0	526
10	0,0	0,0	1,1	15,8	56,7	21,1	1,4	0,0	0,0	0,0	0,0	0,0	0,0	0,0	3,9	100,0	544
11	0,0	0,0	0,0	1,7	15,4	58,3	20,2	1,1	0,0	0,0	0,0	0,0	0,0	0,0	3,2	100,0	506
12	0,0	0,0	0,0	1,2	1,6	16,3	53,0	24,7	1,6	0,0	0,0	0,0	0,0	0,0	1,7	100,0	582
13	0,0	0,0	0,0	0,0	0,3	3,2	13,3	51,4	25,4	2,7	0,3	0,0	0,0	0,1	3,3	100,0	608
14	0,0	0,0	0,0	0,0	0,0	0,6	1,8	14,2	51,4	27,5	2,6	0,1	0,0	0,0	1,8	100,0	510
15	0,0	0,0	0,0	0,0	0,1	0,0	0,1	1,6	12,7	52,4	23,4	3,0	0,0	0,0	6,7	100,0	641
16	0,0	0,0	0,0	0,0	0,0	0,0	0,1	0,0	0,5	7,6	54,3	21,9	2,0	0,0	13,6	100,0	538
17	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	1,1	0,0	9,1	50,8	12,8	0,0	26,2	100,0	551
18	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,6	8,2	37,2	0,0	54,0	100,0	578
19	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,7	39,2	0,0	58,1	100,0	539
20	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	28,2	0,0	71,8	100,0	488
21	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	23,0	0,0	77,0	100,0	465
22	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	15,6	0,0	84,4	100,0	439
23	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	6,6	0,0	93,4	100,0	487
24	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	4,4	0,0	95,6	100,0	432
Total	1,6	4,0	5,1	5,1	5,2	5,2	4,9	5,3	5,0	5,2	4,9	4,6	8,4	0,0	35,4	100,0	10 347

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), Kyrgyzstan, 2006

	Children Ever Born			Children Living			Children deceased			
	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	Number of women
Age										
15-19	18	19	0.94	18	19	0.95	-	-	-	1 542
20-24	422	459	0.92	397	430	0.92	25	29	0.86	1 276
25-29	922	883	1.04	879	852	1.03	42	30	1.40	1 077
30-34	1 142	990	1.15	1 071	963	1.11	71	27	2.67	887
35-39	1 181	1 183	1.00	1 118	1 131	0.99	62	53	1.18	799
40-44	1 337	1 420	0.94	1 227	1 345	0.91	110	75	1.47	791
45-49	1 323	1 227	1.08	1 196	1 143	1.05	127	84	1.51	671
Total	6 345	6 181	1.03	5 907	5 884	1.00	438	298	1.47	7 043

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), Kyrgyzstan, 2006

	Months since last birth				
	Number	Percent		Number	Percent
0	26	1.6	16	37	2.2
1	59	3.6	17	51	3.1
2	45	2.8	18	55	3.4
3	53	3.2	19	39	2.4
4	59	3.6	20	42	2.6
5	81	4.9	21	52	3.2
6	55	3.4	22	29	1.8
7	40	2.5	23	35	2.1
8	48	2.9	24	52	3.2
9	25	1.5	25	54	3.3
10	34	2.0	26	30	1.8
11	59	3.6	27	35	2.2
12	67	4.1	28	41	2.5
13	41	2.5	29	41	2.5
14	64	3.9	30	34	2.1
15	72	4.4			
			Total	1 643	100.0

APPENDIX E. MICS INDICATORS: NUMERATORS AND DENOMINATORS

	INDICATOR	NUMERATOR	DENOMINATOR
1	Under-five mortality rate	Probability of dying by exact age 5 years	
2	Infant mortality rate	Probability of dying by exact age 1 year	
3	Maternal mortality ratio	Number of deaths of women from pregnancy-related causes in a given year	Number of live births in the year (expres+sed per 100,000 births)
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
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

	INDICATOR	NUMERATOR	DENOMINATOR
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
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
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
41	Iodized salt consumption	Number of households with salt testing 15 parts per million or more of iodine/iodate	Total number of households surveyed
42	Vitamin A supplementation (under-fives)	Number of children aged 6-59 months receiving at least one high-dose vitamin A supplement in the previous 6 months	Total number of children aged 6-59 months surveyed
43	Vitamin A supplementation (post-partum mothers)	Number of women with a live birth in the 2 years preceding the survey that received a high-dose vitamin A supplement within 8 weeks after birth	Total number of women that had a live birth in the 2 years preceding the survey
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
48	Support for learning: children's books	Number of households with three or more children's books	Total number of households surveyed
49	Support for learning: non-children's books	Number of households with three or more non-children's books	Total number of households surveyed
50	Support for learning: materials for play	Number of households with three or more materials intended for play	Total number of households surveyed
51	Non-adult care	Number of children aged 0-59 months left alone or in the care of another child younger than 10 years of age in the past week	Total number of children aged 0-59 months surveyed

	INDICATOR	NUMERATOR	DENOMINATOR
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
62	Birth registration	Number of children aged 0-59 months whose births are reported registered	Total number of children aged 0-59 months surveyed
67	Marriage before age 15 and 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
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
70	Polygyny	Number of women in a polygynous union	Total number of women aged 15-49 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
83	Condom use with non-regular partners	Number of women aged 15-24 years reporting the use of a condom during sexual intercourse with their last non-marital, non-cohabiting sex partner in the previous 12 months	Total number of women aged 15-24 years surveyed that had a non-marital, non-cohabiting partner in the previous 12 months

	INDICATOR	NUMERATOR	DENOMINATOR
84	Age at first sex among young people	Number of women aged 15-24 years that have had sex before age 15	Total number of women aged 15-24 surveyed
85	Higher risk sex in the last year	Number of sexually active women aged 15-24 years that have had sex with a non-marital, non-cohabitating partner in the previous 12 months	Total number of women aged 15-24 that were sexually active in the previous 12 months
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
92	Age-mixing among sexual partners	Number of women aged 15-24 years that had sex in the past 12 months with a partner who was 10 or more years older than they were	Total number of sexually active women aged 15-24 years surveyed
96	Source of supplies	Number of children (or households) for whom supplies were obtained from public providers, presented separately for each type of supply: insecticide-treated mosquito nets, oral rehydration salts, antibiotics and antimalarials	Total number of children (or households) for whom supplies were obtained
97	Cost of supplies	Median cost of supplies obtained, presented separately for each type of supply and whether sourced from public or private providers: insecticide-treated mosquito nets, oral rehydration salts, antibiotics and antimalarials.	Total number of children (or households) for whom supplies were obtained
98	Unmet need for family planning	Number of women that are currently married or in union that are fecund and want to space their births or limit the number of children they have and that are not currently using contraception	Total number of women interviewed that are currently married or in union
99	Demand satisfied for family planning	Number of women currently married or in union that are currently using contraception	Number of women currently married or in union that have an unmet need for contraception or that are currently using contraception
100	Attitudes towards domestic violence	Number of women that consider that a husband/partner is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food	Total number of women surveyed

APPENDIX F. QUESTIONNAIRES[1]

HOUSEHOLD QUESTIONNAIRE

We are from National Statistics Committee. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 50 minutes. All the information we obtain will remain strictly confidential and nobody will know these answers are yours. 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 name and number:
Name _____
___ ___ ___

HH4. Supervisor name and number:
Name _____
___ ___ ___

HH5. Day/Month/Year of interview: ___ ___ / ___ ___ / ___ ___ ___ ___

HH6. Area:
Urban 1
Rural 2

HH7. Region:
Batken 1
Jalalabad 2
Issyk-kul 3
Naryn 4
Osh 5
Talas 6
Chui 7
Bishkek c. 8
Osh c. 9

HH 8. Name of head of household:

After all questionnaires for the household have been completed, fill in the following information:

HH9. Result of HH interview:
Completed 1
Not at home 2
Refused 3
HH not found/destroyed 4
Other (*specify*) 6

HH10. Respondent to HH questionnaire:
Name _____
Line No: ___ ___

HH11. Total number of household members:
___ ___

HH12. No.of women meeting survey criteria:
___ ___

HH13. No.of women questionnaires completed:
___ ___

HH14. No.of children under age 5:
___ ___

HH15. No.of under-5 questionnaires completed:
___ ___

Interviewer/supervisor notes: Use this space to record notes about the interview with this household, such as call-back times, incomplete individual interview forms, number of attempts to re-visit household, etc.

