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Qatar Multiple Indicator Cluster Survey 2023

Survey Findings Report

December - 2024

MICS

ENERATING EVIDENCE TO DELIVER FOR CHILDREN

Qatar

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Survey Findings Report

December, 2024

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The Qatar Multiple Indicator Cluster Survey (MICS) was carried out in 2023 by National Planning Council (NPC) in collaboration with UNICEF, as part of the Global MICS Programme, with Government funding and technical support provided by the United Nations Children's Fund (UNICEF).

The Global MICS Programme was developed by UNICEF in the 1990s as an international multi-purpose household survey programme to support countries in collecting internationally comparable data on a wide range of indicators on the situation of children and women. MICS surveys measure key indicators that allow countries to generate data for use in policies, programmes, and national development plans, and to monitor progress towards the Sustainable Development Goals (SDGs) and other internationally agreed upon commitments.

The objective of this report is to facilitate the timely dissemination and use of results from the Qatar MICS 2023. The report contains detailed information on the survey methodology, and all standard MICS tables. The report is accompanied by a series of Statistical Snapshots of the main findings of the survey.

For more information on the Global MICS Programme, please go to mics.unicef.org.

Suggested citation:

National Planning Council (NPC). 2024. *Qatar Multiple Indicator Cluster Survey 2023, Survey Findings Report*. Doha, Qatar: National Planning Council.

SUMMARY TABLE OF SURVEY IMPLEMENTATION AND THE SURVEY POPULATION

Survey sample and implementation			
Sample frame	Qatar 2020 Census of Population, Housing and Establishments 2020	**Questionnaires**	Household Women (age 15-49) Men (age 15-49) Children under five Children age 5-17
Interviewer training	28 May - 8 June 2023	**Fieldwork**	June - August 2023

Survey sample			
Households		Children under five	
- Sampled	6,000	- Eligible	2,985
- Occupied	5,991	- Mothers/caretakers interviewed	2,964
- Interviewed	5,854	- Response rate (Per cent)	99.3
- Response rate (Per cent)	97.6		
Women (age 15-49)		Children age 5-17	
- Eligible for interviews	7,468	- Number in interviewed households	7,553
- Interviewed	7,381	- Eligible[1]	3,342
- Response rate (Per cent)	98.8	- Mothers/caretakers interviewed	3,322
		- Response rate (Per cent)	99.4
Men (age 15-49)			
- Number in interviewed households	7,138		
- Eligible for interviews[2]	3,540		
- Interviewed	3,437		
- Response rate (Per cent)	97.1		

Survey population			
Average household size	4.7	**Percentage of**	
		- Qatari population	18.4
Percentage of population under:		- Non-Qatari population	81.6
- Age 5	11.5		
- Age 18	38.3		
Percentage of women age 15-49 years with at least one live birth in the last 2 years	15.5		

[1] The Questionnaire for Children age 5-17 was administered to one randomly selected child in each interviewed household

[2] The Individual Questionnaire for Men was administered to all men age 15-49 years in every second household

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LIST OF ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ANAR	Adjusted Net Attendance Rate
ARI	Acute Respiratory Infection
C-section	Caesarean section
CAPI	Computer-Assisted Personal Interviewing
CRC	Convention on the Rights of the Child
CSPro	Census and Survey Processing System
DIRC	Data Interpretation and Report Compilation (Workshop)
DTP	Diphtheria, Tetanus and Pertussis
ECDI	Early Child Development Index
FCT	Field Check Table
g	Grams
GAM	Global AIDS Monitoring
GPI	Gender Parity Index
ICT	Information and Communication Technology
IFSS	Internet File Streaming System
ISCED	International Standard Classification of Education
IYCF	Infant and Young Child Feeding
LBW	Low birth weight
LPG	Liquefied Petroleum Gas
MDG	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MICS6	Sixth global round of Multiple Indicator Clusters Surveys programme
MoH	Ministry of Public Heath
NPC	National Planning Council
ORS	Oral Rehydration Salt Solution
ORT	Oral Rehydration Therapy
PNC	Post-natal Care
SDGs	Sustainable Development Goals
SPSS	Statistical Package for Social Sciences
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
WG	Washington Group on Disability Statistics
WHO	World Health Organization

ACKNOWLEDGEMENTS

The Multiple Indicator Cluster Survey (MICS) is designed to collect statistically robust and internationally comparable data on key indicators used to assess the situation of children and women in the areas of health, nutrition, education, water and sanitation, child protection and general well-being. The MICS also generates data to monitor Qatar's progress towards its global commitments such as the Sustainable Development Goals (SDGs) and provides critical indicators for measuring human development.

In presenting the report of the results of the Multiple Indicator Cluster Survey in Qatar 2023, the Council wishes to express its gratitude and appreciation to all those who contributed directly or indirectly to the design and conduct of the survey, the preparation of this report and the publication of the results, especially UNICEF for its support and technical supervision to complete this survey as required, and thanks to all participants from the staff of the National Planning Council, especially the staff working in the Department of Censuses, Surveys and Statistical Methods.

We appreciate the dedication, hard work and professionalism of the survey staff for their efforts in implementing this survey at every stage, our special gratitude goes to all the people who participated in the fieldwork, especially the female researchers who worked tirelessly as frontline data collection staff across the country, and we also appreciate the contributions of the members of the survey technical and steering committees and other relevant ministries.

The National Planning Council remains committed to working with authorities and partners to ensure that high-quality and timely data is available to support policies and programs and monitor progress towards the well-being of residents in Qatar, and we promise to continue providing services to children in Qatar.

H.E. Mr. Abdulaziz Bin Nasser Al Khalifa
President of The Civil Service and Government Development Bureau
Secretary General of The National Planning Council

1 INTRODUCTION

This report is based on the Qatar Multiple Indicator Cluster Survey (MICS), conducted in 2023 by the National Planning Council (NPC). The survey provides statistically sound and internationally comparable data essential for developing evidence-based policies and programmes, and for monitoring progress towards national goals and global commitments.

A Commitment to Action: National and International Reporting Responsibilities

More than two decades ago, the **Plan of Action for Implementing the World Declaration on the Survival, Protection and Development of Children in the 1990s** called for:

> *"Each country should establish appropriate mechanisms for the regular and timely collection, analysis and publication of data required to monitor relevant social indicators relating to the well-being of children …. Indicators of human development should be periodically reviewed by national leaders and decision makers, as is currently done with indicators of economic development…"*

The Multiple Indicator Cluster Surveys programme was developed soon after, in the mid-1990s, to support countries in this endeavour.

Governments that signed the **World Fit for Children Declaration and Plan of Action** also committed themselves to monitoring progress towards the goals and objectives:

> *"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" (**A World Fit for Children**, paragraph 60)*

Similarly, the **Millennium Declaration** (paragraph 31) called 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."*

The General Assembly Resolution, adopted on 25 September 2015, "**Transforming Our World: the 2030 Agenda for Sustainable Development**" stipulates that for the success of the universal SDG agenda,

> *"quality, accessible, timely and reliable disaggregated data will be needed to help with the measurement of progress and to ensure that no one is left behind" (paragraph 48);* recognizes that *"…baseline data for several of the targets remains unavailable..."* and calls for *"…strengthening data collection and capacity building in Member States..."*

The Qatar MICS 2023 results are critically important for the purposes of SDG monitoring, as the survey produces information on 17 global SDG indicators, either in their entirety or partially.

The Qatar MICS 2023 has as its primary objectives:

- To provide high quality data for assessing the situation of children, adolescents, women and households in Qatar;
- To furnish data needed for monitoring progress toward national goals, as a basis for future action;

- To collect disaggregated data for the identification of disparities, to inform policies aimed at social inclusion of the most vulnerable.
- To validate data from other sources and the results of focused interventions;
- To generate data on national and global SDG indicators;
- To generate internationally comparable data for the assessment of the progress made in various areas, and to put additional efforts in those areas that require more attention;
- To generate behavioural and attitudinal data not available in other data sources.

This report presents the results of the Qatar MICS 2023. Following Chapter 2 on survey organisation and methodology, including sample design and implementation, all indicators covered by the survey, with their definitions, are presented in "Indicators and definitions". Prior to presenting the survey results, organized into thematic chapters, the coverage of the sample and the main characteristics of respondents is covered in Chapter 4, "Sample coverage and characteristics of respondents". From Chapter 5, all survey results are presented in six thematic chapters. In each chapter, a brief introduction of the topic and the description of all tables, are followed by the tabulations.

This is followed by Chapter 5, "Thrive – Reproductive and maternal health", which presents findings on early childbearing, antenatal care, neonatal tetanus, delivery care, birthweight, and HIV.

The following chapter, "Thrive – Child health, nutrition and development" presents findings on immunization, disease episodes, diarrhoea, household energy use, symptoms of acute respiratory infection, fever, infant and young child feeding, and early childhood development.

Learning is the topic of the next chapter, where survey findings on early childhood education, educational attendance, and paternal involvement in children's education are covered.

The next chapter, "Protected from violence and exploitation", includes survey results on child discipline, child marriage, victimisation, and feelings of safety.

The final thematic chapter is on equity – titled "Equitable chance in life", the chapter presents findings on a range of equity related topics, including child functioning, social transfers, discrimination and harassment, and subjective well-being.

The report ends with appendices, with detailed information on sample design, personnel involved in the survey, estimates of sampling errors, data quality, and the questionnaires used.

2 SURVEY ORGANISATION AND METHODOLOGY

2.1 SURVEY ORGANISATION

The Qatar MICS 2023 was implemented by a Survey Management Team formed and led by the Department of Censuses, Surveys and Statistical Methods of the National Planning Council (NPC), State of Qatar. Oversight was provided by a Steering Committee and technical decisions and processes were guided and supported by a Technical Committee. The Global MICS Team of UNICEF provided on and off-site support and reviews during key phases of the survey as per the standard Technical Collaboration Framework of the global MICS programme and the Memorandum of Understanding between the NPC and UNICEF.

2.2 SAMPLE DESIGN

The sample for the Qatar MICS 2023 was designed to provide estimates for a large number of indicators on the situation of children and women at the national level, and for Qatari and non-Qatari populations. Qatar has two particularities in respect to its population and its housing arrangements. These have an important bearing on the sample design of household surveys. One of the particularities is the high proportion of non- Qatari population, living in dispersed areas generally distinct from residential areas of Qataris. Another particularity is the existence of many collective housing quarters where non-Qatari workers live in units provided by employers or rented directly from landlords.

Because of these features, the commonly used methodology of multistage area sampling with a single set of PSUs is not efficient. Primary sampling units (PSUs) defined as area segments selected in the first stage may not contain enough households of either type, Qatari and non-Qatari. For these reasons, the sample design was based on independent samples drawn from distinct sets of specially constructed PSUs, which together cover the entire nation. Each set of PSUs was designed to include a target number of households of given type, namely:

(i) Qatari regular households,
(ii) Non-Qatari regular households.

Separate area frames were constructed for Qatari households and non-Qatari households, and each frame was treated as an individual stratum. The Qatari PSUs consist of a list of contiguous Qatari households in the same or adjacent blocks, and the non-Qatari PSUs consist of a list of contiguous non-Qatari households in the same or adjacent blocks.

A multi-stage, stratified cluster sampling approach was used for the selection of the survey sample. The sampling frame was based on the 2020 Qatar Census of Population and Housing. In the first stage, a systematic random sample of PSUs is drawn with probability proportional to size (the measure of size is based on the number of HHs in each PSU) from the two area frames based on the latest census.

After selecting the sample PSUs from each of the two area frames, a systematic sample of 20 households was drawn in each PSU. As the sample is not self-weighting sample weights are used for reporting survey results.

Population groups excluded from the survey include non-citizens visiting for a short period, individuals (citizens and non-citizens) who are institutionalised and individuals living in small or large labour gatherings. Domestic servants are considered household members but were not eligible for individual interviews. As the sample design relies on the census listing, new dwellings established since 2020 are also excluded.

A more detailed description of the sample design can be found in Appendix A: Sample Design.

2.3 QUESTIONNAIRES

Five questionnaires were used in the survey: 1) a household questionnaire to collect basic demographic information on all *de jure* household members (usual residents), the household, and the dwelling; 2) a questionnaire for individual women administered in each household to all women age 15-49 years; 3) a questionnaire for individual men administered in every second household to all men age 15-49 years; 4) an under-5 questionnaire, administered to mothers (or caretakers) of all children under 5 living in the household; and 5) a questionnaire for children age 5-17 years, administered to the mother (or caretaker) of one randomly selected child age 5-17 years living in the household.[3] The questionnaires included the following modules:

Household Questionnaire
List of Household Members
Education
Household Characteristics
Social Transfers
Household Energy Use
Phone call back

Questionnaire for Individual Women / Men
Woman's Background[M]
Mass Media and ICT [M]
Marriage[M]
Fertility
Desire for Last Birth
Maternal and Newborn Health
Unmet Need
Victimisation[M]
Adult Functioning[M]
HIV/AIDS[M]
Life Satisfaction[M]

[M] The individual Questionnaire for Men only included those modules indicated.

Questionnaire for Children Age 5-17 Years
Child's Background
Child Discipline
Child Functioning
Parental Involvement

Questionnaire for Children Under 5
Under-Five's Background
Early Childhood Development
Child Discipline
Child Functioning
Breastfeeding and Dietary Intake
Care of Illness
MICS Link (immunization and child growth)

The Qatar MICS 2023 also piloted an innovative approach to link household surveys to administrative records ("MICS Link"). Caregivers of children under five were asked for consent to obtain information on immunisation and child growth from administrative records maintained by the Ministry of Health. The findings from the child growth data will be covered in a separate report.

The questionnaires were based on the MICS6 standard questionnaires.[4] From the MICS6 model English version, the questionnaires were customised and translated into Arabic and were pre-tested in 100 households in Doha during April 2022. Based on the results of the pre-test, modifications were made to the wording and translation of the questionnaires. A copy of the Qatar MICS 2023 questionnaires is provided in Appendix E in English.

[3] Children age 15-17 years living without their mother and with no identified caretaker in the household were considered emancipated and the questionnaire for children age 5-17 years was administered directly to them. This slightly reworded questionnaire that only includes the Child's Background, Child Labour and Child Functioning modules is not reproduced in Appendix E.

[4] http://mics.unicef.org/tools#survey-design

2.4 ETHICAL PROTOCOL

The survey protocol was approved by Health Media Lab, Inc. HML Institutional Review Board on July 6th, 2022 (ref: HML IRB Review #583QTAR22). The protocol included a Protection Protocol which outlines the potential risks during the life cycle of the survey and management strategies to mitigate these.

Verbal consent was obtained for each respondent participating and, for children age 15-17 years individually interviewed, adult consent was obtained in advance of the child's assent. All respondents were informed of the voluntary nature of participation and the confidentiality and anonymity of information. Additionally, respondents were informed of their right to refuse answering all or particular questions, as well as to stop the interview at any time.

Consent was requested for phone numbers to conduct call backs to households for the purposes of data quality assurance and verifying information collected during the face-to-face interviews.

2.5 DATA COLLECTION METHOD

MICS surveys utilise Computer-Assisted Personal Interviewing (CAPI). The data collection application was based on the CSPro (Census and Survey Processing System) software, Version 7.6, including a MICS dedicated data management platform. Procedures and standard programs[5] developed under the global MICS programme were adapted to the Qatar MICS 2023 final questionnaires and used throughout. The CAPI application was tested in the main training during June 2023. Based on the results of the CAPI-test, modifications were made to the questionnaires and application.

2.6 TRAINING

Training for the fieldwork was conducted for 12 days in May/June 2023. Training included lectures on interviewing techniques and the contents of the questionnaires, and mock interviews between trainees to gain practice in asking questions. Participants first completed full training on paper questionnaires, followed by training on the CAPI application. The trainees spent three days in field practice and one day on a full pilot survey in some PSUs in Doha. The training agenda was based on the template MICS6 training agenda.[6] Field Supervisors attended additional training on the duties of team supervision and responsibilities.

2.7 FIELDWORK

The data were collected by 12 teams; each was comprised of two interviewers, one driver and a supervisor. Fieldwork began in June and concluded in August 2023.

Data was collected using tablet and laptop computers running the Windows 10 operating system, utilising a Bluetooth application for field operations, enabling transfer of assignments and completed questionnaires between supervisor and interviewer tablets.

[5] http://mics.unicef.org/tools#data-processing

[6] http://mics.unicef.org/tools#survey-design

2.8 FIELDWORK QUALITY CONTROL MEASURES

Team supervisors were responsible for the daily monitoring of fieldwork. Mandatory re-interviewing was implemented on one household per cluster. Daily observations of interviewer skills and performance was conducted.

During the fieldwork period, each team was visited multiple times by survey management team members and field visits were arranged for UNICEF MICS Team members.

Throughout the fieldwork, field check tables (FCTs) were produced weekly for analysis and action with field teams. The FCTs were customised versions of the standard tables produced by the MICS Programme.[7]

The Call Center at the NPC was also used to verify the quality of the information collected during personal field interviews, through call Center contact with random samples of the surveyed Households, with the aim of ensuring that the field researchers reached them and that the information they had completed was correct. This center operated two shifts, morning and evening, with a total of 8 workers, during the entire field work period.

2.9 DATA MANAGEMENT AND EDITING

Data were received at the NPC's central office via CSWeb System integrated into the management application on the supervisors' tablets. Whenever logistically possible, synchronisation was daily. The central office communicated application updates to field teams through this system.

During data collection and following the completion of fieldwork, data were edited according to editing process described in detail in the Data Editing Guidelines, a customised version of the standard MICS6 documentation.[8]

As part of the data editing process, the call centre at NPC was also utilised to verify information collected during face-to-face interviews.

2.10 ANALYSIS AND REPORTING

Sample weights and background characteristics were computed and added to the final data. Analysis was done using the Statistical Package for Social Sciences (SPSS) software, Version 29. Model syntax and tabulation plan developed by UNICEF were customised and used for this purpose.[9]

The Survey Findings Report and accompanying Statistical Snapshots were drafted based on the templates developed by the global MICS Programme[10]. These were presented and reviewed by subject matter experts during the Data Interpretation and Report Compilation (DIRC) Workshop held in Doha on 25-28 February 2024. The finalisation of the Survey Findings Report and Statistical Snapshots was managed by the Survey Management Team with guidance from the Technical Committee and the participants in the DIRC Workshop.

The following documents are also available to complement this Survey Findings Report:

[7] http://mics.unicef.org/tools#data-collection
[8] http://mics.unicef.org/tools#data-processing
[9] http://mics.unicef.org/tools#analysis
[10] http://mics.unicef.org/tools#reporting

1. Survey Findings Report (Arabic)
2. Statistical Snapshots (English)
3. Statistical Snapshots (Arabic)

2.11 DATA SHARING

Unique identifiers such as location and personal details collected during interviews were removed from datasets to ensure privacy. These anonymised data files are made available on NPC website and on the MICS website[11] and can be freely downloaded for legitimate research purposes. Users are required to submit final research to entities listed in the included readme file, strictly for information purposes.

[11] http://mics.unicef.org/surveys

3 INDICATORS AND DEFINITIONS

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
SAMPLE COVERAGE AND CHARACTERISTICS OF THE RESPONDENTS					
SR.1	Access to electricity	7.1.1	HC	Percentage of household members with access to electricity	100.0
SR.3	Exposure to mass media		MT	Percentage of women and men age 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television Women Men	 6.6 10.5
SR.10	Ownership of mobile phone	5.b.1	MT	Percentage of women and men age 15-49 years who own a mobile phone Women Men	 99.8 99.9
SR.12a SR.12b	Use of internet	17.8.1	MT	Percentage of women and men age 15-49 years who used the internet Women (a) during the last 3 months (b) at least once a week during the last 3 months Men (a) during the last 3 months (b) at least once a week during the last 3 months	 97.7 95.4 98.5 96.0

[12] Sustainable Development Goal (SDG) Indicators, http://unstats.un.org/sdgs/indicators/indicators-list/. The Inter-agency Working Group on SDG Indicators is continuously updating the metadata of many SDG indicators and changes are being made to the list of SDG indicators. MICS covers many SDG indicators with an exact match of their definitions, while some indicators are only partially covered by MICS. The latter cases are included here as long as the current international methodology allows for only the way that the MICS indicator is defined, and/or a significant part of the SDG indicator can be generated by the MICS indicator. For more information on the metadata of the SDG indicators, see http://unstats.un.org/sdgs/metadata/

[13] Some indicators are constructed by using questions in several modules in the MICS questionnaires. In such cases, only the module(s) which contains most of the necessary information is indicated.

[14] All MICS indicators are or can be disaggregated, where relevant, by wealth quintiles, sex, age, ethnicity, migratory status, disability and geographic location (as per the reporting domains), or other characteristics, as recommended by the Inter-agency Expert Group on SDG Indicators: http://unstats.un.org/sdgs/indicators/Official%20List%20of%20Proposed%20SDG%20Indicators.pdf

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
SR.13a SR.13b	ICT skills	4.4.1	MT	Percentage of women and men who have carried out at least one of nine specific computer related activities during the last 3 months Women (a) age 15-24 (b) age 15-49 Men (a) age 15-24 (b) age 15-49	 88.8 84.6 87.0 90.2
SR.18	Children's living arrangements		HL	Percentage of children age 0-17 years living with neither biological parent	0.1
SR.19	Prevalence of children with one or both parents' dead		HL	Percentage of children age 0-17 years with one or both biological parents dead	1.4
SR.20	Children with at least one parent living abroad		HL	Percentage of children age 0-17 years with at least one biological parent living abroad	1.6
THRIVE - REPRODUCTIVE AND MATERNAL HEALTH					
TM.2	Early childbearing		CM	Percentage of women age 20-24 years who have had a live birth before age 18	0.3
TM.5a TM.5b TM.5c	Antenatal care coverage	3.8.1	MN	Percentage of women age 15-49 years with a live birth in the last 2 years who during the pregnancy of the most recent live birth were attended (a) at least once by skilled health personnel (b) at least four times by any provider (c) at least eight times by any provider	 100.0 98.2 68.4
TM.6	Content of antenatal care		MN	Percentage of women age 15-49 years with a live birth in the last 2 years who during the pregnancy of the most recent live birth, at least once, had blood pressure measured and gave urine and blood samples as part of antenatal care	100.0
TM.7	Neonatal tetanus protection		MN	Percentage of women age 15-49 years with a live birth in the last 2 years who during the pregnancy of the most recent live birth were given at least two doses of tetanus toxoid containing vaccine or had received the appropriate number of doses with appropriate interval[15] prior to the most recent birth	10.9
TM.8	Institutional deliveries		MN	Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered in a health facility	100.0
TM.9	Skilled attendant at delivery	3.1.2	MN	Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was attended by skilled health personnel	100.0

[15] See Table TM.5.1 for a detailed description

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
TM.10	Caesarean section		MN	Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered by caesarean section	32.0
TM.11	Children weighed at birth		MN	Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live-born child was weighed at birth	98.9
TM.29	Comprehensive knowledge about HIV prevention among young people		HA	Percentage of women and men age 15-24 years who correctly identify the two ways of preventing the sexual transmission of HIV[16], who know that a healthy-looking person can be HIV-positive and who reject the two most common misconceptions about HIV transmission Women Men	 76.2 74.7
TM.30a	Knowledge of mother-to-child transmission of HIV		HA	Percentage of women and men age 15-49 years who correctly identify all three means[17] of mother-to-child transmission of HIV Women Men	 72.2 77.6
THRIVE - CHILD HEALTH, NUTRITION AND DEVELOPMENT					
TC.1	Tuberculosis immunization coverage		IM	Percentage of children age 12-23 months who received BCG containing vaccine at any time before the survey	100.0
TC.2	Polio immunization coverage		IM	Percentage of children age 12-23 months who received at least one dose of Inactivated Polio Vaccine (IPV) and the third/fourth dose of either IPV or Oral Polio Vaccine (OPV) vaccines at any time before the survey	97.8
TC.3	Diphtheria, tetanus and pertussis (DTP) immunization coverage	3.b.1 & 3.8.1	IM	Percentage of children age 12-23 months who received the third dose of DTP containing vaccine (DTP3) at any time before the survey	97.4
TC.4	Hepatitis B immunization coverage		IM	Percentage of children age 12-23 months who received the third/fourth dose of Hepatitis B containing vaccine (HepB3) at any time before the survey	97.4
TC.5	Haemophilus influenzae type B (Hib) immunization coverage		IM	Percentage of children age 12-23 months who received the third dose of Hib containing vaccine (Hib3) at any time before the survey	97.4
TC.6	Pneumococcal (Conjugate) immunization coverage	3.b.1	IM	Percentage of children age 12-23 months who received the third dose of Pneumococcal (Conjugate) vaccine (PCV3) at any time before the survey	97.0

[16] Using condoms and limiting sex to one faithful, uninfected husband

[17] Transmission during pregnancy, during delivery, and by breastfeeding

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
TC.7	Rotavirus immunization coverage		IM	Percentage of children age 12-23 months who received the second/third dose of Rotavirus vaccine (Rota2/3) at any time before the survey	97.2
TC.8	Rubella immunization coverage		IM	Percentage of children age 24-35 months who received rubella containing vaccine at any time before the survey	90.1 97.9
TC.10	Measles immunization coverage	3.b.1	IM	Percentage of children age 24-35 months who received the second measles containing vaccine at any time before the survey	96.0
TC.11a TC.11b	Full immunization coverage[18]		IM	Percentage of children who at age a) 12-23 months had received all basic vaccinations at any time before the survey b) 24-35 months had received all vaccinations recommended in the national immunization schedule	 90.1 97.0
TC.12	Care-seeking for diarrhoea		CA	Percentage of children under age 5 with diarrhoea in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	77.6
TC.13a TC.13b	Diarrhoea treatment with oral rehydration salt solution (ORS) and zinc		CA	Percentage of children under age 5 with diarrhoea in the last 2 weeks who received. a) ORS b) ORS and zinc	62.6 14.1
TC.14	Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding		CA	Percentage of children under age 5 with diarrhoea in the last 2 weeks who received ORT (ORS packet, pre-packaged ORS fluid, recommended homemade fluid or increased fluids) and continued feeding during the episode of diarrhoea	49.3
TC.15	Primary reliance on clean fuels and technologies for cooking		EU	Percentage of household members with primary reliance on clean fuels and technologies for cooking (living in households that reported cooking)	100.0
TC.19	Care-seeking for children with acute respiratory infection (ARI) symptoms	3.8.1	CA	Percentage of children under age 5 with ARI symptoms in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	(*)
TC.20	Antibiotic treatment for children with ARI symptoms		CA	Percentage of children under age 5 with ARI symptoms in the last 2 weeks who received antibiotics	(*)

[18] Basic vaccinations include: BCG, one dose of polio, Penta, and one dose of measles vaccination. All vaccinations include all doses of vaccinations recommended for children under age 2 years in the national schedule.

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
TC.26	Care-seeking for fever		CA	Percentage of children under age 5 with fever in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	64.0
TC.30	Children ever breastfed		MN	Percentage of most recent live-born children to women with a live birth in the last 2 years who were ever breastfed	93.6
TC.31	Early initiation of breastfeeding		MN	Percentage of most recent live-born children to women with a live birth in the last 2 years who were put to the breast within one hour of birth	61.3
TC.32	Exclusive breastfeeding under 6 months		BD	Percentage of infants under 6 months of age who are exclusively breastfed[19]	45.4
TC.33	Predominant breastfeeding under 6 months		BD	Percentage of infants under 6 months of age who received breast milk as the predominant source of nourishment[20] during the previous day	51.4
TC.34	Continued breastfeeding at 1 year		BD	Percentage of children age 12-15 months who received breast milk during the previous day	52.4
TC.35	Continued breastfeeding at 2 years		BD	Percentage of children age 20-23 months who received breast milk during the previous day	49.6
TC.36	Duration of breastfeeding		BD	The age in months when 50 percent of children age 0-35 months did not receive breast milk during the previous day	20.5
TC.37	Age-appropriate breastfeeding		BD	Percentage of children age 0-23 months appropriately fed[21] during the previous day	54.9
TC.38	Introduction of solid, semi-solid or soft foods		BD	Percentage of infants age 6-8 months who received solid, semi-solid or soft foods during the previous day	79.2
TC.39a TC.39b	Minimum acceptable diet		BD	Percentage of children age 6–23 months who had at least the minimum dietary diversity and the minimum meal frequency during the previous day (a) breastfed children (b) non-breastfed children	 34.9 43.7
TC.40	Milk feeding frequency for non-breastfed children		BD	Percentage of non-breastfed children age 6-23 months who received at least 2 milk feedings during the previous day	89.3

[19] Infants receiving breast milk, and not receiving any other fluids or foods, with the exception of oral rehydration solution, vitamins, mineral supplements and medicines

[20] Infants who receive breast milk and certain fluids (water and water-based drinks, fruit juice, ritual fluids, oral rehydration solution, drops, vitamins, minerals, and medicines), but do not receive anything else (in particular, non-human milk and food-based fluids)

[21] Infants age 0-5 months who are exclusively breastfed, and children age 6-23 months who are breastfed and ate solid, semi-solid or soft foods

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
TC.41	Minimum dietary diversity		BD	Percentage of children age 6–23 months who received foods from 5 or more food groups[22] during the previous day	55.8
TC.42	Minimum meal frequency		BD	Percentage of children age 6-23 months who received solid, semi-solid and soft foods (plus milk feeds for non-breastfed children) the minimum number of times[23] or more during the previous day	61.8
TC.43	Bottle feeding		BD	Percentage of children age 0-23 months who were fed with a bottle during the previous day	59.0
TC.49a TC.49b TC.49c	Early stimulation and responsive care		EC	Percentage of children age 24-59 months engaged in four or more activities to provide early stimulation and responsive care in the last 3 days with (a) Any adult household member (b) Father (c) Mother	 97.3 82.2 86.7
TC.50	Availability of children's books		EC	Percentage of children under age 5 who have three or more children's books	27.6
TC.51	Availability of playthings		EC	Percentage of children under age 5 who play with two or more types of playthings	99.5
TC.52	Inadequate supervision		EC	Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once in the last week	11.3
TC.53	Early child development index	4.2.1	EC	Percentage of children age 36-59 months who are developmentally on track in at least three of the following four domains: literacy-numeracy, physical, social-emotional, and learning	84.5
LEARN					
LN.1	Attendance to early childhood education		UB	Percentage of children age 36-59 months who are attending an early childhood education programme	84.3
LN.2	Participation rate in organised learning (one year before the official primary entry age) (adjusted)	4.2.2	ED	Percentage of children in the relevant age group (one year before the official primary school entry age) who are attending an early childhood education programme or primary school	99.7
LN.3	School readiness		ED	Percentage of children attending the first grade of primary school who attended early childhood education programme during the previous school year	95.0

[22] The indicator is based on consumption of any amount of food from at least 5 out of the 8 following food groups: 1) breastmilk, 2) grains, roots and tubers, 3) legumes and nuts, 4) dairy products (milk, infant formula, yogurt, cheese), 5) flesh foods (meat, fish, poultry and liver/organ meats), 6) eggs, 7) vitamin-A rich fruits and vegetables, and 8) other fruits and vegetables

[23] Breastfeeding children: Solid, semi-solid, or soft foods, two times for infants age 6-8 months, and three times for children 9-23 months; Non-breastfeeding children: Solid, semi-solid, or soft foods, or milk feeds, four times for children age 6-23 months

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
LN.4	Net intake rate in primary education		ED	Percentage of children of school-entry age who enter the first grade of primary school	89.8
LN.5a LN.5b LN.5c	Net attendance rate (adjusted)		ED	Percentage of children of (1) primary school age currently attending primary, lower or upper secondary school (2) lower secondary school age currently attending lower secondary school or higher (3) upper secondary school age currently attending upper secondary school or higher	 99.8 100.0 na
LN.6a LN.6b LN.6c	Out-of-school rate		ED	Percentage of children of (1) primary school age who are not attending any level of education (2) lower secondary school age who are not attending any level of education (3) upper secondary school age who are not attending any level of education	 0.0 0.0 na
LN.8a LN.8b LN.8c	Completion rate	4.1.2	ED	Percentage of children age 3-5 years above the intended age for the last grade who have completed that grade (1) Primary school (2) Lower secondary school (3) Upper secondary school	96.7 na na
LN.9	Effective transition rate to lower secondary school		ED	Percentage of children attending the last grade of primary school during the previous school year and not repeating in the current school year who are attending the first grade of lower secondary school in the current school year	100.0
LN.10a LN.10b	Over-age for grade		ED	Percentage of children attending school who are at least 2 years above the intended age for grade (1) Primary school (2) Lower secondary school	 0.0 0.0
LN.11a	Education Parity Indices (1) Gender	4.5.1	ED	Net attendance rate (adjusted) for girls divided by net attendance rate (adjusted) for boys (1) Organised learning (one year younger than the official primary school entry age) (2) Primary school (3) Lower secondary school (4) Upper secondary school	 0.97 1.00 1.00 na
LN.19	Reading habit at home		FL	Percentage of children age 7-14 years who read books or are read to at home	74.5
LN.20	School and home languages		FL	Percentage of children age 7-14 years attending school who at home speak the language that teachers use at school	74.6
PROTECTED FROM VIOLENCE AND EXPLOITATION					
PR.2	Violent discipline	16.2.1	UCD – FCD	Percentage of children age 1-14 years who experienced any physical punishment and/or psychological aggression by caregivers in the past one month	37.6

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
PR.4a PR.4b	Child marriage	5.3.1	MA	Percentage of women and men age 20-24 years who were first married Women (a) before age 15 (b) before age 18 Men (a) before age 15 (b) before age 18	 0.0 1.7 0.0 0.2
PR.5	Young people age 15-19 years currently married		MA	Percentage of women and men age 15-19 years who are married Women Men	 1.4 0.0
PR.6	Polygyny		MA	Percentage of women and men age 15-49 years who are in a polygynous union Women Men	 1.2 0.9
PR.7a PR.7b	Spousal age difference		MA	Percentage of women who are married and whose spouse is 10 or more years older (a) age 15-19 years (b) age 20-24 years	 (*) 17.5
PR.12	Experience of robbery and assault		VT	Percentage of women and men age 15-49 years who experienced physical violence of robbery or assault within the last 12 months Women Men	 0.2 0.2
PR.13	Crime reporting	16.3.1	VT	Percentage of women and men age 15-49 years experiencing physical violence of robbery and/or assault in the last 12 months and reporting the last incidences of robbery and/or assault experienced to the police Women Men	 (*) (*)
PR.14	Safety	16.1.4	VT	Percentage of women and men age 15-49 years feeling safe walking alone in their neighbourhood after dark Women Men	 96.6 99.7
EQUITABLE CHANCE IN LIFE					
EQ.CS1	Children with functional difficulty		UCF – FCF	Percentage of children age 2-17 years reported with functional difficulty in at least one domain	2.8
EQ.2a EQ.2b EQ.2c	Health insurance coverage		WB CB UB	Percentage of women, men and children covered by health insurance a) women age 15-49 men age 15-49 b) children age 5-17 c) children under age 5	 100.0 100.0 100.0 100.0

MICS INDICATOR		SDG[12]	Module[13]	Definition[14]	Value
EQ.3	Population covered by social transfers	1.3.1	ST – ED	Percentage of household members living in households that received any type of social transfers and benefits in the last 3 months	2.3
EQ.5	Children in the households that received any type of social transfers		ST – ED	Percentage of children under age 18 living in the households that received any type of social transfers in the last 3 months	1.6
EQ.7	Discrimination	10.3.1 & 16.b.1	VT	Percentage of women and men age 15-49 years having personally felt discriminated against or harassed within the previous 12 months on the basis of a ground of discrimination prohibited under international human rights law Women Men	 2.6 2.2
EQ.9a EQ.9b	Overall life satisfaction index		LS	Average life satisfaction score for women and men Women (a) age 15-24 (b) age 15-49 Men (a) age 15-24 (b) age 15-49	 7.8 7.8 7.4 7.7
EQ.10a EQ.10b	Happiness		LS	Percentage of women and men who are very or somewhat happy Women (a) age 15-24 (b) age 15-49 Men (a) age 15-24 (b) age 15-49	 97.3 97.0 95.3 96.2
EQ.11a EQ.11b	Perception of a better life		LS	Percentage of women and men whose life improved during the last one year and who expect that their life will be better after one year Women (a) age 15-24 (b) age 15-49 Men (a) age 15-24 (b) age 15-49	 82.5 80.1 82.1 80.8

4 SAMPLE COVERAGE AND CHARACTERISTICS OF RESPONDENTS

4.1 RESULTS OF INTERVIEWS

Table SR.1.1 presents results of the sample implementation, including response rates. Of the 6,000 households selected for the sample, 5,991 were found occupied. Of these, 5,854 were successfully interviewed for a household response rate of 97.7 percent.

In the interviewed households, 7,468 women (age 15-49 years) were identified (this number excludes female servants). Of these, 7,381 were successfully interviewed, yielding a response rate of 98.8 percent within the interviewed households.

The survey also sampled men (age 15-49), but required only a subsample. All men (age 15-49) (excluding male servants) were identified in every second household. 7,138 men (age 15-49 years), excluding male servants, were listed in the household questionnaires. Questionnaires were completed for 3,437 eligible men, which corresponds to a response rate of 97.1 percent within eligible interviewed households.

There were 2,985 children under age five listed in the household questionnaires. Questionnaires were completed for 2,964 of these children, which corresponds to a response rate of 99.3 percent within interviewed households.

A sub-sample of children age 5-17 years was used to administer the questionnaire for children age 5-17. Only one child has been selected randomly in each household interviewed, and there were 7,553 children age 5-17 years listed in the household questionnaires. Of these, 3,342 children were selected, and questionnaires were completed for 3,322 which correspond to a response rate of 99.4 percent within the interviewed households.

Overall response rates of 96.6, 94.9, 97.0, 97.1 are calculated for the individual interviews of women, men, under-5s, and children age 5-17 years, respectively.

Table SR.1.1: Results of household, women's, men's, under-5's and children age 5-17's interviews

Number of households, women, men, children under 5, and children age 5-17 by interview results, by nationality, Qatar MICS, 2023

	Total	Nationality	
		Qatari	Non-Qatari
Households			
Sampled	6,000	3,005	2,995
Occupied	5,991	2,998	2,993
Interviewed	5,854	2,914	2,940
Household completion rate	97.6	97.0	98.2
Household response rate	97.7	97.2	98.2
Women age 15-49 years			
Eligible	7,468	3,918	3,550
Interviewed	7,381	3,873	3,508
Women's response rate	98.8	98.9	98.8
Women's overall response rate	96.6	96.1	97.1
Men age 15-49 years[A]			
Number of men in interviewed households	7138	3993	3145
Eligible	3540	1983	1557
Interviewed	3437	1927	1510
Men's response rate	97.1	97.2	97.0
Men's overall response rate	94.9	94.5	95.3
Children under 5 years			
Eligible	2,985	1,358	1,627
Mothers/caretakers interviewed	2,964	1,351	1,613
Under-5's response rate	99.3	99.5	99.1
Under-5's overall response rate	97.0	96.7	97.4
Children age 5-17 years[B]			
Number of children in interviewed households	7,553	3,915	3,638
Eligible	3,342	1,592	1,750
Mothers/caretakers interviewed	3,322	1,583	1,739
Children age 5-17's response rate	99.4	99.4	99.4
Children age 5-17's overall response rate	97.1	96.6	97.6

[A] The Individual Questionnaire for Men was administered to all men age 15-49 years in second sample household

[B] The Questionnaire for Children Age 5-17 was administered to one randomly selected child in each interviewed household

4.2 HOUSING AND HOUSEHOLD CHARACTERISTICS

Tables SR.2.1 provides further details on household level characteristics obtained in the Household Questionnaire.

Table SR.2.1 presents characteristics of housing, disaggregated by nationality (Qatari/Non-Qatari), distributed by whether the dwelling has electricity, energy used for cooking, and having a bank account.

Table SR.2.1: Housing characteristics

Percent distribution of households connected to electricity, using clean energy to cook and have a bank account, by nationality, Qatar MICS, 2023

		Nationality	
	Total	Qatari	Non-Qatari
Total	**100.0**	**100.0**	**100.0**
Electricity			
Yes, interconnected grid	100.0	100.0	100.0
Yes, off-grid	0.0	0.0	0.0
No	0.0	0.0	0.0
Energy use for cooking[A]			
Clean fuels and technologies	100.0	100.0	100.0
Other fuels	0.0	0.0	0.0
No cooking done in the household	0.0	0.0	0.0
Bank account			
Yes	99.6	99.9	99.6
No	0.3	0.1	0.3
Missing/DK	0.1	0.1	0.1
Number of households	5,854	1,021	4,833
Percentage of household members with access to electricity in the household[1]	**100.0**	**100.0**	**100.0**
Number of household members	27,381	6,143	21,239

[1] MICS indicator SR.1 - Access to electricity; SDG Indicator 7.1.1

[A] Calculated for households. For percentage of household members living in households using clean fuels and technologies for cooking, please refer to Table TC.4.1

4.3 HOUSEHOLD COMPOSITION

Tables SR.3.1 provides the distribution of households by selected background characteristics, including the nationality of the household head (Qatari/Non-Qatari), sex of the household head, number of household members, and education and age of household head. Both unweighted and weighted numbers are presented. Such information is essential for the interpretation of findings presented later in the report and provide background information on the representativeness of the survey sample. The remaining tables in this report are presented only with weighted numbers.[24]

The presented background characteristics are used in subsequent tables in this report; the figures in the table are also intended to show the numbers of observations by major categories of analysis in the report.

The weighted and unweighted total number of households are equal, since sample weights were normalized. [24] The table also shows the weighted mean household size estimated by the survey.

[24] See Appendix A: Sample design, for more details on sample weights.

Table SR.3.1: Household composition

Percent and frequency distribution of households, Qatar MICS, 2023

		Number of households	
	Weighted percent	Weighted	Unweighted
Total	**100.0**	**5,854**	**5,854**
Nationality			
Qatari	17.4	1,021	2,914
Non-Qatari	82.6	4,833	2,940
Sex of household head			
Male	93.8	5,491	5,363
Female	6.2	363	491
Age of household head			
<18	0.0	0.0	0
18-34	17.5	1,024	1,081
35-64	74.7	4,375	4,157
65-84	7.3	430	579
85+	0.4	26	37
Education of household head			
Pre-primary or none	0.2	14	34
Primary	1.7	99	114
Preparatory	7.5	438	708
Secondary+	90.6	5,303	4,998
Number of household members			
1	1.5	89	74
2	10.6	619	525
3	17.0	993	824
4	23.2	1,357	1,146
5	19.2	1,125	1,042
6	13.2	775	813
7+	15.3	896	1,430
Households with[A]			
At least one child under age 5 years	40.3	2,356	2,190
At least one child age 5-17 years	58.8	3,436	3,342
At least one child age <18 years	74.1	4,331	4,136
At least one-woman age 15-49 years	92.4	5,398	5,259
At least one-man age 15-49 years	86.2	5,040	5,098
No member age <50	1.6	93	107
No adult (18+) member			
Mean household size	4.7	5,854	5,854

[A] Each proportion is a separate characteristic based on the total number of households

4.4 AGE STRUCTURE OF HOUSEHOLD POPULATION

The weighted age and sex distribution of the survey population is provided in Table SR.4.1. In the households successfully interviewed in the survey, a weighted total of 27,381 household members were listed. Of these, 13,338 were males, and 14,043 were females.[25]

Table SR.4.1: Age distribution of household population by sex

Percent and frequency distribution of the household population[A] in five-year age groups and child (age 0-17 years) and adult populations (age 18 or more), by sex, Qatar MICS, 2023

	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Total	**13,338**	**100.0**	**14,043**	**100.0**	**27,381**	**100.0**
Nationality						
Qatari	2,589	19.4	2,462	17.5	5,051	18.4
Non-Qatari	10,749	80.6	11,581	82.5	22,330	81.6
Age						
0-4	1,571	11.8	1,577	11.2	3,147	11.5
5-9	1,645	12.3	1,648	11.7	3,293	12.0
10-14	1,430	10.7	1,355	9.6	2,784	10.2
15-19	1,027	7.7	974	6.9	2,001	7.3
15-17	654	4.9	621	4.4	1,276	4.7
18-19	372	2.8	353	2.5	725	2.6
20-24	730	5.5	890	6.3	1,620	5.9
25-29	793	5.9	1,260	9.0	2,053	7.5
30-34	1,069	8.0	1,616	11.5	2,685	9.8
35-39	1,237	9.3	1,390	9.9	2,627	9.6
40-44	1,134	8.5	1,113	7.9	2,246	8.2
45-49	797	6.0	687	4.9	1,484	5.4
50-54	619	4.6	536	3.8	1,155	4.2
55-59	427	3.2	339	2.4	766	2.8
60-64	357	2.7	250	1.8	606	2.2
65-69	228	1.7	130	0.9	357	1.3
70-74	127	1.0	53	0.4	180	0.7
75-79	38	0.3	37	0.3	74	0.3
80-84	26	0.2	11	0.1	37	0.1
85+	85	0.6	180	1.3	265	1.0
Child and adult populations						
Children age 0-17 years	5,299	39.7	5,200	37.0	10,500	38.3
Adults age 18+ years	8,039	60.3	8,843	63.0	16,882	61.7

[A] As this table includes all household members listed in interviewed households, the numbers and distributions by sex do not match those found for individuals in tables SR.5.1W/M, SR.5.2 and SR.5.3 where interviewed individuals are weighted with individual sample weights.

[25] The single year age distribution is provided in Table DQ.1.1 in Appendix D: Data quality

4.5 RESPONDENTS' BACKGROUND CHARACTERISTICS

Tables SR.5.1W, SR.5.1M, SR.5.2, and SR.5.3 provide information on the background characteristics of female and male respondents 15-49 years of age, children under age 5 and children age 5-17 years. In all these tables, the total numbers of weighted and unweighted observations are equal, since sample weights have been normalized (standardized).[24] Note that in Table SR.5.3, an additional column is presented (Weighted total number of children age 5-17 years) to account for the random selection of one child in households with at least one child age 5-17 years. The final weight of each child is the weight of the household multiplied by the number of children age 5-17 years in the household.

In addition to providing useful information on the background characteristics of women, men, children age 5-17, and children under age five, 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.

Tables SR.5.1W and SR.5.1M provide background characteristics of female and male respondents, age 15-49 years. The tables include information on the distribution of women and men according to nationality (Qatari/Non-Qatari), age, education[26], marital/union status, motherhood/fatherhood status, health insurance, and functional difficulties (for age 18-49).

Background characteristics of children age 5-17 and under 5 are presented in Tables SR.5.2 and SR.5.3. These include the distribution of children by several attributes: nationality, sex, age in months, mother's (or caretaker's) education, respondent type, and functional difficulties (for children under age 5 only for age 2-4 years).

[26] Throughout this report when used as a background variable, unless otherwise stated, "education" refers to highest educational level ever attended by the respondent.

Table SR.5.1W: Women's background characteristics

Percent and frequency distribution of women age 15-49 years, Qatar MICS, 2023

	Weighted percent	Number of women	
		Weighted	Unweighted
Total	**100.0**	**7,381**	**7,381**
Nationality			
Qatari	18.5	1,368	3,787
Non-Qatari	81.5	6,013	3,594
Age			
15-19	13.5	995	1,108
15-17	8.6	633	692
18-19	4.9	362	416
20-24	11.7	866	985
25-29	16.2	1,196	1,230
30-34	19.4	1,434	1,363
35-39	17.1	1,266	1,137
40-44	13.5	1,000	943
45-49	8.5	624	615
Education			
Pre-primary or none	0.1	11	12
Primary	2.4	174	189
Preparatory	4.2	310	369
Secondary+	93.3	6,885	6,811
Marital status			
Currently married	62.7	4,627	4,125
Widowed	0.3	22	30
Divorced	2.0	144	176
Separated	0.4	29	39
Never married	34.7	2,559	3,010
Missing	0.0	0	1
Motherhood and recent births			
Never gave birth	42.6	3,147	3,557
Ever gave birth	57.4	4,234	3,824
Gave birth in last two years	15.5	1,144	1,044
No birth in last two years	41.9	3,090	2,780
Functional difficulties (age 18-49 years)			
Has functional difficulty	1.9	129	102
Has no functional difficulty	98.1	6,620	6,587

Table SR.5.1M: Men's background characteristics

Percent and frequency distribution of men age 15-49 years, Qatar MICS, 2023

	Weighted percent	Number of men	
		Weighted	Unweighted
Total	**100.0**	**3,437**	**3,437**
Nationality			
Qatari	21.3	733	1,921
Non-Qatari	78.7	2,704	1,516
Age			
15-19	15.8	545	598
15-17	9.8	336	364
18-19	6.1	208	234
20-24	10.4	357	470
25-29	12.0	411	481
30-34	15.9	547	555
35-39	17.1	589	500
40-44	17.2	591	501
45-49	11.5	396	332
Education			
Pre-primary or none	0.1	3	4
Primary	1.9	64	73
Preparatory	4.9	168	182
Secondary+	93.2	3,202	3,178
Marital status			
Currently married	58.9	2,023	1,733
Widowed	0.1	3	4
Divorced	1.0	35	51
Separated	0.0	0	0
Never married	40.0	1,376	1,649
Functional difficulties (age 18-49 years)			
Has functional difficulty	1.2	36	28
Has no functional difficulty	98.8	3,064	3,045

Table SR.5.2: Children under 5's background characteristics

Percent and frequency distribution of children under five years, Qatar MICS, 2023

		Number of under-5 children	
	Weighted percent	Weighted	Unweighted
Total	**100.0**	**2,964**	**2,964**
Nationality			
Qatari	14.9	442	1,337
Non-Qatari	85.1	2,522	1,627
Sex			
Male	50.0	1,481	1,520
Female	50.0	1,483	1,444
Age in months			
0-5	9.2	272	275
6-11	8.8	262	271
12-23	18.9	559	560
24-35	19.9	590	581
36-47	21.2	627	646
48-59	22.1	654	631
Mother's education[A]			
Pre-primary or none	0.2	7	10
Primary	3.0	89	93
Preparatory	4.2	124	148
Secondary+	92.6	2,745	2,713
Respondent to the under-5 questionnaire			
Mother	99.5	2,949	2,947
Other primary caretaker	0.5	15	17
Child's functional difficulties (age 2-4 years)[B,C]			
Has functional difficulty	1.6	29	33
Has no functional difficulty	98.4	1,842	1,825
Mother's functional difficulties[D]			
Has functional difficulty	1.7	49	41
Has no functional difficulty	97.7	2,896	2,897
No information	0.6	18	26

[A] In this table and throughout the report where applicable, mother's education refers to educational attainment of the respondent: Mothers (or caretakers, interviewed only if the mother is deceased or is living elsewhere).

[B] The results of the Child Functioning module are presented in Chapter 11.1.

[C] Children age 0-1 years are excluded, as functional difficulties are only collected for age 2-4 years.

[D] In this table and throughout the report, mother's functional difficulties refer to functional difficulty of the respondent as described in note A. The category of "No information" applies to mothers or caretakers to whom the Adult Functioning module was not administered. This category is not presented in individual tables. Please refer to Tables 8.1W and 8.1M for results of the Adult Functioning module.

Table SR.5.3: Children age 5-17 years' background characteristics

Percent and frequency distribution of children age 5-17 years, Qatar MICS, 2023

	Weighted percent	Weighted total number of children age 5-17 years[A]	Number of households with at least one child age 5-17 years	
			Weighted	Unweighted
Total	**100.0**	**7,109**	**3,322**	**3,322**
Nationality				
Qatari	18.5	1,317	541	1,579
Non-Qatari	81.5	5,792	2,781	1,743
Sex				
Male	50.8	3,609	1,682	1,695
Female	49.2	3,500	1,640	1,627
Age				
5-9	45.0	3,202	1,614	1,541
10-14	36.4	2,588	1,105	1,084
15-17	18.5	1,318	603	697
Mother's education[B]				
Pre-primary or none	0.3	19	8	12
Primary	5.0	359	117	136
Preparatory	5.9	417	190	254
Secondary+	88.8	6,313	3,006	2,919
Emancipated[C]	0.0	2	2	1
Respondent to the children age 5-17 questionnaire				
Mother	98.7	7,017	3,274	3,255
Other primary caretaker	1.3	90	46	66
Emancipated[C]	0.0	2	2	1
Child's functional difficulties[D]				
Has functional difficulty	3.1	221	109	136
Has no functional difficulty	96.9	6,888	3,213	3,186
Mother's functional difficulties[E]				
Has functional difficulty	2.0	143	63	48
Has no functional difficulty	89.4	6,354	2,884	2,817
No information	8.6	611	375	457

[A] As one child is randomly selected in each household with at least one child age 5-17 years, the final weight of each child is the weight of the household multiplied with the number of children age 5-17 years in the household. This column is the basis for the weighted percent distribution, i.e. the distribution of all children age 5-17 years in sampled households.