HH 16. Data entry operator: ___ ___

[1] All questionnaires presented in this section have been backward translated from original Russian ones.

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. Add a continuation sheet if there are more than 15 household members. Tick here if continuation sheet used ☐

						Eligible for:			For children age 0-17 years Ask hl9-hl12			
						Women's Interview	Child Labour Module	Women's Interview				
HL1. *Line no.*	HL2. *Name*	HL3. What is the relation-ship of (*name*) to the head of the household?	HL4. Is (*name*) male or female? 1 male 2 fem.		HL5. How old is (*name*)? How old was (*name*) on his/her last birth-day? Record in completed years 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 care-taker of this child? Record Line no. of mother/ caretaker	HL8. For each child **under 5**: Who is the mother or primary care-taker of this child? Record Line no. of mother/ caretaker	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? Record Line no. *of mother or 00 for 'no'*	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? Record Line no. *of father or 00 for 'no'*
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	__ __

HL1. *Line no.*	HL2. *Name*	HL3. What is the relation-ship of (*name*) to the head of the household?	HL4. Is (*name*) male or female? 1 male 2 fem.		HL5. How old is (*name*)? How old was (*name*) on his/her last birthday? Record in completed years 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? Record Line no. of mother/ caretaker	HL8. For each child **under 5**: Who is the mother or primary caretaker of this child? Record Line no. of mother/ caretaker	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? Record Line no. *of mother or 00 for 'no'*	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? Record Line no. *of father or 00 for 'no'*
line	name	rel.	m	f	age	15-49	mother	mother	y n dk	mother	y n dk	father
11		__ __	1	2	__ __	11	__ __	__ __	1 2 8	__ __	1 2 8	__ __
12		__ __	1	2	__ __	12	__ __	__ __	1 2 8	__ __	1 2 8	__ __
13		__ __	1	2	__ __	13	__ __	__ __	1 2 8	__ __	1 2 8	__ __
14		__ __	1	2	__ __	14	__ __	__ __	1 2 8	__ __	1 2 8	__ __
15		__ __	1	2	__ __	15	__ __	__ __	1 2 8	__ __	1 2 8	__ __

Are there any other persons living here – even if they are not members of your family or do not have parents living in this household?
Including children at work or at school? *If yes, insert child's name and complete form.*
Then, complete the totals below.

Totals:	Women 15-49	Children 5-14	Under-5s
	__ __	__ __	__ __

** See instructions: to be used only for elderly household members (code meaning "do not know/over age 50").*

Now for each woman age 15-49 years, write her name and line number and other identifying information in the information panel of the Women's Questionnaire.
For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of the Questionnaire for Children UnderFive.
You should now have a separate questionnaire for each eligible woman and each child under five in the household.

* *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 of the head of household
07 = Parent-In-Law
08 = Brother or Sister of the head of household
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

EDUCATION MODULE ED

For household members age 5 and above | *For household members age 5-24 years*

ED1. *Line no.*	ED1A. *Name*	ED2. Has (*name*) ever attended school or preschool? 1 yes ⇨ ED3 2 no ⇩ next line	ED3. What is the highest level of school (*name*) attended? What is the highest grade (*name*) completed at this level? Level: 0 pre-school 1 primary 2 secondary 3 higher 6 religious 8 dk Grade: 98 dk If less than 1 grade, enter 00.	ED4. During the (*2004-2005*) 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: 0 Preschool 1 primary 2 secondary 3 higher 6 religious 8 dk grade: 98 dk	ED7. Did (name) attend school or preschool at any time during the previous school year, that is (*2003-2004*)? 1 yes 2 no ⇩ next line 8 dk ⇩ next line	ED8. During that previous school year, which level and grade did (*name*) attend? level: 0 Preschool 1 primary 2 secondary 3 higher 6 religious 8 dk grade: 98 dk

line	yes	no	level	grade	yes	no	days	level	grade	y	n	dk	level	grade
01	1	2⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	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⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___
11	1	2⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___
12	1	2⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___
13	1	2⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___
14	1	2⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___
15	1	2⇨next line	0 1 2 3 6 8	___ ___	1	2	___	0 1 2 3 6 8	___ ___	1	2	8	0 1 2 3 6 8	___ ___

WS1. What is the main source of drinking water for members of your household?	Piped water	
	Piped into dwelling ... 11	11⇨WS5
	Piped into yard or plot ... 12	12⇨WS5
	Public tap/standpipe ... 13	
	Tubewell/borehole ... 21	
	Dug well	
	Protected well ... 31	
	Unprotected well ... 32	
	Water from spring	
	Protected spring ... 41	
	Unprotected spring ... 42	⇨WS3
	Rainwater collection ... 51	
	Tanker-truck ... 61	
	Cart with small tank/drum ... 71	
	Surface water (river, stream, dam, lake, pond, canal, irrigation channel) ... 81	
	Bottled water ... 91	
	Other (*specify*) ... 96	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	11⇨WS5
	Piped into yard or plot ... 12	12⇨WS5
	Public tap/standpipe ... 13	
	Tubewell/borehole ... 21	
	Dug well	
	Protected well ... 31	
	Unprotected well ... 32	
	Water from spring	
	Protected spring ... 41	
	Unprotected spring ... 42	
	Rainwater collection ... 51	
	Tanker-truck, water-cart ... 61	
	Surface water (river, stream, dam, lake, pond, canal, irrigation channel) ... 81	
	Other (*specify*) ... 96	
WS3. How long does it take to go there, get water, and come back?	No. of minutes ... __ __ __	
	Water on premises ... 995	995⇨WS5
	DK ... 998	
WS4. Who usually goes to this source to fetch the water for your household? *Probe:* Is this person under age 15? What sex? *Circle code that best describes this person.*	Adult woman ... 1	
	Adult man ... 2	
	Female child (under 15) ... 3	
	Male child (under 15) ... 4	
	DK ... 8	
WS5. Do you treat your water in any way to make it safer to drink?	Yes ... 1	
	No ... 2	2⇨WS7
	DK ... 8	8⇨WS7