[B] In this table and throughout the report where applicable, mother's education refers to educational attainment of the respondent: Mothers (or caretakers, interviewed only if the mother is deceased or is living elsewhere). The category of "Emancipated" applies to children age 15-17 years as described in note C. This category is not presented in individual tables.

[C] Children age 15-17 years were considered emancipated and individually interviewed if not living with his/her mother and the respondent to the Household Questionnaire indicated that the child does not have a primary caretaker.

[D] The results of the Child Functioning module are presented in Chapter 11.1. Note the child functioning difficulties did not include two domains: Depression and Accepting Change.

[E] In this table and throughout the report, mother's functional difficulties refer to functional difficulty of the respondent as described in note B. The category of "No information" applies to mothers or caretakers to whom the Adult Functioning module was not administered. Emancipated children are also included in this category. This category is not presented in individual tables. Please refer to Tables 8.1W and 8.1M for results of the Adult Functioning module.

4.6 ADULT FUNCTIONING

The Adult Functioning module is based on the "short set" of questions developed by the Washington Group on Disability Statistics (WG) – a UN City Group established under the United Nations Statistical Commission. These questions reflect six domains for measuring disability: seeing, hearing, walking, cognition, self-care and communication. This module is recommended for disaggregation of SDG indicators for adults.[27]

The MICS6 standard questionnaires include these questions in the individual questionnaires as specified previously. For women and men age 18-49, data are obtained directly from the respondents themselves.[28]

Information at the individual level can also be obtained through a proxy respondent using a roster approach of these questions in the household questionnaire. This would necessitate a single proxy respondent answering on behalf of all adult household members. A proxy respondent can identify a large proportion of difficulties, but tend to under-identify persons with functional difficulties, either deliberately or inadvertently.[29]

Self-reporting too can have methodological issues. Specifically, a self-reported approach can bias the total sample, as some individuals cannot be interviewed due to their disability (labeled as "incapacitated" in the result code of the individual questionnaires by the interviewers). The number of "incapacitated" individuals identified in household surveys is generally very low (usually around 0.5%) and holds both those incapacitated for reasons of disability and those incapacitated for any reason (e.g., sick in bed).

Regardless, to avoid such potential bias, the Adult Functioning data in MICS should not be used to estimate prevalence in the household population age 18-49 years. The standard tabulations of MICS do therefore not include such. These data are however the recommended methodology to allow countries to disaggregate the SDG indicators by disability status – the objective behind the inclusion of the module. It is important to interpret the disaggregate with the bias in mind: The data is representative for the household population age 18-49 for which an interview was completed and functioning difficulty is sometimes the reason for incomplete questionnaires.

The recommendation of the WG is to use a proxy respondent for those individuals who cannot respond for themselves, as this would allow estimation of prevalence in the household population age 18-49 years. This approach is not currently sought by MICS, as the majority of data captured in individual questionnaires cannot be collected through a proxy respondent (e.g. the SDG indicators on fertility, child mortality, family planning, delivery attendance, maternal mortality, early marriage, FGM, etc.).

Tables SR.8.1W and SR.8.1M present the percentage of women and men age 18-49 years with functional difficulties, by domain, and percentage who use assistive devices and have functional difficulty within each domain (Seeing, hearing, walking, self-care, communication, and remembering).

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[27] IAEG-SDG's. *Disability Data Disaggregation.* Joint Statement by the Disability Sector, Geneva, 2016. http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/Joint-statement-on-disaggregation-of-data-by-disability-Final.pdf.

[28] Note that the Adult Functioning module does not cover adults over age 49 years which is the population most at risk of having a functional limitation due to aging.

[29] "Using the Washington Group Tools for the First Time." Washington Group on Disability Statistics. Accessed August 24, 2018. http://www.washingtongroup-disability.com/frequently-asked-questions/using-the-wg-questions-for-the-first-time/.

Table SR.8.1W: Adult functioning (women age 18-49 years)

Percentage of women age 18-49 years with functional difficulties, by domain, and percentage who use assistive devices and have functional difficulty within domain of devices, Qatar MICS, 2023

	Percentage of women who:		Percentage of women age 18-49 years who have functional difficulties in the domains of:						Percentage of women age 18-49 years with functional difficulties in at least one domain[A]	Number of women age 18-49 years	Percentage of women with difficulties seeing when wearing glasses/ contact lenses	Number of women age 18-49 years who wear glasses/ contact lenses	Percentage of women with difficulties hearing when using hearing aid	Number of women age 18-49 years who use hearing aid
	Wear glasses/ contact lenses	Use hearing aid	Seeing	Hearing	Walking	Self-care	Communication	Remembering						
Total	**26.2**	**1.7**	**0.4**	**0.2**	**0.4**	**0.1**	**0.3**	**0.9**	**1.9**	**6,748**	**0.7**	**1,769**	**4.0**	**113**
Nationality														
Qatari	18.7	1.5	0.3	0.2	0.1	0.1	0.2	0.4	1.1	1,223	0.9	228	5.7	19
Non-Qatari	27.9	1.7	0.5	0.2	0.5	0.1	0.3	1.0	2.1	5,525	0.7	1,541	3.6	95
Age														
18-19	30.6	1.3	0.7	0.1	0.5	0.0	0.0	0.9	1.1	362	2.2	111	(*)	5
20-24	29.7	2.1	0.4	0.0	0.2	0.0	0.3	0.7	1.5	866	1.5	257	(*)	18
25-29	22.3	1.2	0.4	0.2	0.2	0.2	0.7	0.9	1.8	1,196	0.8	266	(*)	15
30-34	22.8	1.5	0.3	0.1	0.1	0.0	0.1	0.6	1.0	1,434	0.2	327	(*)	22
35-39	22.5	1.5	0.4	0.3	0.4	0.2	0.3	0.5	1.8	1,266	0.6	284	(*)	20
40-44	27.6	2.1	0.2	0.0	0.4	0.0	0.2	1.3	2.0	1,000	0.0	276	(*)	21
45-49	39.7	2.2	1.2	0.6	2.0	0.6	0.3	1.4	5.4	624	0.7	248	(*)	14
Education														
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	11	(*)	5	(*)	2
Primary	15.4	2.0	1.2	1.2	2.4	1.2	2.0	3.0	5.4	173	(0.0)	27	(*)	3
Preparatory	19.6	1.3	1.0	0.2	0.8	0.2	1.0	0.0	2.7	216	(4.1)	42	(*)	3
Secondary+	26.7	1.7	0.4	0.2	0.3	0.1	0.2	0.8	1.7	6,349	0.6	1,696	3.9	105

[A] In MICS, the adult functioning module is asked to individual respondents age 18-49 for the purpose of disaggregation. No information is collected on eligible household members who, for any reason, were unable to complete the interview. It is expected that a significant proportion of the 10 cases of respondents for whom the response code "Incapacitated" was indicated for the individual interview are indeed incapacitated due to functional difficulties. The percentage of women with functional difficulties presented here is therefore not representing a full measure and should not be used for reporting on prevalence in the population.

(*) Figures that are based on fewer than 25 unweighted cases.
( ) Figures that are based on 25-49 unweighted cases

Table SR.8.1M: Adult functioning (men age 18-49 years)

Percentage of men age 18-49 years with functional difficulties, by domain, and percentage who use assistive devices and have functional difficulty within domain of devices, Qatar MICS, 2023

	Percentage of men who:		Percentage of men age 18-49 years who have functional difficulties in the domains of:						Percentage of men age 18-49 years with functional difficulties in at least one domain[A]	Number of men age 18-49 years	Percentage of men with difficulties seeing when wearing glasses/ contact lenses	Number of men age 18-49 years who wear glasses/ contact lenses	Percentage of men with difficulties hearing when using hearing aid	Number of men age 18-49 years who use hearing aid
	Wear glasses/ contact lenses	Use hearing aid	Seeing	Hearing	Walking	Self-care	Communication	Remembering						
Total	**25.7**	**1.9**	**0.4**	**0.1**	**0.3**	**0.0**	**0.2**	**0.4**	**1.2**	**3,101**	**0.7**	**796**	**3.1**	59
Nationality														
Qatari	18.3	2	0.1	0.0	0.3	0.2	0.2	0.1	0.6	650	0.3	119	(*)	10
Non-Qatari	27.6	2	0.4	0.1	0.3	0.0	0.1	0.4	1.3	2,450	0.8	676	(3.7)	49
Age														
18-19	26.9	1.2	0.0	0.0	0.2	0.0	0.0	0.0	0.2	208	0.0	56	(*)	3
20-24	19.8	1.5	0.5	0.0	0.0	0.1	0.6	0.1	1.2	357	0.0	71	(*)	5
25-29	21.5	2.0	0.4	0.0	0.4	0.0	0.1	0.0	1.0	411	2.0	88	(*)	8
30-34	21.4	1.7	0.0	0.0	0.1	0.1	0.5	0.3	0.9	547	0.0	117	(*)	9
35-39	23.2	2.8	0.6	0.0	0.0	0.0	0.0	0.6	1.2	589	1.3	137	(*)	17
40-44	28.1	1.9	0.3	0.3	0.4	0.1	0.0	0.4	1.3	591	1.1	166	(*)	12
45-49	40.6	1.2	0.5	0.0	1.0	0.0	0.0	0.9	2.0	396	0.2	161	(*)	5
Education														
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	3	(*)	2	-	0
Primary	16.5	0.6	0.0	0.0	0.6	0.6	0.6	0.6	1.2	64	(*)	11	(*)	0
Preparatory	11.5	2.1	1.7	0.0	1.7	0.0	0.4	0.4	2.1	105	(*)	12	(*)	2
Secondary+	26.3	1.9	0.3	0.1	0.2	0.0	0.1	0.3	1.1	2,929	0.7	771	3.2	56

[A] In MICS, the adult functioning module is asked to individual respondents age 18-49 for the purpose of disaggregation. No information is collected on eligible household members who, for any reason, were unable to complete the interview. It is expected that a significant proportion of the 7 cases of respondents for whom the response code "Incapacitated" was indicated for the individual interview are indeed incapacitated due to functional difficulties. The percentage of men with functional difficulties presented here is therefore not representing a full measure and should not be used for reporting on prevalence in the population.

(*) Figures that are based on fewer than 25 unweighted cases.

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

–′ denotes 0 unweighted case in the denominator

4.7 MASS MEDIA AND ICT

The Qatar MICS 2023 collected information on exposure to mass media and the use of computers and the internet. Information was collected on exposure to newspapers/magazines, radio and television among women and men age 15-49 years and is presented in Tables SR.9.1W and SR.9.1M.

Tables SR.9.3W and SR.9.3M present the use of ICT by women and men age 15-49 years based on the information about whether they have ever used computers, mobile phones or internet and during the last three months while tables SR.9.4W and SR.9.4M present the ICT skills of women and men age 15-49 years based on the information about whether they carried out computer related activities in the last three months.

Table SR.9.1W: Exposure to mass media (women)

Percentage of women age 15-49 years who are exposed to specific mass media on a weekly basis, Qatar MICS, 2023

	Percentage of women who:					
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week	All three media at least once a week[1]	Any media at least once a week	Number of women
Total	**13.5**	**26.3**	**69.9**	**6.6**	**76.5**	**7,381**
Nationality						
Qatari	9.4	19.1	63.9	4.5	68.9	1,368
Non-Qatari	14.4	27.9	71.2	7.1	78.2	6,013
Age						
15-19	9.5	12.9	65.9	3.0	69.8	995
15-17	8.1	12.5	68.0	3.5	70.9	633
18-19	11.9	13.5	62.2	2.3	67.9	362
20-24	12.6	21.0	66.5	5.9	73.5	866
25-29	12.2	22.5	69.8	5.9	75.5	1,196
30-34	11.1	27.1	71.2	6.3	77.3	1,434
35-39	15.4	29.5	73.0	7.7	78.8	1,266
40-44	15.8	36.2	70.8	8.3	80.7	1,000
45-49	21.1	38.0	70.1	10.6	79.4	624
Education						
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	11
Primary	6.7	22.9	71.2	3.4	77.4	174
Preparatory	10.1	15.7	66.1	5.0	69.7	310
Secondary+	13.8	26.9	70.1	6.8	76.8	6,885
Functional difficulties (age 18-49 years)						
Has functional difficulty	25.4	48.9	69.8	12.0	83.7	129
Has no functional difficulty	13.7	27.2	70.0	6.8	76.8	6,620

[1] MICS indicator SR.3 - Exposure to mass media

(*) Figures that are based on fewer than 25 unweighted cases

Table SR.9.1M: Exposure to mass media (men)

Percentage of men age 15-49 years who are exposed to specific mass media on a weekly basis, Qatar MICS, 2023

	Percentage of men who:					
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week	All three media at least once a week[1]	Any media at least once a week	Number of men
Total	**17.7**	**37.6**	**67.7**	**10.5**	**76.1**	**3,437**
Nationality						
Qatari	10.0	25.7	54.5	6.4	61.6	733
Non-Qatari	19.8	40.8	71.3	11.6	80.0	2,704
Age						
15-19	8.9	12.0	64.7	3.7	68.1	545
15-17	8.5	10.9	68.1	3.6	70.1	336
18-19	9.6	13.9	59.3	3.8	64.7	208
20-24	11.8	19.1	57.4	5.8	62.0	357
25-29	13.1	36.6	68.2	8.5	77.2	411
30-34	18.7	45.4	69.3	11.7	76.9	547
35-39	20.1	46.6	69.5	11.0	82.3	589
40-44	25.7	47.7	72.1	16.7	81.3	591
45-49	23.1	51.1	69.4	14.3	80.2	396
Education						
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	3
Primary	11.8	34.8	59.3	6.2	64.9	64
Preparatory	11.2	27.7	58.8	7.5	65.3	168
Secondary+	18.2	38.2	68.4	10.7	76.9	3,202
Functional difficulties (age 18-49 years)						
Has functional difficulty	(22.0)	(43.0)	(61.0)	(17.0)	(75.9)	36
Has no functional difficulty	18.7	40.5	67.8	11.2	76.7	3,064

[1] MICS indicator SR.3 - Exposure to mass media

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

(*) Figures that are based on fewer than 25 unweighted cases

Table SR.9.3W: Use of ICT (women)

Percentage of women age 15-49 years who have ever used a computer, the internet and who own a mobile phone, and percentage who have used the internet during the last 3 months and who have used it at least once weekly during the last 3 months, Qatar MICS, 2023

	Percentage of women who:					
	Used a computer		Used internet			
	Ever	Own a mobile phone[1]	Ever	During the last 3 months[2]	At least once a week during the last 3 months[3]	Number of women
Total	**95.8**	**99.8**	**99.4**	**97.7**	**95.4**	**7,381**
Nationality						
Qatari	95.2	99.6	99.5	97.2	94.7	1,368
Non-Qatari	95.9	99.8	99.4	97.8	95.5	6,013
Age						
15-19	99.6	99.5	99.6	98.5	94.4	995
15-17	100.0	99.6	99.7	99.1	95.6	633
18-19	99.0	99.5	99.3	97.5	92.2	362
20-24	99.8	100.0	99.6	98.1	97.2	866
25-29	99.9	99.9	99.7	98.0	95.6	1,196
30-34	99.7	99.8	99.5	97.8	95.9	1,434
35-39	100.0	99.7	99.4	97.8	95.1	1,266
40-44	83.8	99.9	99.4	97.3	95.1	1,000
45-49	77.7	99.7	98.5	95.6	93.6	624
Education						
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	11
Primary	75.6	100.0	99.0	97.4	95.3	174
Preparatory	86.5	99.3	99.9	97.5	95.7	310
Secondary+	96.7	99.8	99.5	97.7	95.4	6,885
Functional difficulties (age 18-49 years)						
Has functional difficulty	88.8	100.0	98.4	96.0	94.6	129
Has no functional difficulty	95.5	99.8	99.4	97.6	95.4	6,620

[1] MICS indicator SR.10 - Ownership of mobile phone; SDG indicator 5.b.1

[2] MICS indicator SR.12a - Use of internet (during the last 3 months); SDG indicator 17.8.1

[3] MICS indicator SR.12b - Use of internet (at least once a week during the last 3 months)

(*) Figures that are based on fewer than 25 unweighted cases

Table SR.9.3M: Use of ICT (men)

Percentage of men age 15-49 years who have ever used a computer, the internet and who own a mobile phone, and percentage who have used the internet during the last 3 months and who have used it at least once weekly during the last 3 months, Qatar MICS, 2023

	Percentage of men who:					
	Used a computer		Used internet			
	Ever	Own a mobile phone[1]	Ever	During the last 3 months[2]	At least once a week during the last 3 months[3]	Number of men
Total	**96.9**	**99.7**	**99.8**	**98.5**	**96.0**	**3,437**
Nationality						
Qatari	96.5	99.7	99.4	97.4	95.4	733
Non-Qatari	97.1	99.7	99.9	98.8	96.1	2,704
Age						
15-19	99.3	99.5	99.7	97.3	95.2	545
15-17	98.9	99.2	99.7	97.1	93.7	336
18-19	100.0	99.8	99.8	97.7	97.6	208
20-24	100.0	100.0	99.9	98.6	96.1	357
25-29	100.0	99.0	99.5	98.5	97.7	411
30-34	100.0	100.0	99.9	98.8	95.0	547
35-39	99.7	100.0	100.0	99.2	97.0	589
40-44	90.7	99.9	99.4	98.0	94.5	591
45-49	88.6	99.1	100.0	99.3	97.3	396
Education						
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	3
Primary	80.1	99.4	96.6	96.6	96.6	64
Preparatory	88.1	98.7	99.8	96.6	93.3	168
Secondary+	97.7	99.7	99.8	98.6	96.1	3,202
Functional difficulties (age 18-49 years)						
Has functional difficulty	(83.0)	(99.0)	(97.9)	(97.9)	(97.9)	36
Has no functional difficulty	96.9	99.7	99.8	98.7	96.2	3,064

[1] MICS indicator SR.10 - Ownership of mobile phone; SDG indicator 5.b.1

[2] MICS indicator SR.12a - Use of internet (during the last 3 months); SDG indicator 17.8.1

[3] MICS indicator SR.12b - Use of internet (at least once a week during the last 3 months)

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

(*) Figures that are based on fewer than 25 unweighted cases

Table SR.9.4W: ICT skills (women)

Percentage of women age 15-49 years who in the last 3 months have carried out computer related activities, Qatar MICS, 2023

	Percentage of women who in the last 3 months:										
	Copied or moved a file or folder	Used a copy and paste tool to duplicate or move information within a document	Sent e-mail with attached file, such as a document, picture or video	Used a basic arithmetic formula in a spreadsheet	Connected and installed a new device, such as a modem, camera or printer	Found, downloaded, installed and configured software	Created an electronic presentation with presentation software, including text, images, sound, video or charts	Transferred a file between a computer and other device	Wrote a computer program in any programming language	Performed at least one of the nine listed computer related activities[1,2]	Number of women
Total	**74.0**	**71.8**	**72.9**	**47.8**	**44.5**	**42.6**	**48.1**	**60.7**	**30.1**	**84.6**	**7,381**
Nationality											
Qatari	75.5	72.0	72.0	47.1	44.8	41.1	51.8	61.1	28.6	85.3	1,368
Non-Qatari	73.6	71.7	73.0	48.0	44.5	43.0	47.3	60.6	30.5	84.4	6,013
Age											
15-24[1]	78.1	75.7	74.9	48.3	46.5	47.2	56.1	63.7	32.4	88.8	1,861
15-19	75.3	73.2	70.6	45.1	42.3	43.7	54.6	62.0	30.8	87.4	995
15-17	72.7	70.6	66.0	42.1	40.8	42.1	52.4	59.9	28.8	86.6	633
18-19	79.9	77.9	78.5	50.2	44.8	46.4	58.5	65.5	34.2	89.0	362
20-24	81.4	78.6	79.8	52.1	51.4	51.2	57.9	65.8	34.3	90.3	866
25-29	77.4	73.9	76.7	50.9	43.9	44.4	49.2	65.1	30.9	88.8	1,196
30-34	76.7	76.0	78.7	51.1	49.4	45.8	49.5	64.0	32.5	88.5	1,434
35-39	79.0	77.5	78.0	51.2	48.5	43.8	48.4	63.5	34.1	88.7	1,266
40-44	61.2	57.9	59.4	38.8	33.7	32.2	36.3	49.7	21.2	71.5	1,000
45-49	58.8	56.6	57.2	40.4	37.6	32.6	37.3	47.9	22.9	67.2	624
Education											
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	11
Primary	54.4	50.7	50.5	42.6	38.4	30.8	34.2	40.4	29.3	61.6	174
Preparatory	66.6	61.5	59.9	48.2	44.7	37.6	46.7	52.1	30.8	73.2	310
Secondary+	74.8	72.8	74.1	48.0	44.7	43.2	48.6	61.7	30.2	85.7	6,885
Functional difficulties (age 18-49 years)											
Has functional difficulty	58.9	62.0	52.2	41.2	35.6	36.3	28.9	47.9	23.5	70.9	129
Has no functional difficulty	74.4	72.1	73.9	48.5	45.0	42.8	48.1	61.0	30.4	84.6	6,620

[1] **MICS indicator SR.13a - ICT skills (age 15-24 years); SDG indicator 4.4.1**

[2] **MICS indicator SR.13b - ICT skills (age 15-49 years); SDG indicator 4.4.1**

(*) Figures that are based on fewer than 25 unweighted cases

Table SR.9.4M: ICT skills (men)

Percentage of men age 15-49 years who in the last 3 months have carried out computer related activities, Qatar MICS, 2023

	Percentage of men who in the last 3 months:										Number of men
	Copied or moved a file or folder	Used a copy and paste tool to duplicate or move information within a document	Sent e-mail with attached file, such as a document, picture or video	Used a basic arithmetic formula in a spreadsheet	Connected and installed a new device, such as a modem, camera or printer	Found, downloaded, installed and configured software	Created an electronic presentation with presentation software, including text, images, sound, video or charts	Transferred a file between a computer and other device	Wrote a computer program in any programming language	Performed at least one of the nine listed computer related activities[1,2]	
Total	**80.3**	**77.3**	**79.2**	**58.0**	**54.2**	**50.3**	**51.4**	**68.7**	**37.3**	**90.1**	**3,437**
Nationality											
Qatari	80.8	76.2	75.4	50.8	53.6	46.5	49.7	65.2	31.4	89.5	733
Non-Qatari	80.2	77.5	80.2	59.9	54.4	51.4	51.8	69.7	39.0	90.2	2,704
Age											
15-24[1]	79.3	74.9	73.9	51.0	51.3	49.9	52.3	65.5	37.9	90.2	902
15-19	77.2	73.6	72.1	52.3	52.4	51.4	53.7	63.9	39.2	88.4	545
15-17	73.7	71.7	67.7	50.3	49.0	47.8	50.9	60.1	35.4	85.5	336
18-19	82.9	76.7	79.2	55.5	57.9	57.2	58.1	70.0	45.5	93.0	208
20-24	82.4	76.9	76.6	49.0	49.6	47.7	50.2	67.9	35.8	93.0	357
25-29	82.0	76.8	79.5	56.0	57.5	53.3	55.4	71.1	39.1	92.0	411
30-34	83.3	80.9	84.3	61.7	58.6	54.3	51.7	73.5	40.1	94.0	547
35-39	83.5	80.6	82.3	61.9	54.2	51.0	51.3	74.1	38.9	93.8	589
40-44	76.4	76.1	80.1	62.0	56.6	48.6	53.2	66.5	35.6	85.5	591
45-49	77.9	74.8	77.8	59.0	48.0	44.1	42.3	62.4	30.6	83.6	396
Education											
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	3
Primary	63.2	58.1	60.9	47.4	42.4	28.8	31.6	41.8	29.2	67.8	64
Preparatory	63.5	60.9	65.4	44.5	46.8	34.9	34.7	52.2	27.3	79.5	168
Secondary+	81.5	78.5	80.2	58.9	54.9	51.6	52.7	70.1	38.0	91.1	3,202
Functional difficulties (age 18-49 years)											
Has functional difficulty	(61.0)	(69.9)	(68.9)	(47.9)	(52.9)	(36.9)	(55.0)	(58.9)	(41.9)	(71.0)	36
Has no functional difficulty	81.3	78.0	80.6	58.9	54.8	50.8	51.4	69.8	37.5	90.8	3,064

[1] MICS indicator SR.13a - ICT skills (age 15-24 years); SDG indicator 4.4.1

[2] MICS indicator SR.13b - ICT skills (age 15-49 years); SDG indicator 4.4.1

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

(*) Figures that are based on fewer than 25 unweighted cases

4.8 CHILDREN'S LIVING ARRANGEMENTS

The Convention on the Rights of the Child (CRC) recognizes that “the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding”. Millions of children around the world grow up without the care of their parents for several reasons, including due to the premature death of the parents or their migration for work. In most cases, these children are cared for by members of their extended families, while in others, children may be living in households other than their own, as live-in domestic workers for instance. Understanding the children’s living arrangements, including the composition of the households in which they live and the relationships with their primary caregivers, is key to design targeted interventions aimed at promoting child’s care and wellbeing.

Table SR.11.1 presents information on the living arrangements and orphanhood status of children under age 18.

The Qatar MICS 2023 included a simple measure of one particular aspect of migration related to what is termed “children left behind”, i.e. for whom one or both parents have moved abroad. While the amount of literature is growing, the long-term effects of the benefits of remittances versus the potential adverse psycho-social effects are not yet conclusive, as there is somewhat conflicting evidence available as to the effects on children. Table SR.11.2 presents information on the living arrangements and co-residence with parents of children under age 18.

When examining the distribution of children aged 0-17 who do not live with either of their biological parents, the survey results show that this group consists of only eight children out of a total of 10,500 in this age range, representing approximately 0.07%. This finding highlights the near absence of this phenomenon in Qatari society.

Table SR.11.1: Children's living arrangements and orphanhood

Percent distribution of children age 0-17 years according to living arrangements, percentage of children age 0-17 years not living with a biological parent and percentage of children who have one or both parents dead, Qatar MICS, 2023

		Living with neither biological parent				Living with mother only		Living with father only							
	Living with both parents	Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead	Missing information on father/ mother	Total	Not living with biological mother	Living with neither biological parent[1]	One or both parents dead[2]	Number of children age 0-17 years
Total	**95.2**	**0.0**	**0.0**	**0.0**	**0.0**	**2.8**	**1.0**	**0.4**	**0.4**	**0.2**	**100.0**	**1.0**	**0.1**	**1.4**	**10,500**
Nationality															
Qatari	92.1	0.1	0.0	0.1	0.0	4.3	1.6	0.9	0.6	0.3	100.0	1.9	0.2	2.3	1,827
Non-Qatari	95.8	0.0	0.0	0.0	0.0	2.5	0.8	0.3	0.3	0.2	100.0	0.9	0.1	1.2	8,672
Sex															
Male	95.2	0.0	0.0	0.0	0.0	2.7	1.0	0.5	0.4	0.2	100.0	1.1	0.1	1.4	5,299
Female	95.2	0.0	0.0	0.1	0.0	2.9	0.9	0.4	0.4	0.1	100.0	1.0	0.1	1.4	5,200
Age															
0-4	97.8	0.0	0.0	0.0	0.1	1.3	0.2	0.1	0.3	0.2	100.0	0.6	0.1	0.5	3,147
5-9	95.3	0.0	0.0	0.0	0.0	3.3	0.7	0.5	0.2	0.1	100.0	0.8	0.0	0.9	3,293
10-14	93.5	0.1	0.0	0.0	0.0	3.7	1.6	0.5	0.4	0.1	100.0	1.1	0.1	2.1	2,784
15-17	92.1	0.1	0.0	0.2	0.0	3.2	1.9	0.9	1.1	0.3	100.0	2.6	0.3	3.1	1,276

[1] MICS indicator SR.18 - Children's living arrangements

[2] MICS indicator SR.19 - Prevalence of children with one or both parents dead

Table SR.11.2: Children's living arrangements and co-residence with parents

Percentage of children age 0-17 years by co-residence of parents, Qatar MICS, 2023

	Percentage of children age 0-17 years with:								
	Mother living elsewhere[A]	Father living elsewhere[A]	Both mother and father living elsewhere[A]	At least one parent living elsewhere[A]	Mother living abroad	Father living abroad	Mother and father living abroad	At least one parent living abroad[1]	Number of children age 0-17 years
Total	**0.4**	**2.7**	**0.0**	**3.2**	**0.2**	**1.4**	**0.0**	**1.6**	**10,500**
Nationality									
Qatari	0.8	4.2	0.1	5.1	0.1	1.2	0.0	1.2	1,827
Non-Qatari	0.3	2.4	0.0	2.7	0.2	1.4	0.0	1.6	8,672
Sex									
Male	0.4	2.6	0.0	3.0	0.2	1.4	0.0	1.5	5,299
Female	0.4	2.8	0.1	3.3	0.1	1.4	0.0	1.6	5,200
Age									
0-4	0.1	1.3	0.0	1.4	0.1	0.8	0.0	0.8	3,147
5-9	0.4	3.2	0.0	3.6	0.2	1.5	0.0	1.7	3,293
10-14	0.4	3.6	0.0	4.1	0.1	1.8	0.0	1.9	2,784
15-17	0.9	3.2	0.2	4.3	0.4	1.7	0.1	2.2	1,276
Orphanhood status									
Both parents alive	0.4	2.7	0.0	3.2	0.2	1.4	0.0	1.6	10,338
Only mother alive	0.0	na	na	0.0	0.0	na	na	0.0	100
Only father alive	na	(6.2)	na	(6.2)	na	(3.8)	na	(3.8)	43
Both parents deceased	na	na	na	na	na	na	na	na	2
Unknown	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	17

[1] MICS indicator SR.20 - Children with at least one parent living abroad

[A] Includes parent(s) living abroad as well as those living elsewhere in the country

na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases.

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

5 THRIVE – REPRODUCTIVE AND MATERNAL HEALTH

5.1 EARLY CHILDBEARING

Tables TM.2.2W present a selection of early childbearing and fatherhood indicators for young women age 15-19 and 20-24 years. In Table TM.2.2W, percentages among women age 15-19 who have had a live birth and those who are pregnant with their first child are presented. For the same age group, the table also presents the percentage of women who have had a live birth before age 15. These estimates are all derived from the fertility module in the Women's Questionnaire.

To estimate the proportion of women who have had a live birth before age 18 – when they were still children themselves – data based on women age 20-24 years at the time of survey are used to avoid truncation.[30]

Tables TM.2.3W is designed to look at trends in early childbearing for women, by presenting percentages of women who became mother before ages 15 and 18, for successive age cohorts. The table is designed to capture trends for Qatari and Non-Qatari populations separately.

Table TM.2.2W: Early childbearing (young women)

Percentage of women age 15-19 years who have had a live birth, are pregnant with the first child, have had a live birth or are pregnant with first child, and who have had a live birth before age 15, and percentage of women age 20-24 years who have had a live birth before age 18, Qatar MICS, 2023

	Percentage of women age 15-19 years who:				Number of women age 15-19 years	Percentage of women age 20-24 years who have had a live birth before age 18[1]	Number of women age 20-24 years
	Have had a live birth	Are pregnant with first child	Have had a live birth or are pregnant with first child	Have had a live birth before age 15			
Total	**0.4**	**0.4**	**0.8**	**0.0**	**995**	**0.3**	**866**
Nationality							
Qatari	0.1	0.1	0.3	0.0	239	0.3	211
Non-Qatari	0.5	0.5	0.9	0.0	756	0.3	655
Education							
Less than secondary	0.4	0.0	0.4	0.0	100	(*)	24
Secondary+	0.4	0.4	0.8	0.0	895	0.3	842
Functional difficulties (age 18-49 years)							
Has functional difficulty	(*)	(*)	(*)	(*)	4	(*)	13
Has no functional difficulty	1.1	1.1	2.1	0.0	358	0.3	853

[1] MICS indicator TM.2 - Early childbearing

(*) Figures that are based on fewer than 25 unweighted cases

[30] Using women age 15-19 to estimate the percentage who had given birth before age 18 would introduce truncation to the estimates, since the majority of women in this age group will not have completed age 18, and therefore will not have completed exposure to childbearing before age 18. The age group 20-24 is used to estimate the percentage of women giving birth before age 18, since all women in this age group have completed exposure to childbearing at very early ages.

Table TM.2.3W: Trends in early childbearing (women)

Percentage of women who have had a live birth, by age 18, by nationality, Qatar MICS, 2023

	Qatari		Non-Qatari		Total	
	Percentage of women with a live birth before age 18	Number of women age 20-49 years	Percentage of women with a live birth before age 18	Number of women age 20-49 years	Percentage of women with a live birth before age 18	Number of women age 20-49 years
Total	**0.4**	**1,130**	**0.3**	**5,256**	**0.3**	**6,386**
Age						
15-19	na	na	na	na	na	na
15-17	na	na	na	na	na	na
18-19	na	na	na	na	na	na
20-24	0.3	211	0.3	655	0.3	866
25-29	0.0	234	0.2	962	0.1	1,196
30-34	0.5	232	0.3	1,202	0.3	1,434
35-39	0.2	177	0.2	1,089	0.2	1,266
40-44	0.7	162	0.4	838	0.4	1,000
45-49	1.2	114	1.0	510	1.1	624

na: not applicable

5.2 ANTENATAL CARE

The antenatal period presents important opportunities for reaching pregnant women with a number of interventions that may be vital to their health and well-being and that of their infants. For example, antenatal care can be used to inform women and families about risks and symptoms in pregnancy and about the risks of labour and delivery, and therefore it may provide the route for ensuring that pregnant women do, in practice, deliver with the assistance of a skilled health care provider. Antenatal visits also provide an opportunity to supply information on birth spacing, which is recognised as an important factor in improving infant survival.

WHO recommends a minimum of eight antenatal visits based on a review of the effectiveness of different models of antenatal care.[31] WHO guidelines are specific on the content on antenatal care visits, which include:

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

It is of crucial importance for pregnant women to start attending antenatal care visits as early in pregnancy as possible and ideally have the first visit during the first trimester to prevent and detect pregnancy conditions that could affect both the woman and her baby. Antenatal care should continue throughout the entire pregnancy.[31]

Antenatal care is a tracer indicator of the Reproductive and Maternal Health Dimension of SDG 3.8 Universal Health Coverage. The type of personnel providing antenatal care to women age 15-49 years who gave birth in the two years preceding is presented in Table TM.4.1.

Table TM.4.2 shows the number of antenatal care visits during the pregnancy of their most recent birth within the two years preceding the survey, regardless of provider, by selected characteristics. Table TM.4.2 also provides information about the timing of the first antenatal care visit.

The coverage of key services that pregnant women are expected to receive during antenatal care are shown in Table TM.4.3.

[31] WHO. *WHO recommendations on antenatal care for a positive pregnancy experience*. Geneva: WHO Press, 2016. http://apps.who.int/iris/bitstream/handle/10665/250796/9789241549912-eng.pdf?sequence=1.

Table TM.4.1: Antenatal care coverage

Percent distribution of women age 15-49 years with a live birth in the last 2 years by antenatal care provider during the pregnancy of the most recent live birth, MICS Qatar, 2023

	Provider of antenatal care[A]				
	Doctor	No antenatal care	Total	Percentage of women who were attended at least once by skilled health personnel[1,B]	Number of women with a live birth in the last 2 years
Total	**100.0**	**0.0**	**100.0**	**100.0**	**1,144**
Nationality					
Qatari	100.0	0.0	100.0	100.0	165
Non-Qatari	100.0	0.0	100.0		980
Education					
Less than secondary	100.0	0.0	100.0	100.0	73
Secondary+	100.0	0.0	100.0	100.0	1,072
Age at most recent live birth					
Less than 20	(*)	(*)	100.0	(*)	5
20-34	100.0	0.0	100.0	100.0	811
35-49	100.0	0.0	100.0	100.0	328
Functional difficulties (age 18-49 years)					
Has functional difficulty	(*)	(*)	100.0	(*)	13
Has no functional difficulty	100.0	0.0	100.0	100.0	1,132

[1] MICS indicator TM.5a - Antenatal care coverage (at least once by skilled health personnel)

[A] Only the most qualified provider is considered in cases where more than one provider was reported.

[B] Skilled providers include Medical doctor and Nurse/Midwife.

(*) Figures that are based on fewer than 25 unweighted cases

Table TM.4.2: Number of antenatal care visits and timing of first visit

Percentage of women age 15-49 years with a live birth in the last 2 years by number of antenatal care visits by any provider and percent distribution of timing of first antenatal care visit during the pregnancy of the most recent live birth, and median months pregnant at first ANC visit among women with at least one ANC visit, MICS Qatar, 2023

	Percentage of women by number of antenatal care visits:			Percent distribution of women by number of months pregnant at the time of first antenatal care visit					
	4 or more visits to any provider[1]	8 or more visits to any provider[2]	DK/Missing	Less than 4 months	4-5 months	Total	Number of women with a live birth in the last 2 years	Median months pregnant at first ANC visit	Number of women with a live birth in the last 2 years who had at least one ANC visit
Total	**98.2**	**68.4**	**1.8**	**96.8**	**3.2**	**100.0**	**1,144**	**2.0**	**1,144**
Nationality									
Qatari	98.9	68.7	1.1	98.3	1.7	100.0	165	1.2	165
Non-Qatari	98.1	68.4	1.9	96.5	3.5	100.0	980	2.0	980
Education									
Less than secondary	99.5	74.7	0.5	100.0	0.0	100.0	73	2.0	73
Secondary+	98.1	68.0	1.9	96.5	3.5	100.0	1,072	2.0	1,072
Age at most recent live birth									
Less than 20	(*)	(*)	(*)	(*)	(*)	100.0	5	(*)	5
20-34	97.7	68.0	2.3	96.8	3.2	100.0	811	1.8	811
35-49	100.0	69.4	0.0	96.7	3.3	100.0	328	2.0	328
Functional difficulties (age 18-49 years)									
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	100.0	13	(*)	13
Has no functional difficulty	98.2	68.4	1.8	97.0	3.0	100.0	1,132	2.0	1,132

[1] MICS indicator TM.5b - Antenatal care coverage (at least four times by any provider); SDG indicator 3.8.1

[2] MICS indicator TM.5c - Antenatal care coverage (at least eight times by any provider)

(*) Figures that are based on fewer than 25 unweighted cases

Table TM.4.3: Content of antenatal care

Percentage of women age 15-49 years with a live birth in the last 2 years who, at least once, had their blood pressure measured, urine sample taken, and blood sample taken as part of antenatal care, during the pregnancy of the most recent live birth, MICS Qatar, 2023

	Percentage of women who, during the pregnancy of the most recent live birth, had:				
	Blood pressure measured	Urine sample taken	Blood sample taken	Blood pressure measured, urine and blood sample taken[1]	Number of women with a live birth in the last 2 years
Total	**100.0**	**100.0**	**100.0**	**100.0**	**1,144**
Nationality					
Qatari	100.0	100.0	100.0	100.0	165
Non-Qatari	100.0	100.0	100.0	100.0	980
Education					
Less than secondary	100.0	100.0	100.0	100.0	73
Secondary+	100.0	100.0	100.0	100.0	1,072
Age at most recent live birth					
Less than 20	(*)	(*)	(*)	(*)	5
20-34	100.0	100.0	100.0	100.0	811
35-49	100.0	100.0	100.0	100.0	328
Functional difficulties (age 18-49 years)					
Has functional difficulty	(*)	(*)	(*)	(*)	13
Has no functional difficulty	100.0	100.0	100.0	100.0	1,132

[1] MICS indicator TM.6 - Content of antenatal care

(*) Figures that are based on fewer than 25 unweighted cases

5.3 NEONATAL TETANUS

Tetanus immunisation during pregnancy can be life-saving for both the mother and the infant.[32] WHO estimated that neonatal tetanus killed more than 31,000 newborn children in 2016 within their first month of life.[33]

SDG 3.1 aims at reducing by 2030 the global maternal mortality ratio to less than 70 per 100,000 live births. Eliminating maternal tetanus is one of the strategies used to achieve SDG target 3.1.

The strategy for preventing maternal and neonatal tetanus is to ensure that all pregnant women receive at least two doses of tetanus toxoid vaccine. If a woman has not received at least two doses of tetanus toxoid during a particular pregnancy, she (and her newborn) are also considered to be protected against tetanus if the woman:

- Received at least two doses of tetanus toxoid vaccine, the last within the previous 3 years;
- Received at least 3 doses, the last within the previous 5 years;
- Received at least 4 doses, the last within the previous 10 years;
- Received 5 or more doses anytime during her life.[34]

To assess the status of tetanus vaccination coverage, women who had a live birth during the two years before the survey were asked if they had received tetanus toxoid injections during the pregnancy for their most recent birth, and if so, how many. Women who did not receive two or more tetanus toxoid vaccinations during this recent pregnancy were then asked about tetanus toxoid vaccinations they may have previously received. Interviewers also asked women to present their vaccination card on which dates of tetanus toxoid are recorded and referred to information from the cards when available.

Table TM.5.1 shows the protection status from tetanus of women who have had a live birth within the last 2 years.

[32] Roper, M., J. Vandelaer, and F. Gasse. "Maternal and Neonatal Tetanus." *The Lancet* 370, no. 9603 (2007): 1947-959. doi:10.1016/s0140-6736(07)61261-6.

[33] "Global Health Estimates." World Health Organization. Accessed August 28, 2018. http://www.who.int/healthinfo/global_burden_disease/en/.

[34] Deming M. et al. "Tetanus Toxoid Coverage as an Indicator of Serological Protection against Neonatal Tetanus." *Bulletin of the World Health Organization 80,* no. 9 (2002): 696-703. doi: PMC2567620.

Table TM.5.1: Neonatal tetanus protection

Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was protected against neonatal tetanus, MICS Qatar, 2023

	Percentage of women who received at least 2 tetanus toxoid containing vaccine doses during the pregnancy of the most recent live birth	Percentage of women who did not receive two or more doses during pregnancy but received:				Protected against tetanus[1]	Number of women with a live birth in the last 2 years
		2 doses, the last within prior 3 years	3 doses, the last within prior 5 years	4 doses, the last within prior 10 years	5 or more doses during lifetime		
Total	**4.9**	**5.4**	**0.3**	**0.1**	**0.1**	**10.9**	**1,144**
Nationality							
Qatari	0.0	0.0	0.0	0.0	0.0	0.0	165
Non-Qatari	5.8	6.3	0.3	0.2	0.2	12.8	980
Mother's education							
Less than secondary	2.4	4.7	2.4	0.0	0.0	9.4	73
Secondary+	5.1	5.4	0.2	0.2	0.2	11.0	1,072
Functional difficulties (age 18-49 years)							
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	(*)	13
Has no functional difficulty	5.0	5.1	0.3	0.2	0.2	10.7	1,132

[1] **MICS indicator TM.7 - Neonatal tetanus protection**

(*) Figures that are based on fewer than 25 unweighted cases

5.4 DELIVERY CARE

Increasing the proportion of births that are delivered in health facilities is an important factor in reducing the health risks to both the mother and the baby. Proper medical attention and hygienic conditions during delivery can reduce the risks of complications and infection that can cause morbidity and mortality to either the mother or the baby.[35]

Table TM.6.1 presents the percent distribution of women age 15-49 who had a live birth in the two years preceding the survey by place of delivery of the most recent birth, and the percentage of their most recent births delivered in a health facility, according to background characteristics.

About three quarters of all maternal deaths occur due to direct obstetric causes.[36] The single most critical intervention for safe motherhood is to ensure that a competent health worker with midwifery skills is present at every birth, and, in case of emergency, that there is a referral system in place to provide obstetric care in the right level of facility.[35] The skilled attendant at delivery indicator is used to track progress toward the Sustainable Development Goal 3.1 of reducing maternal mortality and it is SDG indicator 3.1.2.

The MICS included questions to assess the proportion of births attended by a skilled attendant. According to the revised definition[35], skilled health personnel, as referenced by SDG indicator 3.1.2, are competent maternal and newborn health professionals educated, trained and regulated to national and international standards. They are competent to: facilitate physiological processes during labour to ensure clean and safe birth; and identify and manage or refer women and/or newborns with complications.

Table TM.6.2 presents information on assistance during delivery of the most recent birth in the two years preceding the survey. Table TM.6.2 also shows information on women who delivered by caesarean section (C-section) and provides additional information on the timing of the decision to conduct a C-section (before labour pains began or after) to better assess if such decisions are mostly driven by medical or non–medical reasons.

[35] WHO. *Defining competent maternal and newborn health professionals: background document to the 2018 joint statement by WHO, UNFPA, UNICEF, ICM, ICN, FIGO and IPA: definition of skilled health personnel providing care during childbirth.* Geneva: WHO Press, 2018. http://apps.who.int/iris/bitstream/handle/10665/272817/9789241514200-eng.pdf?sequence=1&isAllowed=y.

[36] Say, L. et al. "Global Causes of Maternal Death: A WHO Systematic Analysis." *The Lancet Global Health* 2, no. 6 (2014): 323-33. doi:10.1016/s2214-109x(14)70227-x.

Table TM.6.1: Place of delivery

Percent distribution of women age 15-49 years with a live birth in the last 2 years by place of delivery of the most recent live birth, Qatar MICS, 2023

	Place of delivery				
	Health facility				
	Public sector	Private sector	Total	Delivered in health facility[1]	Number of women with a live birth in the last 2 years
Total	**89.8**	**10.2**	**100.0**	**100.0**	**1,144**
Nationality					
Qatari	89.2	10.8	100.0	100.0	165
Non-Qatari	89.9	10.1	100.0	100.0	980
Education					
Less than secondary	96.2	3.8	100.0	100.0	73
Secondary+	89.4	10.6	100.0	100.0	1,072
Age at most recent live birth					
Less than 20	(*)	(*)	100.0	(*)	5
20-34	90.0	10.0	100.0	100.0	811
35-49	89.8	10.2	100.0	100.0	328
Number of antenatal care visits					
4+ visits	89.8	10.2	100.0	100.0	1,124
8+ visits	88.7	11.3	100.0	100.0	783
DK/missing	(*)	(*)	100.0	(*)	21
Functional difficulties (age 18-49 years)					
Has functional difficulty	(*)	(*)	100.0	(*)	13
Has no functional difficulty	89.9	10.1	100.0	100.0	1,132

[1] **MICS indicator TM.8 - Institutional deliveries**

(*) Figures that are based on fewer than 25 unweighted cases

Table TM.6.2: Assistance during delivery and caesarean section

Percent distribution of women age 15-49 years with a live birth in the last 2 years by person providing assistance at delivery of the most recent live birth, and percentage of most recent live births delivered by C-section, Qatar MICS, 2023

	Person assisting at delivery						Percent delivered by C-section			
	Skilled attendant									
	Doctor	Nurse/ Midwife	Other	No attendant	Total	Delivery assisted by any skilled attendant[1]	Decided before onset of labour pains	Decided after onset of labour pains	Total[2]	Number of women with a live birth in the last 2 years
Total	**100.0**	**0.0**	**0.0**	**0.0**	**100.0**	**100.0**	**22.6**	**9.4**	**32.0**	**1,144**
Nationality										
Qatari	100.0	0.0	0.0	0.0	100.0	100.0	14.7	6.7	21.4	165
Non-Qatari	100.0	0.0	0.0	0.0	100.0	100.0	23.9	9.9	33.8	980
Education										
Less than secondary	100.0	0.0	0.0	0.0	100.0	100.0	17.6	4.3	21.9	73
Secondary+	100.0	0.0	0.0	0.0	100.0	100.0	22.9	9.7	32.7	1,072
Age at most recent live birth										
Less than 20	(*)	(*)	(*)	(*)	100.0	(*)	(*)	(*)	(*)	5
20-34	100.0	0.0	0.0	0.0	100.0	100.0	19.5	10.2	29.7	811
35-49	100.0	0.0	0.0	0.0	100.0	100.0	30.7	7.5	38.2	328
Number of antenatal care visits										
4+ visits	100.0	0.0	0.0	0.0	100.0	100.0	22.5	9.3	31.8	1,124
8+ visits	100.0	0.0	0.0	0.0	100.0	100.0	22.7	10.3	33.0	783
DK/missing	(*)	(*)	(*)	(*)	100.0	(*)	(*)	(*)	(*)	21
Place of delivery										
Health facility										
Public	100.0	0.0	0.0	0.0	100.0	100.0	21.5	8.7	30.2	1,028
Private	100.0	0.0	0.0	0.0	100.0	100.0	32.2	15.4	47.5	116
Functional difficulties (age 18-49 years)										
Has functional difficulty	(*)	(*)	(*)	(*)	100.0	(*)	(*)	(*)	(*)	13
Has no functional difficulty	100.0	0.0	0.0	0.0	100.0	100.0	22.4	9.4	31.7	1,132

[1] MICS indicator TM.9 - Skilled attendant at delivery; SDG indicator 3.1.2

[2] MICS indicator TM.10 - Caesarean section

(*) Figures that are based on fewer than 25 unweighted cases

5.5 BIRTHWEIGHT

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 (LBW), defined as a birthweight less than 2,500 grams (g) regardless of gestational age, carries a range of grave health and developmental risks for children. LBW babies face a greatly increased risk of dying during their early days with more than 80% of neonatal deaths occurring in LBW newborns; recent evidence also links increased mortality risk through adolescence to LBW. For those who do survive, LBW contributes to a wide range of poor health outcomes including higher risk of stunted linear growth in childhood, and long-term effects into adulthood such as lower IQ and an increased risk of chronic conditions including obesity, diabetes and cardiovascular problems.[37,38]

Premature birth, being born before 37 weeks gestation, is the primary cause of LBW given that a baby born early has less time to grow and gain weight in utero, especially as much of the foetal weight is gained during the latter part of pregnancy. The other cause of LBW is intrauterine growth restriction which occurs when the foetus does not grow well because of problems with the mother's health and/or nutrition, placental problems, or birth defects. While poor dietary intake and disease during pregnancy can affect birthweight outcome, an intergenerational effect has also been noted with mothers who were themselves LBW having an increased risk of having an LBW offspring.[39,40,41] Short maternal stature and maternal thinness before pregnancy can increase risk of having an LBW child which can be offset by dietary interventions including micronutrient supplementation.[42,43] Other factors such as cigarette smoking during pregnancy can increase the risk of LBW, especially among certain age groups.[44,45]

A major limitation of monitoring LBW globally is the lack of birthweight data for many children, especially in some countries. There is a notable bias among the unweighed, with those born to poorer, less educated, rural mothers being less likely to have a birthweight when compared to their richer, urban counterparts with more highly educated mothers. As the characteristics of the unweighted are related to being LBW, LBW estimates that do not represent these children may be lower than the true value. Furthermore, poor quality of available data with regard to excessive heaping on multiples of 500 g or 100 g exists in the majority of available data from low and middle-income countries and can further bias LBW estimates.[46] To help overcome some of these limitations, a method was developed to adjust LBW estimates for missing birth weights and heaping on

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[37] Katz, J. et al. "Mortality Risk in Preterm and Small-for-gestational-age Infants in Low-income and Middle-income Countries: A Pooled Country Analysis." *The Lancet* 382, no. 9890 (2013): 417-25. doi:10.1016/s0140-6736(13)60993-9.