WS6. What do you usually do to the water to make it safer to drink? Anything else? *Record all items mentioned.*	Boil ..... A Add bleach/chlorine ..... B Strain it through a cloth ..... C Use water filter (ceramic, sand, composite, etc.) ..... D Solar disinfection ..... E Let it stand and settle ..... F Other (*specify*) ..... X DK ..... Z	
WS7. What kind of toilet facility do members of your household usually use? If "flush" or "pour flush", probe: Where does it flush to? If necessary, ask permission to observe the facility.	Flush / pour flush Flush to piped sewer system ..... 11 Flush to septic tank ..... 12 Flush to pit (latrine) ..... 13 Flush to somewhere else ..... 14 Flush to unknown place/not sure/DK where ..... 15 Ventilated Improved Pit latrine (VIP) ..... 21 Pit latrine with slab ..... 22 Pit latrine without slab / open pit ..... 23 Composting toilet ..... 31 Bucket ..... 41 Hanging toilet/hanging latrine ..... 51 No facilities or bush or field ..... 95 Other (specify) 96	95⇨ next module
WS8. Do you share this facility with other households?	Yes ..... 1 No 2	2⇨ next module
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	

HC1a. What is the religion of the head of this household?	Moslem ..... 1 Christian ..... 2 Buddhism ..... 3 Other religion (*specify*) ..... 6 No religion 7
HC1b. What is the mother tongue/native language of the head of this household?	Kyrgyz 1 Russian..... 2 Uzbek ..... 3 Other language (*specify*) 6
HC2. How many rooms in this household are used for sleeping?	No. of rooms ..... __ __
HC3. Main material of the dwelling floor: *Record observation.*	Natural floor Earth/sand/clay ..... 11 Dung ..... 12 Primitive floor Wood planks (unchipped)..... 21 Palm/bamboo ..... 22 Finished floor Parquet or polished wood ..... 31 Vinyl or asphalt strips..... 32 Ceramic (or glazed) tiles..... 33 Cement ..... 34 Carpet ..... 35 Other (*specify*)..... 96
HC4. Main material of the roof. *Record observation.*	Natural roofing No Roof ..... 11 Thatch/rush..... 12 Sod ..... 13 Primitive Roofing Adobe ..... 21 Tar paper..... 22 Unchipped wood planks ..... 23 Finished roofing Metal..... 31 Wood ..... 32 Calamine/cement fiber/slate ..... 33 Ceramic tiles/tiling ..... 34 Cement/concrete slab ..... 35 Roofing shingles..... 36 Metal ceramics..... 37 Other (*specify*)..... 96
HC5. Main material of the walls. *Record observation.*	Natural walls No walls ..... 11 Cane ..... 12 Dirt..... 13 Rudimentary walls Straw with mud ..... 21 Stone with mud..... 22 Adobe ..... 23 Plywood 24

	Carton ..... 25 Reused wood ..... 26 Tarpaulin/felt ..... 26 Finished walls Cement ..... 31 Stone with lime/cement ..... 32 Bricks ..... 33 Cement blocks/slabs ..... 34 Wood planks/shingles ..... 36 Slag/slag blocks ..... 37 Other (*specify*) 96	
HC6. What type of fuel does your household mainly use for cooking?	Electricity ..... 01 Liquid Propane Gas (LPG) ..... 02 Natural gas ..... 03 Biogas ..... 04 Kerosene ..... 05 Coal / Lignite ..... 06 Charcoal ..... 07 Wood ..... 08 Straw/shrubs/grass ..... 09 Animal dung/pressed dung ..... 10 Agricultural crop residue ..... 11 Other (*specify*) 96	01⇨HC8 02⇨HC8 03⇨HC8 04⇨HC8
HC7. In this household, is food cooked on an open fire, an open stove or a closed stove? *Probe for type.*	Open fire ..... 1 Open stove ..... 2 Closed stove ..... 3 Other (*specify*) 6	
HC7a. Does the fire/stove have a chimney or a hood?	Yes ..... 1 No 2	
HC8. Is the cooking usually done in the house, in a separate building, or outdoors?	In the house ..... 1 In a separate building ..... 2 Outdoors ..... 3 Other (*specify*) 6	

HC9. Does your household have:		Yes	No
Electricity?	Electricity	1	2
A radio?	Radio	1	2
A television?	Television	1	2
A mobile telephone?	Mobile Telephone	1	2
A non-mobile telephone?	Non-Mobile Telephone	1	2
A refrigerator?	Refrigerator	1	2
personal computer?	Personal computer	1	2

HC10. Does any member of your household own:		Yes	No
A watch?	Watch	1	2
A bicycle? (except children's ones)	Bicycle	1	2
A motorcycle or scooter?	Motorcycle/Scooter	1	2
An animal-drawn cart?	Animal drawn-cart	1	2
A car or truck?	Car/Truck	1	2
A boat with a motor?	Boat with motor	1	2

HC11. HC10. Does any member of your household own land useable for agricultural utilization?	Да..... 1 Нет 2	 2⇨HC13
HC12. How many hectares do your family members own? *Record '97' if more than 100 ha.* *Record '98' if unknown.*	Hectares ..... ___ ___	
HC13. Does your family own cattle or live farming?	Да..... 1 Нет 2	 2⇨Next Module
HC14. How many heads of cattle does family have? *If none, record '00'.* *If more than 97, record '97'.* *If unknown, record '98'.*	Cattle…….___ ___ Milch cows ..... ___ ___ Horses/donkeys/mules..... ___ ___ Goats ..... ___ ___ Sheep..... ___ ___ Hens ..... ___ ___	

CHILD LABOUR MODULE — CL

To be administered to mother/caretaker of each child in the household age 5 through 14 years. For household members below age 5 or above age 14, leave rows blank.

NOW I WOULD LIKE TO ASK ABOUT ANY WORK CHILDREN IN THIS HOUSEHOLD MAY DO.

CL1. *Line no.*	CL2. *Name*	CL3. During the past week, did (*name*) do any kind of work for someone who is not a member of this household? If yes: for pay in cash or kind? 1 yes, for pay (cash or kind) 2 yes, unpaid 3 no ⇨to CL5			CL4. *If yes:* Since last (*day of the week*), about how many hours did he/she do this work for someone who is not a member of this household? If more than one job, include all hours at all jobs. Record response then ⇨ CL.6	CL5. At any time during the past year, did (*name*) do any kind of work for someone who is not a member of this household? *If yes:* for pay in cash or kind? 1 yes, for pay (cash or kind) 2 yes, unpaid 3 no			CL6. During the past week, did (*name*) help with household chores such as shopping, collecting firewood, cleaning, fetching water, or caring for children? 1 yes 2 no ⇨ to CL8	CL7. *If yes:* Since last (*day of the week*), about how many hours did he/she spend doing these chores?	CL8. During the past week, did (*name*) do any other family work (on the farm or in a business or selling goods in the street?) 1 yes 2 no ↘ next line	CL9. *If yes:* Since last (*day of the week*), about how many hours did he/she do this work?	CL9a. How many schooling days did a child miss due to any kind of work?
line		yes				yes								
no.	name	paid	unpaid	paid	no. hours	paid	unpaid	no	yes no	no. hours	yes no	no. hours	no. days	
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	___ ___	___ ___	
11		1	2	3	___ ___	1	2	3	1 2	___ ___	1 2	___ ___	___ ___	
12		1	2	3	___ ___	1	2	3	1 2	___ ___	1 2	___ ___	___ ___	
13		1	2	3	___ ___	1	2	3	1 2	___ ___	1 2	___ ___	___ ___	
14		1	2	3	___ ___	1	2	3	1 2	___ ___	1 2	___ ___	___ ___	
15		1	2	3	___ ___	1	2	3	1 2	___ ___	1 2	___ ___	___ ___	

CHILD DISCIPLINE MODULE

TABLE 1: CHILDREN AGED 3-14 YEARS ELIGIBLE FOR CHILD DISCIPLINE QUESTIONS

Review the household listing and list each of the children aged 3-14 years below in order according to their line number (HL1). Do not include other household members outside of the age range 3-14 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 3-14 in the box provided (CD7).

CD1. *Rank no.*	**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**
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 3-14 years ___ ___

If there is only one child age 2-14 years in the household, then skip table 2 and go to CD9; write down the rank number of the child and continue with CD11

TABLE 2: SELECTION OF RANDOM CHILD FOR CHILD DISCIPLINE QUESTIONS

Use this table to select one child between the ages of 3 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 (3-14) 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 on the next page. 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 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* Rank number of child .....__ __

CHILD DISCIPLINE MODULE — CD

Identify eligible child aged 3 to 14 in the household using the tables on the preceding page, according to your instructions. Ask to interview the mother or primary caretaker of the selected child (identified by the line number in CD6).

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 *(name)* in the past month.	
CD12a. Took away privileges, forbade something *(name)* liked or did not allow him/her to leave house).	Yes ..... 1 No 2
CD12b. Explained why something (the behavior) was wrong.	Yes ..... 1 No 2
CD12c. Shook him/her.	Yes ..... 1 No 2
CD12d. Shouted, yelled at or screamed at him/her.	Yes ..... 1 No 2
CD12e. Gave him/her something else to do.	Yes ..... 1 No 2
CD12f. Spanked, hit or slapped him/her on the bottom with bare hand.	Yes ..... 1 No 2
CD12g. Hit him/her on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.	Yes ..... 1 No 2
CD12h. Called him/her dumb, lazy, or another name like that.	Yes ..... 1 No 2
CD12i. Hit or slapped him/her on the face, head or ears.	Yes ..... 1 No 2
CD12j. Hit or slapped him/her on the hand, arm, or leg.	Yes ..... 1 No 2
CD12k. Beat him/her up with an implement (hit over and over as hard as one could).	Yes ..... 1 No 2
CD13. Do you believe that in order to bring up (raise, educate) (*name*) properly, you need to physically punish him/her?	Yes ..... 1 No ..... 2 Don't know/no opinion 8

MATERNAL MORTALITY MODULE — MM

Administer to each adult household member. Copy name and line number of each adult (age 15 or over) in the household. If one of these adults is not at home, another adult may respond for him/her. Indicate this by placing a '1' in MM3, and insert line number of proxy respondent in MM4. For household members below age 15, leave rows blank

MM1. *Line no.*	MM2. *Name*	MM3. Is this a proxy report? 1 yes ⇨MM4 2 no ⇨MM5		MM4. Line no. of proxy respondent (from household listing HL1)	MM5. How many sisters (born to the same mother) have you ever had? 00⇨go to the next line 98 = don't know	MM6. How many of these sisters ever reached age 15? 98 = don't know	MM7. How many of these sisters (who are at least 15 years old) are alive now? 98 = don't know	MM8. How many of these sisters who reached age 15 or more have died? 98 = don't know	MM9. How many of these dead sisters died while pregnant, or during childbirth, *or during the six weeks after the end of pregnancy except accidents?* 98 = don't know
Line	Name	Y	N	Line					
01		1	2	__ __	__ __	__ __	__ __	__ __	__ __
02		1	2	__ __	__ __	__ __	__ __	__ __	__ __
03		1	2	__ __	__ __	__ __	__ __	__ __	__ __
04		1	2	__ __	__ __	__ __	__ __	__ __	__ __
05		1	2	__ __	__ __	__ __	__ __	__ __	__ __
06		1	2	__ __	__ __	__ __	__ __	__ __	__ __
07		1	2	__ __	__ __	__ __	__ __	__ __	__ __
08		1	2	__ __	__ __	__ __	__ __	__ __	__ __
09		1	2	__ __	__ __	__ __	__ __	__ __	__ __
10		1	2	__ __	__ __	__ __	__ __	__ __	__ __
11		1	2	__ __	__ __	__ __	__ __	__ __	__ __
12		1	2	__ __	__ __	__ __	__ __	__ __	__ __
13		1	2	__ __	__ __	__ __	__ __	__ __	__ __
14		1	2	__ __	__ __	__ __	__ __	__ __	__ __
15		1	2	__ __	__ __	__ __	__ __	__ __	__ __

SALT IODIZATION MODULE SI

SI1. We would like to check whether the salt used in your household is iodized. May i see a sample of the salt used to cook the main meal eaten by members of your household last night?

Once you have examined the salt, circle number that corresponds to test outcome.

Not iodized 0 PPM 1
Less than 15 PPM 2
15 PPM or more 3

No salt in home 6
Salt not tested 7

SI2. *Does any eligible woman age 15-49 reside in the household?*
Check household listing, column HL6.You should have a questionnaire with the Information Panel filled in for each eligible woman.
☐ *Yes.* ⇨ *Go to QUESTIONNAIRE FOR INDIVIDUAL WOMEN*
to administer the questionnaire to the first eligible woman.
☐ *No.* ⇨ *Continue.*

SI3. *Does any child under the age of 5 reside in the household?*
Check household listing, column HL8. You should have a questionnaire with the Information Panel filled in for each eligible child.
☐ *Yes.* ⇨ *Go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE*
to administer the questionnaire to mother or caretaker of the first eligible child.
☐ *No.* ⇨ *End the interview by thanking the respondent for his/her cooperation.*
Gather together all questionnaires for this household and tally the number of interviews completed on the cover page.

WOMEN'S INFORMATION PANEL — WM

This module is to be administered to all women age 15 through 49 (see column HL6 of HH listing).
Fill in one form for each eligible woman
Fill in the cluster and household number, and the name and line number of the woman in the space below. Fill in your name, number and the date.

WM1. Cluster number:___ ___ ___	WM2. Household number:___ ___ ___	
WM3. Woman's Name: _____	WM4. Woman's Line Number: ___ ___	
WM5.Interviewer name and 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 (*specify*)_____6	

Repeat greeting if not already read to this woman:
We are from The National Statistics Committee. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 20 minutes. All the information we obtain will remain strictly confidential and your answers will never be identified. Also, you are not obliged to answer any question you don't want to, and you may withdraw from the interview at any time. May I start now?

If permission is given, begin the interview. If the woman does not agree to continue, thank her, complete WM7, and go to the next interview. Discuss this result with your supervisor for a future revisit.

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 (in completed years) ..... __ __	
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 Non-standard curriculum 6	
WM12. What is the highest grade you completed at that level?	Grade ..... __ __	

WM13. *Check WM11:*
☐ *Secondary or higher.* ⇨ *Go to Next Module*
☐ *Primary or non-standard curriculum.* ⇨ *Continue with WM14*

WM14. Now I would like you to read this sentence to me. *Show sentences to respondent.* *If respondent cannot read whole sentence, probe:* Can you read part of the sentence to me? *Example sentences for literacy test:* *1. The child is reading a book.* *2. The rains came late this year.* *3. Parents must care for their children.* *4. Farming is hard work.* *The same text is presented in Kyrgyz and Uzbek.*	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 *(specify language)* Blind/mute, visually/speech impaired..... 5

CHILD MORTALITY MODULE — CM

This module is to be administered to all women age 15-49.
All questions refer only to LIVE births.