[38] Watkins, J., S. Kotecha, and S. Kotecha. "Correction: All-Cause Mortality of Low Birthweight Infants in Infancy, Childhood, and Adolescence: Population Study of England and Wales." *PLOS Medicine* 13, no. 5 (2016). doi:10.1371/journal.pmed.1002069.

[39] Abu-Saad, K., and D. Fraser. "Maternal Nutrition and Birth Outcomes." *Epidemiologic Reviews* 32, no. 1 (2010): 5-25. doi:10.1093/epirev/mxq001.

[40] Qian, M. et al. "The Intergenerational Transmission of Low Birth Weight and Intrauterine Growth Restriction: A Large Cross-generational Cohort Study in Taiwan." *Maternal and Child Health Journal* 21, no. 7 (2017): 1512-521. doi:10.1007/s10995-017-2276-1.

[41] Drake, A., and B. Walker. "The Intergenerational Effects of Fetal Programming: Non-genomic Mechanisms for the Inheritance of Low Birth Weight and Cardiovascular Risk." *Journal of Endocrinology* 180, no. 1 (2004): 1-16. doi:10.1677/joe.0.1800001.

[42] Han, Z. et al. 2012. "Maternal Height and the Risk of Preterm Birth and Low Birth Weight: A Systematic Review and Meta-Analyses." *Journal of Obstetrics and Gynaecology Canada* 34, no. 8 (2012): 721-46. doi:10.1016/s1701-2163(16)35337-3.

[43] Han, Z. et al. "Maternal Underweight and the Risk of Preterm Birth and Low Birth Weight: A Systematic Review and Meta-analyses." *International Journal of Epidemiology* 40, no. 1 (2011): 65-101. doi:10.1093/ije/dyq195.

[44] Periera, P. et al. 2017. "Maternal Active Smoking During Pregnancy and Low Birth Weight in the Americas: A Systematic Review and Meta-analysis." *Nicotine & Tobacco Research* 19, no. 5 (2017): 497-505. doi:10.1093/ntr/ntw228.

[45] Zheng, W. et al. "Association between Maternal Smoking during Pregnancy and Low Birthweight: Effects by Maternal Age." *Plos One* 11, no. 1 (2016). doi:10.1371/journal.pone.0146241.

[46] Blanc, A., and T. Wardlaw. "Monitoring Low Birth Weight: An Evaluation of International Estimates and an Updated Estimation Procedure." *Bulletin of the World Health Organization*83, no. 3 (2005): 178-85. doi:PMC2624216.

2,500 g.[47] This method comprises a single imputation allowing births with missing birthweights to be included in the LBW estimate using data on maternal perception of size at birth, and also moved 25 per cent of data heaped on 2500 g to the LBW category. This was applied to available household survey data and the results were reflected in the UNICEF global LBW database between 2004 and 2017. This computation has been used in earlier rounds of MICS reports.

However, the method of estimating LBW has now been replaced with superior modelling. Currently, this new method is not ready for inclusion in the standard tabulations of MICS. Table TM.7.1 therefore presents only the percentage of children weighed at birth and the crude percentage of LBW among children weighed at birth as reported on available cards or from mother's recall. It should be noted that this crude estimate is likely not representative of the full population (typically an underestimate of true LBW prevalence) and therefore must be interpreted with some caution.

[47] UNICEF, and WHO. *Low Birthweight: Country, regional and global estimates*. New York: UNICEF, 2004. https://www.unicef.org/publications/files/low_birthweight_from_EY.pdf.

Table TM.7.1: Infants weighed at birth

Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live-born child was weighed at birth, by source of information, and percentage of those with a recorded or recalled birthweight estimated to have weighed below 2,500 grams at birth, by source of information, Qatar MICS, 2023

	Percentage of live births weighed at birth:						Percentage of weighed live births recorded below 2,500 grams (crude low birth-weight)[B]:			Number of women with a live birth in the last 2 years whose most recent live-born child have a recorded or recalled birthweight
	From card	From recall	Total[1,A]	Not weighted	Don't know/ Missing	Number of women with a live birth in the last 2 years	From card	From recall	Total	
Total	**17.2**	**81.2**	**98.9**	**0.4**	**0.7**	**1,144**	**0.6**	**1.8**	**2.4**	**1,126**
Nationality										
Qatari	14.7	83.8	99.8	0.0	0.2	165	0.2	1.8	2.0	162
Non-Qatari	17.7	80.7	98.7	0.5	0.7	980	0.7	1.8	2.5	964
Education										
Less than secondary	8.7	91.3	100.0	0.0	0.0	73	0.0	3.8	3.8	73
Secondary+	17.8	80.5	98.8	0.5	0.7	1,072	0.7	1.6	2.3	1,054
Age at most recent live birth										
Less than 20 years	(*)	(*)	(*)	(*)	(*)	5	(*)	(*)	(*)	5
20-34 years	18.3	79.8	98.6	0.6	0.7	811	0.6	1.6	2.2	795
35-49 years	14.3	84.9	99.5	0.0	0.5	328	0.6	2.3	3.0	326
Place of delivery										
Health facility										
Public	18.5	81.0	100.0	0.0	0.0	1,028	0.7	1.6	2.3	1,022
Private	6.2	83.2	89.4	4.4	6.2	116	0.3	3.6	4.0	104
Birth order of most recent live birth										
1	21.0	76.2	98.3	0.5	1.2	320	1.6	1.2	2.9	311
2-3	15.6	82.9	98.7	0.6	0.7	542	0.3	2.4	2.7	534
4-5	14.8	84.8	100.0	0.0	0.0	218	0.2	1.4	1.6	218
6+	20.0	79.4	100.0	0.0	0.0	64	0.0	0.6	0.6	63
Functional difficulties (age 18-49 years)										
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	13	(*)	(*)	(*)	13
Has no functional difficulty	17.1	81.3	98.9	0.5	0.7	1,132	0.6	1.5	2.1	1,114

[1] MICS indicator TM.11 - Infants weighed at birth

[A] The indicator includes children that were reported weighed at birth, but with no actual birthweight recorded or recalled. Only 1.7% of children were reported as *not weighed* at birth, and 4.6% were reported *Don't know/Missing*.

[B] The values here are as recorded on card or as reported by respondent. The total crude low birthweight typically requires adjustment for missing birthweights, as well as heaping, particularly at exactly 2,500 gram. The results presented here cannot be considered to represent the precise rate of low birthweight (very likely an underestimate) and therefore not reported as a MICS indicator.

(*) Figures that are based on fewer than 25 unweighted cases

5.6 HIV

Some of the most important prerequisites for reducing the rate of HIV infection is accurate knowledge of how HIV is transmitted and strategies for preventing transmission.[48, 49] Correct information is the first step towards raising awareness and giving adolescents and young people the tools to protect themselves from infection. Misconceptions about HIV are common and can confuse adolescents and young people and hinder prevention efforts. The UN General Assembly Special Session on HIV/AIDS (UNGASS) called on governments to improve the knowledge and skills of young people to protect themselves from HIV.[48,49] The HIV module administered to women and men 15-49 years of age addresses part of this call.

The Global AIDS Monitoring (GAM) Reporting indicator: the percentage of young people who have comprehensive and correct knowledge of HIV prevention and transmission, is defined as 1) knowing that consistent use of a condom during sexual intercourse and having just one uninfected faithful husband can reduce the chance of getting HIV, 2) knowing that a healthy-looking person can have HIV, and 3) rejecting the two most common local misconceptions about transmission/prevention of HIV. In the Qatar MICS 2023 all women and men who have heard of AIDS were asked questions on all three components and the results are detailed in Tables TM.11.1W and TM.11.1M.

Tables TM.11.1W and TM.11.1M also present the percentage of women and men who can correctly identify misconceptions concerning HIV. The indicator is based on the two most common and relevant misconceptions in Qatar, that HIV can be transmitted by supernatural means or mosquito bites. The tables also provide information on whether women and men know that HIV cannot be transmitted by sharing food with someone with HIV.

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 and men should know that HIV can be transmitted during pregnancy, during delivery, and through breastfeeding. The level of knowledge among women and men age 15-49 years concerning mother-to-child transmission is presented in Tables TM.11.2W and TM.11.2M.

[48] UNAIDS. *Global AIDS Monitoring 2018 - Indicators for monitoring the 2016 United Nations Political Declaration on Ending AIDS.* Geneva: UNAIDS, 2017. http://www.unaids.org/sites/default/files/media_asset/2017-Global-AIDS-Monitoring_en.pdf.

[49] UNAIDS et al. *Fast-Tracking Combination Prevention - Towards reducing new HIV infections to fewer than 500 000 by 2020*. Geneva: UNAIDS, 2015. http://www.unaids.org/sites/default/files/media_asset/20151019_JC2766_Fast-tracking_combination_prevention.pdf.

Table TM.11.1W: Knowledge about HIV transmission, misconceptions about HIV, and comprehensive knowledge about HIV transmission (women)

Percentage of women age 15-49 years who know the main ways of preventing HIV transmission, percentage who know that a healthy-looking person can be HIV-positive, percentage who reject common misconceptions, and percentage who have comprehensive knowledge about HIV transmission, Qatar MICS, 2023

		Percentage who know transmission can be prevented by:			Percentage who know that a healthy-looking person can be HIV-positive	Percentage who know that HIV cannot be transmitted by:			Percentage who reject the two most common misconceptions and know that a healthy-looking person can be HIV-positive	Percentage with comprehensive knowledge[1,A]	Number of women
	Percentage who have heard of AIDS	Having only one faithful uninfected sex husband	Using a condom every time	Both		Mosquito bites	Supernatural means	Sharing food with someone with HIV			
Total	**97.0**	**90.5**	**84.4**	**82.4**	**86.7**	**84.8**	**91.9**	**86.8**	**76.2**	**71.4**	**7,381**
Nationality											
Qatari	96.6	92.9	87.6	86.3	86.6	85.8	91.9	85.5	77.4	74.7	1,368
Non-Qatari	97.1	89.9	83.7	81.5	86.7	84.5	91.9	87.1	75.9	70.6	6,013
Age											
15-24[1]	98.6	90.8	84.9	83.3	85.7	85.0	91.8	87.1	76.4	72.1	1,861
15-19	98.5	89.8	84.0	82.4	85.0	85.4	91.5	86.6	76.5	72.1	995
15-17	98.0	88.8	84.1	82.1	85.7	84.9	91.7	85.7	76.4	71.5	633
18-19	99.2	91.4	83.9	83.0	83.7	86.2	91.3	88.2	76.7	73.2	362
20-24	98.8	92.0	86.0	84.3	86.6	84.5	92.1	87.7	76.4	72.1	866
25-29	99.5	92.7	87.7	85.2	90.5	86.7	94.4	87.8	78.1	73.2	1,196
30-39	96.0	90.0	83.3	81.3	86.3	83.3	91.3	85.9	74.8	69.4	2,700
40-49	94.9	89.2	83.4	81.2	85.8	85.5	91.1	87.4	76.9	72.4	1,624
Education											
Less than secondary	95.3	90.2	84.1	83.3	85.0	84.0	90.2	86.5	77.0	75.7	496
Secondary+	97.1	90.5	84.4	82.4	86.8	84.8	92.0	86.9	76.1	71.1	6,885
Marital status											
Ever married	96.5	90.0	84.2	81.8	86.7	84.4	91.8	86.7	75.7	70.6	4,822
Never married	97.9	91.4	84.8	83.5	86.8	85.4	92.0	87.1	77.1	72.9	2,559
Functional difficulties (age 18-49 years)											
Has functional difficulty	97.3	86.7	78.4	77.1	82.7	68.8	89.1	82.1	60.5	57.9	129
Has no functional difficulty	96.9	90.7	84.6	82.6	86.9	85.0	92.0	87.0	76.5	71.6	6,620

[1] MICS indicator TM.29 - Comprehensive knowledge about HIV prevention among young people

[A] Comprehensive knowledge about HIV prevention includes those who know of the two ways of HIV prevention (having only one faithful uninfected husband and using a condom every time), who know that a healthy-looking person can be HIV-positive and who reject the two most common misconceptions about HIV transmission

Table TM.11.1M: Knowledge about HIV transmission, misconceptions about HIV, and comprehensive knowledge about HIV transmission (men)

Percentage of men age 15-49 years who know the main ways of preventing HIV transmission, percentage who know that a healthy-looking person can be HIV-positive, percentage who reject common misconceptions, and percentage who have comprehensive knowledge about HIV transmission, Qatar MICS, 2023

		Percentage who know transmission can be prevented by:				Percentage who know that HIV cannot be transmitted by:					
	Percentage who have heard of AIDS	Having only one faithful uninfected sex husband	Using a condom every time	Both	Percentage who know that a healthy-looking person can be HIV-positive	Mosquito bites	Supernatural means	Sharing food with someone with HIV	Percentage who reject the two most common misconceptions and know that a healthy-looking person can be HIV-positive	Percentage with comprehensive knowledge[1,A]	Number of men
Total	**96.7**	**92.2**	**88.4**	**86.7**	**89.0**	**87.7**	**92.6**	**89.3**	**81.8**	**78.0**	**3,437**
Nationality											
Qatari	96.0	92.4	88.6	87.7	87.3	86.9	90.6	87.1	80.0	78.3	733
Non-Qatari	96.9	92.1	88.3	86.5	89.4	87.9	93.2	89.9	82.2	77.9	2,704
Age											
15-24[1]	97.8	89.9	87.4	85.1	88.4	85.3	90.9	87.7	78.6	74.5	902
15-19	96.9	89.4	87.4	84.8	87.9	84.0	88.8	87.0	79.5	75.2	545
15-17	98.3	91.5	90.6	88.3	91.9	86.0	90.7	88.0	82.4	79.4	336
18-19	94.8	86.1	82.1	79.2	81.6	80.7	85.6	85.4	74.8	68.4	208
20-24	99.2	90.6	87.5	85.6	89.2	87.2	94.1	88.7	77.2	73.4	357
25-29	98.6	95.7	90.6	89.4	88.7	89.1	94.7	91.6	82.6	79.5	411
30-39	96.1	92.2	86.8	85.2	89.1	89.0	92.8	89.5	82.5	77.7	1,137
40-49	95.6	92.8	90.2	88.9	89.5	87.8	93.2	89.6	83.4	80.8	987
Education											
Less than secondary	97.2	90.9	89.2	87.5	92.4	86.4	91.2	88.4	85.5	83.8	235
Secondary+	96.7	92.2	88.3	86.7	88.7	87.8	92.7	89.4	81.5	77.5	3,202
Marital status											
Ever married	95.8	92.4	88.7	87.2	89.0	88.2	92.9	89.3	82.8	79.5	2,061
Never married	98.1	91.7	87.9	86.0	89.0	86.9	92.2	89.3	80.2	75.7	1,376
Functional difficulties (age 18-49 years)											
Has functional difficulty	(100.0)	(95.0)	(95.0)	(95.0)	(90.0)	(93.0)	(94.0)	(94.0)	(88.0)	(88.0)	36
Has no functional difficulty	96.5	92.2	88.1	86.5	88.6	87.8	92.8	89.4	81.6	77.7	3,064

[1] MICS indicator TM.29 - Comprehensive knowledge about HIV prevention among young people

[A] Comprehensive knowledge about HIV prevention includes those who know of the two ways of HIV prevention (having only one faithful uninfected husband and using a condom every time), who know that a healthy-looking person can be HIV-positive and who reject the two most common misconceptions about HIV transmission

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

Table TM.11.2W: Knowledge of mother-to-child HIV transmission (women)

Percentage of women age 15-49 years who correctly identify means of HIV transmission from mother to child, Qatar MICS, 2023

	Percentage of women who:						
	Know HIV can be transmitted from mother to child:						
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1, A]	Do not know any of the specific means of HIV transmission from mother to child	Number of women
Total	**88.3**	**87.4**	**74.2**	**91.7**	**72.2**	**7.6**	**7,381**
Nationality							
Qatari	90.1	90.2	80.1	92.5	78.3	6.3	1,368
Non-Qatari	87.9	86.8	72.8	91.5	70.8	7.9	6,013
Age group							
15-24	88.2	87.1	75.6	91.1	73.3	7.7	1,861
15-19	88.4	87.1	75.2	90.7	73.2	8.1	995
15-17	88.4	86.1	75.1	90.5	73.3	8.5	633
18-19	88.2	88.8	75.5	91.1	73.1	7.4	362
20-24	87.9	87.2	76.0	91.6	73.4	7.2	866
25-29	91.0	91.3	79.3	94.6	77.3	4.8	1,196
30-39	87.0	85.9	71.5	90.5	69.7	9.0	2,700
40-49	88.5	87.5	73.3	92.2	71.4	7.2	1,624
Education							
Less than secondary	86.1	83.8	78.8	87.7	76.0	11.1	496
Secondary+	88.4	87.7	73.9	92.0	72.0	7.3	6,885
Marital status							
Ever married	88.1	87.1	73.0	91.7	71.1	7.7	4,822
Never married	88.6	88.1	76.5	91.6	74.3	7.3	2,559
Functional difficulties (age 18-49 years)							
Has functional difficulty	86.7	81.1	69.4	93.3	62.4	6.7	129
Has no functional difficulty	88.3	87.7	74.2	91.8	72.3	7.5	6,620

[1] **Country-specific indicator TM.30a - Knowledge of mother-to-child transmission of HIV**

[A] Data on knowledge of special drugs to reduce mother-to-child transmission not collected.

Table TM.11.2M: Knowledge of mother-to-child HIV transmission (men)

Percentage of men age 15-49 years who correctly identify means of HIV transmission from mother to child, Qatar MICS 2023

	Percentage of men who:						
	Know HIV can be transmitted from mother to child:						
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1, A]	Do not know any of the specific means of HIV transmission from mother to child	Number of men
Total	**88.8**	**88.3**	**78.7**	**90.8**	**77.6**	**7.9**	**3,437**
Nationality							
Qatari	88.7	87.8	81.5	90.2	80.2	8.7	733
Non-Qatari	88.9	88.5	78.0	90.9	76.9	7.7	2,704
Age group							
15-24	87.4	87.1	76.7	89.4	75.3	9.0	902
15-19	85.7	85.7	74.6	87.4	73.3	10.4	545
15-17	87.5	87.5	78.1	90.0	76.1	9.4	336
18-19	82.8	82.8	68.9	83.2	68.7	12.0	208
20-24	89.9	89.1	79.9	92.6	78.2	6.8	357
25-29	89.6	88.9	80.9	91.9	79.7	7.1	411
30-39	88.5	88.6	79.3	90.7	78.1	8.2	1,137
40-49	90.3	89.0	79.0	91.7	78.4	6.9	987
Education							
Less than secondary	88.3	88.9	85.0	90.0	84.1	9.0	235
Secondary+	88.9	88.3	78.3	90.8	77.1	7.8	3,202
Marital status							
Ever married	89.5	88.9	79.8	91.2	78.9	7.4	2,061
Never married	87.9	87.4	77.0	90.2	75.7	8.7	1,376
Functional difficulties (age 18-49 years)							
Has functional difficulty	(95.0)	(90.0)	(79.0)	(95.0)	(79.0)	(5.0)	36
Has no functional difficulty	88.9	88.4	78.8	90.8	77.8	7.8	3,064

[1] Country-specific indicator TM.30a - Knowledge of mother-to-child transmission of HIV

[A] Data on knowledge of special drugs to reduce mother-to-child transmission not collected.

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

6 THRIVE – CHILD HEALTH, NUTRITION AND DEVELOPMENT

6.1 IMMUNISATION

Immunisation is a proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between 2 and 3 million deaths each year.[50] It is one of the most cost-effective health investments, with proven strategies that make it accessible to even the most hard-to-reach and vulnerable populations.

The WHO Recommended Routine Immunisations for Children[51] recommends all children to be vaccinated against tuberculosis, diphtheria, tetanus, pertussis, polio, measles, hepatitis B, haemophilus influenzae type b, pneumococcal bacteria/disease, rotavirus, and rubella.[52]

Source of Immunisation Data: MICS LINK

The MICS link initiative refers to the approaches and methods to integrate MICS data with data from other sources. MICS link has been successfully used to link MICS data with administrative data on education, health care, vaccination records and anthropometry. The main objectives of MICS Link are to:

- Increase the analytical power and potential applications of MICS data.
- Enrich MICS data with auxiliary information for better contextualization.
- Reduce respondent burden, potential social desirability and recall bias.
- Promote use of household survey data to inform sector planning and monitoring
- Contribute to improved quality and efficiency of investments in national data ecosystems.

The Qatar MICS 2023 utilized MICS Link initiative to the link survey's data with vaccination records at the Ministry of Public Health (MoH). During data collection, mothers or caretakers of children under five years of age were asked to give permission to access the vaccination records of their children. Mothers or caretakers of children 3-4 years of age were asked to give permission only to access the anthropometry records. The MICS data were linked to children whose mothers or caretakers gave the required permission.

At the global level, SDG indicator 3.b.1 is used to monitor the progress of the vaccination of children at the national level. The proportions of the target population covered by DTP, pneumococcal (conjugate) and measles are presented in Table TC.1.1.

All doses in the primary series are recommended to be completed before the child's first birthday, although depending on the epidemiology of disease in a country, the first doses of measles and rubella containing vaccines may be recommended at 12 months or later. The recommended number and timing of most other doses also vary slightly with local epidemiology and may include booster doses later in childhood.

The following table summarizes the routinely recommended vaccines and immunization schedule for Qatar.

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[50] "Immunization Highlights 2015." World Health Organization. June 27, 2016. Accessed August 23, 2018. http://www.who.int/immunization/highlights/2015/en/.

[51] "WHO Recommendations for Routine Immunization - Summary Tables." World Health Organization. August 22, 2018. Accessed August 23, 2018. http://www.who.int/immunization/policy/immunization_tables/en/.

[52] Additionally, vaccination against the human papillomavirus (HPV) is recommended for girls from 9 to 14 years of age, but coverage of this vaccine is not yet included in MICS, as methodology is under development.

Schedule/Vaccines	Age
BCG Hepatitis B (birth dose)	At Birth
Hexa1 (Hepatitis B+DTaP+Hib+IPV) ROTA1 PCV1	2 Months
Hexa2 (Hepatitis B+DTaP+Hib+IPV) ROTA2 PCV2	4 Months
OPV1 Penta(Hepatitis B+DTaP+Hib) PCV3	6 Months
MMR1 Varicella1 Hepatitis A (HepA1)	12 Months
OPV2 MMR2 Tetra(DTaP+IPV) Hepatitis A (HepA2)	18 Months
OPV3 Varicella2 DTaPB	4 - 6 Years
Tdap	13 - 18 Years

Table TC.1.2 presents vaccination coverage estimates among children age 12-23 and 24-35 months by background characteristics. The figures indicate children receiving the vaccinations at any time up to the date of the survey and are based on information from Ministry of Public Health.

Table TC.1.1: Vaccinations in the first years of life

Percentage of children age 12-23 months and 24-35 months vaccinated against vaccine preventable childhood diseases at any time before the survey (Crude coverage), Qatar MICS, 2023

	Children age 12-23 months: Vaccinated at any time before the survey according to: vaccination records[A,B]	Children age 24-35 months: Vaccinated at any time before the survey according to: vaccination records[A,B]
Antigen		
BCG[1]	100.0	99.9
Polio		
OPV1	97.5	98.6
OPV2	97.0	98.3
HepB (at birth)	99.6	96.6
HepA		
1	89.7	95.1
2	na	93.1
Hexa (HepB+DTaP+Hib+IPV)		
1	98.5	98.3
2[2]	97.8	98.4
Penta[3,4,5]	97.4	98.5
Tetra	na	94.6
Rotavirus		
1	98.0	98.6
2[7]	97.2	98.7
Measles-Mumps-Rubella		
MMR1[8]	90.1	97.9
MMR2[9]	na	96.0
Varicella	90.1	98.1
PCV		
1	98.2	98.7
2	96.8	98.7
3[6]	97.0	98.9
Fully vaccinated		
Basic antigens[10,C]	90.1	97.0
All antigens[11,D]	na	94.6
No vaccinations/No Record	0.0	0.0
Number of children	499	522

[1] MICS indicator TC.1 - Tuberculosis immunization coverage

[2] MICS indicator TC.2 - Polio immunization coverage

[3] MICS indicator TC.3 - Diphtheria, tetanus and pertussis (DTP) immunization coverage; SDG indicator 3.b.1 & 3.8.1

[4] MICS indicator TC.4 - Hepatitis B immunization coverage

[5] MICS indicator TC.5 - Haemophilus influenzae type B (Hib) immunization coverage

[6] MICS indicator TC.6 - Pneumococcal (Conjugate) immunization coverage; SDG indicator 3.b.1

[7] MICS indicator TC.7 - Rotavirus immunization coverage

[8] MICS indicator TC.8 - Rubella immunization coverage

[9] MICS indicator TC.10 - Measles immunization coverage; SDG indicator 3.b.1

[10] MICS indicator TC.11a - Full immunization coverage (basic antigens)

[11] MICS indicator TC.11b - Full immunization coverage (all antigens)

na: not applicable

[A] Ministry of Health vaccination records. 95% of survey records were successfully linked to vaccination records

[B] MICS indicators TC.1, TC.2, TC.3, TC.4, TC.5, TC.6, TC.7, TC.8, and TC.11a refer to children age 12-23 months; MICS indicators TC.10 and TC.11b refer to children age 24-35 months

[C] Basic antigens include: BCG, OPV1, Penta, MMR1

[F] All antigens include: BCG, OPV2, PCV3, Penta, Hexa2, Rota2, MMR2, Varicella as per the vaccination schedule in Qatar

Table TC.1.2: Vaccinations by background characteristics

Percentage of children age 12-23 and 24-35 months currently vaccinated against vaccine preventable childhood diseases (Crude coverage), Qatar MICS, 2023

	Percentage of children age 12-23 months who received:[C]																				Percentage of children age 24-35 months who received:			
		Polio			HepA		Hexa				Rotavirus		MMR			PCV								
	BCG[1]	OPV1	OPV 2	HepB (at birth)	1	2	1	2 [2]	Penta[3, 4,5]	Tetra	1	2 [7]	1 [8]	2 [9]	Vari cella	1	2	3 [6]	Basic antigens[10,A]	No vaccinations	Number of children age 12-23 months	Basic antigens[10,A]	All antigens[11,B]	No vaccinations	Number of children age 24-35 months
Total	**100.0**	**97.5**	**97.0**	**99.6**	**89.7**	**na**	**98.5**	**97.8**	**97.4**	**na**	**98.0**	**97.2**	**90.1**	**na**	**90.1**	**98.2**	**96.8**	**97.0**	**90.1**	**0.0**	**499**	**97.0**	**94.6**	**0.0**	**522**
Sex																									
Male	100.0	96.2	95.2	99.3	85.7	na	97.5	96.2	95.9	na	97.0	95.4	86.4	na	86.4	97.5	95.4	95.9	86.4	0.0	225	99.1	97.2	0.0	235
Female	100.0	98.6	98.5	99.9	93.0	na	99.4	99.2	98.6	na	98.9	98.6	93.1	na	93.1	98.7	97.9	97.8	93.1	0.0	274	95.3	92.4	0.0	287
Mother's education																									
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	(*)	(*)	(*)	0	(*)	(*)	(*)	2
Primary	(*)	(*)	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	(*)	(*)	(*)	20	(*)	(*)	(*)	20
Preparatory	(*)	(*)	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	na	(*)	(*)	(*)	(*)	(*)	(*)	19	(*)	(*)	(*)	19
Secondary+	100.0	97.8	97.2	99.6	90.7	na	98.4	97.8	97.3	na	97.9	97.0	91.1	na	91.1	98.0	96.6	97.2	91.1	0.0	459	96.8	94.5	0.0	482

[1] MICS indicator TC.1 - Tuberculosis immunization coverage
[2] MICS indicator TC.2 - Polio immunization coverage
[3] MICS indicator TC.3 - Diphtheria, tetanus and pertussis (DTP) immunization coverage; SDG indicator 3.b.1 & 3.8.1
[4] MICS indicator TC.4 - Hepatitis B immunization coverage
[5] MICS indicator TC.5 - Haemophilus influenzae type B (Hib) immunization coverage
[6] MICS indicator TC.6 - Pneumococcal (Conjugate) immunization coverage; SDG indicator 3.b.1
[7] MICS indicator TC.7 - Rotavirus immunization coverage
[8] MICS indicator TC.8 - Rubella immunization coverage
[9] MICS indicator TC.10 - Measles immunization coverage; SDG indicator 3.b.1
[10] MICS indicator TC.11a - Full immunization coverage (basic antigens)
[11] MICS indicator TC.11b - Full immunization coverage (all antigens)

na: not applicable

[A] Basic antigens include: BCG, OPV1, Penta1, MMR1

[B] All antigens include: BCG, OPV2, PCV3, Penta1, Hexa2, Rota2, MMR2, Varicella1 as per the vaccination schedule in Qatar

[C] According to Ministry of Health vaccination records. 95% of survey records were successfully linked to vaccination records
(*) Figures that are based on less than 25 unweighted cases

6.2 DISEASE EPISODES

A key strategy for achieving progress toward SDG 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births, is to tackle the diseases such as diarrhoea, pneumonia and malaria which are still among the leading killers of children under 5.[53] Target 3.3 of the SDGs on ending the epidemics on malaria by 2030 along with other diseases is interpreted as the attainment of the Global Technical Strategy for malaria 2016–2030 and the Roll Back Malaria advocacy plan, Action and Investment to defeat Malaria 2016–2030 targets which aim at reducing malaria mortality rates globally by 90 percent compared with 2015.

Table TC.2.1 presents the percentage of children under 5 years of age who were reported to have had an episode of diarrhoea, symptoms of acute respiratory infection (ARI) or fever during the 2 weeks preceding the survey. These results are not measuring of true prevalence, and should not be used as such, but rather the period-prevalence of those illnesses over a two-week time window.

The definition of a case of diarrhoea or fever, in this survey, was the mother's (or caretaker's) report that the child had such symptoms over the specified period; no other evidence was sought beside the opinion of the mother. A child was considered to have had symptoms of ARI if the mother or caretaker reported that the child had, over the specified period, an illness with a cough with rapid or difficult breathing, and whose symptoms were perceived to be due to a problem in the chest or both a problem in the chest and a blocked or runny nose. While this approach is reasonable in the context of a multi-topic household survey, these basically simple case definitions must be kept in mind when interpreting the results, as well as the potential for reporting and recall biases. Further, diarrhoea, fever and ARI are not only seasonal but are also characterized by the often rapid spread of localized outbreaks from one area to another at different points in time. The timing of the survey and the location of the teams might thus considerably affect the results, which must consequently be interpreted with caution. For these reasons, although the period-prevalence over a two-week time window is reported, these data should not be used to assess the epidemiological characteristics of these diseases but rather to obtain denominators for the indicators related to use of health services and treatment.

[53] The main killers of children under age 5 in 2016 included preterm birth complications (18 per cent), pneumonia (16 per cent), intrapartum related events (12 per cent), diarrhoea (8 per cent), neonatal sepsis (7 per cent) and malaria (5 per cent). UNICEF et al. *Levels and Trends in Child Mortality Report 2017.* New York: UNICEF, 2017. https://www.unicef.org/publications/index_101071.html.

Table TC.2.1: Reported disease episodes

Percentage of children age 0-59 months for whom the mother/caretaker reported an episode of diarrhoea, symptoms of acute respiratory infection (ARI), and/or fever in the last two weeks, Qatar MICS, 2023

	Percentage of children who in the last two weeks had:			
	An episode of diarrhoea	Symptoms of ARI[A]	An episode of fever	Number of children
Total	**2.5**	**0.5**	**3.9**	**2,964**
Sex				
Male	2.8	0.4	3.9	1,481
Female	2.1	0.6	4.0	1,483
Nationality				
Qatari	1.9	0.3	3.5	442
Non-Qatari	2.6	0.6	4.0	2,522
Age (in months)				
0-11	0.3	0.4	1.7	537
12-23	4.8	0.6	5.5	559
24-35	2.7	0.6	5.1	588
36-47	3.0	0.3	3.0	625
48-59	1.6	0.7	4.2	654
Mother's education				
Pre-primary or none	(*)	(*)	(*)	7
Primary	9.2	0.0	8.2	89
Preparatory	0.5	0.0	3.6	124
Secondary+	2.4	0.6	3.8	2,745

[A] The indicator may be affected by seasonality. Data collection took place during the summer months when respiratory infections are least common.

(*) Figures that are based on fewer than 25 unweighted cases

6.3 DIARRHOEA

Diarrhoea is one of the leading causes of death among children under five worldwide.[54] 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 salt solution (ORS) or a recommended homemade fluid (RHF) – can prevent many of these deaths.[55] In addition, provision of zinc supplements has been shown to reduce the duration and severity of the illness as well as the risk of future episodes within the next two or three months.

Almost 60 per cent of deaths due to diarrhoea worldwide are attributable to unsafe drinking water and poor hygiene and sanitation. Hand washing with soap alone can cut the risk of diarrhoea by at least 40 per cent and significantly lower the risk of respiratory infections. Clean home environments and good hygiene are important for preventing the spread of both pneumonia and diarrhoea, and safe drinking water and proper disposal of human waste, including child faeces, are vital to stopping the spread of diarrhoeal disease among children and adults.[54]

In the MICS, mothers or caretakers were asked whether their child under age five years had an episode of diarrhoea in the two weeks prior to the survey. In cases where mothers reported that the child had diarrhoea, a series of questions were asked about the treatment of the illness, including what the child had been given to drink and eat during the episode and whether this was more or less than what was usually given to the child. Due to the sample size, the following tables are only disaggregated by nationality and sex of the child.

Table TC.3.1 shows the percentage of children age 0-59 months with diarrhoea in the two weeks preceding the survey for whom advice or treatment was sought and from where.

Table TC.3.2 shows patterns on drinking and feeding practices during diarrhoea among children age 0-59 months.

Table TC.3.3 shows the percentage of children age 0-59 months receiving ORS, various types of recommended homemade fluids and zinc during the episode of diarrhoea. Since children may have been given more than one type of liquid, the percentages do not necessarily add to 100.

Table TC3.4 provides the proportion of children age 0-59 months with diarrhoea in the last two weeks who received oral rehydration therapy with continued feeding, and the percentage of children with diarrhoea who received other treatments.

Table TC.3.5 provides information on the source of ORS and zinc for children age 0-59 months who received these treatments. However, due to the low number of cases, Table TC.3.5 has been omitted.

[54] UNICEF. *One is Too Many: Ending Child Deaths from Pneumonia and Diarrhoea.* New York: UNICEF, 2016. https://data.unicef.org/wp-content/uploads/2016/11/UNICEF-Pneumonia-Diarrhoea-report2016-web-version.pdf.

[55] In 2004, UNICEF and WHO published a joint statement with diarrhoea treatment recommendations for low-income countries, which promotes low-osmolarity rehydration salts (ORS) and zinc, in addition to continued feeding: WHO, and UNICEF. *Clinical Management of Acute Diarrhoea.* Joint Statement, New York: UNICEF, 2004. https://www.unicef.org/publications/files/ENAcute_Diarrhoea_reprint.pdf.

Table TC.3.1: Care-seeking during diarrhoea

Percentage of children age 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Qatar MICS, 2023

	Percentage of children with diarrhoea for whom: Advice or treatment was sought from:					
	Health facilities or providers					
	Public	Private	Other source	A health facility or provider[1,A]	No advice or treatment sought	Number of children with diarrhoea in the last two weeks
Total	**69.0**	**8.5**	**2.6**	**77.6**	**19.8**	**73**
Sex						
Male	(72.3)	(3.7)	(0.0)	(76.1)	(23.9)	42
Female	(64.6)	(15.1)	(6.1)	(79.7)	(14.2)	31
Nationality						
Qatari	(*)	(*)	(*)	(*)	(*)	8
Non-Qatari	(70.0)	(9.7)	(2.4)	(79.7)	(17.9)	65

[1] MICS indicator TC.12 - Care-seeking for diarrhoea

[A] Includes all public and private health facilities and providers, as well as those who did not know if public or private. Excludes private pharmacy.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table TC.3.2: Feeding practices during diarrhea

Percent distribution of children age 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea, Qatar MICS, 2023

	Drinking practices during diarrhoea							Eating practices during diarrhoea							Number of children with diarrhoea in the last two weeks
	Child was given to drink:							Child was given to eat:							
	Much less	Somewhat less	About the same	More	Nothing	Missing/DK	Total	Much less	Somewhat less	About the same	More	Nothing	Missing/DK	Total	
Total	**12.9**	**17.2**	**25.4**	**29.1**	**7.3**	**8.2**	**100.0**	**30.4**	**25.8**	**24.5**	**11.6**	**4.3**	**3.5**	**100.0**	**73**
Sex															
Male	(13.4)	(10.5)	(27.7)	(31.2)	(11.9)	(5.3)	100.0	(32.8)	(23.9)	(26.9)	(9.0)	(7.4)	(0.0)	100.0	42
Female	(12.2)	(26.2)	(22.2)	(26.2)	(1.0)	(12.2)	100.0	(27.3)	(28.3)	(21.2)	(15.1)	(0.0)	(8.2)	100.0	31
Nationality															
Qatari	(*)	(*)	(*)	(*)	(*)	(*)	100.0	(*)	(*)	(*)	(*)	(*)	(*)	100.0	8
Non-Qatari	(12.1)	(17.4)	(24.1)	(31.9)	(7.2)	(7.2)	100.0	(31.4)	(25.1)	(24.1)	(12.1)	(4.8)	(2.4)	100.0	65

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table TC.3.3: Oral rehydration solutions, government-recommended homemade fluid and zinc

Percentage of children age 0-59 months with diarrhoea in the last two weeks, and treatment with oral rehydration salt solution (ORS), government-recommended homemade fluid, and zinc, Qatar MICS, 2023

	Percentage of children with diarrhoea who received:							
	Oral rehydration salt solution (ORS)							
	Fluid from packet	Pre-packaged fluid	Any ORS[1]	Government-recommended homemade fluid (Sage/ Artemisia herb)	ORS or government-recommended homemade fluid	Zinc tablets or syrup	ORS and zinc[2]	Number of children with diarrhoea in the last two weeks
Total	**62.6**	**44.1**	**62.6**	**6.4**	**62.6**	**15.5**	**14.1**	**73**
Sex								
Male	(65.5)	(44.7)	(65.5)	(3.7)	(65.5)	(17.9)	(16.4)	42
Female	(58.5)	(43.4)	(58.5)	(10.1)	(58.5)	(12.2)	(11.1)	31
Nationality								
Qatari	(*)	(*)	(*)	(*)	(*)	(*)	(*)	8
Non-Qatari	(65.2)	(45.9)	(65.2)	(7.2)	(65.2)	(14.5)	(14.5)	65

[1] MICS indicator TC.13a - Diarrhoea treatment with oral rehydration salt solution (ORS)

[2] MICS indicator TC.13b - Diarrhoea treatment with oral rehydration salt solution (ORS) and zinc

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.3.4: Oral rehydration therapy with continued feeding and other treatments

Percentage of children age 0-59 months with diarrhoea in the last two weeks who were given oral rehydration therapy with continued feeding and percentage who were given other treatments, Qatar MICS, 2023

	Children with diarrhoea who were given:																
					Other treatments												
					Pill or syrup				Injection								
	Zinc	ORS or increased fluids	ORT (ORS or government-recommended homemade fluid or increased fluids)	ORT with continued feeding[1]	Anti-biotic	Anti-motility	Other	Unknown	Anti-biotic	Non-antibiotic	Unknown	Intra-venous	Home remedy, herbal medicine	Other	No other treatment	Not given any treatment or drug	Number of children with diarrhoea in the last two weeks
Total	**15.5**	**74.1**	**74.1**	**49.3**	**13.3**	**12.5**	**4.3**	**0.4**	**0.0**	**0.0**	**0.0**	**0.4**	**0.4**	**9.0**	**67.0**	**19.8**	**73**
Sex																	
Male	(17.9)	(77.5)	(77.5)	(42.5)	(11.9)	(13.4)	(3.7)	(0.8)	(0.0)	(0.0)	(0.0)	(0.8)	(0.8)	(4.5)	(69.4)	(20.2)	42
Female	(12.2)	(69.6)	(69.6)	(58.5)	(15.1)	(11.1)	(5.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(15.1)	(63.7)	(19.3)	31
Nationality																	
Qatari	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	8
Non-Qatari	(14.5)	(77.8)	(77.8)	(51.2)	(14.5)	(12.1)	(4.8)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(9.7)	(66.2)	(17.4)	65

[1] **MICS indicator TC.14 - Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding**

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

6.4 HOUSEHOLD ENERGY USE

There is a global consensus and an ever-growing body of evidence that expanding access to clean household energy for cooking, heating, and lighting is key to achieving a range of global priorities such as improving health, gender equality, equitable economic development and environmental protection. Goal 7 of the Sustainable Development Goals seeks to ensure access to affordable, reliable sustainable and modern energy for all by 2030 and would be measured as the percentage of the population relying on clean fuels and technology. [56]

The Qatar MICS 2023 included a module with questions to assess the main technologies and fuels used for cooking and space cooling.

Households that use clean fuels and technologies for cooking are those mainly using electric stove, solar cooker, LPG (Liquefied Petroleum Gas)/cooking gas stove, biogas stove, or a liquid fuel stove burning ethanol/alcohol only. Table TC.4.1 presents the percent distribution of household members according to type of cookstove mainly used by the household and percentage of household members living in households using clean fuels and technologies for cooking.

Households that use clean fuels and technologies for space cooling are those mainly relying on central cooling, window conditioner, or using standalone/split air conditioner. Table TC.4.4 presents the percent distribution of household members according to type of fuel mainly used for space cooling by the household, and percentage of household members living in households using clean fuels and technologies for space cooling.

The questions asked about cooking and space cooling help to monitor SDG indicator 7.1.2, “Proportion of population with primary reliance on clean fuels and technology” for cooking, space heating and lighting.

[56] WHO. *Burning Opportunity: Clean Household Energy for Health, Sustainable Development, and Wellbeing of Women and Children*. Geneva: WHO Press, 2016. http://apps.who.int/iris/bitstream/handle/10665/204717/9789241565233_eng.pdf;jsessionid=63CEC48ED96098D4256007A76FEB8907?sequence=1.

Table TC.4.1: Primary reliance on clean fuels and technologies for cooking

Percent distribution of household members by type of cookstove mainly used by the household and percentage of household members living in households using clean fuels and technologies for cooking, Qatar MICS, 2023

	Percentage of household members in households with primary reliance on: Clean fuels and technologies for cooking and using					
	Electric stove	Gas Stove	Total	Number of household members	Primary reliance on clean fuels and technologies for cooking (in households that reported cooking)[1]	Number of household members (living in households that reported cooking)
Total	**15.0**	**85.0**	**100.0**	**27381**	**100.0**	**27,381**
Nationality						
Qatari	16.6	83.4	100.0	6,143	100.0	6,143
Non-Qatari	14.5	85.5	100.0	21,239	100.0	21,239
Education of household head						
Pre-primary or none	9.1	90.9	100.0	94	100.0	94
Primary	20.3	79.7	100.0	481	100.0	481
Preparatory	9.4	90.6	100.0	2,473	100.0	2,473
Secondary+	15.5	84.5	100.0	24,333	100.0	24,333

[1] MICS indicator TC.15 - Primary reliance on clean fuels and technologies for cooking

Table TC.4.4: Primary reliance on clean fuels and technologies for space cooling

Percentage of household members living in households using clean fuels and technologies for space cooling, Qatar MICS, 2023

	Percentage of household members in households with primary reliance on Clean fuels for space cooling[A]:						
	Central air conditioner	Window Conditioner	Stand alone / Split air conditioner	Total	Number of household members	Primary reliance on clean fuels and technologies for space cooking [1]	Number of household members (living in households that reported the use of space cooling)
Total	**7.5**	**14.5**	**78.0**	**100.0**	**27,381**	**100.0**	**27,381**
Nationality							
Qatari	4.4	4.4	91.2	100.0	5,051	100	5,051
Non-Qatari	8.2	16.8	75.0	100.0	22,330	100	22,330
Education of household head							
Pre-primary or none	2.5	35.7	61.7	100.0	94	100	94
Primary	5.5	27.1	67.4	100.0	481	100	481
Preparatory	2.5	21.9	75.6	100.0	2,473	100	2,473
Secondary+	8.1	13.4	78.5	100.0	24,333	100	24,333

[1] Non-MICS Country Specific Indicator TC.16N - Primary reliance on clean fuels and technologies for space cooling

[A] For those living in households that are not using central cooling

6.5 SYMPTOMS OF ACUTE RESPIRATORY INFECTION

Symptoms of ARI are collected during the Qatar MICS 2023 to capture symptoms related to pneumonia, a leading cause of death in children under five.[53] Once diagnosed, pneumonia is treated effectively with antibiotics. Studies have shown a limitation in the survey approach of measuring pneumonia because many of the cases reported in surveys by the mothers or caretakers with symptoms of pneumonia are in fact, not true pneumonia.[57] While this limitation does not affect the level and patterns of care-seeking for symptoms of ARI, it limits the validity of the level of treatment of ARI with antibiotics, as reported through household surveys. The treatment indicator described in this report must therefore be taken with caution.

In most MICS surveys, Table TC.5.1 presents the percentage of children with symptoms of ARI, which is also generally referred to as symptoms of pneumonia, in the two weeks preceding the survey for whom care was sought, by source of care and the percentage who received antibiotics. However, this table is not presented for Qatar MICS 2023 because the number of children under five with symptoms of ARI in the last two weeks is very low (13 children).

6.6 FEVER

Improving parental practices for managing fever in children is a first step to reducing the overloaded healthcare system related to this common symptom. Parents' knowledge and practices related to managing fever symptoms in children frequently differ from recommendations. Targeted health education interventions are needed to effectively manage fever symptoms in children.

Table TC.6.10 presents the percentage of children under age five with fever in the last two weeks for whom advice or treatment was sought by source of advice or treatment. Table TC.6.11 provide further insight on treatment of children with fever.

Mothers were also asked to report all of the medicines given to a child to treat the fever, including both medicines given at home and medicines given or prescribed at a health facility. Treatment-related findings are presented in table TC.6.11.

[57] Campbell, H. et al. "Measuring Coverage in MNCH: Challenges in Monitoring the Proportion of Young Children with Pneumonia Who Receive Antibiotic Treatment." *PLoS Med* 10, no.5 (2013). doi:10.1371/journal.pmed.1001421

Table TC.6.10: Care-seeking during fever

Percentage of children age 0-59 months with fever in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Qatar MICS, 2023

	Percentage of children with fever for whom:					
	Advice or treatment was sought from:					
	Health facilities or providers					
	Public	Private	Other source	A health facility or provider[1,A]	No advice or treatment sought	Number of children with fever in last two weeks
Total	**55.9**	**10.8**	**0.0**	**64.0**	**36.0**	**116**
Sex						
Male	57.4	13.3	0.0	67.9	32.1	57
Female	(54.5)	(8.5)	(.0)	(60.3)	(39.7)	59
Nationality						
Qatari	(56.1)	(10.5)	(.0)	(66.5)	(33.5)	16
Non-Qatari	55.9	10.9	0.0	63.6	36.4	101
Age (in months)						
0-11	(*)	(*)	(*)	(*)	(*)	9
12-23	(53.1)	(6.1)	(.0)	(59.2)	(40.8)	31
24-35	(51.0)	(27.0)	(.0)	(67.6)	(32.4)	30
36-47	(*)	(*)	(*)	(*)	(*)	19
48-59	(*)	(*)	(*)	(*)	(*)	28
Mother's education						
Pre-primary or none	-	-	-	-	-	0
Primary	(*)	(*)	(*)	(*)	(*)	7
Preparatory	(*)	(*)	(*)	(*)	(*)	4
Secondary+	58.2	10.2	0.0	66.9	33.1	105
Mother's functional difficulties[B]						
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	5
Has no functional difficulty	57.0	9.9	0.0	64.1	35.9	111

[1] MICS indicator TC.26 - Care-seeking for fever

[A] Includes all public and private health facilities and providers, as well as those who did not know if public or private. Also includes shops.

[B] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases
–' denotes 0 unweighted case in the denominator

Table TC.6.11: Treatment of children with fever

Percentage of children age 0-59 months who had a fever in the last two weeks, by type of medicine given for the illness, Qatar MICS, 2023

	Children with a fever in the last two weeks who were given:									
	Other medications									
	Amoxicillin	Cotrimoxazole	Other antibiotic pill or syrup	Other antibiotic injection	Paracetamol/ Panadol/ Acetaminophen	Aspirin	Ibuprofen	Other	Missing/DK	Number of children with fever in last two weeks
Total	**16.5**	**1.3**	**2.2**	**0.0**	**49.2**	**0.3**	**28.6**	**10.5**	**3.5**	**116**
Sex										
Male	17.1	0.0	3.3	0.0	63.0	0.0	21.5	12.1	6.1	57
Female	(15.8)	(2.6)	(1.1)	(.0)	(36.0)	(.5)	(35.4)	(9.0)	(1.1)	59
Nationality										
Qatari	(22.6)	(.0)	(6.3)	(.0)	(52.3)	(2.1)	(22.6)	(8.4)	(6.3)	16
Non-Qatari	15.5	1.6	1.6	0.0	48.8	0.0	29.5	10.9	3.1	101
Age (in months)										
0-11	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	9
12-23	(17.3)	(5.1)	(.0)	(.0)	(37.8)	(1.1)	(25.4)	(11.2)	(2.1)	31
24-35	(17.7)	(.0)	(6.3)	(.0)	(53.1)	(.0)	(32.2)	(15.6)	(5.2)	30
36-47	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	19
48-59	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	28
Mother's education										
Pre-primary or none	-	-	-	-	-	-	-	-	-	0
Primary	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	7
Preparatory	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	4
Secondary+	18.3	1.5	2.4	0.0	52.3	0.0	25.2	11.4	3.6	105
Mother's functional difficulties[A]										
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	5
Has no functional difficulty	17.2	1.4	2.3	0.0	50.1	0.3	28.5	8.2	3.7	111

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.
(*) Figures that are based on fewer than 25 unweighted cases.
( ) Figures that are based on 25-49 unweighted cases
–' denotes 0 unweighted case in the denominator

6.7 INFANT AND YOUNG CHILD FEEDING

Optimal infant and young child feeding practices can increase survival and promote healthy growth and development, particularly during the critical window from birth to 2 years of age.

Breastfeeding in the first few years of life protects children from infection, provides an ideal source of nutrients and is economical and safe.[58] Despite these critical benefits, breastfeeding practices are suboptimal in many parts of the world. Many children do not start breastfeeding early enough, do not breastfeed exclusively for the recommended six months or stop breastfeeding too soon.[59] Mothers often face pressures to switch to infant formula, which can contribute to growth faltering and micronutrient malnutrition. Infant formula and other breastmilk substitutes can also be life-threatening in settings where hygienic conditions and safe drinking water are not readily available. In some cases, it can be unsafe even with proper and hygienic preparation in the home due to food adulteration or other contamination that can affect unaware consumers.[60] As children reach the age of 6 months, their consumption of appropriate, adequate and safe complementary foods and continued breastfeeding leads to better health and growth outcomes, with the potential to reduce stunting during the first two years of life.[61]

UNICEF and WHO recommend that infants be: (i) breastfed within one hour of birth; (ii) breastfed exclusively for the first six months of life; and (iii) breastfed for up to 2 years of age and beyond.[62] Starting at 6 months, breastfeeding should be combined with safe, age-appropriate feeding of solid, semi-solid and soft foods with specific guiding principles available about how the feeding should be done with topics ranging from food consistency to responsive feeding.[63,64] The breastfeeding recommendations and guiding principles for complementary feeding for which standard indicators[65,66] have been developed, and which are collected in this survey, are listed in the table below.