CM1. Now i would like to ask about all the births you have had during your life. Have you ever given birth? *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?	Yes ..... 1 No 2	2⇨marriage/ union module
CM2a. What was the date of your first birth? 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. *Skip to CM3 only if year of first birth is given. Otherwise, continue with CM2B.*	Date of first birth Day ..... __ __ DK day ..... 98 Month..... __ __ DK month ..... 98 Year ..... __ __ __ __ DK year 9998	 ⇨CM3 ⇩CM2b
CM2b. How many years ago did you have your first birth?	Completed years since first birth ..... __ __	
CM3. Do you have any sons or daughters to whom you have given birth who are now living with you?	Yes ..... 1 No 2	2⇨CM5
CM4. How many sons live with you? How many daughters live with you?	Sons at home ..... __ __ Daughters at home..... __ __	
CM5. Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	Yes ..... 1 No 2	2⇨CM7
CM6. How many sons are alive but do not live with you? How many daughters are alive but do not live with you?	Sons elsewhere ..... __ __ Daughters elsewhere ..... __ __	
CM7. Have you ever given birth to a boy or girl who was born alive but later died?	Yes ..... 1 No 2	2⇨CM9
CM7a. Have you any Death Registration Certificate?	Yes ..... 1 No 2	
CM8. How many boys have died? How many girls have died?	Boys dead ..... __ __ Girls dead ..... __ __	
CM9. Sum answers to CM4, CM6, and CM8.	Sum ..... __ __	

CM10. Just to make sure that I have this right, you have had in total (*total number*) births during your life. Is this correct?
☐ *Yes.* ⇨ *Go to CM11*
☐ *No.* ⇨ *Check responses and make corrections before proceeding to CM11*

CM11. Of these (*total number*) births you have had, when did you deliver the last one (even if he or she has died)? If day is not known, enter '98' in space for day.	Date of last birth Day/Month/Year __ __/__ __/__ __ __ __

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)?*
If child has died, take special care when referring to this child by name in the following modules.
☐ *No live birth in last 2 years.* ⇨ *Go to MARRIAGE/UNION module.*
☐ *Yes, live birth in last 2 years.* ⇨ *Continue with CM13*
*Name of child*_____

CM13. At the time you became pregnant with (*name*), did you want to become pregnant then, did you want to wait until later, or did you want no (more) children at all?	Then..... 1 Later..... 2 No more..... 3

TETANUS TOXOID (TT) MODULE — TT

This module is to be administered to all women with a live birth in the 2 years preceding date of interview.

TT1. Do you have a card or other document with your own immunizations listed? *If a card is presented, use it to assist with answers to the following questions.*	Yes (card seen) ..... 1 Yes (card not seen) ..... 2 No ..... 3 DK 8	
TT2. When you were pregnant with your last child, did you receive any injection to prevent him or her from getting tetanus, that is convulsions after birth (an anti-tetanus shot, an injection at the top of the arm or shoulder)?	Yes ..... 1 No ..... 2 DK 8	 2⇨TT5 8⇨TT5
TT3. *If yes:* How many times did you receive this anti-tetanus injection during your last pregnancy?	No. of times ..... __ __ DK 98	 98⇨TT5
TT4. *How many TT doses during last pregnancy were reported in TT3?* ☐ *At least two TT injections during last pregnancy.* ⇨ *Go to Next Module* ☐ *Fewer than two TT injections during last pregnancy.* ⇨ *Continue with TT5*		
TT5. Did you receive any tetanus toxoid injection at any time before your last pregnancy?	Yes ..... 1 No ..... 2 DK 8	 2⇨next module 8⇨next module
TT6. How many times did you receive it?	No. of times ..... __ __	
TT7. In what month and year did you receive the last anti-tetanus injection before that last pregnancy? *Skip to next module only if year of injection is given. Otherwise, continue with TT8.*	Month ..... __ __ DK month ..... 98 Year ..... __ __ __ __ DK year 9998	 ⇨next module ⇩TT8
TT8. How many years ago did you receive the last anti-tetanus injection before that last pregnancy?	Years ago ..... __ __	

MATERNAL AND NEWBORN HEALTH MODULE — MN

This module is to be administered to all women with a live birth in the 2 years preceding date of interview. Check child mortality module CM12 and record name of last-born child here _____. Use this child's name in the following questions, where indicated.

MN1. In the first two months after your last birth [the birth of *name*], did you receive a Vitamin A dose like this?

Show 200,000 IU capsule or dispenser.

Yes 1
No 2
DK 8

MN2. Did you see anyone for antenatal care for this pregnancy?

If yes: Whom did you see? Anyone else?

Probe for the type of person seen and circle all answers given.

Health professional:
Doctor ..... A
Nurse/midwife ..... B
Auxiliary midwife C
Other person
Traditional birth attendant ..... F
Community health worker ..... G
Relative/friend ..... H

Other (*specify*) X
No one ..... Y ⇨ MN7

MN3. As part of your antenatal care, were any of the following done at least once?

		Yes	No
MN3a. Were you weighed?	Weight	1	2
MN3b. Was your blood pressure measured?	Blood pressure	1	2
MN3c. Did you give a urine sample?	Urine sample	1	2
MN3d. Did you give a blood sample?	Blood sample	1	2

MN4. During any of the antenatal visits for the pregnancy, were you given any information or counseled about AIDS or the AIDS virus?

Yes 1
No 2
DK 8

MN5. I don't want to know the results, but were you tested for HIV/AIDS as part of your antenatal care?

Yes 1
No ..... 2 ⇨ MN7
DK ..... 8 ⇨ MN7

MN6. I don't want to know the results, but did you get the results of the test?

Yes 1
No 2
DK 8

MN7. Who assisted with the delivery of your last child (*name*)?

Anyone else?

Probe for the type of person assisting and circle all answers given.

Health professional:
Doctor ..... A
Nurse/midwife ..... B
Auxiliary midwife C
Other person
Traditional birth attendant ..... F
Community health worker ..... G
Relative/friend ..... H

Other (*specify*) X
No one ..... Y

MN8. Where did you give birth to (*name*)? *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.* _____ *(Name of place)*	Home Your home ..... 11 Other home ..... 12 Public sector Govt. hospital ..... 21 Govt. clinic/health center ..... 22 Other public (*specify*) ..... 26 Private Medical Sector Private hospital ..... 31 Private clinic ..... 32 Private maternity home ..... 33 Other private medical (*specify*) ..... 36 Other (*specify*) 96	
MN9. When your last child (*name*) was born, was he/she very large, larger than average, average, smaller than average, or very small?	Very large ..... 1 Larger than average ..... 2 Average ..... 3 Smaller than average ..... 4 Very small ..... 5 DK 8	
MN10. Was (*name*) weighed at birth?	Yes ..... 1 No ..... 2 DK 8	 2⇨MN12 8⇨MN12
MN11. How much did (*name*) weigh? *Record weight from health card, if available.*	From card .....1 (kilograms) __ . __ __ __ From recall .....2 (kilograms) __ . __ __ __ DK 99998	
MN12. Did you ever breastfeed (*name*)?	Yes ..... 1 No 2	 2⇨ next module
MN13. How long after birth did you first put (*name*) to the breast? *If less than 1 hour, record '00' hours. If less than 24 hours, record hours. Otherwise, record days.*	Immediately ..... 000 Hours ..... 1 __ __ or Days ..... 2 __ __ Don't know/remember 998	