[58] Victora, C. et al. "Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect." *The Lancet* 387, (2016): 475–90. doi: https://doi.org/10.1016/S0140-6736(15)01024-7

[59] UNICEF. *From the first hour of life. Making the case for improved infant and young child feeding everywhere.* New York: UNICEF, 2016. https://data.unicef.org/wp-content/uploads/2016/10/From-the-first-hour-of-life.pdf

[60] Gossner, C. et al. "The Melamine incident: Implications for international food and feed safety." *Environ Health Perspective* 117, no. 12 (2009): 1803–1808. doi: 10.1289/ehp.0900949

[61] Bhuta, Z. et al. "Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost?" *The Lancet* 382, no. 9890 (2013):452-477. doi: 10.1016/S0140-6736(13)60996-4

[62] WHO. *Implementing the Global Strategy for Infant and Young Child Feeding*. Meeting Report, Geneva: WHO Press, 2003. http://apps.who.int/iris/bitstream/handle/10665/42590/9241562218.pdf?sequence=1

[63] PAHO. *Guiding principles for complementary feeding of the breastfed child*. 2003.

[64] WHO. *Guiding principles for feeding non-breastfed children 6-24 months of age*. Geneva: WHO Press, 2005. http://apps.who.int/iris/bitstream/handle/10665/43281/9241593431.pdf?sequence=1

[65] WHO, UNICEF, USAID, AED, UCDAVIS, IFPRI. Indicators for assessing infant and young child feeding practices, Part I definitions. 2008.

[66] UNICEF, FANTA, USAID, WHO. *Reconsidering, refining and extending the WHO IYCF Indicators.* Meeting Report, New York, 2017. https://data.unicef.org/resources/meeting-report-infant-young-child-feeding-indicators/

Recommendation/ guiding principle	Indicators /proximate measures[67]	Notes on interpretation[68]	Table
Breastfeed within one hour of birth	**Early Initiation of breastfeeding** Percentage of most recent live-born children to women with a live birth in the last 2 years who were put to the breast within one hour of birth	This is the only indicator in the series based on historical recall, that is, of what happened up to 2 years before the survey interview.	TC 7.1
Breastfeed exclusively for the first six months of life	**Exclusive breastfeeding under 6 months** Percentage of infants under 6 months of age who are exclusively breastfed[69]	Captures the desired practice for the entire population of interest (i.e., all children age 0-5 months should be exclusively breastfed) in a 24-hour period. It does not represent the proportion of infants who are exclusively breastfed every day from birth until they are 6 months of age and should not be interpreted as such.	TC.7.3
Introduce solid, semi-solid and soft foods at the age of 6 months	**Introduction of solid, semi-solid or soft foods (age 6-8 months)** Percentage of infants age 6-8 months who received solid, semi-solid or soft foods during the previous day	Captures the desired practice for the entire population of interest (i.e., all children age 6-8 months should eat solids) in a 24-hour period. It does not represent the proportion of infants who began receiving solids when they turned 6 months nor the proportion of children age 6-8 months who received solids every day since they turned 6 months of age and should not be interpreted as such.	TC 7.6
Continue frequent, on-demand breastfeeding for two years and beyond	**Continued breastfeeding at 1 year and 2 years** Percentage of children age 12-15 months (1 year) and 20-23 months (2 years) who received breast milk during the previous day	Captures the desired practice for different populations of interest (children should be breastfed for up to 2 years) in a 24-hour period. However, the label of 1 and 2 years can be confusing given the actual age range in months for each indicator.	TC.7.3
Provide meals with appropriate frequency and energy density	**Minimum meal frequency (age 6–23 months)** <u>Breastfed children:</u> Depending on age, at least two or three meals/snacks provided during the previous day <u>Non-breastfed children:</u> At least four meals/snacks <u>and/or milk feeds</u> provided during the previous day	This indicator represents the minimum number of meals and not adequacy. In addition, standard questionnaires do not distinguish if milk feeds were provided as part of a solid meal or as a separate meal. Meals may therefore be double counted for some non-breastfed children. Rates should not be compared between breastfed and non-breastfed children.	TC.7.7
Provide foods with appropriate nutrient content	**Minimum dietary diversity (age 6–23 months)** At least five of eight food groups[70] consumed in the 24 hours preceding the survey	This indicator represents the minimum dietary diversity and not adequacy. In addition, consumption of any amount of food from each food group is sufficient to "count" as the standard indicator is only meant to capture yes/no responses. Rates should not be compared between breastfed and non-breastfed children.	TC.7.7

[67] It should be noted that these indicators are, in general, proximate measures which do not capture the exact recommendations or guidelines, but serve as a basis for monitoring, providing useful information on the population of interest.

[68] For all indicators other than early initiation of breastfeeding, the definition is based on current status, that is, what happened during the day before the survey from the time when the child woke up to the time when he/she went to sleep until the morning of the day of the interview.

[69] Infants receiving breast milk, and not receiving any other fluids or foods, with the exception of oral rehydration solution, vitamins, mineral supplements and medicines.

[70] The indicator is based on consumption of any amount of food from at least 5 out of the 8 following food groups: 1) Breastmilk, 2) grains, roots and tubers, 3) legumes and nuts, 4) dairy products (milk, infant formula, yogurt, cheese), 5) flesh foods (meat, fish, poultry and liver/organ meats), 6) eggs, 7) vitamin-A rich fruits and vegetables, and 8) other fruits and vegetables

Recommendation/ guiding principle	Indicators /proximate measures[67]	Notes on interpretation[68]	Table
Provide an appropriate amount of food	No standard indicator exists		na
Provide food with appropriate consistency	No standard indicator exists		na
Use of vitamin-mineral supplements or fortified products	No standard indicator exists		na
Safe preparation and storage of foods	While it was not possible to develop indicators to fully capture guidance, one indicator does cover part of the principle: Not feeding with a bottle with a nipple		TC.7.8
Responsive feeding	No standard indicator exists		na

In addition to the indicators in the table above, three dimensions of complementary feeding are combined to form a composite indicator of "minimum acceptable diet". This indicator assesses energy needs and nutrient adequacy (apart from iron). To have a minimum acceptable diet, a child must have received in the previous day:

(i) The appropriate number of meals/snacks/milk feeds;
(ii) Food items from at least 5 out of 8 food groups for breastfed children; and 4 out of 7[71] food groups for non-breastfed children; and
(iii) At least two milk feeds for non-breastfed children.

Table TC.7.1 is based on mothers' reports of when their last-born child, born in the last two years, was first put to the breast. It indicates the proportion who were ever breastfed, as well as those who were first breastfed within one hour and one day of birth.

Table TC.7.2 presents information about liquids or other items newborns were given in the first 3 days of life, apart from breastmilk. The data are disaggregated by various background characteristics, including whether the child was ever breastfed or not.

The set of infant and young child feeding indicators reported in tables TC.7.3 through TC.7.6 are based on the mother's report of consumption of food and liquids during the day or night prior to being interviewed. Data are subject to a number of limitations, some related to the respondent's ability to provide a full report on the child's liquid and food intake due to recall errors, as well as lack of knowledge in cases where the child was fed by other individuals.

In Table TC.7.3, breastfeeding status is presented for *exclusively breastfed* infants age 0–5 months (i.e. those who receive only breastmilk) and *predominantly* breastfed infants age 0–5 months (i.e. those who receive breastmilk in addition to plain water and/or non-milk liquids). The table also shows continued breastfeeding of children age 12–15 months and age 20–23 months.

Table TC.7.4 shows the median duration of any breastfeeding among children age 0–35 months and the median duration of exclusive breastfeeding and predominant breastfeeding among children age 0–23 months.

[71] Note that the denominator becomes 7 food groups for non-breastfed children in the composite indicator as the milk products group is removed from diet diversity, as this is assessed separately.

The age-appropriateness of breastfeeding practices for children under the age of 24 months is provided in Table TC.7.5. Different feeding criteria are used depending on the age of the child. For infants age 0–5 months, exclusive breastfeeding is considered age-appropriate feeding, while children age 6–23 months are considered appropriately fed if they are receiving breastmilk and solid, semi-solid or soft foods.

Table TC.7.6 further looks into the introduction of solid, semi-solid, or soft foods for infants age 6–8 months, while Table TC.7.7 presents the percentage of children age 6–23 months who received the minimum number and diversity of meals/snacks during the previous day (referring to solid, semi-solid, or soft food, but also milk feeds for non-breastfed children), by breastfeeding status.

The continued practice of bottle-feeding is a concern because of the potential for contamination if the bottle and/or nipple are not properly cleaned or sterilized. Bottle-feeding can also hinder breastfeeding due to nipple confusion, especially at the youngest ages.[72] Table TC.7.8 presents the percentage of children aged 0–23 months who were bottle-fed with a nipple during the previous day.

Table TC.7.1: Initial breastfeeding

Percentage of most recent live-born children to women age 15-49 years with a live birth in the last two years who were ever breastfed, breastfed within one hour of birth and within one day of birth, Qatar MICS, 2023

	Percentage who were ever breastfed[1]	Percentage of children who were first breastfed:		Number of most recent live-born children to women with a live birth in the last 2 years
		Within one hour of birth[2]	Within one day of birth	
Total	**93.6**	**61.3**	**82.9**	**1,144**
Nationality				
Qatari	91.8	63.7	86.4	165
Non-Qatari	94.0	60.9	82.3	980
Months since last birth				
0-11 months	94.7	63.2	84.7	566
12-23 months	92.6	59.4	81.1	578
Mother's education				
Pre-primary or none	(*)	(*)	(*)	1
Primary	(98.9)	(82.1)	(86.4)	33
Preparatory	(94.4)	(72.7)	(87.2)	38
Secondary+	93.4	60.3	82.6	1,072
Assistance at delivery				
Skilled attendant	93.6	61.3	82.9	1,144
Place of delivery				
Health facility				
Public	93.5	62.3	83.2	1,028
Private	94.6	52.7	80.5	116
Type of delivery				
Vaginal birth	95.1	72.7	89.6	768
C-Section	90.6	38.0	69.3	377
Mother's functional difficulties				
Has functional difficulty	(*)	(*)	(*)	13
Has no functional difficulty	93.6	61.0	82.7	1,132

[1] MICS indicator TC.30 - Children ever breastfed

[2] MICS indicator TC.31 - Early initiation of breastfeeding

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

(*) Figures that are based on fewer than 25 unweighted cases

[72] Zimmerman, E. and K. Thompson. "Clarifying Nipple confusion." *J Perinatol* 35, no.11 (2015):895-9. doi: 10.1038/jp.2015.83.

Table TC.7.2: Newborn feeding

Percentage of most recent live-born children to women age 15-49 years with a live birth in the last 2 years by type of liquids or items (not considering breastmilk) consumed in the first 3 days of life, Qatar MICS 2023

	Percentage of children who consumed:					Type[A] of liquids or items (not considering breastmilk) consumed in the first 3 days of life				Number of most recent live-born children to women with a live birth in the last 2 years
	Milk (other than breastmilk)	Infant formula	Prescribed medicine	Other	Nothing	Milk-based liquids only	Non-milk-based liquids/ items only	Both	Any	
Total	**9.5**	**31.0**	**2.1**	**0.4**	**62.4**	**36.3**	**0.3**	**0.1**	**36.8**	**1,144**
Nationality										
Qatari	7.1	26.6	0.6	0.0	68.7	31.1	0.0	0.0	31.1	165
Non-Qatari	9.9	31.7	2.3	0.5	61.4	37.2	0.3	0.2	37.7	980
Months since birth										
0-11 months	10.6	28.5	2.3	0.3	65.4	34.0	0.0	0.3	34.3	566
12-23 months	8.4	33.4	1.9	0.6	59.5	38.6	0.6	0.0	39.2	578
Breastfeeding status										
Ever breastfed	7.9	28.3	2.2	0.3	66.5	32.4	0.3	0.0	32.7	1,072
Never breastfed	32.4	71.0	0.0	2.4	2.9	94.8	0.0	2.4	97.1	72
Assistance at delivery										
Skilled attendant	9.5	31.0	2.1	0.4	62.4	36.3	0.3	0.1	36.8	1,144
Place of delivery										
Health facility										
Public	9.0	30.2	1.8	0.5	63.5	35.4	0.3	0.2	35.9	1,028
Private	13.9	37.8	4.7	0.0	53.0	44.1	0.0	0.0	44.1	116
Mother's education										
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	1
Primary	(2.2)	(28.2)	(.0)	(.0)	(71.8)	(28.2)	(.0)	(.0)	(28.2)	33
Preparatory	(2.8)	(25.4)	(4.5)	(.0)	(67.4)	(28.2)	(.0)	(.0)	(28.2)	38
Secondary+	10.0	31.3	2.1	0.5	61.9	36.9	0.3	0.2	37.4	1,072
Mother's functional difficulties										
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	13
Has no functional difficulty	9.5	31.2	2.1	0.5	62.3	36.4	0.3	0.2	36.9	1,132

[A] Milk-based liquids include milk (other than breastmilk) and infant formula. Non-milk-based include plain water, sugar or glucose water, fruit juice, tea/infusions/traditional herbal preparations, and "other". Note that prescribed medicine/ORS/sugar-salt solutions are not included in any category.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.7.3: Breastfeeding status

Percentage of living children according to breastfeeding status at selected age groups, Qatar MICS, 2023

	Children age 0-5 months			Children age 12-15 months		Children age 20-23 months	
	Percent exclusively breastfed[1]	Percent predominantly breastfed[2]	Number of children	Percent breastfed (Continued breastfeeding at 1 year)[3]	Number of children	Percent breastfed (Continued breastfeeding at 2 years)[4]	Number of children
Total	**45.4**	**51.4**	**272**	**53.3**	**201**	**50.7**	**139**
Sex							
Male	42.3	47.8	143	54.5	100	47.2	63
Female	48.8	55.4	129	52.0	102	53.6	76
Nationality							
Qatari	(39.9)	(44.5)	42	(45.6)	29	(31.6)	25
Non-Qatari	46.4	52.7	230	54.5	172	54.8	114
Mother's education							
Pre-primary or none	(*)	(*)	1	(*)	0	-	0
Primary	(*)	(*)	8	(*)	10	(*)	5
Preparatory	(*)	(*)	8	(*)	8	(*)	5
Secondary+	45.0	51.4	256	53.0	183	52.0	128
Mother's functional difficulties[A]							
Has functional difficulty	(*)	(*)	2	(*)	2	(*)	2
Has no functional difficulty	45.6	51.8	265	52.9	200	51.5	137

[1] MICS indicator TC.32 - Exclusive breastfeeding under 6 months

[2] MICS indicator TC.33 - Predominant breastfeeding under 6 months

[3] MICS indicator TC.34 - Continued breastfeeding at 1 year

[4] MICS indicator TC.35 - Continued breastfeeding at 2 years

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases.
–' denotes 0 unweighted case in the denominator

Table TC.7.4: Duration of breastfeeding

Median duration of any breastfeeding among children age 0-35 months and median duration of exclusive breastfeeding and predominant breastfeeding among children age 0-23 months, Qatar MICS, 2023

	Median duration (in months) of any breastfeeding[1]	Number of children age 0-35 months	Median duration (in months) of: Exclusive breastfeeding	Median duration (in months) of: Predominant breastfeeding	Number of children age 0-23 months
Median	**20.6**	**1,683**	**2.1**	**2.7**	**1,093**
Sex					
Male	16.8	792	1.4	2.3	531
Female	21.2	891	2.4	3.1	562
Nationality					
Qatari	12.9	250	1.1	1.8	169
Non-Qatari	21.1	1,432	2.2	2.8	924
Mother's education					
Pre-primary or none	(*)	3	(*)	(*)	1
Primary	21.5	51	(6.4)	(6.4)	30
Preparatory	18.7	59	(*)	(*)	37
Secondary+	20.7	1,570	2.0	2.7	1,025
Mother's functional difficulties[A]					
Has functional difficulty	(*)	28	(*)	(*)	13
Has no functional difficulty	20.6	1,650	2.1	2.7	1,076
Mean	18.5	1,683	3.2	3.8	1,093

[1] MICS indicator TC.36 - Duration of breastfeeding

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table TC.7.5: Age-appropriate breastfeeding

Percentage of children age 0-23 months who were appropriately breastfed during the previous day, Qatar MICS, 2023

	Children age 0-5 months		Children age 6-23 months		Children age 0-23 months	
	Percent exclusively breastfed[1]	Number of children	Percent currently breastfeeding and receiving solid, semi-solid or soft foods	Number of children	Percent appropriately breastfed[2]	Number of children
Total	**45.4**	**272**	**58.2**	**821**	**55.0**	**1,093**
Sex						
Male	42.3	143	58.2	388	53.9	531
Female	48.8	129	58.3	433	56.1	562
Nationality						
Qatari	39.9	42	44.2	126	43.2	169
Non-Qatari	46.4	230	60.8	695	57.2	924
Mother's education						
Pre-primary or none	(*)	1	(*)	1	(*)	1
Primary	(*)	8	(*)	22	(61.6)	30
Preparatory	(*)	8	(55.8)	29	(48.6)	37
Secondary+	45.0	256	58.5	769	55.1	1,025
Mother's functional difficulties[A]						
Has functional difficulty	(*)	2	(*)	10	(*)	13
Has no functional difficulty	45.6	265	58.4	810	55.2	1,076

[1] MICS indicator TC.32 - Exclusive breastfeeding under 6 months

[2] MICS indicator TC.37 - Age-appropriate breastfeeding

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.7.6: Introduction of solid, semi-solid, or soft foods

Percentage of infants age 6-8 months who received solid, semi-solid, or soft foods during the previous day, Qatar MICS, 2023

	Currently breastfeeding		Currently not breastfeeding		All	
	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods[1]	Number of children age 6-8 months
Total	**78.9**	**118**	**(*)**	**20**	**79.2**	**138**
Nationality						
Qatari	(*)	19	(*)	5	(*)	23
Non-Qatari	79.4	99	(*)	16	80.9	115
Sex						
Male	79.4	58	(*)	10	78.8	68
Female	78.3	59	(*)	10	79.6	70

[1] MICS indicator TC.38 - Introduction of solid, semi-solid or soft foods

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.7.7: Infant and young child feeding (IYCF) practices

Percentage of children age 6-23 months who received appropriate liquids and solid, semi-solid, or soft foods the minimum number of times or more during the previous day, by breastfeeding status, Qatar MICS, 2023

	Currently breastfeeding				Currently not breastfeeding					All			
	Percent of children who received:			Number of children age 6-23 months	Percent of children who received:				Number of children age 6-23 months	Percent of children who received:			Number of children age 6-23 months
	Minimum dietary diversity[A]	Minimum meal frequency[B]	Minimum acceptable diet [1,C]		Minimum dietary diversity[A]	Minimum meal frequency[B]	Minimum acceptable diet [2,C]	At least 2 milk feeds[3]		Minimum dietary diversity[4,A]	Minimum meal frequency [5,B]	Minimum acceptable diet[C]	
Total	**57.6**	**51.3**	**34.9**	**532**	**52.6**	**81.7**	**43.7**	**89.3**	**289**	**55.8**	**62.0**	**38.0**	**821**
Sex													
Male	60.0	50.5	34.5	251	51.2	82.8	44.8	87.2	138	56.9	61.9	38.2	388
Female	55.4	52.0	35.2	282	53.9	80.7	42.7	91.3	151	54.9	62.1	37.8	433
Nationality													
Qatari	51.4	45.7	32.7	68	34.8	84.6	31.0	87.4	59	43.7	63.8	31.9	126
Non-Qatari	58.5	52.1	35.2	465	57.1	81.0	46.9	89.8	230	58.0	61.7	39.1	695
Age (in months)													
6-8	34.0	53.2	27.8	118	(*)	(*)	(*)	(*)	20	31.7	57.3	26.5	138
9-11	57.8	57.0	41.9	116	(*)	(*)	(*)	(*)	7	56.4	59.5	41.4	124
12-17	69.1	46.4	33.0	174	48.1	86.1	41.2	88.4	141	59.7	64.1	36.7	315
18-23	63.6	51.1	37.7	124	64.7	75.5	51.4	89.3	121	64.1	63.1	44.4	244
Mother's education													
Pre-primary or none	-	-	-	0	(*)	(*)	(*)	(*)	1	(*)	(*)	(*)	1
Primary	(*)	(*)	(*)	13	(*)	(*)	(*)	(*)	9	(*)	(*)	(*)	22
Preparatory	(*)	(*)	(*)	19	(*)	(*)	(*)	(*)	11	(52.5)	(46.2)	(24.6)	29
Secondary+	56.5	52.2	35.1	500	54.7	82.3	45.1	90.0	269	55.9	62.7	38.6	769
Mother's functional difficulties[D]													
Has functional difficulty	(*)	(*)	(*)	7	(*)	(*)	(*)	(*)	4	(*)	(*)	(*)	10
Has no functional difficulty	57.7	51.1	34.7	525	52.6	82.2	44.3	89.4	285	55.9	62.0	38.1	810

[1] MICS indicator TC.39a - Minimum acceptable diet (breastfed children)

[2] MICS indicator TC.39b - Minimum acceptable diet (non-breastfed children)

[3] MICS indicator TC.40 - Milk feeding frequency for non-breastfed children

[4] MICS indicator TC.41 - Minimum dietary diversity

[5] MICS indicator TC.42 - Minimum meal frequency

[A] Minimum dietary diversity is defined as receiving foods from at least 5 of 8 food groups: 1) breastmilk, 2) grains, roots and tubers, 3) legumes and nuts, 4) dairy products (milk, infant formula, yogurt, cheese), 5) flesh foods (meat, fish, poultry and liver/organ meats), 6) eggs, 7) vitamin-A rich fruits and vegetables, and 8) other fruits and vegetables.

[B] Minimum meal frequency among currently breastfeeding children is defined as children who also received solid, semi-solid, or soft foods 2 times or more daily for children age 6-8 months and 3 times or more daily for children age 9-23 months. For non-breastfeeding children age 6-23 months it is defined as receiving solid, semi-solid or soft foods, or milk feeds, at least 4 times.

[C] The minimum acceptable diet for breastfed children age 6-23 months is defined as receiving the minimum dietary diversity and the minimum meal frequency, while it for non-breastfed children further requires at least 2 milk feedings and that the minimum dietary diversity is achieved without counting milk feeds.

[D] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.7.8: Bottle feeding

Percentage of children age 0-23 months who were fed with a bottle with a nipple during the previous day, Qatar MICS, 2023

	Percentage of children age 0-23 months fed with a bottle with a nipple[1]	Number of children age 0-23 months
Total	**59.1**	**1,093**
Sex		
Male	56.6	531
Female	61.5	562
Nationality		
Qatari	66.7	169
Non-Qatari	57.7	924
Age (in months)		
0-5	45.5	272
6-11	42.6	262
12-23	73.5	559
Mother's education		
Pre-primary or none	(*)	1
Primary	(65.9)	30
Preparatory	(60.7)	37
Secondary+	58.8	1,025
Mother's functional difficulties[A]		
Has functional difficulty	(*)	13
Has no functional difficulty	59.3	1,076

[1] MICS indicator TC.43 - Bottle feeding

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

6.8 EARLY CHILDHOOD DEVELOPMENT

It is well recognized that a period of rapid brain development occurs in the first years of life, and the quality of children's home environment and their interactions with caregivers is a major determinant of their development during this period. [73] Children's early experiences with responsive caregiving serves an important neurological function and these interactions can boost cognitive, physical, social and emotional development.[74] In this context, engagement of adults in activities with children, presence of books and playthings in the home for the child, and the conditions of care are important indicators.

Information on a number of activities that provide children with early stimulation and responsive care was collected in the survey and presented in Table TC.10.1. These included the involvement of adult members of the household 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. It should be noted that the questionnaire module did not cover activities that children engage in with adults that are not members of the household, even if such frequently or even daily are taking care of the children.

Exposure to books in early years not only provides children with greater understanding of the nature of print but may also give them opportunities to see others reading, such as older siblings doing schoolwork. Presence of books is important for later school performance. The mothers/caretakers of all children under 5 were asked about the number of children's books or picture books they have for the child, and the types of playthings that are available at home. The findings are presented in Table TC.10.2.

Some research has found that leaving children without adequate supervision is a risk factor for unintentional injuries.[75] In MICS, two questions were asked to find out whether children age 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. This is presented in Table TC.10.3.

[73] Black, M. et al. "Early Childhood Development Coming of Age: Science through the Life Course." *The Lancet* 389, no. 10064 (2016): 77-90. doi:10.1016/s0140-6736(16)31389-7; Shonkoff J. et al. "The Lifelong Effects of Early Childhood Adversity and Toxic Stress." *Pediatrics* 129, no. 1 (2011): 232-46. doi:10.1542/peds.2011-2663.

[74] Britto, P. et al. "Nurturing Care: Promoting early childhood development." *The Lancet* 389, no. 10064 (2017): 91–102. doi: 10.1016/S0140-6736(16)31390-3; Milteer R. et al. "The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bond: Focus on children in poverty" *American Academy of Pediatrics* 1129, no. 1 (2012): 183–191. doi: 10.1542/peds.2011-2953.

[75] Howe, L., S. Huttly and T. Abramsky. "Risk Factors for Injuries in Young Children in Four Developing Countries: The Young Lives Study." *Tropical Medicine and International Health* 11, no. 10 (2006): 1557-1566. doi: 10.1111/j.1365-3156.2006.01708.x.; Morrongiello, B. et al. "Understanding Unintentional Injury Risk in Young Children II. The Contribution of Caregiver Supervision, Child Attributes, and Parent Attributes." *Journal of Pediatric Psychology* 31, no. 6 (2006): 540-551. doi: 10.1093/jpepsy/jsj073.

Table TC.10.1: Support for learning

Percentage of children age 2-4 years with whom adult household members engaged in activities that promote learning and school readiness during the last three days, and engagement in such activities by fathers and mothers, Qatar MICS, 2023

	Adult household members			Percentage of children living with their:		Father		Mother		
	Percentage of children with whom adult household members have engaged in four or more activities[1]	Mean number of activities with adult household members	Percentage of children with whom no adult household member have engaged in any activity	Father	Mother	Percentage of children with whom fathers have engaged in four or more activities[2]	Mean number of activities with fathers	Percentage of children with whom mothers have engaged in four or more activities[3]	Mean number of activities with mothers	Number of children age 2-4 years
Total	**97.3**	**5.8**	**0.2**	**98.1**	**99.6**	**82.2**	**5.0**	**86.7**	**5.1**	**1,871**
Sex										
Male	97.3	5.8	0.3	97.8	99.4	81.2	5.0	85.4	5.0	949
Female	97.3	5.8	0.0	98.5	99.7	83.2	5.0	87.9	5.1	922
Nationality										
Qatari	98.2	5.8	0.7	97.7	99.3	74.3	4.7	85.5	5.0	273
Non-Qatari	97.2	5.8	0.1	98.2	99.6	83.5	5.0	86.9	5.1	1,598
Age										
2	97.1	5.8	0.5	98.1	99.7	83.2	5.0	85.1	5.0	590
3	96.8	5.8	0.1	97.7	99.2	80.3	4.9	87.7	5.2	627
4	98.0	5.9	0.0	98.6	99.7	83.1	5.0	87.0	5.1	654
Mother's education										
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	6
Primary	92.0	5.6	0.0	99.4	97.3	69.0	4.5	81.8	4.7	59
Preparatory	96.4	5.6	0.0	95.6	100.0	75.6	4.6	79.7	4.8	87
Secondary+	97.5	5.8	0.2	98.2	99.6	83.0	5.0	87.3	5.1	1,720
Father's education										
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	1
Primary	(97.0)	(5.9)	(0.0)	(100.0)	(100.0)	(71.9)	(4.7)	(82.9)	(4.9)	52
Preparatory	99.6	5.8	0.0	100.0	100.0	79.2	4.8	87.3	5.1	74
Secondary+	97.2	5.8	0.2	100.0	99.6	83.3	5.0	86.6	5.1	1,709
Biological father not in the household	(100.0)	(6.0)	(0.0)	(0.0)	(95.5)	(51.9)	(3.3)	(92.7)	(5.4)	35
Functional difficulties (age 2-4 years										
Has functional difficulty	(91.3)	(5.6)	(2.2)	(92.4)	(94.7)	(76.2)	(4.9)	(90.2)	(5.0)	29
Has no functional difficulty	97.4	5.8	0.2	98.2	99.6	82.3	5.0	86.6	5.1	1,842

[1] MICS indicator TC.49a - Early stimulation and responsive care by any adult household member

[2] MICS Indicator TC.49b - Early stimulation and responsive care by father

[3] MICS Indicator TC.49c - Early stimulation and responsive care by mother

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.10.2: Learning materials

Percentage of children under age 5 by the number of children's books present in the household, and by the type and number of playthings that child plays with, Qatar MICS, 2023

	Percentage of children living in households that have for the child:		Percentage of children who play with:				
	3 or more children's books[1]	10 or more children's books	Homemade toys	Toys from a shop/manufactured toys	Household objects/objects found outside	Two or more types of playthings[2]	Number of children
Total	**27.6**	**5.3**	**79.7**	**99.9**	**81.2**	**99.5**	**2,964**
Sex							
Male	27.7	5.2	80.4	99.8	81.3	99.5	1,481
Female	27.5	5.3	79.0	100.0	81.2	99.5	1,483
Nationality							
Qatari	26.4	4.5	77.7	100.0	76.7	99.6	442
Non-Qatari	27.8	5.4	80.1	99.9	82.0	99.5	2,522
Age							
0-1	8.1	2.3	77.8	100.0	79.5	99.2	1,093
2-4	39.0	7.0	80.8	99.8	82.2	99.7	1,871
Mother's education							
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	7
Primary	9.3	0.0	79.1	100.0	79.3	100.0	89
Preparatory	18.6	2.5	89.5	100.0	83.1	100.0	124
Secondary+	28.5	5.6	79.3	99.9	81.2	99.5	2,745
Functional difficulties (age 2-4 years)							
Has functional difficulty	(21.6)	(0.0)	(87.1)	(100.0)	(82.7)	(100.0)	29
Has no functional difficulty	39.3	7.1	80.7	99.8	82.2	99.7	1,842

[1] MICS indicator TC.50 - Availability of children's books

[2] MICS indicator TC.51 - Availability of playthings

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

(*) Figures that are based on fewer than 25 unweighted cases

Table TC.10.3: Inadequate supervision

Percentage of children under age 5 left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once during the past week, Qatar MICS, 2023

	Percentage of children:			
	Left alone in the past week	Left under the supervision of another child younger than 10 years of age in the past week	Left with inadequate supervision in the past week[1]	Number of children
Total	**9.5**	**6.9**	**11.3**	**2,964**
Sex				
Male	9.3	5.9	10.6	1,481
Female	9.7	7.9	11.9	1,483
Nationality				
Qatari	0.4	0.0	0.4	442
Non-Qatari	11.1	8.1	13.2	2,522
Age				
0-1	5.6	3.7	6.4	1,093
2-4	11.8	8.8	14.1	1,871
Mother's education				
Pre-primary or none	(*)	(*)	(*)	7
Primary	5.3	3.5	7.1	89
Preparatory	8.9	6.3	11.4	124
Secondary+	9.6	7.0	11.3	2,745
Functional difficulties (age 2-4 years)				
Has functional difficulty	(10.7)	(0.0)	(10.7)	29
Has no functional difficulty	11.8	8.9	14.1	1,842

[1] **MICS indicator TC.52 - Inadequate supervision**

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

(*) Figures that are based on fewer than 25 unweighted cases

6.9 EARLY CHILD DEVELOPMENT INDEX

Early childhood development is a multidimensional process that involves an ordered progression of motor, cognitive, language, socio-emotional and regulatory skills and capacities across the first few years of life.[76] While these are distinct domains of early childhood development, they are interconnected. Nurturing and supporting all these dimensions in a holistic manner is key to ensuring children have the best chance to reach their full potential. Physical growth, literacy and numeracy skills, socio-emotional development and learning readiness set the trajectory for lifelong health, learning and well-being.[77]

The Early Childhood Development Index 2030 (ECDI2030) module captures the achievement of key developmental milestones by children between the ages of 24 and 59 months. The data generated by the ECDI2030 can be used for monitoring and reporting on SDG indicator 4.2.1, and to inform government efforts to improve developmental outcomes among children.

The measure includes 20 questions about the way children behave in certain everyday situations, and the skills and knowledge they have acquired, reflecting the increasing difficulty of the skills children acquire as they grow. The 20 items are organized according to the three general domains of health, learning and psychosocial well-being. A child is considered to be developmentally on track if they have achieved the minimum number of milestones expected for their age group. Each of the three general domains is composed of a set of core sub domains:

- Health sub-domains: gross motor development, fine motor development and self-care.
- Learning sub-domains: expressive language, literacy, numeracy, pre-writing, and executive functioning.
- Psychosocial well-being sub-domains: emotional skills, social skills, internalizing behaviour, and externalizing behaviour.

The ECDI2030 module is not designed to report on individual domains separately. Rather, it is meant to produce a single summary score that captures the interlinked developmental concepts embedded in the three domains mentioned in SDG 4.2.1.[78]

The indicator derived from the ECDI2030 module is the percentage of children age 24- 59 months who have achieved the minimum number of milestones expected for their age group.[79] The findings are presented in Table TC.11.1.

[76] UNICEF et al. Advancing Early Childhood Development: From Science to Scale. Executive Summary, The Lancet, 2016. https:// www.thelancet.com/pb-assets/Lancet/stories/series/ecd/Lancet_ECD_Executive_Summary.pdf

[77] Shonkoff, J. and D. Phillips. From Neurons to Neighborhoods: The Science of Early Childhood Development. Washington, D.C.: National Academy Press, 2000.; United Nations Children's Fund, Early Moments Matter, New York: UNICEF, 2017.

[78] 112 For details about the development of the ECDI2030 module and related indicator, see 'ECDI2030-Frequently-Asked-Questions': https://data.unicef.org/resources/early-childhood-development-index-2030-ecdi2030/

[79] The indicator generated by the ECDI2030 module is not entirely comparable to the one generated by the ECDI module that was introduced in the MICS surveys in 2009. For more information see 'ECDI2030-Frequently-Asked-Questions'.

Table TC.11.1: Early childhood development index (ECDI2030)

Percentage of children aged 24-59 months who are developmentally on track in health, learning and psychosocial well-being, Qatar MICS, 2023

	Early childhood development index 2030[1]	Number of children age 24 to 59 months
Total	**84.5**	**1,871**
Sex		
Male	82.6	949
Female	86.5	922
Nationality		
Qatari	86.7	273
Non-Qatari	84.2	1598
Age (in months)		
24-35	79.6	590
36-47	88.5	627
48-59	85.2	654
Attendance to early childhood education[A]		
Attending	87.1	1,080
Not attending	81.1	790
Mother's education		
Pre-primary or none	(*)	6
Primary	68.5	59
Preparatory	75.0	87
Secondary+	85.6	1,720
Functional difficulties		
Has functional difficulty	(63.5)	29
Has no functional difficulty	84.9	1,842

[1] MICS indicator TC.53 - Early childhood development index (ECDI2030); SDG Indicator 4.2.1

[A] Children age 2 are excluded, as early childhood education attendance is only collected for age 3-4 years.

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

(*) Figures that are based on fewer than 25 unweighted cases

7 LEARN

7.1 EARLY CHILDHOOD EDUCATION

Readiness of children for primary school can be improved through attendance to early childhood education programmes or through pre-school. Early childhood education programmes include programmes for children that have organised learning components as opposed to baby-sitting and day-care which do not typically have organised education and learning.

In Qatar, preschool education is a main level of education and corresponds to ISCED-0. Preschool education includes both a basic educational component and additional programmes aimed at the comprehensive development of the personality of a child of early and preschool age in accordance with the child's age and individual capabilities, abilities and needs, the formation of the child's moral standards, the child's acquisition of social experience.

Table LN.1.1 shows the percent of children age 3 and 4 years currently attending early childhood education. A child currently attending school is a child who regularly attends school at the time of the survey. If the child is not attending school at the time of the interview due to school holidays or breaks, but the child regularly attends school, the child is considered as currently attending school. This indicator is based on question UB8 in the Questionnaire for Children Under 5.

Table LN.1.2 looks at children's exposure to organised learning programmes in the year before the official primary entry age. The official primary school entry age in Qatar is age 6 years. Table LN.1.2 therefore refers to children who were 5 years old at the beginning of the school year.[80] In Qatar, the school year begins in September.

The indicator corresponds to SDG indicator 4.2.2: Participation rate in organized learning (one year before the official primary entry age) and is calculated as an adjusted[81] net attendance rate (ANAR). This indicator is based on question UB7 in the Questionnaire for Children Under 5.

Additionally, Table LN.1.2 presents the gender parity index for SDG indicator 4.2.2. This index contributes to SDG indicator 4.5.1: Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict-affected, as data become available) for all education indicators that can be disaggregated. Generally, when a parity index value falls between 0.97 and 1.03, it is regarded as parity between two groups. The likely more disadvantaged group (e.g., female, poor and rural) is placed in the numerator, so parity index values below 0.97 indicate disadvantage for those groups. For example, in the gender parity index (GPI), a value between 0.97 and 1.03 indicates parity between the sexes, a GPI value lower than 0.97 indicates female disadvantage and a value greater than 1.03 suggests male disadvantage. The further from 1.00 that a parity index lies, the greater the disparity between groups. The indices do not reveal the overall indicator levels, as parity may be achieved, while overall levels for both groups are low. Gender parity indices are also presented in Table LN.2.8 (for attendance to primary and preparatory school).

[80] In MICS, the age of household members is the age at the time of the survey. This determines eligibility for individual questionnaires, modules and questions. Age is also used to define indicators. However, in analysis of the majority of education-related indicators based on the age of children, e.g., adjusted net attendance rates, completion rates, etc., a variable is created to reflect the age at the beginning of the school year. This eliminates issues relating to the timing and length of survey fieldwork and creates comparable findings across countries, while taking age-criteria for enrolment into account. Tables in this chapter specifically mention "Age at beginning of school year" in rows and columns where applicable, as compared to simply "age" in reference to age at the time of the survey.

[81] Rates presented in this table are "adjusted" since the numerator includes children one year younger than the official primary entry age attending either ECE or primary education.

Table LN.1.1: Early childhood education

Percentage of children age 36-59 months who are currently attending early childhood education, Qatar MICS, 2023

	Percentage of children age 36-59 months attending early childhood education[1,A]	Number of children age 36-59 months
Total	**84.3**	**1,281**
Sex		
Male	83.9	689
Female	84.8	592
Nationality		
Qatari	84.2	192
Non-Qatari	84.3	1,090
Age (in months)		
36-47	68.2	627
48-59	99.8	654
Mother's education		
Pre-primary or none	(*)	4
Primary	(89.0)	37
Preparatory	90.3	65
Secondary+	83.9	1,174
Child's functional difficulties		
Has functional difficulty	(*)	19
Has no functional difficulty	84.2	1,262

[1] MICS indicator LN.1 - Attendance to early childhood education

[A] Note that this indicator is a measure of current attendance, i.e. attending at the time of interview. It is therefore not directly comparable to the adjusted net attendance rates at higher levels of education presented elsewhere in this chapter.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table LN.1.2: Participation rate in organised learning

Percent distribution of children age one year younger than the official primary school entry age at the beginning of the school year, by attendance to education, and percent of children attending early childhood education or primary education (net attendance rate, adjusted), Qatar MICS, 2023

	Percent of children:					
	Attending an early childhood education programme	Attending primary education	Not attending any level of education (out of school)	Total	Net attendance rate (adjusted)[1]	Number of children age 5 years at beginning of school year
Total	**44.8**	**54.9**	**0.3**	**100.0**	**99.7**	**635**
Sex						
Male	45.5	54.5	0.0	100.0	100.0	306
Female	44.2	55.3	0.5	100.0	99.5	329
Nationality						
Qatari	32.4	67.6	0.0	100.0	100.0	104
Non-Qatari	47.3	52.4	0.3	100.0	99.7	531
Mother's education						
Primary	(*)	(*)	(*)	100.0	(*)	20
Preparatory	(*)	(*)	(*)	100.0	(*)	33
Secondary+	44.7	55.1	0.3	100.0	99.7	582
Mother's functional difficulties[A]						
Has functional difficulty	(*)	(*)	(*)	100.0	(*)	12
Has no functional difficulty	44.7	55.0	0.3	100.0	99.7	609
Parity indices						
Sex						
Female/male[2]	0.97	1.01	0.00	na	1.00	na

[1] MICS indicator LN.2 - Participation rate in organised learning (one year before the official primary entry age) (adjusted); SDG indicator 4.2.2

[2] MICS indicator LN.11a - Parity indices - organised learning (gender); SDG indicator 4.5.1

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases

7.2 ATTENDANCE

Ensuring that all girls and boys complete primary and secondary education is a target of the of the 2030 Agenda for Sustainable Development. Education is a vital prerequisite for combating poverty, empowering women, economic growth, protecting children from hazardous and exploitative labour and sexual exploitation, promoting human rights and democracy, protecting the environment, and influencing population growth.

In Qatar, children enter primary school at age 6, lower secondary (known as 'preparatory' in Qatar) at age 12 and upper secondary (known as 'secondary' in Qatar) school at age 15. There are 6 grades in primary school, 3 grades in lower secondary, and 3 grades for upper secondary. In primary school, grades are referred to as Primary 1 to Primary 6. For lower secondary school, grades are referred to as Preparatory 1 to Preparatory 3 and in upper secondary to Secondary 1 to Secondary 3. The school year typically runs from September of one year to June of the following year.

To achieve comparability between varying national educational systems and classifications across the world, the United Nations Educational, Scientific and Cultural Organization (UNESCO) maintains the International Standard Classification of Education (ISCED) statistical framework. Its defined levels and coding are used in computation of MICS Indicators.[82] With focus on completion of primary and secondary education, indicators are centred on levels 0-3 presented in the table of classifications below.

ISCED 2011		**Education system in Qatar**	
Level	ISCED Name	**Name of education level in:**	
		Arabic	English
0	Early childhood education and care	الحضانة رياض الأطفال	Crèche Pre-primary education
1	Primary	الابتدائية	Primary school
2	Lower secondary	الإعدادية	Lower secondary/Preparatory
3	Upper secondary	الثانوية	Upper secondary/Secondary

Attendance to pre-primary education is important for the readiness of children to school. Table LN.2.1 shows the proportion of children in the first grade of primary school (regardless of age) who attended an early childhood education programme the previous year.[83]

Table LN.2.2 presents the percentage of children of primary school entry age entering Primary 1.

[82] ISCED is periodically revised by UNESCO (latest in 2011) in consultation with countries. National ISCED mappings are published here: http://uis.unesco.org/en/isced-mappings.

[83] The computation of the indicator does not exclude repeaters, and therefore is inclusive of both children who are attending primary school for the first time, as well as those who were in the first grade of primary school the previous

Table LN.2.3 provides the percentage of children of primary school age (6 to 11 years) who are attending primary or preparatory school[84], and those who are out of school. Similarly, Table LN.2.4 presents the percentage of children of preparatory school age (age 12 to 14 years) who are attending preparatory school or higher education levels[85], and those who are out of school.

In Table LN.2.5, children are distributed according to their age against current grade of attendance (age-for-grade). For example, an 8-year-old child (at the beginning of the school year) is expected to be in Primary 3, as per the official intended age-for-grade. If this child is currently in Primary 1, he/she will be classified over-age by 2 years. The table includes both primary and preparatory levels.

The primary school completion rate and transition rate to preparatory education are presented in Table LN.2.7.

The completion rate of primary education refers to the percentage of a cohort of children aged 3 to 5 years above the official intended age for the last grade of primary education who have completed primary education. The intended age for the last grade of primary is the age at which children would enter the last grade of primary school if they had started school at the official primary entry age and had progressed without repeating or skipping a grade. In Qatar, the official age of entry into primary school is age 6 years. With 6 grades in primary school, the intended age for the last grade of primary is therefore 11 years, and the reference group for the completion rate of primary education is children aged 14 to 16 years.

The table also provides the “effective” transition rate[86], defined as the percentage of children who continued to the next level of education – the number of children who are attending the first grade of the higher education level in the current school year and were in the last grade of the lower education level the previous year divided by the number of children who were in the last grade of the lower education level the previous school year and are not repeating that grade in the current year.

A low effective transition rate indicates that a low percentage of students are transitioning to the next level of education. This brings to light the existence of potential barriers in an education system including: financial burden such as enrolment fees or the obligation to purchase textbooks or school uniforms; education supply and quality issues such as a limited number of teachers or classrooms and low-quality teaching; as well as social and individual beliefs on education such as low expectation in returns of advancing in education.

Table LN.2.8 presents the gender parity indices for the adjusted primary and lower and upper secondary net attendance rates provided in Tables LN.2.3 and LN.2.4.

In Qatar MICS 2023, information on attendance was captured in the individual questionnaires rather than in the education module in the household questionnaire. Consequently, the sample size is lower for indicators pertaining to children 5-17 and reduced content is presented for lower and upper secondary levels in selected tables.

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school year and are repeating. Children repeating may have attended pre-primary education prior to the school year during which they attended the first grade of primary school for the first time; these children are not captured in the numerator of the indicator.

[84] Rates presented in this table are "adjusted" since they include not only primary school attendance, but also lower and upper secondary school attendance in the numerator.

[85] Rates presented in this table are "adjusted" since they include not only lower secondary school attendance, but also attendance to higher education levels in the numerator.

[86] The simple transition rate, which is no longer calculated in MICS, tends to underestimate pupils’ progression to secondary school as it assumes that the repeaters never reach secondary school.

Table LN.2.1: School readiness

Percentage of children attending the first grade of primary school who attended an early childhood education programme during the previous school year, Qatar MICS, 2023

	Percentage of children attending the first grade of primary school who attended an early childhood education programme during the previous school year[1]	Number of children attending first grade of primary school
Total	**95.0**	**686**
Sex		
Male	92.7	323
Female	97.1	363
Nationality		
Qatari	92.1	127
Non-Qatari	95.7	559
Mother's education		
Pre-primary or none	(*)	2
Primary	(*)	29
Preparatory	(*)	47
Secondary+	95.4	608
Mother's functional difficulties[A]		
Has functional difficulty	(*)	7
Has no functional difficulty	94.9	663

[1] MICS indicator LN.3 - School readiness

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.2: Primary school entry

Percentage of children of primary school entry age entering grade 1 (net intake rate), Qatar MICS, 2023

	Percentage of children of primary school entry age entering grade 1[1]	Number of children of primary school entry age
Total	**89.8**	**710**
Sex		
Male	86.2	346
Female	93.2	364
Nationality		
Qatari	92.4	110
Non-Qatari	89.3	600
Mother's education		
Pre-primary or none	(*)	2
Primary	(*)	25
Preparatory	(*)	33
Secondary+	89.1	650
Mother's functional difficulties[A]		
Has functional difficulty	(*)	9
Has no functional difficulty	89.4	676

[1] MICS indicator LN.4 - Net intake rate in primary education

[A] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.3: School attendance among children of primary school age

Percentage of children of primary school age at the beginning of the school year attending primary or preparatory school (net attendance rate, adjusted), percentage attending early childhood education, and percentage out of school, by sex, Qatar MICS, 2023

	Male				Female				Total			
		Percentage of children:				Percentage of children:				Percentage of children:		
	Net attendance rate (adjusted)	Attending early childhood education	Out of school[A]	Number of children of primary school age at beginning of school year	Net attendance rate (adjusted)	Attending early childhood education	Out of school[A]	Number of children of primary school age at beginning of school year	Net attendance rate (adjusted)[1]	Attending early childhood education	Out of school[2,A]	Number of children of primary school age at beginning of school year
Total	**99.9**	**0.1**	**0.0**	**1,786**	**99.6**	**0.4**	**0.0**	**1,660**	**99.8**	**0.2**	**0.0**	**3,446**
Nationality												
Qatari	100.0	0.0	0.0	291	99.9	0.1	0.0	288	99.9	0.1	0.0	579
Non-Qatari	99.9	0.1	0.0	1,495	99.5	0.5	0.0	1,372	99.7	0.3	0.0	2,867
Age at beginning of school year												
6	99.5	0.5	0.0	346	98.1	1.9	0.0	364	98.8	1.2	0.0	710
7	100.0	0.0	0.0	305	100.0	0.0	0.0	297	100.0	0.0	0.0	602
8	100.0	0.0	0.0	314	100.0	0.0	0.0	275	100.0	0.0	0.0	589
9	100.0	0.0	0.0	297	100.0	0.0	0.0	231	100.0	0.0	0.0	528
10	100.0	0.0	0.0	242	100.0	0.0	0.0	235	100.0	0.0	0.0	478
11	100.0	0.0	0.0	282	100.0	0.0	0.0	257	100.0	0.0	0.0	539
Mother's education												
Pre-primary or none	(*)	(*)	(*)	2	(*)	(*)	(*)	2	(*)	(*)	(*)	4
Primary	(100.0)	(0.0)	(0.0)	92	(100.0)	(0.0)	(0.0)	84	100.0	0.0	0.0	177
Preparatory	(100.0)	(0.0)	(0.0)	65	(100.0)	(0.0)	(0.0)	65	100.0	0.0	0.0	130
Secondary+	99.9	0.1	0.0	1,627	99.6	0.4	0.0	1,509	99.7	0.3	0.0	3,136
Mother's functional difficulties[B]												
Has functional difficulty	(*)	(*)	(*)	23	(*)	(*)	(*)	42	(*)	(*)	(*)	65
Has no functional difficulty	99.9	0.1	0.0	1,688	99.6	0.4	0.0	1,521	99.7	0.3	0.0	3,208

[1] MICS indicator LN.5a - Primary school net attendance rate (adjusted)

[2] MICS indicator LN.6a - Out-of-school rate for children of primary school age

[A] The percentage of children of primary school age out of school are those not attending any level of education.

[B] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.4: School attendance among children of preparatory school age

Percentage of children of preparatory school age at the beginning of the school year attending preparatory school or higher (net attendance rate, adjusted), percentage attending primary school, and percentage out of school, by sex, Qatar MICS, 2023

	Male				Female				Total			
		Percentage of children:				Percentage of children:				Percentage of children:		
	Net attendance rate (adjusted)	Attending primary school	Out of school[A]	Number of children of preparatory school age at beginning of school year	Net attendance rate (adjusted)	Attending primary school	Out of school[A]	Number of children of preparatory school age at beginning of school year	Net attendance rate (adjusted)[1]	Attending primary school	Out of school[2,A]	Number of children of preparatory school age at beginning of school year
Total	**100.0**	**0.0**	**0.0**	**786**	**100.0**	**0.0**	**0.0**	**766**	**100.0**	**0.0**	**0.0**	**1,553**
Nationality												
Qatari	100.0	0.0	0.0	160	100.0	0.0	0.0	139	100.0	0.0	0.0	300
Non-Qatari	100.0	0.0	0.0	626	100.0	0.0	0.0	627	100.0	0.0	0.0	1,253
Age at beginning of school year												
12	100.0	0.0	0.0	235	100.0	0.0	0.0	242	100.0	0.0	0.0	477
13	100.0	0.0	0.0	298	100.0	0.0	0.0	264	100.0	0.0	0.0	562
14	100.0	0.0	0.0	254	100.0	0.0	0.0	261	100.0	0.0	0.0	514
Mother's education[B]												
Pre-primary or none	(*)	(*)	(*)	5	(*)	(*)	(*)	6	(*)	(*)	(*)	10
Primary	(*)	(*)	(*)	49	(*)	(*)	(*)	24	(100.0)	(0.0)	(0.0)	73
Preparatory	(100.0)	(0.0)	(0.0)	84	(100.0)	(0.0)	(0.0)	73	100.0	0.0	0.0	157
Secondary+	100.0	0.0	0.0	649	100.0	0.0	0.0	663	100.0	0.0	0.0	1,312
Mother's functional difficulties[C]												
Has functional difficulty	(*)	(*)	(*)	14	(*)	(*)	(*)	24	(*)	(*)	(*)	38
Has no functional difficulty	100.0	0.0	0.0	649	100.0	0.0	0.0	644	100.0	0.0	0.0	1,293

[1] MICS indicator LN.5b - Lower secondary school net attendance rate (adjusted)

[2] MICS indicator LN.6b - Out-of-school rate for children of lower secondary school age

[A] The percentage of children of preparatory school age out of school are those not attending any level of education.

[B] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated or those age 18 at the time of interview.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.5: Age for grade

Percent distribution of children attending primary and preparatory school who are underage, at official age and overage by 1 and by 2 or more years for grade attended, Qatar MICS, 2023

	Primary school						Preparatory school					
	Percent of children by grade of attendance:						Percent of children by grade of attendance:					
	Under-age	At official age	Over-age by 1 year	Over-age by 2 or more years[1]	Total	Number of children attending primary school	Under-age	At official age	Over-age by 1 year	Over-age by 2 or more years[2]	Total	Number of children attending preparatory school
Total	**53.2**	**46.2**	**0.6**	0.0	**100.0**	**3,588**	**43.1**	**50.2**	**6.6**	0.0	**100.0**	**1,617**
Sex												
Male	53.2	46.5	0.2	0.0	100.0	1,835	43.6	49.1	7.3	0.0	100.0	836
Female	53.2	45.8	1.0	0.0	100.0	1,753	42.6	51.5	5.9	0.0	100.0	780
Nationality												
Qatari	57.8	41.7	0.5	0.0	100.0	615	38.4	51.5	10.1	0.0	100.0	303
Non-Qatari	52.3	47.1	0.6	0.0	100.0	2,973	44.2	50.0	5.8	0.0	100.0	1,314
Mother's education[A]												
Pre-primary or none	(*)	(*)	(*)	(*)	100.0	4	(*)	(*)	(*)	(*)	100.0	9
Primary	45.6	54.4	0.0	0.0	100.0	184	(53.0)	(40.7)	(6.3)	(0.0)	100.0	79
Preparatory	56.8	43.2	0.0	0.0	100.0	150	25.0	62.6	12.4	0.0	100.0	141
Secondary+	53.5	45.8	0.7	0.0	100.0	3,251	44.6	49.4	6.0	0.0	100.0	1,387
Grade												
1 (primary/preparatory)	53.3	46.6	0.2	0.0	100.0	686	46.7	49.0	4.3	0.0	100.0	537
2 (primary/preparatory)	54.4	43.3	2.4	0.0	100.0	651	33.0	54.0	13.0	0.0	100.0	567
3 (primary/preparatory)	53.8	46.2	0.0	0.0	100.0	585	50.6	47.4	2.0	0.0	100.0	513
4 (primary)	56.3	43.5	0.2	0.0	100.0	581	na	na	na	na	na	na
5 (primary)	52.7	46.4	0.9	0.0	100.0	536	na	na	na	na	na	na
6 (primary)	48.3	51.7	0.0	0.0	100.0	549	na	na	na	na	na	na
Mother's functional difficulties[B]												
Has functional difficulty	(*)	(*)	(*)	(*)	100.0	58	(*)	(*)	(*)	(*)	100.0	47
Has no functional difficulty	52.9	46.4	0.7	0.0	100.0	3,367	43.7	50.2	6.1	0.0	100.0	1,362

[1] MICS indicator LN.10a - Over-age for grade (Primary)

[2] MICS indicator LN.10b - Over-age for grade (Preparatory)

[A] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated or those age 18 at the time of interview.

[B] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

na: not applicable

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

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.7: Completion and effective transition rates

Completion rate for primary school, effective transition rate to preparatory school, Qatar MICS, 2023

	Primary school completion rate[A,2]	Number of children age 14-16 years at beginning of school year[B]	Effective transition rate to preparatory school[3]	Number of children who were in the last grade of primary school the previous year and are not repeating that grade in the current school year
Total	**96.7**	**1,339**	**100.0**	**511**
Sex				
Male	96.3	676	100.0	254
Female	97.2	663	100.0	256
Nationality				
Qatari	97.0	332	100.0	96
Non-Qatari	96.7	1,007	100.0	414
Mother's education[C]				
Pre-primary or none	(*)	14	na	0
Primary	57.5	66	(100)	27
Preparatory	100.0	123	(*)	33
Secondary+	100.0	1,134	100.0	450
Mother's functional difficulties[D]				
Has functional difficulty	(*)	19	(*)	16
Has no functional difficulty	96.9	1,048	100.0	446

[1] MICS indicator LN.8a - Completion rate (Primary); SDG indicator 4.1.2

[2] MICS indicator LN.9 - Effective transition rate to preparatory school

[A] In Qatar MICS 2023, information on attendance was captured in the individual questionnaires rather than in the education module in the household questionnaire. Gross intake ratios and completion rates (preparatory, secondary) are not presented.

[B] Total number of children age 3-5 years above the intended age for the last grade, for primary

[C] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated or those age 18 at the time of interview.

[D] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years.

na: not applicable

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

(*) Figures that are based on fewer than 25 unweighted cases

Table LN.2.8: Parity index

Ratio of adjusted net attendance rates of girls to boys, in primary and preparatory school [A], and additional parity indices, Qatar MICS, 2023

	Primary school				Preparatory school			
	Primary school adjusted net attendance rate (ANAR), girls	Primary school adjusted net attendance rate (ANAR), boys	Primary school adjusted net attendance rate (ANAR), total[1]	Gender parity index (GPI) for primary school ANAR[1]	Preparatory school adjusted net attendance rate (ANAR), girls	Preparatory school adjusted net attendance rate (ANAR), boys	Preparatory school adjusted net attendance rate (ANAR), total[1]	Gender parity index (GPI) for preparatory school ANAR[1]
Total[1]	**99.6**	**99.9**	**99.8**	**1.00**	**100.0**	**100.0**	**100.0**	**1.00**
Nationality								
Qatari	99.9	100.0	99.9	1.00	100.0	100.0	100.0	1.00
Non-Qatari	99.5	99.9	99.7	1.00	100.0	100.0	100.0	1.00
Mother's education[B]								
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)
Primary	(100.0)	(100.0)	100.0	1.00	(*)	(*)	(100)	(1.00)
Preparatory	(100.0)	(100.0)	100.0	1.00	(100.0)	(100.0)	100.0	1.00
Secondary+	99.6	99.9	99.7	1.00	100.0	100.0	100.0	1.00
Mother's functional difficulties[C]								
Has functional difficulty	(*)	(*)	(*)	(*)	(*)	(*)	100.0	1.00
Has no functional difficulty	99.6	99.9	99.7	1.00	100.0	100.0	100.0	1.00
Parity indices								
Orphans/non-orphans	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)

[1] MICS indicator LN.11a - Parity indices – primary and preparatory attendance (gender); SDG indicator 4.5.1

[A] In Qatar MICS 2023, information on attendance was captured in the individual questionnaires rather than in the education module in the household questionnaire. Information is not presented for upper secondary net attendance rates or gender parity indices.

[B] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated or those age 18 at the time of interview. The sum of cases in the disaggregate may not equal the total denominator.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

na: not applicable
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

7.3 PARENTAL INVOLVEMENT

Parental involvement in their children's education is widely accepted to have a positive effect on their child's learning performance. For instance, reading activities at home have significant positive influences on reading achievement, language comprehension and expressive language skills.[87] Research also shows that parental involvement in their child's literacy practices is a positive long-term predictor of later educational attainment.[88]

Beyond learning activities at home, parental involvement that occurs in school (like participating in school meetings, talking with teachers, attending school meetings and volunteering in schools) can also benefit a student's performance.[89] Research studies have shown that, in the primary school age range, the impact of parental involvement in school activities can even be much bigger than differences associated with variations in the quality of schools, regardless of social class and ethnic group.[90]

The PR module included in the Questionnaire for children age 5-17 years was developed and tested for inclusion in MICS6. The work is described in detail in MICS Methodological Papers, No. 5.[91]

Table LN.3.3 shows learning environment at home, i.e., percentage of children with 3 or more books to read, and percentage whose teachers teach in the language that the child speaks at home.

[87] Gest, D. et al. "Shared Book Reading and Children's Language Comprehension Skills: The Moderating Role of Parental Discipline Practices." *Early Childhood Research Quarterly*19, no. 2 (2004): 319-36. doi:10.1016/j.ecresq.2004.04.007.

[88] Fluori, E. and A. Buchanan. "Early Father's and Mother's Involvement and Child's Later Educational Outcomes." *Educational Psychology*74, no. 2 (2004): 141-53. doi:10.1348/000709904773839806.

[89] Pomerantz, M., E. Moorman, and S. Litwack. "The How, Whom, and Why of Parents' Involvement in Children's Academic Lives: More Is Not Always Better." *Review of Educational Research*77, no. 3 (2007): 373-410. doi:10.3102/003465430305567.

[90] Desforges, C. and A. Abouchaar. *The Impact of Parental Involvement, Parental Support and Family Education on Pupil Achievements and Adjustment: A Literature Review.* Research report. Nottingham: Queen's Printer, 2003. https://www.nationalnumeracy.org.uk/sites/default/files/the_impact_of_parental_involvement.pdf.

[91] Hattori, H., M. Cardoso, and B. Ledoux. *Collecting data on foundational learning skills and parental involvement in education.* MICS Methodological Papers, No. 5. New York: UNICEF, 2017. http://mics.unicef.org/files?job=W1siZiIsIjIwMTcvMDYvMTUvMTYvMjcvMDAvNzMxL01JQ1NfTWV0aG9kb2xvZ2IjYWxfUGFwZXJfNS5wZGYiXV0&sha=39f5c31dbb91df26.

Table LN.3.3: Learning environment at home

Percentage of children age 7-14 years[A] who read or are read to at home and percentage who at home speak the language that teachers use at school, Qatar MICS 2023

	Percentage of children who read books or are read to at home[1]	Number of children age 7-14 years	Percentage of children who at home use the language also used by teachers at school[2]	Number of children age 7-14 years attending school
Total	**74.5**	**4,464**	**74.6**	**4,464**
Sex				
Male	70.5	2,314	73.5	2,314
Female	78.8	2,149	75.7	2,149
Nationality				
Qatari	64.8	753	85.2	753
Non-Qatari	76.5	3,710	72.4	3,710
Age at beginning of school year				
6[B]	78.5	597	70.9	597
7	72.8	602	73.1	602
8	74.0	589	75.5	589
9	73.7	528	75.5	528
10	73.0	478	75.1	478
11	72.7	539	72.6	539
12	68.3	477	76.5	477
13	80.4	562	79.5	562
14	(82.4)	92	(65.4)	92
School attendance				
Primary	74.2	3,082	73.5	3,082
Preparatory	75.2	1,381	77.0	1,381
Mother's education				
Pre-primary or none	(*)	6	(*)	6
Primary	73.5	232	83.3	232
Preparatory	66.5	230	89.9	230
Secondary+	75.1	3,996	73.1	3,996
Child's functional difficulties				
Has functional difficulty	53.6	120	72.2	120
Has no functional difficulty	75.1	4,344	74.6	4,344
Mother's functional difficulties[C]				
Has functional difficulty	(60.7)	88	(63.3)	88
Has no functional difficulty	75.1	4,071	74.7	4,071

[1] MICS indicator LN.19 - Reading habit at home

[2] MICS indicator LN.20 - School and home languages

[A] This table utilises information collected in both the Parental Involvement and Foundational Learning Skills modules. Note that otherwise identical denominators may be slightly different, as the Foundational Learning Skills module includes consent of respondent to interview child and assent and availability of child to be interviewed. This invariably reduces the number of cases for data collected in this module.

[B] As eligibility for the Parental Involvement and Foundational Learning Skills modules was determined based on age at time of interview (age 7-14 years), the disaggregate of Age at beginning of school year inevitably presents children who were age 6 years at the beginning of the school year.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

na: not applicable

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

(*) Figures that are based on fewer than 25 unweighted cases

8 PROTECTED FROM VIOLENCE AND EXPLOITATION

8.1 CHILD DISCIPLINE

Teaching children self-control and acceptable behaviour is an integral part of child discipline in all cultures. Positive parenting practices involve providing guidance on how to handle emotions or conflicts in manners that encourage judgment and responsibility and preserve children's self-esteem, physical and psychological integrity and dignity. Too often however, children are raised using punitive methods that rely on the use of physical force or verbal intimidation to obtain desired behaviours. Studies[92] have found that exposing children to violent discipline has harmful consequences, which range from immediate impacts to long-term harm that children carry forward into adult life. Violence hampers children's development, learning abilities and school performance; it inhibits positive relationships, provokes low self-esteem, emotional distress and depression; and, at times, it leads to risk taking and self-harm.

In the Qatar MICS 2023, mothers or caretakers of children under age five and of one randomly selected child aged 5-17 were asked a series of questions on the methods adults in the household used to discipline the child during the past month and if the respondent believes that physical punishment is a necessary part of child-rearing. Tables PR.2.1 and PR.2.2 present the results.

[92] Straus, M. and M. Paschall. "Corporal Punishment by Mothers and Development of Children's Cognitive Ability: A Longitudinal Study of Two Nationally Representative Age Cohorts." *Journal of Aggression, Maltreatment & Trauma* 18, no. 5 (2009): 459-83. doi:10.1080/10926770903035168.; Erickson, M. and B. Egeland. "A Developmental View of the Psychological Consequences of Maltreatment." *School Psychology Review* 16, no. 2 (1987): 156-68. http://psycnet.apa.org/record/1987-29817-001.; Schneider, M. et al. "Do Allegations of Emotional Maltreatment Predict Developmental Outcomes beyond That of Other Forms of Maltreatment?" *Child Abuse & Neglect* 29, no. 5 (2005): 513-32. doi:10.1016/j.chiabu.2004.08.010.

Table PR.2.1: Child discipline

Percentage of children age 1-14 years by child disciplining methods experienced during the last one month, Qatar MICS, 2023

	Percentage of children age 1-14 years who experienced:					Number of children age 1-14 years
	Only non-violent discipline	Psychological aggression	Physical punishment		Any violent discipline method[1]	
			Any	Severe[A]		
Total	**53.7**	**33.1**	**18.7**	**2.4**	**37.6**	**8,221**
Sex						
Male	53.1	33.8	21.4	2.9	38.8	4,159
Female	54.3	32.4	16.1	1.8	36.4	4,062
Nationality						
Qatari	61.7	25.4	12.1	1.2	28.8	1,342
Non-Qatari	52.2	34.7	20.0	2.6	39.3	6,880
Age						
1-2	71.1	0.4	1.4	0.0	1.6	1,149
3-4	72.1	21.8	11.3	0.8	26.1	1,281
5-9	45.9	42.3	26.6	2.8	48.2	3,202
10-14	46.5	42.0	20.4	3.6	46.1	2,588
Mother's education						
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	12
Primary	46.8	38.8	24.2	2.4	44.7	364
Preparatory	45.0	37.4	20.3	0.9	39.3	403
Secondary+	54.5	32.7	18.4	2.5	37.2	7,442
Child's functional difficulties (age 5-14 years)[B]						
Has functional difficulty	39.6	45.2	40.1	12.4	51.4	222
Has no functional difficulty	53.5	35.2	19.4	2.2	39.9	7,440
Mother's functional difficulties[C]						
Has functional difficulty	35.1	50.9	33.5	1.0	59.2	165
Has no functional difficulty	54.1	32.8	18.7	2.4	37.2	7,713

[1] MICS indicator PR.2 - Violent discipline; SDG 16.2.1

[A] Severe physical punishment includes: 1) Hit or slapped on the face, head or ears or 2) Beat up, that is, hit over and over as hard as one could

[B] Children aged under 5 years are excluded, as functional difficulties are only collected for age 5-14 years.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

(*) Figures that are based on fewer than 25 unweighted cases

Table PR.2.2: Attitudes toward physical punishment

Percentage of mothers/caretakers of children age 1-14 years who believe that physical punishment is needed to bring up, raise, or educate a child properly, Qatar MICS, 2023

	Percentage of mothers/caretakers who believe that a child needs to be physically punished	Number of mothers/ caretakers responding to a child discipline module
Total	**8.8**	**4,186**
Sex		
Male	(18.3)	28
Female	8.8	4,158
Nationality		
Qatari	7.8	623
Non-Qatari	9.0	3,563
Age		
<25	7.3	66
25-34	7.2	1,754
35-49	10.3	2,199
50+	7.0	168
Education		
Pre-primary or none	(*)	7
Primary	8.5	142
Preparatory	8.6	209
Secondary+	8.9	3,828
Functional difficulties[A]		
Has functional difficulty	16.5	74
Has no functional difficulty	8.7	3,919

[A] The disaggregate of Functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years and men age 18-49 years in selected households.

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

8.2 CHILD MARRIAGE

Marriage[93] before the age of 18 is violation of human rights, yet remains a reality for many children. 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 husband. In the Sustainable Development Goals, child marriage has been identified as a harmful practice which the world should aim to eliminate by 2030.

Child marriage is more common among girls than boys, but does occur around the world among children of both sexes. The impacts specific to boys married in childhood are not yet well understood, but marriage does place boys in an adult role accompanied by responsibilities for which they may not be prepared.

In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage compromises the development of girls and often results in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty.[94]

Closely related to the issue of child marriage is the age at which sexual activity – and for females, childbearing – may begin. Women who were married before the age of 18 tend to have more children than those who marry later in life and are less likely to receive maternal health care services.[95,96] In addition, pregnancy related deaths are known to be a leading cause of mortality for both married and unmarried girls between the ages of 15 and 19.

Tables PR.4.1W and PR.4.1M present the percentage of women and men married before ages 15 and 18 years, the percentage of adolescent girls and boys age 15-19 years who are currently married, and the percentage of women in a polygynous marriage.

Tables PR.4.2W and PR.4.2M present, respectively, the proportion of women and men who were first married before age 15 and 18 by nationality and age groups. Examining the percentages married before ages 15 and 18 across different age groups allow for trends to be observed in child marriage over time.

Another component is the spousal age difference with the indicator being the percentage of married women 10 or more years younger than their current spouse. Table PR.4.3 presents the results of the age difference between women and their husband.

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[93] All references to marriage in this chapter include cohabiting unions as well.

[94] Bajracharya, A. and N. Amin, S. *Poverty, marriage timing, and transitions to adulthood in Nepal: A longitudinal analysis using the Nepal living standards survey.* Poverty, Gender, and Youth Working Paper No. 19. New York: Population Council, 2010. http://www.popcouncil.org/uploads/pdfs/wp/pgy/019.pdf.;
Godha, D. et al. 2011. *The influence of child marriage on fertility, fertility-control, and maternal health care utilization.* MEASURE/Evaluation PRH Project Working paper 11-124.

[95] Godha D., D. Hotchkiss and A. Gage. "Association Between Child Marriage and Reproductive Health Outcomes and Service Utilization: A Multi-Country Study from South Asia." *Journal of Adolescent Health* 52, no. 5 (2013): 552-58. doi:10.1016/j.jadohealth.2013.01.021.

[96] Nour, N. "Health Consequences of Child Marriage in Africa." *Emerging Infectious Diseases* 12, no. 11 (2006): 1644-649. doi:10.3201/eid1211.060510.

Table PR.4.1W: Child marriage and polygyny (women)

Percentage of women age 15-49 years who first married before their 15th birthday, percentages of women age 20-49 and 20-24 years who first married before their 15th and 18th birthdays, percentage of women age 15-19 years currently married, and the percentage of women who are in a polygynous marriage, Qatar MICS, 2023

	Women age 15-49 years		Women age 20-49 years			Women age 20-24 years			Women age 15-19 years		Women age 15-49 years	
	Percentage married before age 15	Number of women age 15-49 years	Percentage married before age 15	Percentage married before age 18	Number of women age 20-49 years	Percentage married before age 15[1]	Percentage married before age 18[2]	Number of women age 20-24 years	Percentage currently married[3]	Number of women age 15-19 years	Percentage in polygynous marriage[4]	Number of women age 15-49 years currently married
Total	**0.0**	**7,381**	**0.0**	**3.7**	**6,386**	**0.0**	**1.7**	**866**	**1.4**	**995**	**1.2**	**4,627**
Nationality												
Qatari	0.0	1,368	0.0	4.0	1,130	0.0	1.2	211	0.7	239	2.0	627
Non-Qatari	0.0	6,013	0.0	3.7	5,256	0.0	1.9	655	1.6	756	1.1	4,001
Age												
15-19	0.0	995	na	na	-	na	na	0	1.4	995	(*)	14
15-17	0.0	633	na	na	-	na	na	0	0.3	633	(*)	2
18-19	0.0	362	na	na	-	na	na	0	3.3	362	(*)	12
20-24	0.0	866	0.0	1.7	866	0.0	1.7	866	na	-	1.0	179
25-29	0.0	1,196	0.0	3.5	1,196	na	na	0	na	-	0.5	742
30-34	0.0	1,434	0.0	3.4	1,434	na	na	0	na	-	0.5	1,149
35-39	0.0	1,266	0.0	2.9	1,266	na	na	0	na	-	2.3	1,088
40-44	0.0	1,000	0.0	5.1	1,000	na	na	0	na	-	1.7	894
45-49	0.0	624	0.0	7.3	624	na	na	0	na	-	1.1	562
Education												
Pre-primary or none	(*)	11	(*)	(*)	11	(*)	(*)	2	na	-	(*)	7
Primary	0.0	174	0.0	17.3	173	(*)	(*)	7	(*)	2	4.2	140
Preparatory	0.0	310	0.0	13.0	212	(*)	(*)	16	0.4	98	1.6	174
Secondary+	0.0	6,885	0.0	3.0	5,990	0.0	1.5	842	1.5	895	1.1	4,307
Functional difficulties (age 18-49 years)												
Has functional difficulty	0.0	129	0.0	1.7	124	(*)	(*)	13	(*)	4	4.4	94
Has no functional difficulty	0.0	6,620	0.0	3.8	6,262	0.0	1.7	853	3.4	358	1.2	4,532

[1] MICS indicator PR.4a - Child marriage (before age 15); SDG 5.3.1

[2] MICS indicator PR.4b - Child marriage (before age 18); SDG 5.3.1

[3] MICS indicator PR.5 - Young women age 15-19 years currently married

[4] MICS indicator PR.6 - Polygyny

na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases

'–' denotes 0 unweighted case in the denominator

Table PR.4.1M: Child marriage and polygyny (men)

Percentage of men age 15-49 years who first married before their 15th birthday, percentages of men age 20-49 and 20-24 years who first married before their 15th and 18th birthdays, percentage of men age 15-19 years currently married, and the percentage of men who are in a polygynous marriage, Qatar MICS, 2023

	Men age 15-49 years		Men age 20-49 years			Men age 20-24 years			Men age 15-19 years		Men age 15-49 years	
	Percentage married before age 15	Number of men age 15-49 years	Percentage married before age 15	Percentage married before age 18	Number of men age 20-49 years	Percentage married before age 15[1]	Percentage married before age 18[2]	Number of men age 20-24 years	Percentage currently married[3]	Number of men age 15-19 years	Percentage in polygynous marriage[4]	Number of men age 15-49 years currently married
Total	**0.0**	**3,437**	**0.0**	**0.6**	**2,892**	**0.0**	**0.2**	**366**	**0.0**	**545**	**0.9**	**2,023**
Nationality												
Qatari	0.0	733	0.0	0.6	595	0.0	0.6	144	0.0	138	0.5	293
Non-Qatari	0.0	2,704	0.0	0.5	2,297	0.0	0.0	222	0.0	406	1.0	1,730
Age												
15-19	0.0	545	na	na	-	na	na	0	0.0	545	na	-
15-17	0.0	336	na	na	-	na	na	0	0.0	336	na	-
18-19	0.0	208	na	na	-	na	na	0	0.0	208	na	-
20-24	0.0	357	0.0	0.2	357	0.0	0.2	366	na	-	(*)	16
25-29	0.0	411	0.0	0.9	411	na	na	0	na	-	0.0	138
30-34	0.0	547	0.0	0.3	547	na	na	0	na	-	0.1	409
35-39	0.0	589	0.0	0.4	589	na	na	0	na	-	0.8	522
40-44	0.0	591	0.0	0.8	591	na	na	0	na	-	1.0	557
45-49	0.0	396	0.0	0.6	396	na	na	0	na	-	2.0	381
Education												
Pre-primary or none	(*)	3	(*)	(*)	3	na	na	0	(*)	0	(*)	0
Primary	0.0	64	0.0	2.9	62	(*)	(*)	3	(*)	2	0.7	50
Preparatory	0.0	168	0.0	0.0	103	(*)	(*)	7	0.0	65	2.4	76
Secondary+	0.0	3,202	0.0	0.5	2,725	0.0	0.2	355	0.0	477	0.8	1,897
Functional difficulties (age 18-49 years)												
Has functional difficulty	(0.0)	36	(0.0)	(0.0)	36	(*)	(*)	4	(*)	0	(*)	25
Has no functional difficulty	0.0	3,064	0.0	0.6	2,857	0.0	0.2	361	0.0	208	0.9	1,998

[1] MICS indicator PR.4a - Child marriage (before age 15); SDG 5.3.1
[2] MICS indicator PR.4b - Child marriage (before age 18); SDG 5.3.1
[3] MICS indicator PR.5 - Young women age 15-19 years currently married
[4] MICS indicator PR.6 - Polygyny

na: not applicable
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases
'–' denotes 0 unweighted case in the denominator

Table PR.4.2W: Trends in child marriage (women)

Percentage of women who were first married or entered into a marital union before their 15th and 18th birthday, by nationality, Qatar MICS, 2023

	Qatari				Non-Qatari				All			
	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years
Total	**0.0**	**1,368**	**4.0**	**1,130**	**0.0**	**6,013**	**3.7**	**5,256**	**0.0**	**7,381**	**3.7**	**6,386**
Age												
15-19	0.0	239	na	-	0.0	756	na	-	0.0	995	na	-
15-17	0.0	146	na	-	0.0	487	na	-	0.0	633	na	-
18-19	0.0	93	na	-	0.0	269	na	-	0.0	362	na	-
20-24	0.0	211	1.2	211	0.0	655	1.9	655	0.0	866	1.7	866
25-29	0.0	234	1.7	234	0.0	962	3.9	962	0.0	1,196	3.5	1,196
30-34	0.0	232	4.6	232	0.0	1,202	3.2	1,202	0.0	1,434	3.4	1,434
35-39	0.0	177	5.0	177	0.0	1,089	2.5	1,089	0.0	1,266	2.9	1,266
40-44	0.0	162	6.8	162	0.0	838	4.8	838	0.0	1,000	5.1	1,000
45-49	0.0	114	7.2	114	0.0	510	7.4	510	0.0	624	7.3	624

na: not applicable

'–' denotes 0 unweighted case in the denominator

Table PR.4.2M: Trends in child marriage (men)

Percentage of men who were first married or entered into a marital union before their 15th and 18th birthday, by area of residence, Qatar MICS, 2023

	Qatari				Non-Qatari				All			
	Percentage of men married before age 15	Number of men age 15-49 years	Percentage of men married before age 18	Number of men age 20-49 years	Percentage of men married before age 15	Number of men age 15-49 years	Percentage of men married before age 18	Number of men age 20-49 years	Percentage of men married before age 15	Number of men age 15-49 years	Percentage of men married before age 18	Number of men age 20-49 years
Total	**0.0**	**733**	**0.6**	**595**	**0.0**	**2,704**	**0.5**	**2,297**	**0.0**	**3,437**	**0.6**	**2,892**
Age												
15-19	0.0	138	na	-	0.0	406	na	-	0.0	545	na	-
15-17	0.0	83	na	-	0.0	254	na	-	0.0	336	na	-
18-19	0.0	56	na	-	0.0	153	na	-	0.0	208	na	-
20-24	0.0	128	0.6	128	0.0	229	0.0	229	0.0	357	0.2	357
25-29	0.0	124	0.0	124	0.0	287	1.3	287	0.0	411	0.9	411
30-34	0.0	122	0.0	122	0.0	425	0.4	425	0.0	547	0.3	547
35-39	0.0	82	0.9	82	0.0	508	0.4	508	0.0	589	0.4	589
40-44	0.0	83	1.3	83	0.0	508	0.7	508	0.0	591	0.8	591
45-49	0.0	56	1.3	56	0.0	340	0.5	340	0.0	396	0.6	396

na: not applicable

'–' denotes 0 unweighted case in the denominator

Table PR.4.3: Spousal age difference

Percent distribution of women currently married age 15-19 and 20-24 years by age difference with their husband, Qatar MICS, 2023

	Percentage of currently married women age 15-19 years whose husband is:						Number of women age 15-19 years currently married	Percentage of currently married women age 20-24 years whose husband is:						Number of women age 20-24 years currently married
	Younger	0-4 years older	5-9 years older	10+ years older[1]	Husband's age unknown	Total		Younger	0-4 years older	5-9 years older	10+ years older[2]	Husband's age unknown	Total	
Total	(*)	(*)	(*)	(*)	(*)	100	14	6.7	26.1	49.4	17.5	0.2	100.0	179
Nationality	(*)	(*)	(*)	(*)	(*)	100	2	5.0	59.4	28.7	5.9	1.0	100.0	36
Qatari	(*)	(*)	(*)	(*)	(*)	100	12	7.2	17.8	54.7	20.4	0.0	100.0	143
Non-Qatari														
Education	-	-	-	-	-	-	0	-	-	-	-	-	-	0
Pre-primary or none	-	-	-	-	-	-	0	(*)	(*)	(*)	(*)	(*)	100	2
Primary	-	-	-	-	-	-	0	(*)	(*)	(*)	(*)	(*)	100	13
Preparatory	(*)	(*)	(*)	(*)	(*)	100	13	7.2	27.1	47.4	18.1	0.2	100.0	163
Secondary+	-	-	-	-	-	-	0	-	-	-	-	-	-	0
Functional difficulties (age 18-49 years)														
Has functional difficulty	-	-	-	-	-	-	0	(*)	(*)	(*)	(*)	(*)	100.0	1
Has no functional difficulty	(*)	(*)	(*)	(*)	(*)	100	12	6.8	26.0	49.6	17.3	0.2	100.0	178

[1] MICS indicator PR.7a - Spousal age difference (among women age 15-19)

[2] MICS indicator PR.7b - Spousal age difference (among women age 20-24)

(*) Figures that are based on fewer than 25 unweighted cases

'–' denotes 0 unweighted case in the denominator

8.3 VICTIMISATION

Crime can have a large impact on the lives of victims and the wider community in which they live. Those who are victims of crimes can suffer physically and psychologically and experience loss of assets and income. Crime can also carry significant economic costs to the community through the provision of preventative measures as well as corrective services[97].

Tables PR.6.1W and PR.6.1M present the percentage of women and men who were victims of robbery or assault in the last 3 and 1 year prior to the survey, by various background characteristics.

The results also showed that the percentage of women in the age group 15-49 years who were victims of robbery or assault in the last year was only two (2) women out of the total number of women surveyed in this age group, while women in the age group 15-49 years who were victims of robbery or assault in the last 3 and 1 year in the last year did not exceed (14 cases) of the total women surveyed, and this percentage is zero, and this indicates the state of security enjoyed by the State of Qatar.

The results also showed that there was no one in the category of men in the age group of 15-49 years who were victims of robbery or assault in the last year, while the number of men who were assaulted in the last year only reached six people (6) of the total respondents in this study, which in turn confirms the previous results of the cluster survey.

[97] United Nations Office on Drugs and Crime, and United Nations Economic Commission for Europe. *Manual on Victimization Surveys*. Geneva: UN. https://www.unodc.org/documents/data-and-analysis/Crime-statistics/Manual_on_Victimization_surveys_2009_web.pdf.

Table PR.6.1W: Victims of robbery and assault (women)

Percentage of women age 15-49 years who were victims of robbery, assault and either robbery or assault in the last 3 years and last 1 year, Qatar MICS, 2023

	Percentage of women age 15-49 years who were victims of:				Percentage of women age 15-49 years who experienced physical violence of robbery or assault:		
	Robbery[A]		Assault[B]				
	In the last 3 years	In the last 1 year	In the last 3 years	In the last 1 year	In the last 3 years	In the last 1 year[1]	Number of women
Total	**0.1**	**0.0**	**0.5**	**0.2**	**0.5**	**0.2**	**7,381**
Nationality							
Qatari	0.0	0.0	0.3	0.1	0.3	0.1	1,368
Non-Qatari	0.1	0.0	0.5	0.2	0.6	0.2	6,013
Age							
15-19	0.0	0.0	0.6	0.2	0.6	0.2	995
15-17	0.0	0.0	0.3	0.3	0.3	0.3	633
18-19	0.0	0.0	0.9	0.0	0.9	0.0	362
20-24	0.0	0.0	0.5	0.3	0.5	0.3	866
25-29	0.0	0.0	0.4	0.2	0.4	0.2	1,196
30-34	0.2	0.1	0.6	0.3	0.8	0.4	1,434
35-39	0.1	0.0	0.4	0.1	0.6	0.1	1,266
40-44	0.0	0.0	0.5	0.2	0.5	0.2	1,000
45-49	0.0	0.0	0.2	0.1	0.2	0.1	624
Education							
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	11
Primary	0.0	0.0	0.2	0.0	0.2	0.0	174
Preparatory	0.0	0.0	0.2	0.1	0.2	0.1	310
Secondary+	0.1	0.0	0.5	0.2	0.6	0.2	6,885
Functional difficulties (age 18-49 years)							
Has functional difficulty	0.0	0.0	1.9	1.6	1.9	1.6	129
Has no functional difficulty	0.1	0.0	0.4	0.2	0.5	0.2	6,620

[1] MICS indicator PR.12 - Experience of robbery and assault

[A] A robbery is here defined as "taking or trying to take something, by using force or threatening to use force".

[B] An assault is here defined as a physical attack.

(*) Figures that are based on fewer than 25 unweighted cases

Table PR.6.1M: Victims of robbery and assault (men)

Percentage of men age 15-49 years who were victims of robbery, assault and either robbery or assault in the last 3 years and last 1 year, Qatar MICS, 2023

	Percentage of men age 15-49 years who were victims of:				Percentage of men age 15-49 years who experienced physical violence of robbery or assault:		
	Robbery[A]		Assault[B]				
	In the last 3 years	In the last 1 year	In the last 3 years	In the last 1 year	In the last 3 years	In the last 1 year[1]	Number of men
Total	**0.0**	**0.0**	**0.3**	**0.2**	**0.4**	**0.2**	**3,437**
Nationality							
Qatari	0.1	0.1	0.2	0.1	0.2	0.2	733
Non-Qatari	0.0	0.0	0.4	0.2	0.4	0.2	2,704
Age							
15-19	0.0	0.0	1.7	1.0	1.7	1.0	545
15-17	0.0	0.0	2.1	1.6	2.1	1.6	336
18-19	0.0	0.0	1.0	0.0	1.0	0.0	208
20-24	0.0	0.0	0.0	0.0	0.0	0.0	357
25-29	0.1	0.1	0.0	0.0	0.1	0.1	411
30-34	0.0	0.0	0.0	0.0	0.0	0.0	547
35-39	0.0	0.0	0.1	0.1	0.1	0.1	589
40-44	0.0	0.0	0.3	0.0	0.3	0.0	591
45-49	0.0	0.0	0.0	0.0	0.0	0.0	396
Education							
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	3
Primary	0.0	0.0	0.0	0.0	0.0	0.0	64
Preparatory	0.0	0.0	1.3	1.3	1.3	1.3	168
Secondary+	0.0	0.0	0.3	0.1	0.3	0.1	3,202
Functional difficulties (age 18-49 years)							
Has functional difficulty	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	36
Has no functional difficulty	0.0	0.0	0.2	0.0	0.2	0.0	3,064

[1] MICS indicator PR.12 - Experience of robbery and assault

[A] A robbery is here defined as "taking or trying to take something, by using force or threatening to use force".

[B] An assault is here defined as a physical attack.

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

(*) Figures that are based on fewer than 25 unweighted cases

8.4 FEELINGS OF SAFETY

Questions about fear, such as feelings of safety and perceptions of crime as a problem, indicate respondents' level of perceived safety in everyday life. This is important as such perceptions limit people's freedom of movement and influence how they manage threats to their safety [97]

Tables PR.7.1W and PR.7.1M present data for women and men on their feelings of safety for walking alone in their neighbourhood after dark and for being at home alone after dark.

Table PR.7.1W: Feelings of safety (women)

Percent distribution of women age 15-49 years by feeling of safety walking alone in their neighbourhood after dark and being home alone after dark, Qatar MICS, 2023

	Percent distribution of women who walking alone in their neighbourhood after dark feel:						
	Very safe	Safe	Unsafe	Never walk alone after dark	Total	Percentage of women who feel safe walking alone in their neighbourhood after dark[1]	Number of women
Total	**82.1**	**14.6**	**0.6**	**2.7**	**100.0**	**96.6**	**7,381**
Nationality							
Qatari	80.9	12.1	0.7	6.4	100.0	92.8	1,368
Non-Qatari	82.4	15.1	0.6	1.9	100.0	97.5	6,013
Age							
15-19	78.7	14.1	0.8	6.5	100.0	92.7	995
15-17	77.5	14.7	1.2	6.7	100.0	92.1	633
18-19	81.0	13.0	0.0	6.1	100.0	93.8	362
20-24	79.1	17.4	0.4	3.1	100.0	96.4	866
25-29	79.1	18.6	0.5	1.8	100.0	97.6	1,196
30-34	83.6	13.9	0.8	1.8	100.0	97.5	1,434
35-39	86.1	11.2	0.8	1.9	100.0	97.3	1,266
40-44	83.9	13.0	0.6	2.5	100.0	96.7	1,000
45-49	83.1	14.4	0.5	2.0	100.0	97.5	624
Education							
Pre-primary or none	(*)	(*)	(*)	(*)	100.0	(*)	11
Primary	79.2	16.8	0.6	3.4	100.0	95.0	174
Preparatory	80.0	14.2	0.7	5.1	100.0	94.3	310
Secondary+	82.3	14.5	0.6	2.6	100.0	96.7	6,885
Functional difficulties (age 18-49 years)							
Has functional difficulty	82.1	15.7	0.3	1.9	100.0	96.2	129
Has no functional difficulty	82.5	14.5	0.6	2.3	100.0	97.0	6,620

[1] MICS indicator PR.14 - Safety; SDG indicator 16.1.4

(*) Figures that are based on fewer than 25 unweighted cases

Table PR.7.1M: Feelings of safety (men)

Percent distribution of men age 15-49 years by feeling of safety walking alone in their neighbourhood after dark and being home alone after dark, Qatar MICS, 2023

	Percent distribution of men who walking alone in their neighbourhood after dark feel:						
	Very safe	Safe	Unsafe	Never walk alone after dark	Total	Percentage of men who feel safe walking alone in their neighbourhood after dark[1]	Number of men
Total	**89.1**	**10.6**	**0.2**	**0.1**	**100.0**	**99.7**	**3,437**
Nationality							
Qatari	87.8	11.5	0.6	0.1	100.0	99.2	733
Non-Qatari	89.4	10.4	0.1	0.1	100.0	99.8	2,704
Age							
15-19	87.2	12.7	0.1	0.1	100.0	99.9	545
15-17	86.8	13.1	0.0	0.1	100.0	99.9	336
18-19	87.8	12.0	0.2	0.0	100.0	99.8	208
20-24	86.3	13.6	0.0	0.1	100.0	99.8	357
25-29	85.6	14.1	0.3	0.0	100.0	99.7	411
30-34	86.4	13.3	0.3	0.0	100.0	99.7	547
35-39	91.1	8.6	0.3	0.0	100.0	99.7	589
40-44	91.4	7.8	0.5	0.3	100.0	99.2	591
45-49	95.0	4.9	0.1	0.0	100.0	99.9	396
Education							
Pre-primary or none	(*)	(*)	(*)	(*)	100.0	(*)	3
Primary	87.5	12.5	0.0	0.0	100.0	100.0	64
Preparatory	86.7	12.8	0.4	0.0	100.0	99.6	168
Secondary+	89.2	10.5	0.2	0.1	100.0	99.7	3,202
Functional difficulties (age 18-49 years)							
Has functional difficulty	(86.9)	(13.1)	(0.0)	(0.0)	100.0	(100.0)	36
Has no functional difficulty	89.4	10.3	0.3	0.1	100.0	99.7	3,064

[1] MICS indicator PR.14 - Safety; SDG indicator 16.1.4

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

(*) Figures that are based on fewer than 25 unweighted cases

9 EQUITABLE CHANCE IN LIFE

9.1 CHILD FUNCTIONING

The Convention on the Rights of Persons with Disabilities[98] outlines States Parties' obligations to ensure the full realization of rights for children with disabilities on an equal basis with other children. The presence of functional difficulties may place children at risk of experiencing limited participation in an unaccommodating environment, and limit the fulfilment of their rights.

Qatar MICS 2023 included child functioning modules intended to provide an estimate of the number/proportion of children with functional difficulties as reported by their mothers or primary caregivers. The module included in the Questionnaire for Children Under Five covered children between 2 and 4 years of age while a similar module is also included in the Questionnaire for Children Age 5-17.

Functional domains covered in Questionnaire for Children Under Five are as follows: Seeing, hearing, walking, fine motor, communication, learning, playing, and controlling behaviour, while functional domains covered in Questionnaire for Children Age 5-17 are as follows: Seeing, hearing, walking, self-care, communication, learning, remembering, concentrating, controlling behaviour, making friends, and anxiety. Two domains were excluded from the Qatar MICS 2023 child functioning module for children 5-17: Depression and Accepting Change. Consequently, this might have led to a reduction in the percentage of children reported to experience functional difficulties. Additionally, questions about difficulties in walking 500 meters were omitted, with the walking domain now referring only to difficulties in walking 100 meters.

Tables EQ.1.1 and EQ.1.2 present the percentage of children by age group with functional difficulty by domain.

Table EQ.1.3 presents the percentage of children age 2-17 who use assistive devices and still have difficulty within the relevant functional domains.

Table EQ.1.4 is a summary table presenting the percentage of children by age group with functional difficulty.

[98] "Convention on the Rights of Persons with Disabilities." United Nations. Accessed August 31, 2018. https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html.

Table EQ.1.1: Child functioning (children age 2-4 years)

Percentage of children age 2-4 years who have functional difficulty, by domain, Qatar MICS, 2023

	Percentage of children aged 2-4 years with functional difficulty[A] in the domain of:								Percentage of children age 2-4 years with functional difficulty in at least one domain	Number of children age 2-4 years
	Seeing	Hearing	Walking	Fine motor	Communication	Learning	Playing	Controlling behaviour		
Total	**0.3**	**0.2**	**0.4**	**0.3**	**0.8**	**0.5**	**0.2**	**0.2**	**1.6**	**1,871**
Sex										
Male	0.3	0.3	0.6	0.4	1.1	0.8	0.3	0.1	2.1	949
Female	0.2	0.0	0.1	0.1	0.6	0.2	0.0	0.2	1.1	922
Nationality										
Qatari	0.0	0.0	0.7	0.6	0.6	0.5	0.0	0.6	2.1	273
Non-Qatari	0.3	0.2	0.3	0.2	0.9	0.5	0.2	0.1	1.5	1,598
Age										
2	0.5	0.3	0.7	0.8	1.2	1.0	0.5	0.0	1.8	590
3	0.0	0.0	0.4	0.0	0.8	0.2	0.0	0.4	1.5	627
4	0.2	0.2	0.0	0.0	0.5	0.2	0.0	0.1	1.4	654
Early childhood education attendance[B]										
Attending	0.1	0.1	0.2	0.0	0.6	0.1	0.0	0.3	1.6	1,080
Not attending	0.0	0.0	0.2	0.0	0.8	0.8	0.0	0.0	0.9	201
Mother's education										
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	6
Primary	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	2.7	59
Preparatory	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4	0.4	87
Secondary+	0.3	0.2	0.4	0.3	0.8	0.5	0.2	0.2	1.6	1,720
Mother's functional difficulties[C]										
Has functional difficulty	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	37
Has no functional difficulty	0.3	0.2	0.3	0.3	0.9	0.5	0.2	0.2	1.5	1,820

[A] Functional difficulty for children age 2-4 years are defined as having responded "A lot of difficulty" or "Cannot at all" to questions within all listed domains, except the last domain of controlling behaviour, for which the response category "A lot more" is considered a functional difficulty.

[B] Children age 2 are excluded, as early childhood education attendance is only collected for age 3-4 years.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table EQ.1.2: Child functioning (children age 5-17 years)

Percentage of children age 5-17 years who have functional difficulty, by domain, Qatar MICS, 2023

	Percentage of children aged 5-17 years with functional difficulty[A] in the domain of:											Percentage of children age 5-17 years with functional difficulty in at least one domain	Number of children age 5-17 years
	Seeing	Hearing	Walking[B]	Self-care	Communication	Learning	Remembering	Concentrating	Controlling behaviour	Making friends	Anxiety		
Total	**0.2**	**0.1**	**0.7**	**0.3**	**0.5**	**0.4**	**0.4**	**0.4**	**0.7**	**1.0**	**1.1**	**3.1**	**7,109**
Sex													
Male	0.3	0.1	0.8	0.4	0.7	0.7	0.5	0.7	1.1	1.6	1.3	4.2	3,609
Female	0.1	0.1	0.5	0.1	0.2	0.2	0.4	0.2	0.3	0.4	0.8	2.0	3,500
Nationality													
Qatari	0.2	0.4	0.4	0.5	0.6	0.4	0.5	0.5	0.5	0.9	3.1	4.8	1,317
Non-Qatari	0.2	0.0	0.7	0.2	0.5	0.4	0.4	0.4	0.7	1.0	0.6	2.7	5,792
Age													
5-9	0.2	0.1	0.9	0.5	0.7	0.6	0.4	0.6	0.8	1.3	1.4	4.0	3,202
10-14	0.1	0.1	0.5	0.2	0.2	0.4	0.6	0.4	0.9	0.9	0.8	2.5	2,588
15-17	0.3	0.0	0.5	0.1	0.5	0.2	0.2	0.1	0.0	0.4	0.7	2.2	1,318
School attendance													
Attending[C]	0.2	0.1	0.7	0.3	0.5	0.4	0.4	0.4	0.7	1.0	1.1	3.1	7,101
Not attending	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	8
Mother's education[D]													
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	19
Primary	0.0	0.3	0.0	0.3	1.6	0.3	0.3	0.3	1.6	1.6	0.9	2.8	359
Preparatory	0.2	0.1	0.2	0.2	0.1	0.1	0.1	0.3	0.1	0.1	3.0	3.5	417
Secondary+	0.2	0.1	0.7	0.3	0.5	0.5	0.4	0.5	0.7	1.0	0.9	3.1	6,313
Mother's functional difficulties[E]													
Has functional difficulty	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.7)	(0.7)	143
Has no functional difficulty	0.2	0.1	0.7	0.3	0.5	0.4	0.4	0.5	0.8	1.1	1.0	3.2	6,354

[A] Functional difficulty for children age 5-17 years are defined as having responded "A lot of difficulty" or "Cannot at all" to questions within all listed domains, except the last domain of anxiety for which the response category "Daily" is considered a functional difficulty. Note the child functioning module in Qatar MICS 2023 did not include two domains: Depression and Accepting Change.

[B] In Qatar MICS 2023 questions related to difficulties walking 500 m were removed and the walking domain refers to difficulties walking 100 m.

[C] Includes attendance to early childhood education

[D] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated.

[E] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years.

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

(*) Figures that are based on fewer than 25 unweighted cases

Table EQ.1.3: Use of assistive devices (children age 2-17 years)

Percentage of children age 2-17 years who use assistive devices and have functional difficulty within domain of assistive devices, Qatar MICS, 2023

	Percentage of children age 2-17 years who:			Number of children age 2-17 years	Percentage of children with difficulties seeing when wearing glasses	Number of children age 2-17 years who wear glasses	Percentage of children with difficulties hearing when using hearing aid	Number of children age 2-17 years who use hearing aid	Percentage of children with difficulties walking when using equipment or receiving assistance[A]	Number of children age 2-17 years who use equipment or receive assistance for walking
	Wear glasses	Use hearing aid	Use equipment or receive assistance for walking							
Total	**14.8**	**1.6**	**2.6**	**8,980**	**0.8**	**1,327**	**3.4**	**144**	**7.4**	**234**
Sex										
Male	12.6	1.9	2.7	4,559	1.7	574	(3.7)	87	8.7	121
Female	17.0	1.3	2.6	4,422	0.1	752	(2.9)	57	6.0	113
Nationality										
Qatari	10.5	1.4	1.6	1,591	0.4	167	(15.2)	22	(11.9)	25
Non-Qatari	15.7	1.6	2.8	7,390	0.8	1,160	(1.3)	122	6.9	209
Age										
2-4	3.9	1.5	2.6	1,871	2.1	73	(5.6)	28	(4.6)	48
5-9	9.7	1.3	2.7	3,202	2.1	311	(*)	42	(11.4)	88
10-14	22.9	1.3	2.0	2,588	0.1	592	(*)	33	(*)	51
15-17	26.5	3.1	3.6	1,318	0.5	350	(*)	41	(*)	47
Mother's education[B]										
Pre-primary or none	(*)	(*)	(*)	25	(*)	3	(*)	1	-	0
Primary	13.0	1.3	1.6	418	(*)	54	(*)	5	(*)	7
Preparatory	9.8	2.0	2.1	503	(1.4)	49	(*)	10	(*)	11
Secondary+	15.2	1.6	2.7	8,033	0.8	1,220	3.1	127	7.9	217
Mother's functional difficulties[C]										
Has functional difficulty	16.6	0.9	4.6	180	(*)	30	(*)	2	(*)	8
Has no functional difficulty	14.0	1.4	2.6	8,175	0.8	1,142	4.2	116	8.2	213

[A] In Qatar MICS 2023 questions related to difficulties walking 500 m for children 5-17 years were removed and the walking domain refers to difficulties walking 100 m.

[B] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years.

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

(*) Figures that are based on fewer than 25 unweighted cases

'–' denotes 0 unweighted case in the denominator

Table EQ.1.4: Child functioning (children age 2-17 years)

Percentage of children age 2-4, 5-17 and 2-17 years with functional difficulty, Qatar MICS, 2023

	Percentage of children age 2-4 years with functional difficulty in at least one domain	Number of children age 2-4 years	Percentage of children age 5-17 years with functional difficulty in at least one domain[A]	Number of children age 5-17 years	Percentage of children age 2-17 years with functional difficulty in at least one domain[1, A]	Number of children age 2-17 years
Total	**1.6**	**1,871**	**3.1**	**7,109**	**2.8**	**8,980**
Sex						
Male	2.1	949	4.2	3,609	3.7	4,559
Female	1.1	922	2.0	3,500	1.8	4,422
Nationality						
Qatari	2.1	273	4.8	1,317	4.4	1,591
Non-Qatari	1.5	1,598	2.7	5,792	2.5	7,390
Mother's education[B]						
Pre-primary or none	(*)	6	(*)	19	(*)	25
Primary	2.7	59	2.8	359	2.8	418
Preparatory	0.4	87	3.5	417	3.0	503
Secondary+	1.6	1,720	3.1	6,313	2.8	8,033
Mother's functional difficulties[C]						
Has functional difficulty	(0.0)	37	(0.7)	143	0.6	180
Has no functional difficulty	1.5	1,820	3.2	6,354	2.8	8,175

[1] Country-specific indicator EQ.CS1 - Children with functional difficulty

[A] In Qatar MICS 2023 questions related to difficulties walking 500 m for children 5-17 years were removed and the walking domain refers to difficulties walking 100 m.

[B] The disaggregate of Mother's education is not available for children age 15-17 years identified as emancipated.

[C] The disaggregate of Mother's functional difficulties is shown only for respondents to the Adult Functioning module, i.e. individually interviewed women age 18-49 years.

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

(*) Figures that are based on fewer than 25 unweighted cases

9.2 SOCIAL TRANSFERS

Social protection is the set of public and private policies and programmes aimed at preventing, reducing and eliminating economic and social vulnerabilities to poverty and deprivation. Increasing volatility at the macro and household level, the persistence of inequalities and exclusion, threats posed to sustainable development by climate change and changing population trends have heightened the relevance and political momentum for social protection globally.[99]

Social transfers or external economic support can be defined as predictable direct transfers to individuals or households, both in-kind and cash (including cash for work and public work programmes) to protect and prevent individuals and households from being affected by shock and support the accumulation of human, productive and financial assets and includes various social protection schemes – examples in Qatar include supports from Zakat Fund, Qatar Charity, Qatar for Social Work, any retirement pension/social security, Red Crescent, or any other types of ad-hoc support, excluding transfers or assistance from family members, relatives or neighbours.