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
MA2a. Besides yourself, does your husband/partner have any other wives?	Yes ..... 1 No ..... 2 DK 98	 2⇨MA5
MA2b. how many other wives does he have?	Number ..... __ __ 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⇨next module
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 first marry or start living with a man as if married?	Month ..... __ __ DK month ..... 98 Year ..... __ __ __ __ DK year 9998	
MA7. *Check MA6:* ☐ *Both month and year of marriage/union known? ⇨ Go to Next Module* ☐ *Either month or year of marriage/union not known? ⇨ Continue with 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 Unsure or DK 8	1⇨ next module
CP1a. At the time you became pregnant did you want to become pregnant <u>then</u>, did you want to wait until <u>later</u>, or did you <u>not want</u> to have any more children?	Then ..... 1 Later ..... 2 Not want more children 3	1⇨CP4b 2⇨CP4b 3⇨CP4b
CP1b. Could you become pregnant if you and your partner would wish?	Yes ..... 1 No ..... 2 DK 8	
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⇨ next module
CP3. Which method are you using? *Do not prompt.* *If more than one method is mentioned, circle each one.*	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	
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? CP4b. *If currently pregnant:* 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?	Have (a/another) child ..... 1 No more/none ..... 2 Says she cannot get pregnant ..... 3 Undecided/don't know 8	
CP4c. How long would you like to wait before the birth of (a/another) child?	Months ..... 1 __ __ Years ..... 2 __ __ Soon/now ..... 993 Says she cannot get pregnant ..... 994 After marriage ..... 995 Other ..... 996 Don't know 998	

ATTITUDES TOWARD DOMESTIC VIOLENCE

DV1. Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:

DV1a. If she goes out with out telling him?
DV1b. If she neglects the children?
DV1c. If she argues with him?
DV1d. If she refuses sex with him?
DV1e. If she burns the food?

	Yes	No	DK
Goes out without telling	1	2	8
Neglects children	1	2	8
Argues	1	2	8
Refuses sex	1	2	8
Burns food	1	2	8

SEXUAL BEHAVIOUR MODULE SB

Check for the presence of others. Before continuing, ensure privacy.

SB0. *Check WM9: Age of respondent is between 15 and 24?*
☐ *Age 25-49.* ⇨ *Go to Next Module*
☐ *Age 15-24.* ⇨ *Continue with SB1*

SB1. Now I need to ask you some questions about sexual activity in order to gain a better understanding of some family life issues.

The information you supply will remain strictly confidential.

How old were you when you first had sexual intercourse (if ever)?

Never had intercourse 00
Age in years ..... __ __ → 00⇨next module
First time when started living with (first) husband/partner 95

SB2. When was the last time you had sexual intercourse?

Record 'years ago' only if last intercourse was one or more years ago. If 12 months or more the answer must be recorded in years.

Days ago ..... 1 __ __
Weeks ago ..... 2 __ __
Months ago ..... 3 __ __
Years ago ..... 4 __ __ → 4⇨next module

SB3. The last time you had sexual intercourse was a condom used?

Yes 1
No 2

SB4. What is your relationship to the man with whom you last had sexual intercourse?
If man is 'boyfriend' or 'fiancũe', ask:
Was your boyfriend/fiancũe living with you when you last had sex?
If 'yes', circle 1 .If 'no', circle 2.

Spouse / cohabiting partner ..... 1 → 1⇨SB6
Man is boyfriend / fiancũe 2
Other friend 3
Casual acquaintance 4
Other (*specify*) 6

SB5. how old is this person?
If response is DK, probe:
About how old is this person?

Age of sexual partner ..... __ __
DK 98

SB6. Have you had sex with any other man in the last 12 months?

Yes 1
No ..... 2 → 2⇨next module

SB7. The last time you had sexual intercourse with this other man, was a condom used?	Yes ..... 1 No 2	
SB8. What is your relationship to this man? *If man is 'boyfriend' or 'fiancũe', ask:* Was your boyfriend/fiancñe living with you when you last had sex? *If 'yes', circle 1. If 'no', circle 2.*	Spouse / cohabiting partner..... 1 Man is boyfriend / fiancñe..... 2 Other friend..... 3 Casual acquaintance ..... 4 Other (*specify*)..... 6	1⇨SB10
SB9. how old is this person? *If response is DK, probe:* About how old is this person?	Age of sexual partner ..... __ __ DK..... 98	
SB10. Other than these two men, have you had sex with any other man in the last 12 months?	Yes ..... 1 No 2	2⇨next module
SB11. In total, with how many different men have you had sex in the last 12 months?	No. of partners..... __ __	

HIV/AIDS MODULE — HA

HA1. Now I would like to talk with you about something else. Have you ever heard of the virus HIV or an illness called AIDS?	Yes ..... 1 No 2	2⇨ next module
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?	Yes ..... 1 No ..... 2 DK 8	
HA3. Can people get infected with the AIDS virus because of witchcraft or other supernatural means?	Yes ..... 1 No ..... 2 DK 8	
HA4. Can people reduce their chance of getting the AIDS virus by using a condom every time they have sex?	Yes ..... 1 No ..... 2 DK 8	
HA5. Can people get the AIDS virus from mosquito bites?	Yes ..... 1 No ..... 2 DK 8	
HA6. Can people reduce their chance of getting infected with the AIDS virus by not having sex at all?	Yes ..... 1 No ..... 2 DK 8	
HA7. Can people get the AIDS virus by sharing food with a person who has AIDS?	Yes ..... 1 No ..... 2 DK 8	
HA7a. Can people get the AIDS virus by getting injections with a needle that was already used by someone else?	Yes ..... 1 No ..... 2 DK 8	
HA8. Is it possible for a healthy-looking person to have the AIDS virus?	Yes ..... 1 No ..... 2 DK 8	

HA9. Can the AIDS virus be transmitted from a mother to a baby?

		Yes	No	DK
HA9a. During pregnancy?	During pregnancy	1	2	8
HA9b. During delivery?	During delivery	1	2	8
HA9c. By breastfeeding?	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. *Check MN5: Tested for HIV during antenatal care?* ☐ *Yes.* ⇨ *Go to HA18A* ☐ *No.* ⇨ *Continue with 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⇨next module 2⇨next module 3⇨next module
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. *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?	Yes ..... 1 No 2	
Follow instructions in your Interviewer's Manual.		

UNDER-FIVE CHILD INFORMATION PANEL — UF

This questionnaire is to be administered to all mothers or caretakers (see household listing, column HL8) who care for a child that lives with them and is under the age of 5 years (see household listing, column HL5).
A separate questionnaire should be used for each eligible child.
Fill in the cluster and household number, and names and line numbers of the child and the mother/caretaker in the space below. Insert your own name and number, and the date.

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 name and 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 (specify) 6

Repeat greeting if not already read to this respondent:
We are from the National Statistics Committee. We are working on a project concerned with family health and education. I would like to talk to you about this. The interview will take about 20 minutes. All the information we obtain will remain strictly confidential and your answers will never be identified. Also, you are not obliged to answer any question you don't want to, and you may withdraw from the interview at any time. May I start now?
If permission is given, begin the interview. If the respondent does not agree to continue, thank him/her and go to the next interview. Discuss this result with your supervisor for a future revisit.