Health insurance is one of the protection schemes, and coverage data was collected for women and men aged 15-49 years, children under five years, and children aged 5-17 years. The results show 100% coverage for all respondents of different age groups, and this result shows the extent of social protection enjoyed by citizens in the State of Qatar regardless of their nationality.

The percentage of household members living in households that received social transfers or benefits in the last 3 months is further shown in Table EQ.2.5, by type of transfers and benefits. This table is an approximation to the SDG indicator 1.3.1 which is the proportion of population covered by social protection floors/systems.

Finally, Table EQ.2.7 presents the percentage of children under age 18 living in households that received social transfers or benefits in the last 3 months, by type of transfers or benefits.

[99] UNICEF. *Collecting Data to Measure Social Protection Programme Coverage: Pilot-Testing the Social Protection Module in Viet Nam.* A methodological report. New York: UNICEF, 2016. http://mics.unicef.org/files?job=W1siZiIsIjIwMTgvMDcvMTkvMjAvMzcvMzAvNzQ0L1ZpZXRuYW1fUmVwb3J0X1BpbG90X1Rlc3RpbmdfU1BfTW9kdWxlX0RlY2VtYmVyXzIwMTZfRklOQUwuUERGIl1d&sha=3df47c3a17992c8f

Table EQ.2.5: Coverage of social transfers and benefits: All household members

Percentage of household members living in households that received social transfers or benefits in the last 3 months, by type of transfers and benefits, Qatar MICS, 2023

	Percentage of household members living in households receiving specific types of support in the last 3 months:							
	Zakat Fund	Qatar Charity	Qatar for Social Work	Any retirement pension[A]	Red Crescent	Any social transfers or benefits[1]	No social transfers or benefits	Number of household members
Total	**0.3**	**0.4**	**0.2**	**5.5**	**0.2**	**2.3**	**97.7**	**27,381**
Sex of household head								
Male	0.4	0.3	0.1	5.3	0.2	2.1	97.9	26,003
Female	0.0	2.0	0.3	7.9	0.5	5.8	94.2	1,378
Nationality								
Qatari	0.4	0.3	0.7	5.5	0.1	6.7	93.3	6,143
Non-Qatari	0.3	0.4	0.0	na	0.3	1.0	99.0	21,239
Education household head								
Pre-primary or none	0.0	0.0	0.0	0.0	0.0	0.0	100.0	94
Primary	2.6	1.6	0.3	3.9	2.5	5.5	94.5	481
Preparatory	1.7	0.8	0.6	12.3	0.7	9.6	90.4	2,473
Secondary+	0.2	0.4	0.1	3.9	0.1	1.5	98.5	24,333

[1] MICS indicator EQ.3 - Population covered by social transfers; SDG indicator 1.3.1

[A] This percentage is limited to Qatari nationals only, as they are the ones eligible for retirement pensions.

NA: Not Applicable.

Table EQ.2.7: Coverage of social transfers and benefits: Children in all households

Percentage of children under age 18 living in households that received social transfers or benefits in the last 3 months, by type of transfers or benefits, Qatar MICS, 2023

	Percentage of children living in households receiving specific types of support in the last 3 months:					Any social transfers or benefits[1]	No social transfers or benefits	Number of children under age 18
	Zakat Fund	Qatar Charity	Qatar for Social Work	Any retirement pension[A]	Red Crescent			
Total	**0.5**	**0.3**	**0.1**	**2.7**	**0.2**	**1.6**	**98.4**	**10,500**
Sex of household head								
Male	0.5	0.3	0.1	2.5	0.2	1.5	98.5	10,154
Female	0.0	1.8	0.5	6.5	0.0	4.2	95.8	346
Nationality								
Qatari	0.2	0.4	0.8	2.7	0.1	4.0	96.0	1,827
Non-Qatari	0.6	0.3	0.0	na	0.3	1.1	98.9	8,672
Age of household head								
20-24	(*)	(*)	(*)	(*)	(*)	(*)	(*)	23
25-29	0.0	0.0	0.0	0.5	0.0	0.1	99.9	233
30-34	0.0	0.0	0.2	0.6	0.1	0.4	99.6	1,007
35-39	0.0	0.3	0.2	0.6	0.5	1.2	98.8	2,208
40-44	0.8	0.6	0.2	1.4	0.0	1.6	98.4	2,666
45-49	0.9	0.5	0.0	1.1	0.4	1.6	98.4	2,032
50-59	0.7	0.2	0.2	5.9	0.0	1.9	98.1	1,756
60-69	0.0	0.0	0.1	15.6	1.1	4.3	95.7	444
70+	0.0	1.3	0.0	12.5	0.0	5.6	94.4	130
Education of household head								
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	24
Primary	3.9	1.7	0.0	2.6	3.5	5.8	94.2	225
Preparatory	3.0	0.7	0.4	8.9	0.7	7.7	92.3	668
Secondary+	0.2	0.3	0.1	1.8	0.1	1.1	98.9	9,583

[1] MICS indicator EQ.5 - Children in the households that received any type of social transfers

[A] This percentage is limited to Qatari nationals only, as they are the ones eligible for retirement pensions.

Na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases

9.3 DISCRIMINATION AND HARASSMENT

Discrimination can impede individuals from accessing opportunities and services in a fair and equal manner. These questions are designed to measure the experiences of discrimination and harassment of respondents in the 12 months before the survey. The questions include specific grounds of discrimination and harassment which can increase the respondents' recall of events. The current questions are based on a recommended set of questions available at the start of MICS6 which were adapted for the Qatar MICS 2023. The questions may change given that methodological development is currently underway to move the indicator from a Tier III SDG indicator classification to Tier II. Tables EQ.3.1W and EQ.3.1M show the percentage of women and men who felt discriminated against based on a number of grounds.

Table EQ.3.1W: Discrimination and harassment (women)

Percentage of women age 15-49 years who in the past 12 months have felt discriminated against or harassed and those who have not felt discriminated against or harassed, Qatar MICS, 2023

	Percentage of women who in the last 12 months have felt discriminated against or harassed on the basis of:							Percentage of women who have not felt discriminated against or harassed in the last 12 months	Number of women
	Economic Status	Sex	Age	Educational Status	Disability	Other reason	Any reason[1]		
Total	**1.4**	**0.0**	**0.1**	**0.3**	**0.1**	**1.2**	**2.6**	**97.4**	**7,381**
Nationality									
Qatari	1.0	0.0	0.1	0.7	0.2	0.4	1.7	98.3	1,368
Non-Qatari	1.5	0.0	0.1	0.2	0.1	1.4	2.8	97.2	6,013
Age									
15-19	1.3	0.0	0.0	0.4	0.3	1.9	3.7	96.3	995
15-17	1.0	0.0	0.0	0.1	0.5	2.5	4.1	95.9	633
18-19	1.9	0.0	0.1	0.8	0.0	0.7	3.0	97.0	362
20-24	1.2	0.0	0.2	0.5	0.4	0.7	2.6	97.4	866
25-29	1.0	0.0	0.3	0.3	0.0	1.3	2.4	97.6	1,196
30-34	1.6	0.0	0.1	0.3	0.0	0.7	2.3	97.7	1,434
35-39	1.8	0.0	0.0	0.2	0.1	1.9	3.0	97.0	1,266
40-44	1.5	0.0	0.1	0.1	0.1	1.3	2.5	97.5	1,000
45-49	0.8	0.0	0.0	0.2	0.1	0.5	1.2	98.8	624
Education									
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	11
Primary	2.2	0.0	0.0	0.2	1.2	0.2	3.6	96.4	174
Preparatory	2.0	0.0	0.0	0.6	0.1	0.6	2.7	97.3	310
Secondary+	1.3	0.0	0.1	0.3	0.1	1.3	2.5	97.5	6,885
Functional difficulties (age 18-49 years)									
Has functional difficulty	5.1	0.0	0.0	1.1	1.3	4.3	11.0	89.0	129
Has no functional difficulty	1.3	0.0	0.1	0.3	0.1	1.0	2.3	97.7	6,620

[1] MICS indicator EQ.7 - Discrimination; SDG Indicators 10.3.1 & 16.b.1

(*) Figures that are based on fewer than 25 unweighted cases

Table EQ.3.1M: Discrimination and harassment (men)

Percentage of men age 15-49 years who in the past 12 months have felt discriminated against or harassed and those who have not felt discriminated against or harassed, Qatar MICS, 2023

	Percentage of men who in the last 12 months have felt discriminated against or harassed on the basis of:							Percentage of men who have not felt discriminated against or harassed in the last 12 months	Number of men
	Economic Status	Sex	Age	Educational Status	Disability	Other reason	Any reason[1]		
Total	**1.2**	**0.0**	**0.2**	**0.2**	**0.1**	**0.9**	**2.2**	**97.8**	**3,437**
Nationality									
Qatari	0.6	0.0	0.2	0.4	0.2	0.8	1.7	98.3	733
Non-Qatari	1.4	0.0	0.2	0.1	0.1	0.9	2.4	97.6	2,704
Age									
15-19	0.7	0.0	0.3	0.1	0.0	0.9	2.1	97.9	545
15-17	1.2	0.0	0.5	0.0	0.0	0.5	2.2	97.8	336
18-19	0.0	0.0	0.0	0.4	0.0	1.4	1.8	98.2	208
20-24	0.2	0.0	0.0	0.2	0.0	0.7	0.9	99.1	357
25-29	1.1	0.0	0.5	0.1	0.5	0.4	2.1	97.9	411
30-34	1.1	0.0	0.1	0.4	0.0	0.7	2.2	97.8	547
35-39	1.2	0.0	0.0	0.0	0.0	0.9	2.1	97.9	589
40-44	2.3	0.0	0.1	0.1	0.2	0.4	2.4	97.6	591
45-49	1.5	0.0	0.5	0.5	0.0	2.3	3.7	96.3	396
Education									
Pre-primary or none	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	3
Primary	2.8	0.0	0.0	0.0	0.6	0.0	3.4	96.6	64
Preparatory	0.0	0.0	0.0	0.0	0.0	1.3	1.3	98.7	168
Secondary+	1.3	0.0	0.2	0.2	0.1	0.9	2.3	97.7	3,202
Functional difficulties (age 18-49 years)									
Has functional difficulty	(10.0)	(0.0)	(0.0)	(0.0)	(1.0)	(1.0)	(12.0)	(88.0)	36
Has no functional difficulty	1.1	0.0	0.2	0.2	0.1	0.9	2.1	97.9	3,064

[1] MICS indicator EQ.7 - Discrimination; SDG Indicators 10.3.1 & 16.b.1

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

(*) Figures that are based on fewer than 25 unweighted cases

9.4 SUBJECTIVE WELL-BEING

Subjective perceptions of individuals of their incomes, health, living environments and the like, play a significant role in their lives and can impact their perception of well-being, irrespective of objective conditions such as actual income and physical health status[100].

Qatar MICS 2023 included a question about happiness and the respondents' overall satisfaction with life. To assist respondents in answering the question on happiness, they were shown a card with smiling faces (and not so smiling faces) that corresponded to the response categories (see the Questionnaires in Appendix E) 'very happy', 'somewhat happy', 'neither happy nor unhappy', 'somewhat unhappy' and 'very unhappy'. They were then shown a pictorial of a ladder with steps numbered from 0 at the bottom to 10 at the top and asked to indicate at which step of the ladder they feel they are standing at the time of the survey to indicate their level of life satisfaction. Tables EQ.4.1W and EQ.4.1M present the percentage of women and men age 15-49 years, and age 15-24 years separately, who are very or somewhat satisfied with their life overall, ladder step reported and the average life satisfaction score.

In addition to the questions on life satisfaction and happiness, respondents were also asked two simple questions on whether they think their life improved during the last one year, and whether they think their life will be better in one year's time. Such information may contribute to the understanding of desperation that may exist among young people, as well as hopelessness and hopes for the future. Specific combinations of the perceptions during the last one year and expectations for the next one year may be valuable information to understand the general sense of well-being among young people. In Tables EQ.4.2W and EQ.4.2M, women's and men's perceptions of a better life are shown.

[100] OECD. *OECD Guidelines on Measuring Subjective Well-being*. Paris: OECD Publishing, 2013. https://read.oecd-ilibrary.org/economics/oecd-guidelines-on-measuring-subjective-well-being_9789264191655-en#page1.

Table EQ.4.1W: Overall life satisfaction and happiness (women)

Percentage of women age 15-24 and 15-49 years by level of overall life satisfaction, average life satisfaction score, and the percentage who are very or somewhat satisfied with their life overall, Qatar MICS, 2023

	Ladder step reported:								Ladder step reported:							
	0-3	4-6	7-10	Missing	Total	Average life satisfaction score[1]	Percentage of women who are very or somewhat happy[2]	Number of women age 15-24 years	0-3	4-6	7-10	Missing	Total	Average life satisfaction score[3]	Percentage of women who are very or somewhat happy[4]	Number of women age 15-49 years
Total	**2.4**	**22.1**	**75.2**	**0.3**	**100.0**	**7.8**	**97.3**	**1,861**	**2.2**	**21.5**	**76.0**	**0.2**	**100.0**	**7.8**	**97.0**	**7,381**
Nationality																
Qatari	1.4	17.2	80.9	0.5	100.0	8.1	97.3	449	1.7	15.0	82.9	0.4	100.0	8.1	97.1	1,368
Non-Qatari	2.7	23.7	73.4	0.2	100.0	7.7	97.3	1,411	2.4	22.9	74.5	0.2	100.0	7.7	97.0	6,013
Age																
15-19	2.2	23.9	73.8	0.1	100.0	7.7	96.9	995	2.2	23.9	73.8	0.1	100.0	7.7	96.9	995
15-17	1.7	24.1	74.0	0.2	100.0	7.8	96.9	633	1.7	24.1	74.0	0.2	100.0	7.8	96.9	633
18-19	3.0	23.6	73.4	0.0	100.0	7.6	96.9	362	3.0	23.6	73.4	0.0	100.0	7.6	96.9	362
20-24	2.6	20.0	76.9	0.5	100.0	7.8	97.8	866	2.6	20.0	76.9	0.5	100.0	7.8	97.8	866
25-29	-	-	-	-	-	na	na	na	2.5	22.5	74.7	0.4	100.0	7.7	96.2	1,196
30-34	-	-	-	-	-	na	na	na	2.8	20.3	76.7	0.2	100.0	7.8	97.3	1,434
35-39	-	-	-	-	-	na	na	na	1.6	20.8	77.4	0.2	100.0	7.8	97.5	1,266
40-44	-	-	-	-	-	na	na	na	1.4	21.3	77.0	0.2	100.0	7.8	96.7	1,000
45-49	-	-	-	-	-	na	na	na	2.6	22.0	75.5	0.0	100.0	7.7	96.5	624
Education																
Pre-primary or none	(*)	(*)	(*)	(*)	100.0	(*)	(*)	2	(*)	(*)	(*)	(*)	100.0	(*)	(*)	11
Primary	(*)	(*)	(*)	(*)	100.0	(*)	(*)	8	0.2	36.9	61.9	1.0	100.0	7.3	97.2	174
Preparatory	1.8	29.9	68.3	0.0	100.0	7.8	98.5	114	1.9	27.7	70.3	0.1	100.0	7.7	96.7	310
Secondary+	2.4	21.6	75.7	0.3	100.0	7.8	97.2	1,737	2.3	20.8	76.7	0.2	100.0	7.8	97.0	6,885
Marital Status																
Ever married	1.7	17.3	80.1	0.9	100.0	8.2	99.0	197	1.9	21.1	76.8	0.2	100.0	7.8	97.2	4,822
Never married	2.4	22.7	74.6	0.2	100.0	7.7	97.1	1,663	2.9	22.2	74.7	0.3	100.0	7.7	96.7	2,559
Functional difficulties (age 18-49 years)																
Has functional difficulty	(*)	(*)	(*)	(*)	100.0	(*)	(*)	17	0.8	29.4	68.2	1.6	100.0	7.3	86.3	129
Has no functional difficulty	2.7	20.9	76.0	0.3	100.0	7.7	97.8	1,211	2.3	21.1	76.4	0.2	100.0	7.8	97.2	6,620

[1] MICS indicator EQ.9a - Life satisfaction among women age 15-24

[2] MICS indicator EQ.10a - Happiness among women age 15-24

[3] MICS indicator EQ.9b - Life satisfaction among women age 15-49

[4] MICS indicator EQ.10b - Happiness among women age 15-49

na: not applicable
(*) Figures that are based on fewer than 25 unweighted cases
'–' denotes 0 unweighted case in the denominator

Table EQ.4.1M: Overall life satisfaction and happiness (men)

Percentage of men age 15-24 and 15-49 years by level of overall life satisfaction, average life satisfaction score, and the percentage who are very or somewhat satisfied with their life overall, Qatar MICS, 2023

	Ladder step reported:								Ladder step reported:							
	0-3	4-6	7-10	Missing	Total	Average life satisfaction score[1]	Percentage of men who are very or somewhat happy[2]	Number of men age 15-24 years	0-3	4-6	7-10	Missing	Total	Average life satisfaction score[3]	Percentage of men who are very or somewhat happy[4]	Number of men age 15-49 years
Total	**5.2**	**24.1**	**70.2**	**0.5**	**100.0**	**7.4**	**95.3**	**902**	**3.2**	**21.6**	**75.0**	**0.2**	**100.0**	**7.7**	**96.2**	**3,437**
Nationality																
Qatari	2.0	15.9	81.0	1.1	100.0	8.0	96.9	266	1.9	14.3	83.1	0.6	100.0	8.1	97.1	733
Non-Qatari	6.5	27.5	65.7	0.3	100.0	7.2	94.6	636	3.5	23.6	72.7	0.1	100.0	7.6	95.9	2,704
Age																
15-19	3.9	25.4	69.9	0.8	100.0	7.6	96.5	545	3.9	25.4	69.9	0.8	100.0	7.6	96.5	545
15-17	2.8	27.1	68.9	1.2	100.0	7.6	95.8	336	2.8	27.1	68.9	1.2	100.0	7.6	95.8	336
18-19	5.7	22.6	71.5	0.2	100.0	7.6	97.6	208	5.7	22.6	71.5	0.2	100.0	7.6	97.6	208
20-24	7.1	22.1	70.8	0.1	100.0	7.3	93.5	357	7.1	22.1	70.8	0.1	100.0	7.3	93.5	357
25-29	-	-	-	-	-	na	na	na	1.1	22.5	76.4	0.0	100.0	7.8	96.9	411
30-34	-	-	-	-	-	na	na	na	3.5	19.7	76.7	0.1	100.0	7.8	95.8	547
35-39	-	-	-	-	-	na	na	na	2.9	16.4	80.5	0.1	100.0	7.9	97.3	589
40-44	-	-	-	-	-	na	na	na	1.8	24.2	74.0	0.0	100.0	7.7	97.0	591
45-49	-	-	-	-	-	na	na	na	2.9	21.7	74.9	0.5	100.0	7.7	95.2	396
Education																
Pre-primary or none	(*)	(*)	(*)	(*)	100.0	(*)	(*)	0	(*)	(*)	(*)	(*)	100.0	(*)	(*)	3
Primary	(*)	(*)	(*)	(*)	100.0	(*)	(*)	5	2.8	19.3	77.9	0.0	100.0	7.6	95.5	64
Preparatory	8.0	31.8	56.7	3.5	100.0	7.0	95.9	72	5.8	32.6	60.1	1.5	100.0	7.1	94.8	168
Secondary+	4.9	23.5	71.3	0.3	100.0	7.5	95.3	825	3.1	21.1	75.7	0.2	100.0	7.7	96.3	3,202
Marital Status																
Ever married	(*)	(*)	(*)	(*)	100.0	(*)	(*)	18	2.5	20.7	76.6	0.2	100.0	7.8	96.8	2,061
Never married	5.3	23.9	70.2	0.5	100.0	7.4	95.3	884	4.2	23.0	72.5	0.3	100.0	7.5	95.3	1,376
Functional difficulties (age 18-49 years)																
Has functional difficulty	(*)	(*)	(*)	(*)	100.0	(*)	(*)	5	(7.0)	(45.0)	(47.9)	(0.0)	100.0	(6.4)	(82.0)	36
Has no functional difficulty	6.2	22.4	71.3	0.1	100.0	7.4	95.5	561	3.2	20.7	75.9	0.1	100.0	7.7	96.4	3,064

[1] MICS Indicator EQ.9a - Life satisfaction among men age 15-24

[2] MICS indicator EQ.10a - Happiness among men age 15-24

[3] MICS Indicator EQ.9b - Life satisfaction among men age 15-49

[4] MICS indicator EQ.10b - Happiness among men age 15-49

na: not applicable
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases
'–' denotes 0 unweighted case in the denominator

Table EQ.4.2W: Perception of a better life (women)

Percentage of women age 15-24 and 15-49 years who think that their lives improved during the last one year and those who expect that their lives will get better after one year, Qatar MICS, 2023

	Percentage of women age 15-24 years who think that their life				Percentage of women age 15-49 years who think that their life			
	Improved during the last one year	Will get better after one year	Both[1]	Number of women age 15-24 years	Improved during the last one year	Will get better after one year	Both[2]	Number of women age 15-49 years
Total	**83.7**	**97.0**	**82.5**	**1,861**	**81.5**	**96.5**	**80.1**	**7,381**
Nationality								
Qatari	88.8	97.5	87.8	449	88.2	97.5	87.3	1,368
Non-Qatari	82.1	96.8	80.8	1,411	79.9	96.3	78.4	6,013
Age								
15-19	83.2	97.1	82.5	995	83.2	97.1	82.5	995
15-17	81.5	96.9	81.2	633	81.5	96.9	81.2	633
18-19	86.0	97.5	84.7	362	86.0	97.5	84.7	362
20-24	84.2	96.8	82.5	866	84.2	96.8	82.5	866
25-29	na	na	na	na	84.5	97.6	83.5	1,196
30-34	na	na	na	na	82.3	97.3	81.2	1,434
35-39	na	na	na	na	79.1	96.9	78.2	1,266
40-44	na	na	na	na	79.2	95.4	76.1	1,000
45-49	na	na	na	na	75.7	92.5	74.3	624
Education								
Pre-primary or none	(*)	(*)	(*)	2	(*)	(*)	(*)	11
Primary	(*)	(*)	(*)	8	70.6	95.6	69.8	174
Preparatory	76.1	94.3	74.3	114	75.0	95.3	73.3	310
Secondary+	84.2	97.1	83.0	1,737	82.0	96.6	80.7	6,885
Marital Status								
Ever married	85.2	97.2	83.3	197	80.8	96.2	79.2	4,822
Never married	83.5	96.9	82.4	1,663	82.7	97.2	81.8	2,559
Functional difficulties (age 18-49 years)								
Has functional difficulty	(*)	(*)	(*)	17	53.0	88.8	51.7	129
Has no functional difficulty	85.2	97.0	83.6	1,211	82.0	96.7	80.5	6,620

[1] MICS indicator EQ.11a - Perception of a better life among women age 15-24

[2] MICS indicator EQ.11b - Perception of a better life among women age 15-49

na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases

Table EQ.4.2M: Perception of a better life (men)

Percentage of men age 15-24 and 15-49 years who think that their lives improved during the last one year and those who expect that their lives will get better after one year, Qatar MICS, 2023

	Percentage of men age 15-24 years who think that their life				Percentage of men age 15-49 years who think that their life			
	Improved during the last one year	Will get better after one year	Both[1]	Number of men age 15-24 years	Improved during the last one year	Will get better after one year	Both[2]	Number of men age 15-49 years
Total	**84.2**	**94.7**	**82.1**	**902**	**82.7**	**95.4**	**80.8**	**3,437**
Nationality								
Qatari	89.8	96.1	88.2	266	90.4	96.8	88.8	733
Non-Qatari	81.8	94.1	79.5	636	80.6	95.0	78.6	2,704
Age								
15-19	86.4	95.1	84.3	545	86.4	95.1	84.3	545
15-17	84.1	94.8	82.0	336	84.1	94.8	82.0	336
18-19	90.1	95.7	88.0	208	90.1	95.7	88.0	208
20-24	80.8	93.9	78.8	357	80.8	93.9	78.8	357
25-29	na	na	na	na	88.1	97.2	86.4	411
30-34	na	na	na	na	81.6	95.3	79.9	547
35-39	na	na	na	na	80.6	97.2	79.8	589
40-44	na	na	na	na	81.0	93.4	77.9	591
45-49	na	na	na	na	80.6	95.5	78.6	396
Education								
Pre-primary or none	(*)	(*)	(*)	0	(*)	(*)	(*)	3
Primary	(*)	(*)	(*)	5	87.1	96.0	86.5	64
Preparatory	72.3	93.4	68.7	72	76.5	92.0	72.4	168
Secondary+	85.2	94.8	83.2	825	82.9	95.6	81.1	3,202
Marital Status								
Ever married	(*)	(*)	(*)	18	81.8	95.6	79.9	2,061
Never married	84.1	94.6	82.0	884	84.0	95.1	82.0	1,376
Functional difficulties (age 18-49 years)								
Has functional difficulty	(*)	(*)	(*)	5	(52.1)	(78.0)	(52.1)	36
Has no functional difficulty	84.6	95.0	82.5	561	82.9	95.7	81.0	3,064

[1] MICS indicator EQ.11a - Perception of a better life among men age 15-24

[2] MICS indicator EQ.11b - Perception of a better life among men age 15-49

na: not applicable

(*) Figures that are based on fewer than 25 unweighted cases

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

APPENDIX A SAMPLE DESIGN

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

The primary objective of the sample design for the Qatar MICS 2023 was to produce statistically reliable estimates of most indicators, and the results will be published at national level by nationality (Qatari, Non-Qatari). In designing the sample for the Qatar MICS 2023, it was useful to review the sample design and results of the MICS conducted in 2012, documented in the Final Report of that survey.

Qatar has two particularities in respect to its population and its housing arrangement. These have important bearing on the sample design of household surveys. One of the particularities is the high proportion of non-Qatari population, living in dispersed areas generally distinct from residential areas of Qataris. Another particularity is the existence of many collective housing quarters where non-Qatari workers live in units provided by employers or rented directly from landlords.

Because of these features, the commonly used methodology of multistage area sampling with a single set of PSUs is not efficient. Primary sampling units (PSUs) defined as area segments selected in the first stage may not contain enough households of either type, Qatari and non-Qatari.

For these reasons, the sample design is usually based on independent samples drawn from distinct sets of especially constructed PSUs, which together cover the entire nation. Each set of PSUs is designed to include a target number of households of given type, namely:

(i) Qatari regular households,

(ii) Non-Qatari regular households;

As in the other household surveys, separate area frames were constructed, separately for Qatari households and non-Qatari households, and each frame was treated as an individual stratum. The Qatari PSUs consist of a list of contiguous Qatari households in the same or adjacent blocks, and the non-Qatari PSUs consist of a list of contiguous non-Qatari households in the same or adjacent blocks.

A multi-stage, stratified cluster sampling approach was used for the selection of the survey sample. The sampling frame was based on the 2020 Qatar Census of Population and Housing. In the first stage, a systematic random sample of PSUs was drawn with probability proportional to size (the measure of size is based on the number of HHs in each PSU) from the two area frames based on the latest census. The selection of the PSUs has been done by using an implicit stratification technique for each frame. In this method the PSUs for each of the two groups (Qatari and non-Qatari) were arranged geographically by PSU number to ensure that all municipalities are represented in the sample. We then selected the PSUs using a PPS systematic sampling technique. In this way we must generate a single random number for each frame rather than generating a separate random number in each municipality.

After selecting the sample PSUs from each of the two area frames, a sample of 20 households was selected from each sample PSU. The sample selection of households was carried out by a systematic random sampling scheme. This is a type of probability sample, in which each household and household member has a positive and known probability of selection. With probability sampling, it is possible to make valid inferences to the population or any subgroup of the population, through weighting the data by the inverse of the overall probabilities of selection.

Population groups excluded from the survey include non-citizens visiting for a short period, individuals (citizens and non-citizens) who are institutionalised and individuals living in small or large labour gatherings. Domestic

servants are considered household members but were not eligible for individual interviews. As the sample design relies on the census listing, new dwellings established since 2020 are also excluded.

A.1 SAMPLE SIZE AND SAMPLE ALLOCATION

Since the overall sample size for the Qatar MICS 2023 partly depends on the domains of analysis that are defined for the survey tables, the latest frame based on the 2020 Census of Population, Housing and Establishments is provided in Table SD.1.

Table SD.1: Distribution of PSUs and households in sampling frame

Frame	Qatari HHs		Non-Qatari HHs	
Municipality	**HHs**	**PSUs**	**HHs**	**PSUs**
Total	**48,028**	**581**	**233,102**	**1,678**
Doha	10,413	123	116,134	848
Al Rayyan	19,984	241	64,383	478
Al Wakra	3,950	49	25,740	131
Umm Slal	4,862	60	7559	63
Al Khor	1,795	22	8,507	74
Al Shamal	364	5	526	5
Al Dayyen	5,594	68	7,821	58
Al Sheehaniya	1,066	13	2,432	21

The overall sample size for the Qatar MICS 2023 was calculated as 6,000 households. For the calculation of the sample size, the key indicator used was Attendance to early childhood education. Since the survey results are tabulated by nationality, it was necessary to determine the minimum sample size for each domain. The following formula was used to estimate the required sample size for this indicator:

$$n = \frac{[4(r)(1-r)(deff)]}{[(RME \times r)^2(pb)(AveSize)(RR)]}$$

,

where:

n = the required sample size, expressed as number of households

4 = a factor to achieve the 95 percent level of confidence

r = the predicted or anticipated value of the indicator, expressed in the form of a proportion

deff = the design effect for the indicator, estimated from a previous survey or using a default value of 1.5

RME = the relative margin of error of r to be tolerated at the 95 percent level of confidence; it is generally not more that 0.12 (12 percent) for national-level estimates

pb = the proportion of the total population upon which the indicator, *r*, is based

AveSize = the average household size (mean number of persons per household)

RR = the predicted response rate

For the calculation, *r* (Attendance to early childhood education prevalence) was assumed to be 40.8 percent based on the national estimate from the MICS 2012. The value of deff (design effect) was taken as 2, pb was taken as 7 percent, AveSize (mean household size) was taken as 4.8 households, and the response rate was assumed to be 80 percent. An RME of 12% is needed for the national-level estimates, and the resulting number of sample households from this exercise was 2,999, rounded to 3,000, which is the sample size needed in each stratum (domain). Therefore, the total sample size at the national level was 6,000 households.

The number of households selected per cluster for the Qatar MICS 2023 was determined as 20 households, based on several considerations, including the design effect, the budget available, and the time that would be needed per team to complete one cluster. Dividing the total number of households by the number of sample households per cluster, it was calculated that 150 sample clusters would need to be selected in each stratum.

Equal allocation of the total sample size to both strata, Qatari and non-Qatari, was used. Therefore, 150 clusters were allocated to each stratum, with the final sample size calculated as 6,000 households (300 clusters * 20 sample households per cluster). Table SD.2 shows the allocation of the sample clusters and households to the sampling strata.

Table SD.2: Sample allocation

	Qatari HHs		Non-Qatari HHs	
Municipality	**HHs**	**PSUs**	**HHs**	**PSUs**
Total	**3,000**	**150**	**3,000**	**150**
Doha	640	32	1,540	77
Al Rayyan	1,240	62	840	42
Al Wakra	240	12	280	14
Umm Slal	340	17	80	4
Al Khor	100	5	120	6
Al Shamal	20	1	20	1
Al Dayyen	360	18	100	5
Al Sheehaniya	60	3	20	1

A.2 SELECTION OF ENUMERATION AREAS (CLUSTERS)

The PSUs were selected from each of the sampling strata by using a systematic probability proportional to size (pps) sampling procedure, based on the number of households in each PSU from the 2020 Census frame. The first stage of sampling was thus completed by selecting the required number of sample PSUs (specified in Table SD.2) from each of the two strata.

A.4 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 M_{hi} (the total number of households in each enumeration area) at the NSO, where the selection of 20 households in each enumeration area was carried out using random systematic selection procedures.

Lists of households were prepared for each sample PSU based on the Census 2020. The households were then sequentially numbered from 1 to M_{hi} (the total number of households in each PSU) at the National Planning Council (NPC), where the selection of 20 households in each PSU was carried out using random systematic

selection procedures. The MICS6 spreadsheet template for systematic random selection of households was adapted for this purpose.[101]

The survey also included a questionnaire for individual men that was to be administered in half of the sample of households. The MICS household selection template includes an option to specify the proportion of households to be selected for administering the individual questionnaire for men, and the spreadsheet automatically selected the corresponding subsample of households.[101] All men age 15 to 49 years in the selected households were eligible for interview.

A.5 CALCULATION OF SAMPLE WEIGHTS

The Qatar MICS 2023 sample is not self-weighting. For this reason, sample weights were calculated and 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 stratum (*h*) and PSU (*i*):

$$W_{hi} = \frac{1}{f_{hi}}$$

The term f_{hi}, the sampling probability for the *i*-th sample PSU in the *h*-th stratum, is the product of the probabilities of selection at every stage in each sampling stratum:

$$f_{hi} = p_{1hi} \times p_{2hi}$$

where p_{shi} is the probability of selection of the sampling unit at stage *s* for the *i*-th sample PSU in the *h*-th sampling stratum. Based on the sample design, these probabilities will be calculated as follows:

p_{1hi} = $\frac{n_h \times M_{hi}}{M_h}$

n_h = number of sample PSUs selected in stratum *h*

M_{hi} = number of households in the 2020 Census frame for the i-th sample PSU in stratum h

M_h = total number of households in the 2020 Census frame for stratum *h*

p_{2hi} = $\frac{20}{M'_{hi}}$

M'_{hi} = number of households in the *i*-th sample PSU in stratum *h*

A final component in the calculation of sample weights takes into account the level of non-response for the household and individual interviews by stratum, as well as the sample cluster completion rate for each stratum. The adjustment for the cluster and household non-response in each stratum is equal to:

$$\frac{n_h}{n'_h} \times \frac{1}{RR_h}$$

where RR_h is the response rate for the sample households in stratum *h*, defined as the proportion of the number of interviewed households in stratum *h* out of the number of selected households found to be occupied during the fieldwork in stratum *h*. The term n'_h is the number of sample clusters with complete enumeration in stratum *h*, so the first adjustment factor corresponds to the inverse of the sample cluster

[101] Available here: "MICS6 TOOLS." Home - UNICEF MICS. Accessed August 31, 2018. http://mics.unicef.org/tools#survey-design.

completion rate for stratum *h*. This additional adjustment factor is needed in the case where some sample clusters cannot be enumerated in some strata due to security or accessibility problems. In the case where all the sample clusters in each stratum are enumerated, this cluster adjustment factor is equal to 1 for all strata, so it does not affect the weight. This adjustment of the household weight based on the cluster completion rate is included in the corresponding formulas in the MICS template for calculating the weights.

Similarly, adjustment for non-response at the individual level (women, men, and under-5 children) for each stratum is equal to:

$$\frac{1}{RR_{qh}}$$

where RR_{qh} is the response rate for the individual questionnaires in stratum *h*, defined as the proportion of eligible individuals (women, men, and under-5 children) in the sample households in stratum *h* who were successfully interviewed.

After the completion of fieldwork, response rates were calculated for each sampling stratum. These were used to adjust the sample weights calculated for each cluster. Response rates in the Qatar MICS 2023 are shown in Table SR.1.1 in this report.

The non-response adjustment factors for the individual women and under-5 questionnaires were applied to the adjusted household weights. Numbers of eligible women and under-5 children were obtained from the list of household members in the Household Questionnaire for households where interviews were completed.

The weights for the questionnaire for individual men were calculated in a similar way. In this case the number of eligible men in the list of household members in all the MICS sample households in the stratum was used as the numerator of the non-response adjustment factor, while the number of completed questionnaires for men in the stratum was obtained from the 50% subsample of households. Therefore, this adjustment factor includes an implicit subsampling weighting factor of 2 in addition to the adjustment for the non-response to the individual questionnaire for men.

In the case of the questionnaire for children age 5-17 years, in each sample household, one child was randomly selected from all the children in this age group recorded in the list of household members, in effect a tertiary sampling unit. The household weight for the children age 5-17 years is first adjusted based on the response rate for this questionnaire at the stratum level. Once this adjusted household weight is normalised as described below, it is multiplied by the number of children age 5-17 years recorded in the list of household members. Therefore, the weights for the individual children age 5-17 years will vary by sample household. This weighting of the data for the children age 5-17 years old is implemented in the tabulation programs for the corresponding tables.

The Qatar MICS 2023 full (raw) weights for the households were calculated by multiplying the inverse of the probabilities of selection by the non-response adjustment factor for each enumeration area. These weights were then standardised (or normalised), one purpose of which is to make the weighted sum of the interviewed sample units equal to the total sample size at the national level.

Normalisation is achieved by dividing the full sample weights (adjusted for nonresponse) by the average of these weights across all households at the national level. This is performed by multiplying the sample weights by a constant factor equal to the unweighted number of households at the national level divided by the weighted total number of households (using the full sample weights adjusted for non-response). A similar standardisation procedure was followed in obtaining standardised weights for the individual women, men, 5-17 and under-5 questionnaires. Adjusted (normalised) household weights varied between 0.3433 and 1.6487 in the 300 sample enumeration areas (clusters).

Sample weights were appended to all data sets and analyses were performed by weighting the data for households, women, men, under-5s and 5-17-year olds with these sample weights.

APPENDIX C ESTIMATES OF SAMPLING ERRORS

The sample of respondents selected in the Qatar MICS 2023 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 based on the actual sample selected. Sampling errors are a measure of the variability between the estimates from all possible samples. The extent of variability is not known exactly but can be estimated statistically from the survey data.

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

- *Standard error* (*se*): Standard error is the square root of the variance of the estimate. For survey indicators that are means, proportions or ratios, the Taylor series linearization method is used for the estimation of standard errors. For more complex statistics, such as fertility and mortality rates, the Jackknife repeated replication method is used for standard error estimation.
- *Coefficient of variation* (*se*/*r*) is the ratio of the standard error to the value (*r*) of the indicator and is a measure of the relative sampling error.
- *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 based on the same sample size. The *square root of the design effect* (*deft*) is used to show the efficiency of the sample design in relation to the precision. A *deft* value of 1.0 indicates that the sample design of the survey is as efficient as a simple random sample for a particular indicator, while a *deft* value above 1.0 indicates an increase in the standard error due to the use of a complex sample design. If a *deft* (or *deff*) value is less than 1.0 and the corresponding number of observations is relatively small, the values of the standard error and confidence limits should be used with caution. These situations might stem from the small number of observations and the distribution of the indicator values within and between the sample clusters in such estimation domains.
- *Confidence limits* are calculated to show the interval which contains the true value of the indicator for the population, with a specified level of confidence. For MICS results 95% confidence intervals are used, which is the standard for this type of survey. The concept of the 95% confidence interval can be understood in this way: if many repeated samples of identical size and design were taken and the confidence interval computed for each sample, then 95% of these intervals would contain the true value of the indicator.

For the calculation of sampling errors from MICS data, programs developed in CSPro Version 7.6 and SPSS Version 27 Complex Samples module have been used.

The results are shown in the tables that follow. Sampling errors are calculated for SDG indicators for which SEs can be calculated, and several other MICS indicators. Definitions, numerators and denominators of each of these indicators are provided in Chapter 3. Results are presented for the national level (Table SE.1), for Qatari and non-Qatari populations (Tables SE.2 and SE.3).

In addition to the sampling error measures described above, the tables also include weighted and unweighted counts of denominators for each indicator. Given the use of normalized weights, by comparing the weighted and unweighted counts it is possible to determine whether a particular domain has been under-sampled or over-sampled compared to the average sampling rate. If the weighted count is smaller than the unweighted count, this means that the domain had been over-sampled.

For the following indicators, however, the unweighted count represents the number of sample households, and the weighted counts reflect the weighted total population living in these households.

- Access to electricity
- Primary reliance on clean fuels and technologies for cooking and space cooling
- Population covered by social transfers

Table SE.1: Sampling errors: Total sample

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected SDG and MICS indicators, Qatar MICS, 2023

	MICS Indicator	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: Lower bound r - 2se	Confidence limits: Upper bound r + 2se
Sample coverage and characteristics of the respondents										
Access to electricity	SR.1	1.000	0.000	0.000	na	na	27,381	5,854	1.000	1.000
Ownership of mobile phone (women)	SR.10	0.998	0.001	0.001	1.384	1.176	7,381	7,381	0.997	0.999
Ownership of mobile phone (men)	SR.10	0.997	0.001	0.001	1.537	1.240	3,437	3,437	0.994	0.999
Use of internet (during the last 3 months, women)	SR.12a	0.977	0.002	0.002	1.758	1.326	7381	7,381	0.972	0.982
Use of internet (during the last 3 months, men)	SR.12a	0.985	0.002	0.003	1.408	1.187	3,437	3,437	0.980	0.990
ICT skills (women)	SR.13b	0.846	0.007	0.009	3.136	1.771	7,381	7,381	0.831	0.860
ICT skills (men)	SR.13b	0.901	0.008	0.009	2.442	1.563	3,437	3,437	0.885	0.917
Thrive - Reproductive and maternal health										
Early childbearing	TM.2	0.003	0.002	0.743	1.523	1.234	866	985	0.000	0.007
Antenatal care coverage (at least four times by any provider)	TM.5b	0.982	0.005	0.005	1.514	1.231	1,144	1,044	0.972	0.992
Skilled attendant at delivery	TM.9	1.000	0.000	0.000	na	na	1,144	1,044	1.000	1.000
Thrive - Child health, nutrition and development										
Exclusive breastfeeding under 6 months	TC.32	0.454	0.031	0.068	1.039	1.019	272	275	0.392	0.515
Early child development index	TC.53	0.845	0.012	0.015	2.154	1.468	1,871	1,858	0.821	0.870
Learn										
Participation rate in organised learning (adjusted)	LN.2	0.997	0.003	0.003	0.874	0.935	635	342	0.992	1.003
Completion rate (Primary)	LN.8a	0.967	0.010	0.010	2.263	1.504	1,339	704	0.947	0.988
Protected from violence and exploitation										
Violent discipline	PR.2	0.376	0.012	0.032	3.014	1.736	8,221	5,043	0.352	0.400
Safety (women)	PR.14	0.966	0.004	0.004	3.275	1.810	7,381	7,381	0.958	0.974
Safety (men)	PR.14	0.997	0.001	0.001	1.386	1.177	3,437	3,437	0.995	0.999
Equitable chance in life										
Children with functional difficulty	EQ.1	0.028	0.004	0.140	2.898	1.702	8,980	5,180	0.020	0.036
Population covered by social transfers	EQ.3	0.023	0.003	0.145	2.835	1.684	27,381	5,854	0.016	0.029
Discrimination (women)	EQ.7	0.026	0.003	0.106	2.188	1.479	7,381	7,381	0.020	0.031
Discrimination (men)	EQ.7	0.022	0.004	0.163	2.085	1.444	3,437	3,437	0.015	0.030
Overall life satisfaction index (women age 15-24; scale of 0-10)	EQ.9a	7.763	0.068	0.009	2.785	1.669	1,855	2,085	7.627	7.899
Overall life satisfaction index (men age 15-24; scale of 0-10)	EQ.9a	7.435	0.098	0.013	2.105	1.451	897	1,059	7.238	7.631

na: not applicable

Table SE.2: Sampling errors: Qatari

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected SDG and MICS indicators, Qatar MICS, 2023

	MICS Indicator	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: Lower bound r - 2se	Confidence limits: Upper bound r + 2se
Sample coverage and characteristics of the respondents										
Access to electricity	SR.1	1.000	0.000	0.000	na	na	6,143	2,914	1.000	1.000
Ownership of mobile phone (women)	SR.10	0.996	0.001	0.001	1.982	1.408	1,368	3,787	0.994	0.999
Ownership of mobile phone (men)	SR.10	0.997	0.001	0.001	0.976	0.988	733	1,921	0.995	1.000
Use of internet (during the last 3 months, women)	SR.12a	0.972	0.004	0.004	2.280	1.510	1368	3,787	0.963	0.980
Use of internet (during the last 3 months, men)	SR.12a	0.974	0.006	0.006	2.293	1.514	733	1,921	0.962	0.985
ICT skills (women)	SR.13b	0.853	0.008	0.010	2.007	1.417	1,368	3,787	0.837	0.869
ICT skills (men)	SR.13b	0.895	0.008	0.009	1.478	1.216	733	1,921	0.878	0.912
Thrive - Reproductive and maternal health										
Early childbearing	TM.2	0.003	0.002	0.703	0.989	0.995	211	592	0.000	0.008
Antenatal care coverage (at least four times by any provider)	TM.5b	0.989	0.005	0.005	1.021	1.010	165	455	0.979	0.999
Skilled attendant at delivery	TM.9	1.000	0.000	0.000	na	na	165	455	1.000	1.000
Thrive - Child health, nutrition and development										
Exclusive breastfeeding under 6 months	TC.32	0.399	0.025	0.063	0.325	0.570	42	126	0.349	0.449
Early child development index	TC.53	0.867	0.013	0.015	1.273	1.128	273	826	0.840	0.894
Learn										
Participation rate in organised learning (adjusted)	LN.2	0.997	0.003	0.003	0.874	0.935	635	342	0.992	1.003
Completion rate (Primary)	LN.8a	0.948	0.013	0.014	2.412	1.553	1,339	704	0.922	0.974
Protected from violence and exploitation										
Violent discipline	PR.2	0.288	0.015	0.051	2.364	1.538	1,342	2,257	0.259	0.317
Safety (women)	PR.14	0.928	0.008	0.009	3.799	1.949	1,368	3,787	0.912	0.945
Safety (men)	PR.14	0.992	0.003	0.003	2.556	1.599	733	1,921	0.986	0.999
Equitable chance in life										
Children with functional difficulty	EQ.1	0.044	0.005	0.111	1.342	1.159	1,591	2,405	0.034	0.053
Population covered by social transfers	EQ.3	0.067	0.009	0.137	3.949	1.987	6,143	2,914	0.049	0.086
Discrimination (women)	EQ.7	0.017	0.004	0.250	4.082	2.020	1,368	3,787	0.008	0.025
Discrimination (men)	EQ.7	0.017	0.003	0.180	1.045	1.022	733	1,921	0.011	0.023
Overall life satisfaction index (women age 15-24; scale of 0-10)	EQ.9a	8.085	0.088	0.011	3.101	1.761	447	1,249	7.909	8.260
Overall life satisfaction index (men age 15-24; scale of 0-10)	EQ.9a	7.974	0.097	0.012	2.050	1.432	263	703	7.780	8.168

na: not applicable

Table SE.3: Sampling errors: Non-Qatari

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected SDG and MICS indicators, Qatar MICS, 2023

	MICS Indicator	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: Lower bound r - 2se	Confidence limits: Upper bound r + 2se
Sample coverage and characteristics of the respondents										
Access to electricity	SR.1	1.000	0.000	0.000	na	na	21,239	2,940	1.000	1.000
Ownership of mobile phone (women)	SR.10	0.998	0.001	0.001	1.021	1.011	6,013	3,594	0.997	1.000
Ownership of mobile phone (men)	SR.10	0.997	0.001	0.001	0.997	0.999	2,704	1,516	0.994	1.000
Use of internet (during the last 3 months, women)	SR.12a	0.978	0.003	0.003	1.222	1.105	6013	3,594	0.973	0.984
Use of internet (during the last 3 months, men)	SR.12a	0.988	0.003	0.003	0.983	0.992	2,704	1,516	0.982	0.994
ICT skills (women)	SR.13b	0.844	0.009	0.011	2.178	1.476	6,013	3,594	0.826	0.862
ICT skills (men)	SR.13b	0.902	0.010	0.011	1.635	1.279	2,704	1,516	0.883	0.922
Thrive - Reproductive and maternal health										
Early childbearing	TM.2	0.003	0.003	1.009	1.046	1.023	655	393	0.000	0.008
Antenatal care coverage (at least four times by any provider)	TM.5b	0.981	0.006	0.006	1.073	1.036	980	589	0.969	0.993
Skilled attendant at delivery	TM.9	1.000	0.000	0.000	na	na	980	589	1.000	1.000
Thrive - Child health, nutrition and development										
Exclusive breastfeeding under 6 months	TC.32	0.464	0.036	0.078	0.773	0.879	230	149	0.392	0.536
Early child development index	TC.53	0.842	0.014	0.017	1.559	1.249	1,598	1,032	0.813	0.870
Learn										
Participation rate in organised learning (adjusted)	LN.2	0.997	0.003	0.003	0.581	0.762	531	190	0.991	1.003
Completion rate (Primary)	LN.8a	0.967	0.013	0.013	1.526	1.235	1,007	300	0.941	0.992
Protected from violence and exploitation										
Violent discipline	PR.2	0.393	0.014	0.035	2.154	1.468	6,880	2,786	0.366	0.420
Safety (women)	PR.14	0.975	0.004	0.004	2.664	1.632	6,013	3,594	0.966	0.983
Safety (men)	PR.14	0.998	0.001	0.001	1.013	1.006	2,704	1,516	0.996	1.000
Equitable chance in life										
Children with functional difficulty	EQ.1	0.025	0.005	0.189	2.487	1.577	7,390	2,775	0.015	0.034
Population covered by social transfers	EQ.3	0.010	0.002	0.253	1.863	1.365	21,239	2,940	0.005	0.015
Discrimination (women)	EQ.7	0.028	0.003	0.115	1.353	1.163	6,013	3,594	0.021	0.034
Discrimination (men)	EQ.7	0.024	0.004	0.186	1.287	1.135	2,704	1,516	0.015	0.033
Overall life satisfaction index (women age 15-24; scale of 0-10)	EQ.9a	7.661	0.085	0.011	1.711	1.308	1,408	836	7.490	7.831
Overall life satisfaction index (men age 15-24; scale of 0-10)	EQ.9a	7.210	0.130	0.018	1.108	1.053	634	356	6.951	7.470

na: not applicable

APPENDIX D DATA QUALITY

D.1 AGE DISTRIBUTION

Table DQ.1.1: Age distribution of household population

Single-year age distribution of household population[A], by sex, Qatar MICS, 2023

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
Age					**Age**				
0	294	2.2	278	2.0	45	169	1.3	175	1.2
1	271	2.0	318	2.3	46	147	1.1	152	1.1
2	276	2.1	351	2.5	47	214	1.6	129	0.9
3	343	2.6	323	2.3	48	167	1.3	129	0.9
4	387	2.9	306	2.2	49	100	0.7	101	0.7
5	347	2.6	359	2.6	50	163	1.2	164	1.2
6	316	2.4	344	2.4	51	118	0.9	102	0.7
7	344	2.6	330	2.3	52	118	0.9	97	0.7
8	340	2.5	318	2.3	53	117	0.9	95	0.7
9	299	2.2	298	2.1	54	102	0.8	79	0.6
10	311	2.3	298	2.1	55	98	0.7	61	0.4
11	277	2.1	283	2.0	56	69	0.5	74	0.5
12	309	2.3	286	2.0	57	88	0.7	77	0.5
13	282	2.1	279	2.0	58	89	0.7	66	0.5
14	250	1.9	209	1.5	59	83	0.6	62	0.4
15	272	2.0	224	1.6	60	104	0.8	81	0.6
16	192	1.4	185	1.3	61	61	0.5	43	0.3
17	190	1.4	213	1.5	62	59	0.4	45	0.3
18	201	1.5	193	1.4	63	70	0.5	47	0.3
19	171	1.3	160	1.1	64	63	0.5	35	0.2
20	161	1.2	177	1.3	65	68	0.5	33	0.2
21	155	1.2	168	1.2	66	50	0.4	21	0.2
22	145	1.1	154	1.1	67	45	0.3	33	0.2
23	149	1.1	191	1.4	68	41	0.3	18	0.1
24	121	0.9	200	1.4	69	23	0.2	25	0.2
25	157	1.2	222	1.6	70	31	0.2	17	0.1
26	143	1.1	220	1.6	71	34	0.3	8	0.1
27	145	1.1	256	1.8	72	16	0.1	6	0.0
28	168	1.3	272	1.9	73	23	0.2	14	0.1
29	180	1.4	290	2.1	74	23	0.2	8	0.1
30	194	1.5	359	2.6	75	12	0.1	9	0.1
31	186	1.4	281	2.0	76	9	0.1	8	0.1
32	193	1.4	318	2.3	77	5	0.0	8	0.1
33	253	1.9	333	2.4	78	8	0.1	5	0.0
34	243	1.8	326	2.3	79	4	0.0	6	0.0
35	263	2.0	326	2.3	80	5	0.0	3	0.0
36	268	2.0	267	1.9	81	10	0.1	1	0.0
37	262	2.0	250	1.8	82	1	0.0	3	0.0
38	237	1.8	301	2.1	83	9	0.1	4	0.0
39	207	1.6	246	1.8	84	0	0.0	1	0.0
40	272	2.0	289	2.1	85+	85	0.6	180	1.3
41	222	1.7	186	1.3					
42	237	1.8	213	1.5	DK/Missing	0	0.0	0	0.0
43	214	1.6	264	1.9					
44	190	1.4	161	1.1	**Total**	**13,338**	**100.0**	**14,043**	**100.0**

[A] As this table includes all household members listed in interviewed households, the numbers and distributions by sex do not match those shown for individuals in Tables SR.5.1W/M, SR.5.2 and SR.5.3 where interviewed individuals are weighted with individual sample weights. Tables DQ.1.2W/M, DQ.1.3 and DQ.1.4 similarly use household sample weights and do not match distributions obtained through individual questionnaires.

Table DQ.1.2W: Age distribution of eligible and interviewed women

Household population of women age 10-54 years, interviewed women age 15-49 years, and percentage of eligible women who were interviewed, Qatar MICS, 2023

	Household population of women age 10-54 years	Interviewed women age 15-49 years		Percentage of eligible women interviewed (Completion rate)
	Number	Number	Percent	
Age				
10-14	1,355	na	na	na
15-19	974	959	13.5	98.4
20-24	890	834	11.7	93.7
25-29	1,260	1,152	16.2	91.5
30-34	1,616	1,382	19.4	85.5
35-39	1,390	1,219	17.1	87.7
40-44	1,113	963	13.5	86.6
45-49	687	601	8.5	87.6
50-54	536	na	na	na
Total (15-49)	7,929	7,111	100.0	89.7
Ratios				
10-14 to 15-19	1.39	na	na	na
50-54 to 45-49	0.78	na	na	na

na: not applicable

Table DQ.1.2M: Age distribution of eligible and interviewed men

Household population of men age 10-54 years, in all households and in households selected for men's interviews, interviewed men age 15-49 years, and percentage of eligible men who were interviewed, Qatar MICS, 2023

	Household population of men age 10-54 years		Interviewed men age 15-49 years		Percentage of eligible men interviewed (Completion rate)
	In all households	In selected households			
	Number	Number	Number	Percent	
Age					
10-14	1,430	738	na	na	na
15-19	1,027	523	500	15.9	95.7
20-24	730	349	328	10.4	94.1
25-29	793	400	378	12.0	94.4
30-34	1,069	543	503	15.9	92.5
35-39	1,237	580	541	17.1	93.3
40-44	1,134	580	543	17.2	93.6
45-49	797	391	363	11.5	93.0
50-54	619	340	na	na	na
Total (15-49)	6,786	3,366	3,156	100.0	93.8
Ratios					
10-14 to 15-19	1.39	1.41	na	na	na
50-54 to 45-49	0.78	0.87	na	na	na

na: not applicable

Table DQ.1.3: Age distribution of young children in households and under-5 questionnaires

Household population of children age 0-7 years, children age 0-4 years whose mothers/caretakers were interviewed, and percentage of under-5 children whose mothers/caretakers were interviewed, Qatar MICS, 2023

	Household population of children 0-7 years	Under-5s with completed interviews		Percentage of eligible under-5s with completed interviews (Completion rate)
	Number	Number	Percent	
Age				
0	573	562	18.0	98.2
1	589	589	18.9	100.0
2	627	621	19.9	99.0
3	665	660	21.2	99.3
4	693	689	22.1	99.4
5	706	na	na	na
6	660	na	na	na
7	673	na	na	na
Total (0-4)	3,147	3,122	100.0	99.2
Ratios				
Ratio of 2 to 1	1.06	na	na	na
Ratio of 5 to 4	1.02	na	na	na

na: not applicable

Table DQ.1.4: Age distribution of children age 3-20 in households and 5-17 questionnaires

Number of households with at least one member age 3-20 years, percent distribution of children selected for interview and number and percent of children age 5-17 years whose mothers/caretakers were interviewed, Qatar MICS, 2023

	Number of households with at least one household member age 3-20 years	**Percent distribution of children selected for interview[A]**	**5-17s with completed interviews**		Percentage of eligible 5-17s with completed interviews (Completion rate)
			Number	Percent	
Age					
3	630	na	na	na	na
4	623	na	na	na	na
5	681	11.7	401	11.7	100.0
6	636	10.6	364	10.7	99.5
7	651	10.1	345	10.1	100.0
8	607	8.9	300	8.8	98.8
9	594	7.3	247	7.3	98.6
10	585	7.0	235	6.9	97.9
11	566	6.1	210	6.2	99.8
12	569	6.8	233	6.8	99.3
13	573	7.0	239	7.0	100.0
14	491	6.4	218	6.4	99.1
15	534	6.9	236	6.9	99.9
16	423	5.2	175	5.1	98.9
17	462	6.1	208	6.1	98.9
18	470	na	na	na	na
19	401	na	na	na	na
20	413	na	na	na	na
Total (5-17)	7,372	100.0	3,413	100.0	99.3
Ratios					
Ratio of 4 to 5	0.91	na	na	na	na
Ratio of 6 to 7	0.98	1.06	na	na	na
Ratio of 15 to 14	1.09	1.07	na	na	na
Ratio of 18 to 17	1.02	na	na	na	na

na: not applicable

[A] Number of cases are used to calculate the 'Ratio of 6 to 7' and 'Ratio of 15 to14'

D.2 BIRTH DATE REPORTING

Table DQ.2.1: Birth date reporting (household population)

Percent distribution of household population by completeness of date of birth information, Qatar MICS, 2023

	Completeness of reporting of date of birth and age						
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Missing/DK/Other	Total	Number of household members
Total	**96.4**	**1.2**	**0.0**	**2.3**	**0.1**	**100.0**	**27,381**
Nationality							
Qatari	96.5	2.8	0.0	0.6	0.1	100.0	5,051
Non-Qatari	96.4	0.9	0.0	2.6	0.1	100.0	22,330
Age							
0-4	99.5	0.5	0.0	0.0	0.0	100.0	3,147
5-14	99.2	0.7	0.0	0.2	0.0	100.0	6,077
15-24	98.4	1.0	0.0	0.6	0.0	100.0	3,621
25-49	95.8	1.4	0.0	2.7	0.1	100.0	11,095
50-64	95.4	2.2	0.0	1.9	0.4	100.0	2,528
65-84	91.9	4.6	0.0	3.1	0.4	100.0	649
85+	11.5	0.9	0.0	84.5	3.2	100.0	265

na: not applicable

Table DQ.2.2W: Birth date and age reporting (women)

Percent distribution of women age 15-49 years by completeness of date of birth/age information, Qatar MICS, 2023

	Completeness of reporting of date of birth and age						
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Missing/DK/ Other	Total	Number of women
Total	**99.3**	**0.7**	**0.0**	**0.0**	**0.0**	**100.0**	**7,381**
Nationality							
Qatari	97.8	2.2	0.0	0.0	0.0	100.0	1,368
Non-Qatari	99.6	0.4	0.0	0.0	0.0	100.0	6,013
Age							
15-19	99.5	0.5	0.0	0.0	0.0	100.0	995
20-24	99.2	0.8	0.0	0.0	0.0	100.0	866
25-29	99.2	0.8	0.0	0.0	0.0	100.0	1,196
30-34	99.4	0.6	0.0	0.0	0.0	100.0	1,434
35-39	98.9	1.1	0.0	0.0	0.0	100.0	1,266
40-44	99.5	0.5	0.0	0.0	0.0	100.0	1,000
45-49	99.4	0.6	0.0	0.0	0.0	100.0	624

Table DQ.2.2M: Birth date and age reporting (men)

Percent distribution of men age 15-49 years by completeness of date of birth/age information, Qatar MICS, 2023

	Completeness of reporting of date of birth and age						
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Missing/DK/ Other	Total	Number of men
Total	**99.1**	**0.8**	**0.0**	**0.1**	**0.1**	**100.0**	**3,437**
Nationality							
Qatari	98.1	1.7	0.0	0.2	0.0	100.0	733
Non-Qatari	99.3	0.5	0.0	0.1	0.1	100.0	2,704
Age							
15-19	99.5	0.5	0.0	0.0	0.0	100.0	545
20-24	98.7	1.2	0.0	0.1	0.0	100.0	357
25-29	98.6	1.3	0.0	0.1	0.0	100.0	411
30-34	99.1	0.9	0.0	0.1	0.0	100.0	547
35-39	99.4	0.3	0.0	0.3	0.0	100.0	589
40-44	99.4	0.5	0.0	0.1	0.0	100.0	591
45-49	98.4	1.1	0.0	0.0	0.5	100.0	396

Table DQ.2.3: Birth date reporting (live births)

Percent distribution of first and most recent live births to women age 15-49 years by completeness of date of birth (unimputed), Qatar MICS, 2023

	Completeness of reporting of date of birth										
	Date of first live birth						Date of last live birth				
	Year and month of birth	Year of birth only	Completed years since first birth only	Missing/DK/Other	Total	Number of first live births	Year and month of birth	Year of birth only	Missing/DK/Other	Total	Number of most recent live births
Total	**99.4**	**0.6**	**0.0**	**0.0**	**100.0**	**4,234**	**98.7**	**0.6**	**0.7**	**100.0**	**3,328**
Nationality											
Qatari	98.1	1.9	0.0	0.0	100.0	602	97.7	1.7	0.6	100.0	506
Non-Qatari	99.6	0.4	0.0	0.0	100.0	3,633	98.9	0.4	0.7	100.0	2,823

Table DQ.2.4: Birth date and age reporting (children under age 5 years)

Percent distribution children under 5 by completeness of date of birth/age information, Qatar MICS, 2023

	Completeness of reporting of date of birth and age						
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Missing/DK/Other	Total	Number of children under 5
Total	**99.9**	**0.1**	**0.0**	**0.0**	**0.0**	**100.0**	**2,964**
Nationality							
Qatari	99.9	0.1	0.0	0.0	0.0	100.0	442
Non-Qatari	99.9	0.1	0.0	0.0	0.0	100.0	2,522
Age							
0	100.0	0.0	0.0	0.0	0.0	100.0	534
1	100.0	0.0	0.0	0.0	0.0	100.0	559
2	99.6	0.4	0.0	0.0	0.0	100.0	590
3	99.9	0.1	0.0	0.0	0.0	100.0	627
4	100.0	0.0	0.0	0.0	0.0	100.0	654

Table DQ.2.5: Birth date reporting (children age 5-17 years)

Percent distribution of selected children age 5-17 years by completeness of date of birth information, Qatar MICS, 2023

	Completeness of reporting of date of birth and age						
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Missing/DK/Other	Total	Number of selected children age 5-17 years
Total	**99.8**	**0.2**	**0.0**	**0.0**	**0.0**	**100.0**	**3,322**
Nationality							
Qatari	99.1	0.9	0.0	0.0	0.0	100.0	541
Non-Qatari	99.9	0.1	0.0	0.0	0.0	100.0	2,781
Age							
5-9	99.8	0.2	0.0	0.0	0.0	100.0	1,614
10-14	99.9	0.1	0.0	0.0	0.0	100.0	1,105
15-17	99.4	0.6	0.0	0.0	0.0	100.0	603

Table DQ.3.3W: Completeness of information on dates of marriage (women)

Percentage of women age 15-49 years with missing or incomplete information on date of and age at first marriage, Qatar MICS, 2023

	Percent with missing/ incomplete information[A]	Number of women
Ever married (age 15-49 years)		
Date of first marriage missing	2.1	4,822
Only month missing	2.1	4,822
Both month and year missing	0.0	4,822
Age at first marriage missing	0.0	4,822

[A] Includes "Don't know" responses

Table DQ.3.3M: Completeness of information on dates of marriage (men)

Percentage of men age 15-49 years with missing or incomplete information on date of and age at first marriage, Qatar MICS, 2023

	Percent with missing/ incomplete information[A]	Number of men
Ever married (age 15-49 years)		
Date of first marriage missing	3.4	2,061
Only month missing	2.9	2,061
Both month and year missing	0.4	2,061
Age at first marriage missing	0.0	2,061

[A] Includes "Don't know" responses

Table DQ.5.1A: Highest level of school attended by single age

Distribution of household population age 3-24 years by educational level and highest grade ever attended, Qatar MICS, 2023

	Highest level ever attended																
			Primary Grade						Preparatory Grade			Secondary Grade					
	Not attending school	Early childhood education	1	2	3	4	5	6	1	2	3	1	2	3	Higher than secondary	Total	Number of household members age 3-24 years
Age at beginning of school year																	
3	1.8	98.2	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	100.0	687
4	0.0	91.2	8.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	713
5	0.0	45.4	48.3	6.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	653
6	0.0	1.1	45.2	44.5	9.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	691
7	0.0	0.0	1.1	47.6	39.7	11.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	624
8	0.0	0.0	0.0	1.9	45.3	42.4	10.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	638
9	0.0	0.0	0.0	0.0	0.9	46.7	40.4	11.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	593
10	0.0	0.0	0.0	0.0	0.0	4.8	49.1	41.0	5.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	581
11	0.0	0.0	0.0	0.0	0.0	0.0	0.9	27.7	38.7	32.7	0.0	0.0	0.0	0.0	0.0	100.0	605
12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	45.5	40.3	14.2	0.0	0.0	0.0	0.0	100.0	548
13	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.4	47.6	46.9	0.0	0.0	0.0	0.0	100.0	456
14	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	12.0	48.0	33.4	6.5	0.0	0.0	100.0	518
15	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.7	38.8	37.7	21.8	0.0	100.0	387
16	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.5	37.7	50.0	4.9	100.0	416
17	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	3.7	11.8	59.3	23.2	100.0	383
18	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.1	3.8	30.0	62.4	100.0	355
19	16.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.8	1.8	20.9	60.4	100.0	331
20	22.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	1.2	12.0	64.4	100.0	323
21	27.2	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.3	2.6	12.1	57.8	100.0	299
22	42.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	1.7	8.9	47.1	100.0	338
23	49.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	6.7	43.9	100.0	326
24[A]	52.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0	5.4	41.2	100.0	49

[A] Those age 25 at the time of interview who were age 24 at beginning of school year are excluded as current attendance was only collected for those age 3-24 years at the time of interview

D.6 BIRTH HISTORY

Table DQ.6.1: Sex ratio at birth among children ever born and living

Sex ratio (number of males per 100 females) among children ever born (at birth), children living, and deceased children born to women age 15-49 years, Qatar MICS, 2023

	Children Ever Born			Children Living			Children Deceased			
	Sons	Daughters	Sex ratio at birth	Sons	Daughters	Sex ratio	Sons	Daughters	Sex ratio	Number of women
Total	**6,053**	**5,760**	**1.05**	**5,968**	**5,706**	**1.05**	**85**	**54**	**1.58**	**7,381**
Age										
15-19	0	3	0.10	0	3	0.10	0	0	na	995
20-24	75	77	0.97	75	77	0.97	0	0	na	866
25-29	525	542	0.97	516	539	0.96	9	2	3.68	1,196
30-34	1,253	1,238	1.01	1,243	1,229	1.01	10	9	1.15	1,434
35-39	1,619	1,481	1.09	1,601	1,465	1.09	18	16	1.11	1,266
40-44	1,584	1,444	1.10	1,556	1,423	1.09	28	21	1.32	1,000
45-49	997	975	1.02	976	969	1.01	21	6	3.59	624

na - not applicable

APPENDIX E QATAR MICS 2023 QUESTIONNAIRES

The questionnaires of the Qatar MICS 2023 are presented in Arabic and English:

- Household Questionnaire
- Questionnaire for Individual Women
- Questionnaire for Individual Men
- Questionnaire for Children Under Five
- Questionnaire for Children Age 5-17

Response cards and questionnaire aids:

- Response card for Life Satisfaction module

E.1 ENGLISH QUESTIONNAIRES

HOUSEHOLD QUESTIONNAIRE

Qatar MICS 2023

HOUSEHOLD INFORMATION PANEL		HH
HH1. *Cluster number:* ___ ___ ___	**HH2**. *Household number:* ___ ___	
HH3. *Interviewer's name and number:* ___ ___ ___	**HH4**. *Supervisor's name and number:* ___ ___ ___	
HH5. *Day / Month / Year of interview:* ___ ___ / ___ ___ / 2 0 2 3	**HH7**. *MUNICIPALITY:* _____	
HH8. *Is the household selected for QUESTIONNAIRE FOR MEN?* — *Yes..... 1* *No..... 2*		

Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.	**HH11**. *Record the time.* HOURS : MINUTES __ __ : __ __

HH12. Hello, my name is (***your name***). We are from National Planning Council. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about ***20*** minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?

YES .....1 NO / NOT ASKED 2	1 ⇨ *LIST OF HOUSEHOLD MEMBERS* 2 ⇨ *HH46*

HH46. *Result of HOUSEHOLD QUESTIONNAIRE interview:* *Discuss any result not completed with Supervisor.*	COMPLETED ..... 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT ..... 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME ..... 03 REFUSED ..... 04 DWELLING VACANT OR ADDRESS NOT A DWELLING ..... 05 DWELLING DESTROYED..... 06 DWELLING NOT FOUND ..... 07 OTHER (*specify*) _____ 96

HH47. *Name and line number of the respondent to HOUSEHOLD QUESTIONNAIRE interview:* NAME _____ ___ ___	*To be filled after HOUSEHOLD QUESTIONNAIRE is completed* TOTAL NUMBER		*To be filled after <u>all</u> the questionnaires are completed* COMPLETED NUMBER	
HOUSEHOLD MEMBERS	**HH48**	__ __		
WOMEN AGE 15-49	**HH49**	__ __	**HH53**	__ __
If household is selected for QUESTIONNAIRE FOR MEN: MEN AGE 15-49	**HH50**	__ __	**HH54**	__ __
CHILDREN UNDER AGE 5	**HH51**	__ __	**HH55**	__ __
CHILDREN AGE 5-17	**HH52**	__ __	**HH56**	ZERO..... 0 ONE..... 1

LIST OF HOUSEHOLD MEMBERS — HL

First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, make sure to probe for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household. Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box: ..... ☐

HL1. *Line number*	**HL2**. First, please tell me the name of each person who usually lives here, starting with the head of the household. *Probe for additional household members.*	**HL2A.** What is (***name***)'s nationality? 1 QATARI 2 NON QATARI	**HL3**. What is the relationship of (***name***) to (***name of the head of household***)?	**HL4**. Is (***name***) male or female? 1 MALE 2 FEMALE	HL5. What is (***name***)'s date of birth? 98 DK 9998 DK		**HL6**. How old is (***name***)? *Record in completed years. If age is 95 or above, record '95'.*	**HL8**. *Record line number if woman and age 15-49.*	**HL9**. *Record line number if man, age 15-49 and HH8 is yes.*	**HL10**. *Record line number if age 0-4.*	**HL11**. *Age 0-17?* 1 YES 2 NO ⇩ *Next Line*	**HL12**. Is (***name***)'s natural mother alive? 1 YES 2 NO ⇩ *HL16* 8 DK ⇩ *HL16*	**HL13**. Does (***name***)'s natural mother live in this household? 1 YES 2 NO ⇩ *HL15*	**HL14**. *Record the line number of mother and go to HL16.*	**HL15**. Where does (***name***)'s natural mother live? 1 ABROAD 2 IN QATAR 8 DK	**HL16**. Is (***name***)'s natural father alive? 1 YES 2 NO ⇩ *HL20* 8 DK ⇩ *HL20*	**HL17**. Does (***name***)'s natural father live in this household? 1 YES 2 NO ⇩ *HL19*	**HL18**. *Record the line number of father and go to HL20.*	**HL19**. Where does (***name***)'s natural father live? 1 ABROAD 2 IN QATAR 8 DK	**HL20**. *Copy the line number of mother from HL14. If blank, ask:* Who is the primary caretaker of (***name***)? *If 'No one' for a child age 15-17, record '90'.*
LINE	NAME	Q NQ	RELATION*	M F	MONTH	YEAR	AGE	W 15-49	M 15-49	0-4	Y N	Y N DK	Y N	MOTHER		Y N DK	Y N	FATHER		
01		1 2	0 1	1 2	__ __	__ __ __ __	__ __	01	01	01	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
02		1 2	__ __	1 2	__ __	__ __ __ __	__ __	02	02	02	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
03		1 2	__ __	1 2	__ __	__ __ __ __	__ __	03	03	03	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
04		1 2	__ __	1 2	__ __	__ __ __ __	__ __	04	04	04	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
05		1 2	__ __	1 2	__ __	__ __ __ __	__ __	05	05	05	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
06		1 2	__ __	1 2	__ __	__ __ __ __	__ __	06	06	06	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
07		1 2	__ __	1 2	__ __	__ __ __ __	__ __	07	07	07	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
08		1 2	__ __	1 2	__ __	__ __ __ __	__ __	08	08	08	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
09		1 2	__ __	1 2	__ __	__ __ __ __	__ __	09	09	09	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
10		1 2	__ __	1 2	__ __	__ __ __ __	__ __	10	10	10	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
11		1 2	__ __	1 2	__ __	__ __ __ __	__ __	11	11	11	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
12		1 2	__ __	1 2	__ __	__ __ __ __	__ __	12	12	12	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
13		1 2	__ __	1 2	__ __	__ __ __ __	__ __	13	13	13	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
14		1 2	__ __	1 2	__ __	__ __ __ __	__ __	14	14	14	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___
15		1 2	__ __	1 2	__ __	__ __ __ __	__ __	15	15	15	1 2	1 2 8	1 2	__ __	1 2 3 4 8	1 2 8	1 2	__ __	1 2 3 4 8	___ ___

* *Codes for **HL3**: Relationship to head of household:*

01 HEAD	05 GRANDCHILD	09 BROTHER-IN-LAW / SISTER-IN-LAW	13 ADOPTED / FOSTER / STEPCHILD
02 SPOUSE	06 PARENT	10 UNCLE/AUNT	14 SERVANT (LIVE-IN)
03 SON / DAUGHTER	07 PARENT-IN-LAW	11 NIECE / NEPHEW	96 OTHER (NOT RELATED)
04 SON-IN-LAW / DAUGHTER-IN-LAW	08 BROTHER / SISTER	12 OTHER RELATIVE	98 DK

EDUCATION 1 **ED**

ED1. *Line number*	**ED2**. *Name and age.* *Copy names and ages of all members of the household from HL2 and HL6 to below and to next page of the module.*		**ED3**. *Age 3 or above?* 1 YES 2 NO ⇩ *Next Line*		**ED4**. Has (***name***) ever attended school or any Early Childhood Education programme? 1 YES 2 NO ⇩ *Next Line*		**ED5**. What is the highest level and grade or year of school (***name***) has ever attended? LEVEL: 0 ECE ⇩ *ED7* 1 PRIMARY 2 PREPARATORY 3 SECONDARY 4 UNIVERSITY/HIGHER 8 DK ⇩ *ED7*						GRADE/YEAR: 98 DK ⇩ *ED7*	**ED6**. Did (***name***) ever complete that (grade/ year)? 1 YES 2 NO 8 DK			**ED7**. *Age 3-24?* 1 YES 2 NO ⇩ *Next Line*		**ED8**. *Check ED4: Ever attended school or ECE?* 1 YES 2 NO ⇩ *Next Line*		**ED9**. At any time during the current school year did (***name***) attend school or any Early Childhood Education programme? 1 YES 2 NO	
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL						GRADE/YEAR	Y	N	DK	YES	NO	YES	NO	YES	NO
01		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
02		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
03		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
04		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
05		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
06		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
07		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
08		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
09		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
10		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
11		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
12		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
13		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
14		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2
15		___ ___	1	2	1	2	0	1	2	3	4	8	___ ___	1	2	1	2	2	1	2	1	2

HOUSEHOLD CHARACTERISTICS		HC
HC8. Does your household have electricity?	YES, INTERCONNECTED GRID ..... 1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) ..... 2 NO 3	
HC19. Does any member of this household have a bank account?	YES ..... 1 NO 2	

SOCIAL TRANSFERS						ST
ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.						
	[A] ZAKAT FUND	[B] QATAR CHARITY	[C] QATAR FOR SOCIAL WORK	[D] ANY RETIREMENT PENSION/SOCIAL SECURITY	[E] RED CRESCENT	
ST3. Has your household or anyone in your household received assistance through (***name of programme***)?	YES ..... 1 ⇩ *ST4* NO ..... 2 ⇩ *[B]* DK ..... 8 ⇩ *[B]*	YES ..... 1 ⇩ *ST4* NO ..... 2 ⇩ *[C]* DK ..... 8 ⇩ *[C]*	YES ..... 1 ⇩ *ST4* NO ..... 2 ⇩ *[D]* DK ..... 8 ⇩ *[D]*	YES ..... 1 ⇩ *ST4* NO ..... 2 ⇩ *[X]* DK ..... 8 ⇩ *[X]*	YES ..... 1 ⇩ *ST4* NO ..... 2 ⇩ *End* DK ..... 8 ⇩ *End*	
ST4. When was the last time your household or anyone in your household received assistance through (***name of programme***)? *If less than one month, record '1' and record '00' in Months.* *If less than 12 months, record '1' and record in Months.* *If 1 year/12 months or more, record '2' and record in Years.*	MONTHS AGO... **1** __ __ ⇩ *[B]* YEARS AGO ..... **2** __ __ ⇩ *[B]* DK ..... 998 ⇩ *[B]*	MONTHS AGO ... **1** __ __ ⇩ *[C]* YEARS AGO..... **2** __ __ ⇩ *[C]* DK..... 998 ⇩ *[C]*	MONTHS AGO .. **1** __ __ ⇩ *[D]* YEARS AGO ..... **2** __ __ ⇩ *[D]* DK ..... 998 ⇩ *[D]*	MONTHS AGO ... **1** __ __ ⇩ *[X]* YEARS AGO..... **2** __ __ ⇩ *[X]* DK..... 998 ⇩ *[X]*	MONTHS AGO ... **1** __ __ ⇩*End* YEARS AGO ..... **2** __ __ ⇩*End* DK ..... 998 ⇩*End*	

HOUSEHOLD ENERGY USE		EU
EU1. In your household, what type of cookstove is mainly used for cooking?	ELECTRIC STOVE ..... 01 GAS STOVE ..... 02 OTHER (*specify*) _____ 96 THE HOUSEHOLD DOES NOT COOK 97	
EU10. What does your family mainly use to cool the house down when necessary?	WINDOW CONDITIONER..... 01 SPLIT AAIR CONDITIONER..... 02 CENTRAL AIR CONDITIONER..... 03 FAN ..... 04 OTHER (*specify*) _____ 96 THE HOUSEHOLD DOES NOT USE COOLING SYSTEM 97	

HH13. *Record the time.*	HOUR AND MINUTES ..... __ __ : __ __	
HH14. *Language of the Questionnaire.*	ARABIC .....1 ENGLISH 2	
HH15. *Language of the Interview.*	ARABIC .....1 ENGLISH .....2 OTHER LANGUAGE (*specify*) _____ 6	
HH16. *Native language of the Respondent.*	ARABIC .....1 ENGLISH .....2 OTHER LANGUAGE (*specify*) _____ 6	
HH17. *Was a translator used for any parts of this questionnaire?*	YES, ENTIRE QUESTIONNAIRE .....1 YES, PART OF QUESTIONNAIRE .....2 NO, NOT USED.....3	
HH18. *Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:*	NO CHILDREN .....0 1 CHILD .....1 2 OR MORE CHILDREN (NUMBER)..... __	0 ⇨*HH29* 1 ⇨*HH27*

HH19. *List each of the children age 5-17 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.*

HH20. *Rank number*	**HH21**. *Line number from HL1*	**HH22**. *Name from HL2*	**HH23**. *Sex from HL4*	**HH24**. *Age from HL6*
RANK	LINE	NAME	M F	AGE
1	__ __		1 2	___ ___
2	__ __		1 2	___ ___
3	__ __		1 2	___ ___
4	__ __		1 2	___ ___
5	__ __		1 2	___ ___
6	__ __		1 2	___ ___
7	__ __		1 2	___ ___
8	__ __		1 2	___ ___

HH25. *Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.*

Check the total number of children age 5-17 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

HH26. *Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.*

HH27. *(When HH18=1 or when there is a single child age 5-17 in the household): Record the rank number as '1'and record the line number (HL1), the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD MEMBERS.*

RANK NUMBER .....__

LINE NUMBER .....__ __

NAME _____

AGE .....__ __

HH28. *Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the mother/caretaker of this child.*

HH29. *Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?*	YES, AT LEAST ONE WOMAN AGE 15-49.....1 NO 2	2⇨*HH35*

HH30. *Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.*

HH31. *Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?*	YES, AT LEAST ONE GIRL AGE 15-17 .....1 NO 2	2⇨*HH35*
HH32. *Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?*	YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠90.....1 NO, HL20=90 FOR ALL GIRLS AGE 15-17.....2	2⇨*HH35*

HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.

For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (***name(s) of female member(s) age 15-17***) later?

- ☐ *'Yes' for all girls age 15-17 ⇨ Continue with HH35.*
- ☐ *'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇨ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH35.*
- ☐ *'No' for all girls age 15-17 ⇨ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH35.*

HH35. *Check HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any men age 15-49?*	YES, AT LEAST ONE MAN AGE 15-49 .....1 NO 2	2⇨*HH40*
HH36. *Issue a separate QUESTIONNAIRE FOR INDIVIDUAL MEN for each man age 15-49 years.*		
HH37. *Check HL6 and HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any boys age 15-17?*	YES, AT LEAST ONE BOY AGE 15-17 .....1 NO 2	2⇨*HH40*
HH38. *Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one boy age 15-17?*	YES, AT LEAST ONE BOY AGE 15-17 WITH HL20≠90 .....1 NO, HL20=90 FOR ALL BOYS AGE 15-17.....2	2⇨*HH40*

HH39. As part of the survey we are also interviewing men age 15-49. We ask each person we interview for permission. A male interviewer conducts these interviews.

For boys age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (***name(s) of male member(s) age 15-17***) later?

- ☐ *'Yes' for all boys age 15-17 ⇨ Continue with HH40.*
- ☐ *'No' for at least one boy age 15-17 and 'Yes' to at least one boy age 15-17 ⇨ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.*
- ☐ *'No' for all boys age 15-17 ⇨ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.*

HH40. *Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?*	YES, AT LEAST ONE .....1 NO 2	2⇨*HH44A*
HH41. *Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.*		

PHONE CALL BACK	
HH44B. Thank you for your participation. The National Planning Council would like to collect your phone number. The survey team may call you for the purpose of quality assurance or to obtain additional information. Only a small proportion of households will ever be called. Please know that all the information you share during the phone call will remain strictly confidential, and that your phone number will not be shared with anyone outside our team. If you are selected, your participation is very important to the survey. May I ask you for your phone number?	
YES..... *1* *NO*..... *2*	 2 ⇨*HH45*

HH44E. Do you have a personal phone number or does your household have a communal number where you can be reached?	——— ———
HH44J. Do you have another personal phone number or communal number where you can be reached?	——— ———

HH45. *Now return to the HOUSEHOLD INFORMATION PANEL and,*

- *Record '01' in question HH46 (Result of the HOUSEHOLD QUESTIONNAIRE interview),*
- *Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the HOUSEHOLD QUESTIONNAIRE interview in HH47,*
- *Fill the questions HH48 – HH52,*
- *Thank the respondent for his/her cooperation and then*
- *Proceed with the administration of the remaining individual questionnaire(s) in this household.*

Thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

QUESTIONNAIRE FOR INDIVIDUAL WOMEN

MICS Qatar 2023

WOMAN'S INFORMATION PANEL		WM
WM1. *Cluster number:* ___ ___ ___		**WM2**. *Household number:* ___ ___
WM3. *Woman's name and line number:* NAME _____ ___ ___		**WM4**. *Supervisor's name and number:* NAME _____ ___ ___ ___
WM5. *Interviewer's name and number:* NAME _____ ___ ___ ___		**WM6**. *Day / Month / Year of interview:* ___ ___ / ___ ___ / 2 0 2 3
WM6A. *Is this woman selected for the HIV module?*	*Yes* .....1 *No* 2	

Check woman's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify in HH33 that adult consent for interview is obtained or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in WM17.		**WM7**. *Record the time:* HOURS : MINUTES __ __ : __ __
WM8. *Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?*	YES, INTERVIEWED ALREADY .....1 NO, FIRST INTERVIEW 2	1 ⇨*WM9B* 2 ⇨*WM9A*
WM9A. Hello, my name is (***your name***). We are from National Planning Council. We are conducting a survey about the situation of children, families and households. I would like to talk to you about your health and other topics. This interview usually takes about *20* minutes. We are also interviewing mothers about their children. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	**WM9B**. Now I would like to talk to you about your health and other topics in more detail. This interview will take about ***20*** minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	
YES .....1 NO / NOT ASKED 2	1 ⇨*WOMAN'S BACKGROUND Module* 2 ⇨*WM17*	

WM17. *Result of woman's interview.* *Discuss any result not completed with Supervisor.*	COMPLETED.....01 NOT AT HOME .....02 REFUSED.....03 PARTLY COMPLETED .....04 INCAPACITATED (*specify*) _____ 05 NO ADULT CONSENT FOR RESPONDENT AGE 15-17 .....06 OTHER (*specify*)_____ 96

WOMAN'S BACKGROUND		WB
WB1. *Check the respondent's line number (WM3) in WOMAN'S INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the HOUSEHOLD QUESTIONNAIRE?*	YES, RESPONDENT IS THE SAME, WM3=HH47 AND AGE 15-24 ..... 0 YES, RESPONDENT IS THE SAME, WM3=HH47 AND AGE 25-49 ..... 1 NO, RESPONDENT IS NOT THE SAME, WM3≠HH47 2	0 ⇨*WB10* 1 ⇨*WB18*
WB3. In what month and year were you born?	DATE OF BIRTH MONTH ..... __ __ DK MONTH ..... 98 YEAR ..... __ __ __ __ DK YEAR 9998	
WB4. How old are you? *Probe:* How old were you at your last birthday? *If responses to WB3 and WB4 are inconsistent, probe further and correct. Age must be recorded.*	AGE (IN COMPLETED YEARS) ..... __ __	
WB5. Have you ever attended school or any early childhood education programme?	YES ..... 1 NO 2	2 ⇨*WB18*
WB6. What is the highest level and grade or year of school you have attended?	EARLY CHILDHOOD EDUCATION ..... 000 PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	000 ⇨*WB18*
WB7. Did you complete that (grade/year)?	YES ..... 1 NO 2	
WB8. *Check WB4: Age of respondent:*	AGE 15-24 ..... 1 AGE 25-49 2	2 ⇨*WB18*
WB9. At any time during the current school year 2022/2023 did you attend school?	YES ..... 1 NO 2	2 ⇨*WB11*
WB10. During this current school year 2022/2023, which level and grade or year are you attending?	PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
WB11. At any time during the previous school year 2021/2022 did you attend school?	YES ..... 1 NO 2	2 ⇨*WB18*
WB12. During that previous school year 2021/2022, which level and grade or year did you attend?	PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
WB18. Are you covered by any health insurance?	YES ..... 1 NO 2	
WB20. Do you have an account in a bank or other financial institution that you yourself use?	YES ..... 1 NO 2	

MASS MEDIA AND ICT		MT
MT1. Do you read a newspaper or magazine at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL ..... 0 LESS THAN ONCE A WEEK ..... 1 AT LEAST ONCE A WEEK ..... 2 ALMOST EVERY DAY 3	
MT2. Do you listen to the radio at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL ..... 0 LESS THAN ONCE A WEEK ..... 1 AT LEAST ONCE A WEEK ..... 2 ALMOST EVERY DAY 3	
MT3. Do you watch television at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL ..... 0 LESS THAN ONCE A WEEK ..... 1 AT LEAST ONCE A WEEK ..... 2 ALMOST EVERY DAY 3	
MT4. Have you ever used a computer or a tablet from any location?	YES ..... 1 NO 2	2 ⇨ *MT9*
MT6. During the last 3 months, did you:	YES NO	
[A] Copy or move a file or folder?	COPY/MOVE FILE 1 2	
[B] Use a copy and paste tool to duplicate or move information within a document?	USE COPY/PASTE IN DOCUMENT 1 2	
[C] Send e-mail with attached file, such as a document, picture or video?	SEND E-MAIL WITH ATTACHMENT 1 2	
[D] Use a basic arithmetic formula in a spreadsheet?	USE BASIC SPREADSHEET FORMULA .. 1 2	
[E] Connect and install a new device, such as a modem, camera or printer?	CONNECT DEVICE 1 2	
[F] Find, download, install and setup software?	INSTALL SOFTWARE 1 2	
[G] Create an electronic presentation with presentation software, including text, images, sound, video or charts?	CREATE PRESENTATION 1 2	
[H] Transfer a file between a computer and other device?	TRANSFER FILE 1 2	
[I] Write a computer program in any programming language?	PROGRAMMING 1 2	
MT9. Have you ever used the internet from any location and any device?	YES ..... 1 NO 2	2 ⇨ *MT11*

MT10. During the last 3 months, did you use the internet at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL ..... 0 LESS THAN ONCE A WEEK ..... 1 AT LEAST ONCE A WEEK ..... 2 ALMOST EVERY DAY 3	
MT11. Do you own a mobile phone?	YES ..... 1 NO 2	

MARRIAGE		MA
MA1. Are you currently married?	YES, CURRENTLY MARRIED.....1 NO.....3	 3⇨*MA5*
MA2. How old is your husband? *Probe*: How old was your husband on his last birthday?	AGE IN YEARS .....__ __ DK.....98	
MA3. Besides yourself, does your husband have any other wives?	YES.....1 NO.....2	 2⇨*MA7*
MA4. How many other wives does he have?	NUMBER .....__ __ DK.....98	⇨*MA7* 98⇨*MA7*
MA5. Have you ever been married?	YES, FORMERLY MARRIED.....1 NO.....3	 3⇨*End*
MA6. What is your marital status now: are you widowed, divorced or separated?	WIDOWED.....1 DIVORCED.....2 SEPARATED 3	
MA7. Have you been married only once or more than once?	ONLY ONCE.....1 MORE THAN ONCE 2	1⇨*MA8A* 2⇨*MA8B*
MA8A. In what month and year did you start living with your husband? **MA8B**. In what month and year did you start living with your <u>first</u> husband?	DATE OF (FIRST) MARRIAGE MONTH.....__ __ DK MONTH .....98 YEAR.....__ __ __ __ DK YEAR.....9998	
MA9. *Check MA8A/B: Is 'DK YEAR' recorded?*	YES, MA8A/B=9998.....1 NO, MA8A/B≠9998.....2	 2⇨*End*
MA10. *Check MA7: In union only once?*	YES, MA7=1 .....1 NO, MA7=2 2	1⇨*MA11A* 2⇨*MA11B*
MA11A. How old were you when you started living with your husband? **MA11B**. How old were you when you started living with your <u>first</u> husband?	AGE IN YEARS .....__ __	

FERTILITY		CM
CM0. *Check MA1 and MA5:Is the respondent currently married or has ever been married before?*	YES, MA1=1 OR MA5=1 ..... 1 NO, MA1=3 AND MA5=3 2	2 ⇨*END*
CM1. Now I would like to ask about all the births you have had during your life. Have you ever given birth? *This module history should only include children born alive. Any stillbirths should not be included in response to any question.*	YES ..... 1 NO 2	2 ⇨*CM8*
CM2. 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*
CM3. How many sons live with you? *If none, record '00'.*	SONS AT HOME ..... __ __	
CM4. How many daughters live with you? *If none, record '00'.*	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 ⇨*CM8*
CM6. How many sons are alive but do not live with you? *If none, record '00'.*	SONS ELSEWHERE ..... __ __	
CM7. How many daughters are alive but do not live with you? *If none, record '00'.*	DAUGHTERS ELSEWHERE ..... __ __	
CM8. Have you ever given birth to a boy or girl who was born alive but later died? *If 'No' probe by asking:* I mean, to any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?	YES ..... 1 NO 2	2 ⇨*CM11*
CM9. How many boys have died? *If none, record '00'.*	BOYS DEAD ..... __ __	
CM10. How many girls have died? *If none, record '00'.*	GIRLS DEAD ..... __ __	
CM11. *Sum answers to CM3, CM4, CM6, CM7, CM9 and CM10.*	SUM ..... __ __	
CM12. Just to make sure that I have this right, you have had in total (***total number in CM11***) births during your life. Is this correct?	YES ..... 1 NO 2	1 ⇨*CM14A*
CM13. *Check responses to CM1-CM10 and make corrections as necessary until response in CM12 is 'Yes'.*		

CM14A. *Check CM11. How many live births?*	NO LIVE BIRTHS, CM11=00.....0 ONE LIVE BIRTH ONLY, CM11=01 .....1 TWO OR MORE LIVE BIRTHS, CM11=02 OR MORE.....2	0 ⇨*End* 1 ⇨*CM15A* 2 ⇨*CM15B*
CM15A. In what month and year was your child born? **CM15B**. In what month and year was the last of your (***total number in CM11***) births? *Month and year must be recorded.*	DATE OF LAST BIRTH MONTH ..... __ __ YEAR .....__ __ __ __	
CM16A. *Check CM11. How many live births?*	ONE LIVE BIRTH ONLY, CM11=01 .....1 TWO OR MORE LIVE BIRTHS, CM11=02 OR MORE.....2	1 ⇨*CM17*
CM16B. In what month and year was the first of your (***total number in CM11***) births?	DATE OF FIRST BIRTH MONTH ..... __ __ DK MONTH.....98 YEAR .....__ __ __ __ DK YEAR.....9998	
CM16C. *Check CM16B. Is year of birth recorded?*	YES .....1 NO 2	1 ⇨*CM17*
CM16D. How many years ago did you first give birth? *Probe:* How old is or would your child have been today? How old were you when your child was born? *If using the second probe, remember to use respondent's age to calculate completed years since first birth.*	COMPLETED YEARS SINCE FIRST BIRTH.....__ __	
CM17. *Check CM15A/B: Last birth occurred within the last 2 years, that is, since (**month of interview**) in (**year of interview minus 2**)?* *If the month of interview and the month of birth are the same, and the year of birth is (**year of interview minus 2**), consider this as a birth within the last 2 years.*	NO LIVE BIRTHS IN THE LAST 2 YEARS .....0 ONE OR MORE LIVE BIRTHS IN THE LAST 2 YEARS 1	0 ⇨*End*
CM18. *Ask for the name of the last-born child.* *If the child has died, take special care when referring to this child by name in the following modules.*	NAME OF LAST-BORN CHILD _____	

DESIRE FOR LAST BIRTH		DB
DB1. *Check CM17: Was there a live birth in the last 2 years?* *Copy name of last birth listed in the birth history (CM18) to here and use where indicated:* *Name* _____	YES, CM17=1 ..... 1 NO, CM17=0 OR BLANK 2	2 ⇨*End*
DB2. When you got pregnant with (***name***), did you want to get pregnant at that time?	YES ..... 1 NO 2	1 ⇨*End*
DB3. *Check CM11: Number of births:*	ONLY 1 BIRTH ..... 1 2 OR MORE BIRTHS 2	1 ⇨*DB4A* 2 ⇨*DB4B*
DB4A. Did you want to have a baby later on, or did you not want any children? **DB4B**. Did you want to have a baby later on, or did you not want any more children?	LATER ..... 1 NO MORE / NONE 2	

MATERNAL AND NEWBORN HEALTH		MN
MN1. *Check CM17: Was there a live birth in the last 2 years?* *Copy name of last birth listed in the birth history (CM18) to here and use where indicated:* *Name* _____	YES, CM17=1 ..... 1 NO, CM17=0 OR BLANK 2	2 ⇨*End*
MN2. Did you see anyone for antenatal care during your pregnancy with (***name***)?	YES ..... 1 NO 2	2 ⇨*MN7*
MN3. Whom did you see? *Probe:* Anyone else? *Probe for the type of person seen and record all answers given.*	**HEALTH PROFESSIONAL** DOCTOR ..... A NURSE / MIDWIFE ..... B OTHER (*specify*) _____ X	
MN4. How many weeks or months pregnant were you when you first received antenatal care for this pregnancy? *Record the answer as stated by respondent. If "9 months" or later, record 9.*	WEEKS ..... **1** __ __ MONTHS ..... **2** 0 __ DK 998	
MN5. How many times did you receive antenatal care during this pregnancy? *Probe to identify the number of times antenatal care was received. If a range is given, record the minimum number of times antenatal care received.*	NUMBER OF TIMES ..... __ __ DK 98	
MN6. As part of your antenatal care during this pregnancy, were any of the following done at least once: [A] Was your blood pressure measured? [B] Did you give a urine sample? [C] Did you give a blood sample?	YES NO BLOOD PRESSURE ..... 1 2 URINE SAMPLE ..... 1 2 BLOOD SAMPLE 1 2	
MN7. Do you have a card or other document with your own immunisations listed? *If yes, ask*: May I see it please? *If a card is presented, use it to assist with answers to the following questions.*	YES (CARD OR OTHER DOCUMENT SEEN) .... 1 YES (CARD OR OTHER DOCUMENT NOT SEEN) ..... 2 NO ..... 3 DK 8	
MN8. When you were pregnant with (***name***), did you receive any injection in the arm or shoulder to prevent the baby from getting tetanus, that is, convulsions after birth?	YES ..... 1 NO ..... 2 DK 8	2 ⇨*MN11* 8 ⇨*MN11*

MN9. How many times did you receive this tetanus injection during your pregnancy with (***name***)?	NUMBER OF TIMES .....__ DK 8	 8 ⇨*MN11*
MN10. *Check MN9: How many tetanus injections during last pregnancy were reported?*	ONLY 1 INJECTION .....1 2 OR MORE INJECTIONS 2	 2 ⇨*MN19*
MN11. At any time before your pregnancy with (***name***), did you receive any tetanus injection either to protect yourself or another baby? *Include DTP (Tetanus) vaccinations received as a child if mentioned.*	YES .....1 NO .....2 DK 8	 2 ⇨*MN19* 8 ⇨*MN19*
MN12. Before your pregnancy with (***name***), how many times did you receive a tetanus injection? *If 7 or more times, record '7'.* *Include DTP (Tetanus) vaccinations received as a child if mentioned.*	NUMBER OF TIMES .....__ DK 8	
MN13. *Check MN12: How many tetanus injections before last pregnancy were reported?*	ONLY 1 INJECTION .....1 2 OR MORE INJECTIONS OR DK 2	1 ⇨*MN14A* 2 ⇨*MN14B*
MN14A. How many years ago did you receive that tetanus injection **MN14B**. How many years ago did you receive the last of those tetanus injections? *The reference is to the last injection received <u>prior</u> to this pregnancy, as recorded in MN12.* *If less than 1 year, record '00'.*	YEARS AGO ..... __ __ DK 98	
MN19. Who assisted with the delivery of (***name***)? *Probe:* Anyone else? *Probe for the type of person assisting and record all answers given.*	**HEALTH PROFESSIONAL** DOCTOR.....A NURSE / MIDWIFE .....B OTHER (*specify*) _____X	
MN20. Where did you give birth to (***name***)? *Probe to identify the type of place.* *<u>If unable to determine whether public or private</u>, write the name of the place and then temporarily record '76' until you learn the appropriate category for the response.* _____ *(Name of place)*	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL ..... 21 **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL ..... 31 DK PUBLIC OR PRIVATE..... 76 OTHER (*specify*) _____ 96	 96 ⇨*MN33*

MN21. Was (***name***) delivered by caesarean section? That is, did they cut your belly open to take the baby out?	YES .....1 NO 2	 2 ⇨*MN33*
MN22. When was the decision made to have the caesarean section? *Probe if necessary:* Was it before or after your labour pains started?	BEFORE LABOUR PAINS .....1 AFTER LABOUR PAINS 2	
MN33. Was (***name***) weighed at birth?	YES .....1 NO .....2 DK 8	 2 ⇨*MN35* 8 ⇨*MN35*
MN34. How much did (***name***) weigh? *If a card is available, record weight from card.*	FROM CARD .....**1 (KG)** __ . __ __ __ FROM RECALL .....**2 (KG)** __ . __ __ __ DK 99998	
MN35. Has your menstrual period returned since the birth of (***name***)?	YES .....1 NO 2	
MN36. Did you ever breastfeed (***name***)?	YES .....1 NO 2	 2 ⇨*MN39B*
MN37. 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** __ __ DAYS .....**2** __ __ DK / DON'T REMEMBER 998	
MN38. In the first three days after delivery, was (***name***) given anything to drink other than breast milk?	YES .....1 NO 2	1 ⇨*MN39A* 2 ⇨*End*
MN39A. What was (***name***) given to drink? *Probe:* Anything else? *'Not given anything to drink' is not a valid response and response category Y cannot be recorded.* **MN39B**. In the first three days after delivery, what was (***name***) given to drink? *Probe:* Anything else? *'Not given anything to drink' (category Y) can only be recorded if no other response category is recorded.*	MILK (OTHER THAN BREAST MILK) .....A PLAIN WATER .....B PRESCRIBED MEDICINE .....J OTHER (*specify*) _____X NOT GIVEN ANYTHING TO DRINK .....Y	

UNMET NEED		UN
CP0. *Check MA1: is the respondent currently married?*	YES, MA1=1 ..... 1 NO, MA1=3 2	2 ⇨*End*
CP1. Are you pregnant now?	YES, CURRENTLY PREGNANT ..... 1 NO ..... 2 DK OR NOT SURE 8	
UN1. *Check CP1: Currently pregnant?*	YES, CP1=1 ..... 1 NO, DK OR NOT SURE, CP1=2 OR 8 2	*UN7*⇦2
UN2. Now I would like to talk to you about your current pregnancy. When you got pregnant, did you want to get pregnant at that time?	YES ..... 1 NO 2	1 ⇨*UN5*
UN3. *Check CM11: Any births?*	NO BIRTHS ..... 0 ONE OR MORE BIRTHS 1	0 ⇨*UN4A* 1 ⇨*UN4B*
UN4A. Did you want to have a baby later on or did you not want any children? **UN4B**. Did you want to have a baby later on or did you not want any more children?	LATER ..... 1 NONE / NO MORE 2	
UN5. 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 ANOTHER CHILD ..... 1 NO MORE / NONE ..... 2 UNDECIDED / DK 8	1 ⇨ *END* 2 ⇨*END* 8 ⇨ *END*
UN7. Now I would like to ask you some questions about the future. Would you like to have (a/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 / DK 8	3 ⇨*UN12*
UN11. Do you think you are physically able to get pregnant at this time?	YES ..... 1 NO ..... 2 DK 8	1 ⇨*END* 8 ⇨*END*
UN12. Why do you think you are not physically able to get pregnant?	INFREQUENT SEX / NO SEX ..... A MENOPAUSAL ..... B NEVER MENSTRUATED ..... C HYSTERECTOMY (SURGICAL REMOVAL OF UTERUS) ..... D BREASTFEEDING ..... G TOO OLD ..... H FATALISTIC ..... I HEALTH ISSUES ..... J OTHER (*specify*) _____ X DK ..... Z	