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 (*name*). In what month and year was (*name*) born? *Probe:* What is his/her birthday? If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day.	Date of birth: Day ..... __ __ DK day ..... 98 Month ..... __ __ Year ..... __ __ __ __
UF11. How old was (*name*) at his/her last birthday? Record age in completed years.	Age in completed years ..... __

BIRTH REGISTRATION AND EARLY LEARNING MODULE — BR

BR1. Does (*name*) have a birth certificate? May I see it?	Yes, seen ..... 1 Yes, not seen ..... 2 No ..... 3 DK 8	1⇨BR5
BR2. Has (*name's*) birth been registered with the civil authorities?	Yes ..... 1 No ..... 2 DK 8	1⇨BR5 8⇨BR4
BR3. Why is (*name's*) birth not registered?	Costs too much ..... 1 Must travel too far ..... 2 Did not know it should be registered ..... 3 Did not want to pay fine ..... 4 Does not know where to register ..... 5 Marriage wasn't registered ..... 7 Other (*specify*) ..... 6 DK 8	
BR4. Do you know how to register your child's birth?	Yes ..... 1 No 2	
BR5. *Check age of child in UF11: Child is 3 or 4 years old?* ☐ *Yes.* ⇨ *Continue with BR6* ☐ *No.* ⇨ *Go to BR8*		
BR6. Does (*name*) attend any organized learning or early childhood education programme, such as a private or government facility, including kindergarten or community child care?	Yes ..... 1 No ..... 2 DK 8	2⇨BR8 8⇨BR8
BR7. Within the last seven days, about how many hours did (*name*) 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 (*name*): *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)? *Circle all that apply.*		Mother	Father	Other	No one
BR8a. Read books or look at picture books with (*name*)?	Books	A	B	X	Y
BR8b. Tell stories to (*name*)?	Stories	A	B	X	Y
BR8c. Sing songs with (*name*)?	Songs	A	B	X	Y
BR8d. Take (*name*) outside the home, compound, yard or enclosure?	Take outside	A	B	X	Y
BR8e. Play with (*name*)?	Play with	A	B	X	Y
BR8f. Spend time with (name) naming, counting, and/or drawing things?	Spend time with	A	B	X	Y

CHILD DEVELOPMENT	CE
Question CE1 is to be administered only once to each caretaker	
CE1. How many children's books or picture books do you have for (*name*)? If 'none' enter 00	Number of non-children's books..... 0 __ Ten or more non-children's books 10
CE2. How many other books are there in the household? Please include school-books, but not other books meant for children, such as picture books If 'none' enter 00	Number of non-children's books..... 0 __ Ten or more non-children's books 10
CE3. I am interested in learning about the things that (*name*) plays with when he/she is at home. What does (*name*) play with? Does he/she play with Household objects, such as bowls, plates, cups or pots? Objects and materials found outside the living quarters, such as sticks, rocks, animals, shells, or leaves? Homemade toys, such as dolls, cars and other toys made at home? Toys that came from a store? Code Y if child does not play with any of the items mentioned.	 Household objects (bowls, plates, cups, pots) ..... A Objects and materials found outside the living quarters (sticks, rocks, animals, shells, leaves) .....B Homemade toys (dolls, cars and other toys made at home) ..C Toys that came from a store ..... D No playthings mentioned .....Y
CE4. since last (*day of the week*) how many times was (*name*) left in the care of another child (that is, someone less than 10 years old)? If 'none' enter 00	Number of times ..... __ __
CE5. In the past week, how many times was (*name*) left alone? If 'none' enter 00	Number of times ..... __ __
CE5.a Have you any special place reserved for kids' games?	Yes – 1, No – 2.

VITAMIN A MODULE		VA
VA1. Has (*name*) ever received a vitamin A capsule (supplement) like this one? Show capsule or dispenser for different doses – 100,000 IU for those 6-11 months old, 200,000 IU for those 12-59 months old.	Yes ..... 1 No ..... 2 DK 8	2⇨next module 8⇨next module
VA2. How many months ago did (*name*) take the last dose?	Months ago ..... __ __ DK 98	
VA3. Where did (*name*) get this last dose?	On routine visit to health facility ..... 1 Sick child visit to health facility ..... 2 National Immunization Day campaign ..... 3 Other (*specify*) ..... 6 DK 8	

BREASTFEEDING MODULE — BF

BF1. Has (*name*) ever been breastfed?	Yes ..... 1 No ..... 2 DK 8	2⇨BF3 8⇨BF3
BF2. Is he/she still being breastfed?	Yes ..... 1 No ..... 2 DK 8	

BF3. Since this time yesterday, did he/she receive any of the following:

Read each item aloud and record response before proceeding to the next item.

		Y	N	DK
BF3a. vitamin, mineral supplements or medicine?	A. Vitamin supplements	1	2	8
BF3b. plain water?	B. Plain water	1	2	8
BF3c. sweetened, flavoured water or fruit juice or tea or infusion?	C. Sweetened water or juice	1	2	8
BF3d. oral rehydration solution (ORS)?	D. ORS	1	2	8
BF3e. infant formula?	E. Infant formula	1	2	8
BF3f. tinned, powdered or fresh milk?	F. Milk	1	2	8
BF3g. any other liquids?	G. Other liquids	1	2	8
BF3h. solid or semi-solid (mushy) food?	H. Grated food	1	2	8
	I. Solid or semi-solid food	1	2	8

BF4. Check BF3H: Child received solid or semi-solid (mushy) food?
☐ Yes. ⇨ Continue with BF5
☐ *No or DK. ⇨ Go to Next Module*

BF5. Since this time yesterday, how many times did (*name*) eat solid, semisolid, or soft foods other than liquids?	No. of times ..... ___ Don't know 8	

If 7 or more times, record '7'.

CARE OF ILLNESS MODULE — CA

CA1. Has (*name*) had diarrhoea in the last two weeks, that is, since (*day of the week*) of the week before last?

Diarrhoea is determined as perceived by mother or caretaker, or as three or more loose or watery stools per day, or blood in stool.

Yes 1
No ..... 2 — 2⇨CA5
DK ..... 8 — 8⇨CA5

CA2. During this last episode of diarrhoea, did (*name*) drink any of the following:

Read each item aloud and record response before proceeding to the next item.

		Yes	No	DK
CA2a. A fluid made from a special packet called (*local name for ORS packet solution*)?	A. Fluid from ORS packet	1	2	8
CA2b. Government-recommended homemade fluid?	B. Recommended homemade fluid	1	2	8
CA2c. A pre-packaged ORS fluid for diarrhoea?	C. Pre-packaged ORS fluid	1	2	8
CA2D. Antibiotics?	D. Antibiotics	1	2	8

CA3. During (*name's*) 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 (*name's*) illness, did he/she eat less, about the same, or more food than usual?

If "less", probe:
much less or a little less?

None 1
Much less 2
Somewhat less 3
About the same 4
More 5
DK 8

CA4A. *Check CA2A: ORS packet used?*
☐ *Yes.*⇨ *Continue with CA4B*
☐ *No.*⇨ *Go to CA5*

CA4b. Where did you get the *(local name for ORS packet from CA2A)?*

Public sector
- Govt. hospital 11
- Govt. health centre 12
- Govt. health post 13
- Village health worker 14
- Mobile/outreach clinic 15
- Other public (*specify*) 16

Private medical sector
- Private hospital/clinic 21
- Private physician 22
- Private pharmacy 23
- Mobile clinic 24
- Other private medical (*specify*) 26

Other source
- Relative or friend 31
- Shop 32

	Traditional practitioner ..... 33 Other (*specify*)..... 96 DK..... 98	
CA4c. How much did you pay for the *(local name for ORS packet from CA2A)?*	Local currency ..... __ __ __ __ Free..... 9996 DK..... 9998	
CA5. Has (*name*) had an illness with a cough at any time in the last two weeks, that is, since (*day of the week*) of the week before last?	Yes ..... 1 No..... 2 DK..... 8	 2⇨CA12 8⇨CA12
CA6. When (*name*) 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 (*specify*)..... 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
CA9. From where did you seek care? Anywhere else? Circle all providers mentioned, but do NOT prompt with any suggestions. 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. _____ (Name of place)	Public sector Govt. hospital..... A Govt. health centre ..... B Govt. health post..... C Village health worker..... D Mobile/outreach clinic ..... E Pharmacy ..... F Other public (*specify*)..... H Private medical sector Private hospital/clinic ..... I Private physician ..... J Private pharmacy ..... K Mobile clinic ..... L Other private medical (*specify*)..... O Other source Relative or friend ..... P Shop ..... Q Traditional practitioner ..... R Other (*specify*)..... X	
CA10. Was (*name*) given medicine to treat this illness?	Yes ..... 1 No..... 2 DK..... 8	2⇨CA12 8⇨CA12
CA11. What medicine was (*name*) given? Circle all medicines given.	Antibiotic..... A Paracetamol/Panadol/Acetaminophen..... P Aspirin..... Q Ibupropfen ..... R Other (*specify*)..... X DK..... Z	

CA11a. Was medicine given according to prescription	Yes ..... 1 No ..... 2 DK 8

CA11B. Check CA11: Antibiotic given?
☐ Yes. ⇨ Continue with CA11B
☐ No. ⇨ Go to CA12

CA11c. Where did you get the antibiotic?	Public sector Govt. hospital ..... 11 Govt. health centre ..... 12 Govt. health post ..... 13 Village health worker ..... 14 Mobile/outreach clinic ..... 15 Other public (*specify*) ..... 16 Private medical sector Private hospital/clinic ..... 21 Private physician ..... 22 Private pharmacy ..... 23 Mobile clinic ..... 24 Other private medical (*specify*) ..... 26 Other source Relative or friend ..... 31 Shop ..... 32 Traditional practitioner ..... 33 Other (*specify*) ..... 96 DK 98
CA11d. How much did you pay for the antibiotic?	Local currency ..... __ __ __ __ Free ..... 9996 DK 9998

CA12. Check UF11: Child aged under 3?
☐ Yes. ⇨ Continue with CA13
☐ *No. ⇨ Go to CA14*

CA13. The last time *(name)* passed stools, what was done to dispose of the stools?	Child used toilet/latrine ..... 01 Put/rinsed into toilet or latrine ..... 02 Put/rinsed into drain or ditch ..... 03 Thrown into garbage (solid waste) ..... 04 Buried ..... 05 Left in the open ..... 06 Other (*specify*) ..... 96 DK 98
Ask the following question (CA14) only once for each mother/caretaker. 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? Keep asking for more signs or symptoms until the mother/caretaker cannot recall any additional symptoms. Circle all symptoms mentioned, But do NOT prompt with any suggestions.	Child not able to drink or breastfeed ..... A Child becomes sicker ..... B Child develops a fever ..... C Child has fast breathing ..... D Child has difficult breathing ..... E Child has blood in stool ..... F Child is drinking poorly ..... G Other (*specify*) ..... X Other (*specify*) ..... Y Other (*specify*) ..... Z

IMMUNIZATION MODULE IM

If an immunization card is available, copy the dates in IM2-IM8 for each type of immunization or vitamin A dose 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.

IM1. Is there a vaccination card for (*name*)?	Yes, seen 1	
	Yes, not seen..... 2	2⇨IM10
	No 3	3⇨IM10

(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.			Date of Immunization	
			DAY	MONTH	YEAR
IM2.	BCG	BCG			
IM3a.	Polio at birth	OPV0			
IM3b.	Polio 1	OPV1			
IM3c.	Polio 2	OPV2			
IM3d.	Polio 3	OPV3			
IM4a.	DPT1	DPT1			
IM4b.	DPT2	DPT2			
IM4c.	DPT3	DPT3			
IM5a.	HepB1 (or DPTHepB1)	(DPT)H1			
IM5b.	HepB2 (or DPTHepB2)	(DPT)H2			
IM5c.	HepB3 (or DPTHepB3)	(DPT)H3			
IM6.	Measles (or MMR)	Measles			
IM8a.	Vitamin A (1)	VitA1			
IM8b.	Vitamin A (2)	VitA2			

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? Record 'Yes' only if respondent mentions BCG, OPV 0-3, DPT 1-3, Hepatitis B 1-3, Measles, Yellow Fever vaccine(s), or Vitamin A supplements.	Yes ..... 1 (Probe for vaccinations and write '66' in the corresponding day column on IM2 to IM8B.) No ..... 2 DK..... 8	1⇨IM19 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?	Yes ..... 1 No ..... 2 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?	Yes ..... 1 No ..... 2 DK 8	
IM12. Has (*name*) ever been given any "vaccination drops in the mouth" to protect him/her from getting diseases – that is, polio?	Yes ..... 1 No ..... 2 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 Later 2	
IM14. How many times has he/she been given these drops?	No. of times ..... __ __	
IM15. Has (*name*) ever been given "DPT vaccination injections" – 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)	Yes ..... 1 No ..... 2 DK 8	2⇨IM17 8⇨IM17
IM16. How many times?	No. of times ..... __ __	
IM17. Has (*name*) ever been given "Measles vaccination injections" or MMR – that is, a shot in the arm at the age of **9** months or older – to prevent him/her from getting measles?	Yes ..... 1 No ..... 2 DK 8	

IM19. Please tell me if (*name*) has participated in any of the following campaigns, national immunization days and/or vitamin A or child health days:

		Y	N	DK
IM19a. *Date/type of campaign A*	*Campaign A*	1	2	8
IM19b. Date/type of campaign B	*Campaign B*	1	2	8
IM19c. Date/type of campaign C	*Campaign C*	1	2	8

IM20. *Does another eligible child reside in the household for whom this respondent is mother/caretaker? Check household listing, column HL8.*

☐ *Yes.* ⇨ *End the current questionnaire and then Go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE to administer the questionnaire for the next eligible child.*

☐ *No.* ⇨ *End the interview with this respondent by thanking him/her for his/her cooperation. If this is the last eligible child in the household, go on to ANTHROPOMETRY MODULE.*

ANTHROPOMETRY MODULE AN

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 before recording measurements.

AN1. Child's weight.	Kilograms (kg) ..... __ __ . __
AN2. Child's length or height. Check age of child in UF11: ☐ Child under 2 years old. ⇨ Measure length (lying down). ☐ Child age 2 or more years. ⇨ Measure height (standing up).	Length (cm) Lying down ..... 1 __ __ __ . __ Height (cm) Standing up ..... 2 __ __ __ . __
AN3. Measurer's identification code.	Measurer code ..... __ __
AN4. Result of measurement.	Measured ..... 1 Not present ..... 2 Refused ..... 3 Other (*specify*) 6

AN5. Is there another child in the household who is eligible for measurement?
☐ Yes. ⇨ Record measurements for next child.
☐ No. ⇨ End the interview with this household by thanking all participants for their cooperation. Gather together all questionnaires for this household and check that all identification numbers are inserted on each page. Tally on the Household Information Panel the number of interviews completed.

Kyrgyzstan

Multiple Indicator Cluster Survey

2006