VICTIMISATION		VT
VT1. *Check for the presence of others. Before continuing, ensure privacy.* Now I would like to ask you some questions about crimes in which you personally were the victim. Let me assure you again that your answers are completely confidential and will not be told to anyone. In the last three years, that is since (***month of interview***) (***year of interview minus 3***), has anyone taken or tried taking something from you, by using force or threatening to use force? *Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household.* *If necessary, help the respondent to establish the recall period and make sure that you allow adequate time for the recall. You may reassure:* It can be difficult to remember this sort of incidents, so please take your time while you think about your answers.	YES ..... 1 NO ..... 2 DK 8	 2 ⇨ *VT9B* 8 ⇨ *VT9B*
VT2. Did this last happen during the last 12 months, that is, since (***month of interview***) (***year of interview minus 1***)?	YES, DURING THE LAST 12 MONTHS..... 1 NO, MORE THAN 12 MONTHS AGO ..... 2 DK / DON'T REMEMBER 8	
VT8. DID YOU OR ANYONE ELSE REPORT THE INCIDENT TO THE POLICE? *IF 'YES', PROBE:* WAS THE INCIDENT REPORTED BY YOU OR SOMEONE ELSE?	YES, RESPONDENT REPORTED ..... 1 YES, SOMEONE ELSE REPORTED ..... 2 NO, NOT REPORTED ..... 3 DK / NOT SURE..... 8	1 ⇨ *VT9A* 2 ⇨ *VT9A* 3 ⇨ *VT9A* 8 ⇨ *VT9A*

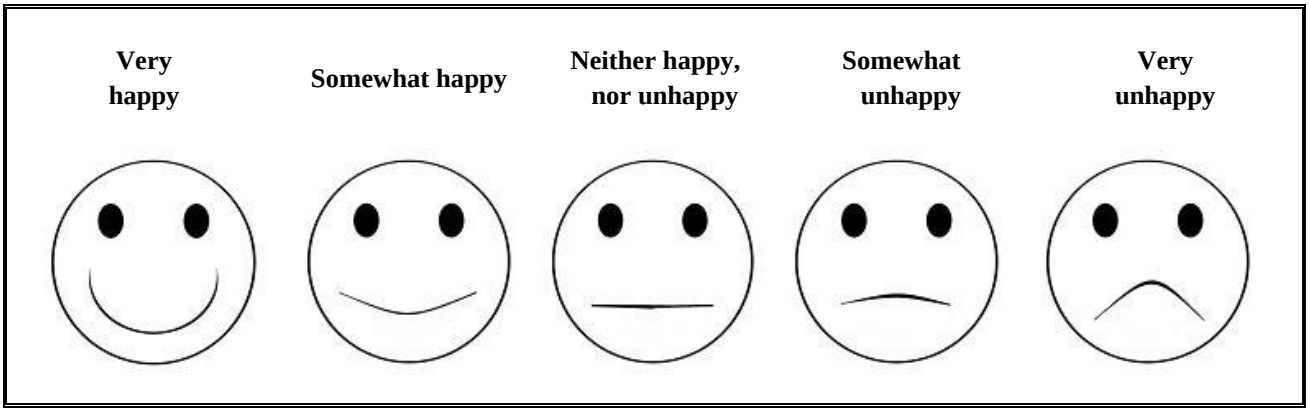
VT9A. Apart from the incident(s) just covered, have you in the last three years, that is since (***month of interview***) (***year of interview minus 3***), been physically attacked? **VT9B**. In the same period of the last three years, that is since (***month of interview***) (***year of interview minus 3***), have you been physically attacked? *If 'No', probe:* An attack can happen at home or any place outside of the home, such as in other homes, in the street, at school, on public transport, public restaurants, or at your workplace. *Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household. Exclude incidents where the intention was to take something from the respondent, which should be recorded under VT1.*	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*VT20* 8 ⇨*VT20*
VT10. Did this last happen during the last 12 months, that is, since (***month of interview***) (***year of interview minus 1***)?	YES, DURING THE LAST 12 MONTHS..... 1 NO, MORE THAN 12 MONTHS AGO ..... 2 DK / DON'T REMEMBER 8	
VT19. Did you or anyone else report the incident to the police? *If 'Yes', probe:* Was the incident reported by you or someone else?	YES, RESPONDENT REPORTED ..... 1 YES, SOMEONE ELSE REPORTED ..... 2 NO, NOT REPORTED ..... 3 DK / NOT SURE..... 8	
VT20. How safe do you feel walking alone in your neighbourhood after dark?	VERY SAFE ..... 1 SAFE ..... 2 UNSAFE ..... 3 VERY UNSAFE..... 4 NEVER WALK ALONE AFTER DARK 7	
VT22. In the past 12 months, have you <u>personally</u> felt discriminated against or harassed?	YES ____ 1 NO ____ 2 IF "YES" ASK ABOUT THE FOLLOWING OPTIONS: YES NO DK A. ECONOMIC STATUS ..... 1 2 8 B. SEX ..... 1 2 8 C. Age..... 1 2 8 D. EDUCATIONAL STATUS . 1 2 8 E. DISABILITY ..... 1 2 8 X. OTHER REASON..... 1 2 8	

ADULT FUNCTIONING		AF
AF1. *Check WB4: Age of respondent?*	AGE 15-17 YEARS ..... 1 AGE 18-49 YEARS 2	1 ⇨*End*
AF2. Do you use glasses or contact lenses? *Include the use of glasses for reading.*	YES ..... 1 NO 2	
AF3. Do you use a hearing aid?	YES ..... 1 NO 2	
AF4. I will now ask you about difficulties you may have doing a number of different activities. For each activity there are four possible answers. You may say that you have 1) no difficulty, 2) some difficulty, 3) a lot of difficulty or 4) that you cannot do the activity at all. *Repeat the categories during the individual questions whenever the respondent does not use an answer category:* Remember, the four possible answers are: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that you cannot do the activity at all.		
AF5. *Check AF2: Respondent uses glasses or contact lenses?*	YES, AF2=1 ..... 1 NO, AF2=2 2	1 ⇨*AF6A* 2 ⇨*AF6B*
AF6A. When using your glasses or contact lenses, do you have difficulty seeing? **AF6B**. Do you have difficulty seeing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT SEE AT ALL 4	
AF7. *Check AF3: Respondent uses a hearing aid?*	YES, AF3=1 ..... 1 NO, AF3=2 2	1 ⇨*AF8A* 2 ⇨*AF8B*
AF8A. When using your hearing aid(s), do you have difficulty hearing? **AF8B**. Do you have difficulty hearing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT HEAR AT ALL 4	
AF9. Do you have difficulty walking or climbing steps?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK/ CLIMB STEPS AT ALL 4	
AF10. Do you have difficulty remembering or concentrating?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT REMEMBER/ CONCENTRATE AT ALL 4	
AF11. Do you have difficulty with self-care, such as washing all over or dressing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CARE FOR SELF AT ALL 4	

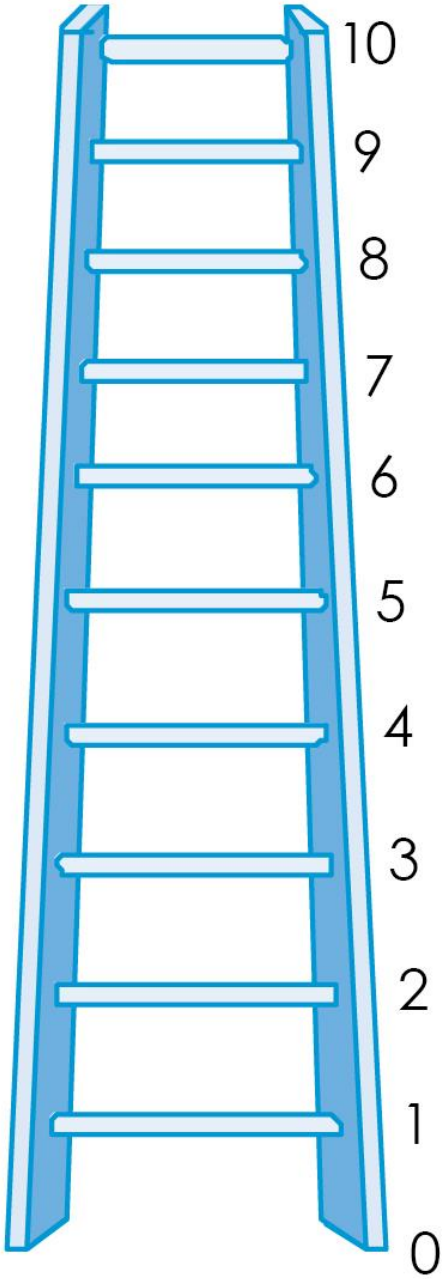
AF12. Using your usual language, do you have difficulty communicating, for example understanding or being understood?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY 3	

HIV/AIDS		**HA**
HA1. Now I would like to talk with you about something else. Have you ever heard of HIV or AIDS?	YES ..... 1 NO 2	2 ⇨*End*
HA2. HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex husband who has no other sex husbands?	YES ..... 1 NO ..... 2 DK 8	
HA3. Can people get HIV from mosquito bites?	YES ..... 1 NO ..... 2 DK 8	
HA4. Can people reduce their chance of getting HIV by using a condom every time they have sex?	YES ..... 1 NO ..... 2 DK 8	
HA5. Can people get HIV by sharing food with a person who has HIV?	YES ..... 1 NO ..... 2 DK 8	
HA6. Can people get HIV because of witchcraft or other supernatural means?	YES ..... 1 NO ..... 2 DK 8	
HA7. Is it possible for a healthy-looking person to have HIV?	YES ..... 1 NO ..... 2 DK 8	
HA8. Can HIV be transmitted from a mother to her baby: [A] During pregnancy? [B] During delivery? [C] By breastfeeding?	YES NO DK DURING PREGNANCY ..... 1 2 8 DURING DELIVERY ..... 1 2 8 BY BREASTFEEDING 1 2 8	

LIFE SATISFACTION		LS
LS1. I would like to ask you some simple questions on happiness and satisfaction. First, taking all things together, would you say you are very happy, somewhat happy, neither happy nor unhappy, somewhat unhappy or very unhappy? I am now going to show you pictures to help you with your response. *Show smiley card and explain what each symbol represents. Record the response code selected by the respondent.*	VERY HAPPY ..... 1 SOMEWHAT HAPPY ..... 2 NEITHER HAPPY NOR UNHAPPY ..... 3 SOMEWHAT UNHAPPY ..... 4 VERY UNHAPPY 5	
LS2. *Show the picture of the ladder.* Now, look at this ladder with steps numbered from 0 at the bottom to 10 at the top. Suppose we say that the top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you. On which step of the ladder do you feel you stand at this time? *Probe if necessary:* Which step comes closest to the way you feel?	LADDER STEP ..... ___ ___	
LS3. Compared to this time last year, would you say that your life has improved, stayed more or less the same, or worsened, overall?	IMPROVED ..... 1 MORE OR LESS THE SAME ..... 2 WORSENED 3	
LS4. And in one year from now, do you expect that your life will be better, will be more or less the same, or will be worse, overall?	BETTER ..... 1 MORE OR LESS THE SAME ..... 2 WORSE 3	


Very happy
Somewhat happy
Neither happy, nor unhappy
Somewhat unhappy
Very unhappy

Best Possible Life



Worst Possible Life

WM10. *Record the time.*	HOURS AND MINUTES ..... __ __ : __ __	
WM11. *Was the entire interview completed in private or was there anyone else during the entire interview or part of it?*	YES, THE ENTIRE INTERVIEW WAS COMPLETED IN PRIVATE ..... 1 NO, OTHERS WERE PRESENT DURING THE ENTIRE INTERVIEW (*specify*) _____ 2 NO, OTHERS WERE PRESENT DURING PART OF THE INTERVIEW (*specify*) _____ 3	
WM12. *Language of the Questionnaire.*	ARABIC..... 1 ENGLISH..... 2	
WM13. *Language of the Interview.*	ARABIC..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*) _____ 6	
WM14. *Native language of the Respondent.*	ARABIC..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*) _____ 6	
WM15. *Was a translator used for any parts of this questionnaire?*	YES, THE ENTIRE QUESTIONNAIRE..... 1 YES, PARTS OF THE QUESTIONNAIRE ..... 2 NO, NOT USED..... 3	

WM16. *Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of any child age 0-4 living in this household?*

☐ *Yes* ⇨ *Go to WM17 in WOMAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent.*

☐ *No* ⇨ *Check HH26-HH27 in HOUSEHOLD QUESTIONNAIRE: Is there a child age 5-17 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17?*

- ☐ *Yes* ⇨ *Check column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of the child selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17 in this household?*
  - ☐ *Yes* ⇨ *Go to WM17 in WOMAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 for that child and start the interview with this respondent.*
  - ☐ *No* ⇨ *Go to WM17 in WOMAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking her for her cooperation. Check to see if there are other questionnaires to be administered in this household.*
- ☐ *No* ⇨ *Go to WM17 in WOMAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking her for her cooperation. Check to see if there are other questionnaires to be administered in this household.*

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

QUESTIONNAIRE FOR INDIVIDUAL MEN

MICS Qatar 2023

MAN'S INFORMATION PANEL	MWM
MWM1. *Cluster number:* ___ ___ ___	**MWM2**. *Household number:* ___ ___
MWM3. *Man's name and line number:* NAME _____ ___ ___	**MWM4**. *Supervisor's name and number:* NAME _____ ___ ___ ___
MWM5. *Interviewer's name and number:* NAME _____ ___ ___ ___	**MWM6**. *Day / Month / Year of interview:* ___ ___ / ___ ___ / 2 0 2 3

Check man's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify in HH39 that adult consent for interview is obtained or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in MWM17.	**MWM7**. *Record the time:* HOURS : MINUTES __ __ : __ __

MWM8. *Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?*	YES, INTERVIEWED ALREADY .... 1 NO, FIRST INTERVIEW 2	1 ⇨*MWM9B* 2 ⇨*MWM9A*

MWM9A. Hello, my name is (***your name***). We are from National Planning Council. We are conducting a survey about the situation of children, families and households. I would like to talk to you about your health and other topics. This interview usually takes about ***10*** minutes. We are also interviewing mothers about their children. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	**MWM9B**. Now I would like to talk to you about your health and other topics in more detail. This interview will take about ***10*** minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?
YES ..... 1 NO / NOT ASKED 2	1 ⇨*MAN'S BACKGROUND Module* 2 ⇨*MWM17*

MWM17. *Result of man's interview.* *Discuss any result not completed with Supervisor.*	COMPLETED ..... 01 NOT AT HOME ..... 02 REFUSED ..... 03 PARTLY COMPLETED ..... 04 INCAPACITATED (*specify*) _____ 05 NO ADULT CONSENT FOR RESPONDENT AGE 15-17 ..... 06 OTHER (*specify*) _____ 96

MAN'S BACKGROUND		MWB
MWB1. *Check the respondent's line number (MWM3) in MAN'S INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the HOUSEHOLD QUESTIONNAIRE?*	YES, RESPONDENT IS THE SAME, MWM3=HH47 AND AGE 15-24 ..... 0 YES, RESPONDENT IS THE SAME, MWM3=HH47 AND AGE 25-49 ..... 1 NO, RESPONDENT IS NOT THE SAME, MWM3≠HH47 2	0 ⇨*MWB10* 1 ⇨*MWB18*
MWB3. In what month and year were you born?	DATE OF BIRTH MONTH ..... __ __ DK MONTH ..... 98 YEAR ..... __ __ __ __ DK YEAR 9998	
MWB4. How old are you? *Probe:* How old were you at your last birthday? *If responses to MWB3 and MWB4 are inconsistent, probe further and correct. Age must be recorded.*	AGE (IN COMPLETED YEARS) ..... __ __	
MWB5. Have you ever attended school or any early childhood education programme?	YES ..... 1 NO 2	2 ⇨*MWB18*
MWB6. What is the highest level and grade or year of school you have attended?	EARLY CHILDHOOD EDUCATION ..... 000 PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	000 ⇨*MWB18*
MWB7. Did you complete that (grade/year)?	YES ..... 1 NO 2	
MWB8. *Check MWB4: Age of respondent:*	AGE 15-24 ..... 1 AGE 25-49 2	2 ⇨*MWB18*
MWB9. At any time during the current school year 2022/2023 did you attend school?	YES ..... 1 NO 2	2 ⇨*MWB11*
MWB10. During this current school year 2022/2023, which level and grade or year are you attending?	PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
MWB11. At any time during the previous school year 2021/2022 did you attend school?	YES ..... 1 NO 2	2 ⇨*MWB18*
MWB12. During that previous school year 2021/2022, which level and grade or year did you attend?	PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
MWB18. Are you covered by any health insurance?	YES ..... 1 NO 2	
MWB20. Do you have an account in a bank or other financial institution that you yourself use?	YES ..... 1 NO 2	

MASS MEDIA AND ICT		MMT
MMT1. Do you read a newspaper or magazine at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL....0 LESS THAN ONCE A WEEK....1 AT LEAST ONCE A WEEK....2 ALMOST EVERY DAY....3	
MMT2. Do you listen to the radio at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL....0 LESS THAN ONCE A WEEK....1 AT LEAST ONCE A WEEK....2 ALMOST EVERY DAY....3	
MMT3. Do you watch television at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL....0 LESS THAN ONCE A WEEK....1 AT LEAST ONCE A WEEK....2 ALMOST EVERY DAY....3	
MMT4. Have you ever used a computer or a tablet from any location?	YES....1 NO....2	2 ⇨*MMT9*
MT6. During the last 3 months, did you:	YES NO	
[A] Copy or move a file or folder?	COPY/MOVE FILE....1 2	
[B] Use a copy and paste tool to duplicate or move information within a document?	USE COPY/PASTE IN DOCUMENT....1 2	
[C] Send e-mail with attached file, such as a document, picture or video?	SEND E-MAIL WITH ATTACHMENT....1 2	
[D] Use a basic arithmetic formula in a spreadsheet?	USE BASIC SPREADSHEET FORMULA..1 2	
[E] Connect and install a new device, such as a modem, camera or printer?	CONNECT DEVICE....1 2	
[F] Find, download, install and setup software?	INSTALL SOFTWARE....1 2	
[G] Create an electronic presentation with presentation software, including text, images, sound, video or charts?	CREATE PRESENTATION....1 2	
[H] Transfer a file between a computer and other device?	TRANSFER FILE....1 2	
[I] Write a computer program in any programming language?	PROGRAMMING....1 2	
MMT9. Have you ever used the internet from any location and any device?	YES....1 NO....2	2 ⇨*MMT11*

MMT10. During the last 3 months, did you use the internet at least once a week, less than once a week or not at all? *If 'At least once a week', probe:* Would you say this happens almost every day? *If 'Yes' record 3, if 'No' record 2.*	NOT AT ALL ..... 0 LESS THAN ONCE A WEEK ..... 1 AT LEAST ONCE A WEEK ..... 2 ALMOST EVERY DAY 3	
MMT11. Do you own a mobile phone?	YES ..... 1 NO 2	

MARRIAGE		MMA
MMA1. Are you currently married?	YES, CURRENTLY MARRIED ..... 1 NO 3	 3 ⇨*MMA5*
MMA3. Do you have other wives?	YES ..... 1 NO 2	 2 ⇨*MMA7*
MMA4. How many other wives do you have?	NUMBER ..... __ __ DK 98	⇨*MMA7* 98 ⇨*MMA7*
MMA5. Have you ever been married?	YES, FORMERLY MARRIED ..... 1 NO 3	 3 ⇨*End*
MMA6. What is your marital status now: are you widowed, divorced or separated?	WIDOWED ..... 1 DIVORCED ..... 2 SEPARATED 3	
MMA7. Have you been married only once or more than once?	ONLY ONCE ..... 1 MORE THAN ONCE 2	1 ⇨*MMA8A* 2 ⇨*MMA8B*
MMA8A. In what month and year did you start living with your wife? **MMA8B**. In what month and year did you start living with your <u>first</u> wife?	DATE OF (FIRST) MARRIAGE MONTH ..... __ __ DK MONTH ..... 98 YEAR ..... __ __ __ __ DK YEAR 9998	
MMA9. *Check MMA8A/B: Is 'DK YEAR' recorded?*	YES, MMA8A/B=9998 ..... 1 NO, MMA8A/B≠9998 2	 2 ⇨*End*
MMA10. *Check MMA7: In union only once?*	YES, MMA7=1 ..... 1 NO, MMA7=2 2	1 ⇨*MMA11A* 2 ⇨*MMA11B*
MMA11A. How old were you when you started living with your wife? **MMA11B**. How old were you when you started living with your <u>first</u> wife?	AGE IN YEARS ..... __ __	

VICTIMISATION		**MVT**
MVT1. *Check for the presence of others. Before continuing, ensure privacy.* Now I would like to ask you some questions about crimes in which you personally were the victim. Let me assure you again that your answers are completely confidential and will not be told to anyone. In the last three years, that is since (***month of interview***) (***year of interview minus 3***), has anyone taken or tried taking something from you, by using force or threatening to use force? *Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household.* *If necessary, help the respondent to establish the recall period and make sure that you allow adequate time for the recall. You may reassure:* It can be difficult to remember this sort of incidents, so please take your time while you think about your answers.	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*MVT9B* 8 ⇨*MVT9B*
MVT2. Did this last happen during the last 12 months, that is, since (***month of interview***) (***year of interview minus 1***)?	YES, DURING THE LAST 12 MONTHS ..... 1 NO, MORE THAN 12 MONTHS AGO ..... 2 DK / DON'T REMEMBER 8	
MVT8. DID YOU OR ANYONE ELSE REPORT THE INCIDENT TO THE POLICE? *IF 'YES', PROBE:* WAS THE INCIDENT REPORTED BY YOU OR SOMEONE ELSE?	YES, RESPONDENT REPORTED ..... 1 YES, SOMEONE ELSE REPORTED ..... 2 NO, NOT REPORTED ..... 3 DK / NOT SURE 8	1 ⇨*MVT9A* 2 ⇨*MVT9A* 3 ⇨*MVT9A* 8 ⇨*MVT9A*

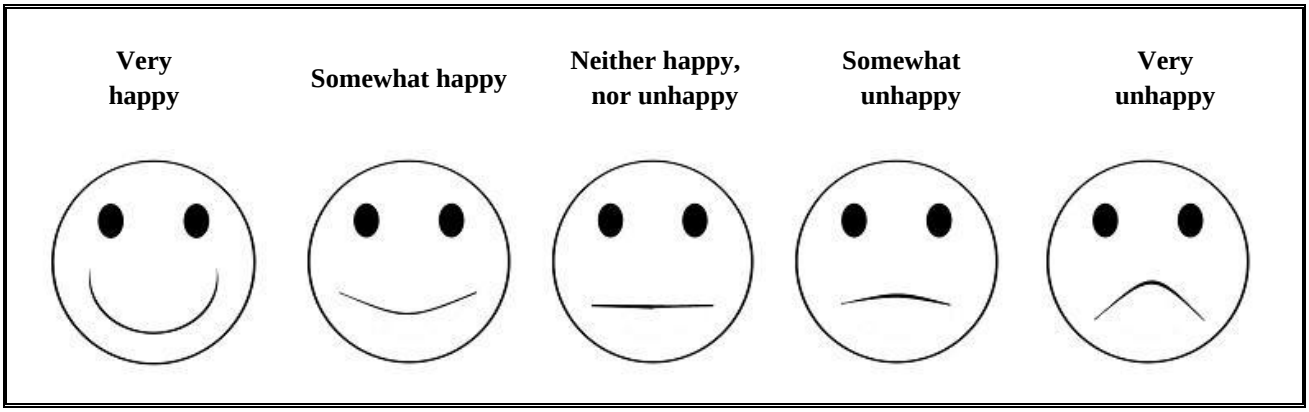
MVT9A. Apart from the incident(s) just covered, have you in the last three years, that is since (***month of interview***) (***year of interview minus 3***), been physically attacked? **MVT9B**. In the same period of the last three years, that is since (***month of interview***) (***year of interview minus 3***), have you been physically attacked? *If 'No', probe:* An attack can happen at home or any place outside of the home, such as in other homes, in the street, at school, on public transport, public restaurants, or at your workplace. *Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household. Exclude incidents where the intention was to take something from the respondent, which should be recorded under MVT1.*	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*MVT20* 8 ⇨*MVT20*
MVT10. Did this last happen during the last 12 months, that is, since (***month of interview***) (***year of interview minus 1***)?	YES, DURING THE LAST 12 MONTHS ..... 1 NO, MORE THAN 12 MONTHS AGO ..... 2 DK / DON'T REMEMBER 8	
MVT19. Did you or anyone else report the incident to the police? *If 'Yes', probe:* Was the incident reported by you or someone else?	YES, RESPONDENT REPORTED ..... 1 YES, SOMEONE ELSE REPORTED ..... 2 NO, NOT REPORTED ..... 3 DK / NOT SURE 8	
MVT20. How safe do you feel walking alone in your neighbourhood after dark?	VERY SAFE ..... 1 SAFE ..... 2 UNSAFE ..... 3 VERY UNSAFE ..... 4 NEVER WALK ALONE AFTER DARK 7	
VT22. In the past 12 months, have you <u>personally</u> felt discriminated against or harassed?	YES ____ 1 NO ____ 2 IF "YES" ASK ABOUT THE FOLLOWING OPTIONS: YES NO DK F. ECONOMIC STATUS ..... 1 2 8 G. SEX ..... 1 2 8 H. Age ..... 1 2 8 I. EDUCATIONAL STATUS .. 1 2 8 J. DISABILITY ..... 1 2 8 X. OTHER REASON 1 2 8	

ADULT FUNCTIONING		MAF
MAF1. *Check MWB4: Age of respondent?*	AGE 15-17 YEARS ..... 1 AGE 18-49 YEARS 2	1 ⇨*End*
MAF2. Do you use glasses or contact lenses? *Include the use of glasses for reading.*	YES ..... 1 NO 2	
MAF3. Do you use a hearing aid?	YES ..... 1 NO 2	
MAF4. I will now ask you about difficulties you may have doing a number of different activities. For each activity there are four possible answers. You may say that you have 1) no difficulty, 2) some difficulty, 3) a lot of difficulty or 4) that you cannot do the activity at all. *Repeat the categories during the individual questions whenever the respondent does not use an answer category:* Remember, the four possible answers are: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that you cannot do the activity at all.		
MAF5. *Check MAF2: Respondent uses glasses or contact lenses?*	YES, MAF2=1..... 1 NO, MAF2=2 2	1 ⇨*MAF6A* 2 ⇨*MAF6B*
MAF6A. When using your glasses or contact lenses, do you have difficulty seeing? **MAF6B**. Do you have difficulty seeing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT SEE AT ALL 4	
MAF7. *Check MAF3: Respondent uses a hearing aid?*	YES, MAF3=1..... 1 NO, MAF3=2 2	1 ⇨*MAF8A* 2 ⇨*MAF8B*
MAF8A. When using your hearing aid(s), do you have difficulty hearing? **MAF8B**. Do you have difficulty hearing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT HEAR AT ALL..... 4	
MAF9. Do you have difficulty walking or climbing steps?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK/ CLIMB STEPS AT ALL 4	
MAF10. Do you have difficulty remembering or concentrating?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT REMEMBER/ CONCENTRATE AT ALL 4	
MAF11. Do you have difficulty with self-care, such as washing all over or dressing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CARE FOR SELF AT ALL..... 4	

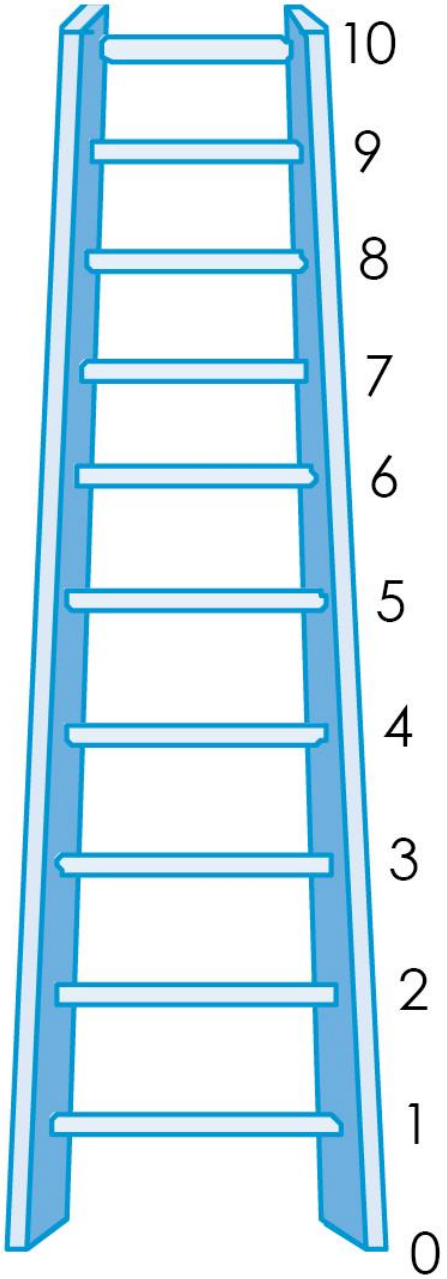
MAF12. Using your usual language, do you have difficulty communicating, for example understanding or being understood?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY 3	

HIV/AIDS		**MHA**
MHA1. Now I would like to talk with you about something else. Have you ever heard of HIV or AIDS?	YES ..... 1 NO 2	2 ⇨*End*
MHA2. HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex husband who has no other sex husbands?	YES ..... 1 NO ..... 2 DK 8	
MHA3. Can people get HIV from mosquito bites?	YES ..... 1 NO ..... 2 DK 8	
MHA4. Can people reduce their chance of getting HIV by using a condom every time they have sex?	YES ..... 1 NO ..... 2 DK 8	
MHA5. Can people get HIV by sharing food with a person who has HIV?	YES ..... 1 NO ..... 2 DK 8	
MHA6. Can people get HIV because of witchcraft or other supernatural means?	YES ..... 1 NO ..... 2 DK 8	
MHA7. Is it possible for a healthy-looking person to have HIV?	YES ..... 1 NO ..... 2 DK 8	
MHA8. Can HIV be transmitted from a mother to her baby: [A] During pregnancy? [B] During delivery? [C] By breastfeeding?	YES NO DK DURING PREGNANCY ..... 1 2 8 DURING DELIVERY ..... 1 2 8 BY BREASTFEEDING 1 2 8	

IFE SATISFACTION		**MLS**
MLS1. I would like to ask you some simple questions on happiness and satisfaction. First, taking all things together, would you say you are very happy, somewhat happy, neither happy nor unhappy, somewhat unhappy or very unhappy? I am now going to show you pictures to help you with your response. *Show smiley card and explain what each symbol represents. Record the response code selected by the respondent.*	VERY HAPPY ..... 1 SOMEWHAT HAPPY ..... 2 NEITHER HAPPY NOR UNHAPPY ..... 3 SOMEWHAT UNHAPPY ..... 4 VERY UNHAPPY 5	
MLS2. *Show the picture of the ladder.* Now, look at this ladder with steps numbered from 0 at the bottom to 10 at the top. Suppose we say that the top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you. On which step of the ladder do you feel you stand at this time? *Probe if necessary:* Which step comes closest to the way you feel?	LADDER STEP ..... ___ ___	
MLS3. Compared to this time last year, would you say that your life has improved, stayed more or less the same, or worsened, overall?	IMPROVED ..... 1 MORE OR LESS THE SAME ..... 2 WORSENED 3	
MLS4. And in one year from now, do you expect that your life will be better, will be more or less the same, or will be worse, overall?	BETTER ..... 1 MORE OR LESS THE SAME ..... 2 WORSE 3	


Very happy
Somewhat happy
Neither happy, nor unhappy
Somewhat unhappy
Very unhappy

Best Possible Life



Worst Possible Life

MWM10. *Record the time.*	HOURS AND MINUTES ..... __ __ : __ __	
MWM11. *Was the entire interview completed in private or was there anyone else during the entire interview or part of it?*	YES, THE ENTIRE INTERVIEW WAS COMPLETED IN PRIVATE .....1 NO, OTHERS WERE PRESENT DURING THE ENTIRE INTERVIEW (*specify*)_____2 NO, OTHERS WERE PRESENT DURING PART OF THE INTERVIEW (*specify*)_____3	
MWM12. *Language of the Questionnaire.*	ARABIC .....1 ENGLISH 2	
MWM13. *Language of the Interview.*	ARABIC .....1 ENGLISH .....2 OTHER LANGUAGE (*specify*)_____6	
MWM14. *Native language of the Respondent.*	ARABIC .....1 ENGLISH .....2 OTHER LANGUAGE (*specify*)_____6	
MWM15. *Was a translator used for any parts of this questionnaire?*	YES, THE ENTIRE QUESTIONNAIRE .....1 YES, PARTS OF THE QUESTIONNAIRE.....2 NO, NOT USED 3	

MWM16. *Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the caretaker of any child age 0-4 living in this household?*

☐ *Yes* ⇨ *Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent.*

☐ *No* ⇨ *Check HH26-HH27 in HOUSEHOLD QUESTIONNAIRE: Is there a child age 5-17 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17?*

- ☐ *Yes* ⇨ *Check column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the caretaker of the child selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17 in this household?*
  - ☐ *Yes* ⇨ *Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 for that child and start the interview with this respondent.*
  - ☐ *No* ⇨ *Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking him for his cooperation. Check to see if there are other questionnaires to be administered in this household.*
- ☐ *No* ⇨ *Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking him for his cooperation. Check to see if there are other questionnaires to be administered in this household.*

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

MICS

QUESTIONNAIRE FOR CHILDREN UNDER FIVE

QATAR MICS 2023

UNDER-FIVE CHILD INFORMATION PANEL		UF
UF1. *Cluster number:* ___ ___ ___	**UF2**. *Household number:* ___ ___	
UF3. *Child's name and line number:* NAME _____ ___ ___	**UF4**. *Mother's / Caretaker's name and line number:* NAME _____ ___ ___	
UF5. *Interviewer's name and number:* NAME _____ ___ ___ ___	**UF6**. *Supervisor's name and number:* NAME _____ ___ ___ ___	
UF7. *Day / Month / Year of interview:* ___ ___ /___ ___ / 2 0 2 3	**UF8**. *Record the time:*	HOURS : MINUTES __ __ : __ __

Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE:
If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in UF17. The respondent must be at least 15 years old.

UF9. *Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?*	YES, INTERVIEWED ALREADY ..... 1 NO, FIRST INTERVIEW 2	1 ⇨*UF10B* 2 ⇨*UF10A*
UF10A. Hello, my name is (***your name***). We are from National Planning Council. We are conducting a survey about the situation of children, families and households. I would like to talk to you about (***child's name from UF3***)'s health and well-being. This interview will take about ***15*** minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	**UF10B**. Now I would like to talk to you about (***child's name from UF3***)'s health and well-being in more detail. This interview will take about ***15*** minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	
YES ..... 1 NO / NOT ASKED 2	1 ⇨*UNDER FIVE'S BACKGROUND Module* 2 ⇨*UF17*	

UF17. *Result of interview for children under 5* *Codes refer to mother/caretaker.* *Discuss any result not completed with Supervisor.*	COMPLETED ..... 01 NOT AT HOME ..... 02 REFUSED ..... 03 PARTLY COMPLETED ..... 04 INCAPACITATED (*specify*) _____ 05 NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17 ..... 06 OTHER (*specify*) _____ 96

UNDER-FIVE'S BACKGROUND		UB
UB1. On what day, month and year was (***name***) born? *Probe:* What is (his/her) birthday? *If the mother/caretaker knows the exact date of birth, also record the day; otherwise, record '98' for day.* *Month and year must be recorded.*	DATE OF BIRTH DAY .....__ __ DK DAY .....98 MONTH.....__ __ YEAR ..... 2 0 __ __	
UB2. How old is (***name***)? *Probe*: How old was (***name***) at (his/her) last birthday? *Record age in completed years.* *Record '0' if less than 1 year.* *If responses to UB1 and UB2 are inconsistent, probe further and correct.*	AGE (IN COMPLETED YEARS) .....__	
UB3. *Check UB2: Child's age?*	AGE 0, 1, OR 2.....1 AGE 3 OR 4.....2	1 ⇨*UB9*
UB4. *Check the respondent's line number (UF4) in UNDER-FIVE CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the HOUSEHOLD QUESTIONNAIRE?*	YES, RESPONDENT IS THE SAME, UF4=HH47 .....1 NO, RESPONDENT IS NOT THE SAME, UF4≠HH47 2	2 ⇨*UB6*
UB5. *Check ED10 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE: Is the child attending ECE in the current school year?*	YES, ED10=0 .....1 NO, ED10≠0 OR BLANK.....2	1 ⇨*UB8B* 2 ⇨*UB9*
UB6. Has (***name***) ever attended any early childhood education programme, such as kindergarten or KG?	YES.....1 NO 2	2 ⇨*UB9*
UB7. At any time since September, did (he/she) attend (*programmes mentioned in UB6*)?	YES.....1 NO 2	1 ⇨*UB8A* 2 ⇨*UB9*
UB8A. Does (he/she) currently attend (*programmes mentioned in UB6*)? **UB8B**. You have mentioned that (***name***) has attended an early childhood education programme this school year. Does (he/she) currently attend this programme?	YES.....1 NO 2	
UB9. Is (***name***) covered by any health insurance?	YES.....1 NO 2	2 ⇨*End*

EARLY CHILDHOOD DEVELOPMENT		EC
EC1. How many children's books or picture books do you have for (*name*)?	NONE ..... 00 NUMBER OF CHILDREN'S BOOKS ..... 0 __ TEN OR MORE BOOKS 10	
EC2. I am interested in learning about the things that (*name*) plays with when (he/she) is at home. Does (he/she) play with: [A] Homemade toys, such as dolls, cars, or other toys made at home? [B] Toys from a shop or manufactured toys? [C] Household objects, such as bowls or pots, or objects found outside, such as sticks, rocks, animal shells or leaves?	Y N DK HOMEMADE TOYS ..... 1 2 8 TOYS FROM A SHOP ..... 1 2 8 HOUSEHOLD OBJECTS OR OUTSIDE OBJECTS 1 2 8	
EC3. Sometimes adults taking care of children have to leave the house to go shopping, wash clothes, or for other reasons and have to leave young children. On how many days in the past week was (*name*): [A] Left alone for more than an hour? [B] Left in the care of another child, that is, someone less than 10 years old, for more than an hour? *If 'None' record '0'. If 'Don't know' record '8'.*	NUMBER OF DAYS LEFT ALONE FOR MORE THAN AN HOUR ..... __ NUMBER OF DAYS LEFT WITH ANOTHER CHILD FOR MORE THAN AN HOUR ..... __	
EC4. *Check UB2: Child's age?*	AGE 0 OR 1 ..... 1 AGE 2, 3 OR 4 2	1 ⇨ *End*

EC5. In the past 3 days, did you or any household member age 15 or over engage in any of the following activities with (*name*): *If 'Yes', ask:* Who engaged in this activity with (*name*)? *A foster/step mother or father living in the household who engaged with the child should be coded as mother or father.* *Record all that apply.* *'No one' cannot be recorded if any household member age 15 and above engaged in activity with child.*		**MOTHER**	**FATHER**	**OTHER**	**NO ONE**	
[A] Read books or looked at picture books with (*name*)?	READ BOOKS	A	B	X	Y	
[B] Told stories to (*name*)?	TOLD STORIES	A	B	X	Y	
[C] Sang songs to or with (*name*), including lullabies?	SANG SONGS	A	B	X	Y	
[D] Took (*name*) outside the home?	TOOK OUTSIDE	A	B	X	Y	
[E] Played with (*name*)?	PLAYED WITH	A	B	X	Y	
[F] Named, counted, or drew things for or with (*name*)?	NAMED	A	B	X	Y	
EC6. *Check UB2: Child's age?*	AGE 0 OR 1 ..... 1 AGE 2, 3 OR 4 2					1 ⇨*End*
EC7. I would like to ask you about certain things (***name***) is currently able to do. Please keep in mind that children can develop and learn at a different pace. For example, some start talking earlier than others, or they might already say some words but not yet form sentences. So, it is fine if your child is not able to do all the things I am going to ask about. You can let me know if you have any doubts about what answer to give. Can (***name***) walk on an uneven surface, for example a bumpy or steep road, without falling?	YES ..... 1 NO ..... 2 DK 8					
EC8. Can (***name***) jump up with both feet leaving the ground?	YES ..... 1 NO ..... 2 DK 8					

EC9. Can (***name***) dress (***him/herself***), that is, put on pants and a shirt without help?	YES .....1 NO .....2 DK 8	
EC10. Can (***name***) fasten and unfasten buttons without help?	YES .....1 NO .....2 DK 8	
EC11. Can (***name***) say 10 or more words like "mama" or "ball"?	YES .....1 NO .....2 DK 8	
EC12. Can (***name***) speak using sentences of 3 or more words that go together, for example "I want water" or "The house is big"?	YES .....1 NO .....2 DK 8	2 ⇨*EC28* 8 ⇨*EC28*
EC13. Can (***name***) speak using sentences of 5 or more words that go together, for example "The house is very big"?	YES .....1 NO .....2 DK 8	
EC14. Can (***name***) correctly use any of the words "I," "you," "she," or "he," for example "I want water," or "He eats rice"?	YES .....1 NO .....2 DK 8	
EC15. If you show (***name***) an object (***he/she***) knows well, such as a cup or animal, can (***he/she***) consistently name it? *Probe:* By consistently I mean that (***he/she***) uses the same word to refer to the same object, even if the word used is not fully correct.	YES .....1 NO .....2 DK 8	
EC16. Can (***name***) recognise at least 5 letters of the alphabet?	YES .....1 NO .....2 DK 8	
EC17. Can (***name***) write (***his/her***) own name?	YES .....1 NO .....2 DK 8	
EC18. Does (***name***) recognise all numbers from 1 to 5?	YES .....1 NO .....2 DK 8	
EC19. If you ask (***name***) to give you 3 objects, such as 3 stones or 3 beans, does (***he/she***) give you the correct amount?	YES .....1 NO .....2 DK 8	

EC20. Can (***name***) count 10 objects, for example 10 fingers or 10 blocks, without mistakes?	YES .....1 NO .....2 DK 8	
EC21. Can (***name***) do an activity, such as colouring or playing with building blocks, without repeatedly asking for help or giving up too quickly?	YES .....1 NO .....2 DK 8	
EC22. Does (***name***) ask about familiar people other than parents when they are not there, for example "Where is Grandma?"?	YES .....1 NO .....2 DK 8	
EC23. Does (***name***) offer to help someone who seems to need help?	YES .....1 NO .....2 DK 8	
EC24. Does (***name***) get along well with other children?	YES .....1 NO .....2 DK 8	
EC25. The next two questions have five different options for answers. I am going to read these to you after each question. How often does (***name***) seem to be very sad or depressed? Would you say: daily, weekly, monthly, a few times a year, or never?	 DAILY .....1 WEEKLY .....2 MONTHLY .....3 A FEW TIMES A YEAR .....4 NEVER .....5 DK 8	
EC26. Compared with children of the same age, how much does (***name***) kick, bite, or hit other children or adults? Would you say: not at all, less, the same, more, or a lot more?	 NOT AT ALL .....1 LESS .....2 THE SAME .....3 MORE .....4 A LOT MORE 5	

CHILD DISCIPLINE		UCD
UCD1. *Check UB2: Child's age?*	AGE 0 ..... 1 AGE 1, 2, 3 OR 4 2	1 ⇨ *End*
UCD2. Adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used. Please tell me if you or any other adult in your household has used this method with ***(name)*** in the past month.	YES NO	
[A] Took away privileges, forbade something ***(name)*** liked or did not allow (him/her) to leave the house.	TOOK AWAY PRIVILEGES 1 2	
[B] Explained why ***(name)***'s behavior was wrong.	EXPLAINED WRONG BEHAVIOR 1 2	
[C] Shook (him/her).	SHOOK HIM/HER 1 2	
[D] Shouted, yelled at or screamed at (him/her).	SHOUTED, YELLED, SCREAMED 1 2	
[E] Gave (him/her) something else to do.	GAVE SOMETHING ELSE TO DO 1 2	
[F] Spanked, hit or slapped (him/her) on the bottom with bare hand.	SPANKED, HIT, SLAPPED ON BOTTOM WITH BARE HAND 1 2	
[G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.	HIT WITH BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT 1 2	
[H] Called (him/her) dumb, lazy or another name like that.	CALLED DUMB, LAZY OR ANOTHER NAME 1 2	
[I] Hit or slapped (him/her) on the face, head or ears.	HIT / SLAPPED ON FACE, HEAD OR EARS 1 2	
[J] Hit or slapped (him/her) on the hand, arm, or leg.	HIT / SLAPPED ON HAND, ARM OR LEG 1 2	
[K] Beat (him/her) up, that is hit (him/her) over and over as hard as one could.	BEAT UP, HIT OVER AND OVER AS HARD AS ONE COULD 1 2	
UCD3. *Check UF4: Is this respondent the mother or caretaker of any other children under age 5 or a child age 5-14 selected for the QUESTIONNAIRE FOR CHILDREN AGE 5-17?*	YES ..... 1 NO 2	2 ⇨ *UCD5*
UCD4. *Check UF4: Has this respondent already responded to the following question (UCD5 or FCD5) for another child?*	YES ..... 1 NO 2	1 ⇨ *End*
UCD5. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished?	YES ..... 1 NO ..... 2 DK / NO OPINION 8	

CHILD FUNCTIONING		UCF
UCF1. *Check UB2: Child's age?*	AGE 0 OR 1 ..... 1 AGE 2, 3 OR 4..... 2	1⇨*End*
UCF2. I would like to ask you some questions about difficulties (***name***) may have. Does (***name***) wear glasses?	YES..... 1 NO 2	
UCF3. Does (***name***) use a hearing aid?	YES..... 1 NO 2	
UCF4. Does (***name***) use any equipment or receive assistance for walking?	YES..... 1 NO 2	
UCF5. In the following questions, I will ask you to answer by selecting one of four possible answers. For each question, would you say that (***name***) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all. *Repeat the categories during the individual questions whenever the respondent does not use an answer category:* Remember the four possible answers: Would you say that (***name***) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all?		
UCF6. *Check UCF2: Child wears glasses?*	YES, UCF2=1..... 1 NO, UCF2=2 2	1⇨*UCF7A* 2⇨*UCF7B*
UCF7A. When wearing (his/her) glasses, does (***name***) have difficulty seeing? **UCF7B**. Does (***name***) have difficulty seeing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT SEE AT ALL..... 4	
UCF8. *Check UCF3: Child uses a hearing aid?*	YES, UCF3=1..... 1 NO, UCF3=2 2	1⇨*UCF9A* 2⇨*UCF9B*
UCF9A. When using (his/her) hearing aid(s), does (***name***) have difficulty hearing sounds like peoples' voices or music? **UCF9B**. Does (***name***) have difficulty hearing sounds like peoples' voices or music?	NO DIFFICULTY ..... 1 SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT HEAR AT ALL..... 4	
UCF10. *Check UCF4: Child uses equipment or receives assistance for walking?*	YES, UCF4=1..... 1 NO, UCF4=2 2	1⇨*UCF11* 2⇨*UCF13*
UCF11. Without (his/her) equipment or assistance, does (***name***) have difficulty walking?	SOME DIFFICULTY..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK AT ALL..... 4	

UCF12. With (his/her) equipment or assistance, does (***name***) have difficulty walking?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK AT ALL 4	1 ⇨*UCF14* 2 ⇨*UCF14* 3 ⇨*UCF14* 4 ⇨*UCF14*
UCF13. Compared with children of the same age, does (***name***) have difficulty walking?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK AT ALL 4	
UCF14. Compared with children of the same age, does (***name***) have difficulty picking up small objects with (his/her) hand?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT PICK UP AT ALL 4	
UCF15. Does (***name***) have difficulty understanding you?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT UNDERSTAND AT ALL 4	
UCF16. When (***name***) speaks, do you have difficulty understanding (him/her)?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT BE UNDERSTOOD AT ALL 4	
UCF17. Compared with children of the same age, does (***name***) have difficulty learning things?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT LEARN THINGS AT ALL 4	
UCF18. Compared with children of the same age, does (***name***) have difficulty playing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT PLAY AT ALL 4	
UCF19. The next question has five different options for answers. I am going to read these to you after the question. Compared with children of the same age, how much does (***name***) kick, bite or hit other children or adults? Would you say: not at all, less, the same, more or a lot more?	NOT AT ALL ..... 1 LESS ..... 2 THE SAME ..... 3 MORE ..... 4 A LOT MORE 5	

BREASTFEEDING AND DIETARY INTAKE					BD
BD1. *Check UB2: Child's age?*	AGE 0, 1, OR 2 ..... 1 AGE 3 OR 4 2				2 ⇨ *End*
BD2. Has (***name***) ever been breastfed?	YES ..... 1 NO ..... 2 DK 8				2 ⇨ *BD3A* 8 ⇨ *BD3A*
BD3. Is (***name***) still being breastfed?	YES ..... 1 NO ..... 2 DK 8				
BD3A. *Check UB2: Child's age?*	AGE 0 OR 1 ..... 1 AGE 2 2				2 ⇨ *End*
BD4. Yesterday, during the day or night, did (***name***) drink anything from a bottle with a nipple?	YES ..... 1 NO ..... 2 DK 8				
BD5. Did (***name***) drink Oral Rehydration Salt solution (ORS) yesterday, during the day or night?	YES ..... 1 NO ..... 2 DK 8				
BD6. Did (***name***) drink or eat vitamin or mineral supplements or any medicines yesterday, during the day or night?	YES ..... 1 NO ..... 2 DK 8				
BD7. Now I would like to ask you about all other liquids that (***name***) may have had yesterday during the day or the night. Please include liquids consumed outside of your home. Did (***name***) drink (***name of item***) yesterday during the day or the night:		YES	NO	DK	
[A] Plain water?	PLAIN WATER	1	2	8	
[B1] 100% real juice made from papaya, carrots, mango , or melon?	VITAMIN A-RICH 100% REAL JUICE	1	2	8	
[B2] 100% real juice made from any other fruits or vegetables such as sugar candde, oranges or apples?	OTHER 100% REAL JUICE	1	2	8	
[B3] Any packaged sweet-tasting drink such as Tang, Dandi, Baladna, Raw'a or any similar packaged sweet-tasting juice drink?	NON-NUTRITIOUS DRINKS/BEVERAGES	1	2	8	
[C] Clear soup/broth	CLEAR BROTH/SOUP	1	2	8	
[D] Infant formula, such as Optimal, Semilac, 123, or Enfamil?	INFANT FORMULA	1	2 ⇩ *BD7[E]*	8 ⇩ *BD7[E]*	

[D1] How many times did (***name***) drink infant formula? *If 7 or more times, record '7'.*	NUMBER OF TIMES DRANK INFANT FORMULA .....__ DK.....8			
[E] Milk from animals, such as fresh, tinned, or powdered milk?	MILK	1	2 ⇩ *BD7[X]*	8 ⇩ *BD7[X]*
[E1] How many times did (***name)*** drink milk? *If 7 or more times, record '7'.*	NUMBER OF TIMES DRANK MILK .....__ DK.....8			
[X] Any other liquids?	OTHER LIQUIDS	1	2 ⇩ *BD8*	8 ⇩ *BD8*
[X1] *Record all other liquids mentioned.*	(*Specify*) _____			

BD8. Now I would like to ask you about <u>everything</u> that (***name***) ate yesterday during the day or the night. Please include foods consumed outside of your home.

- Think about when (***name***) woke up yesterday. Did (he/she) eat anything at that time?
  If 'Yes' ask: Please tell me everything (***name***) ate at that time. *Probe:* Anything else?
  Record answers using the food groups below.
- What did (***name***) do after that? Did (he/she) eat anything at that time?
  Repeat this string of questions, recording in the food groups, until the respondent tells you that the child went to sleep until the next morning.

For each food group not mentioned after completing the above ask: Just to make sure, did (***name***) eat (***food group items***) yesterday during the day or the night		YES	NO	DK
[A] Yogurt made from animal milk? *Note that liquid/drinking yogurt should be captured in BD7[E] or BD7[X], depending on milk content.*	YOGURT	1	2 ⇩ *BD8[B]*	8 ⇩ *BD8[B]*
[A1] How many times did (***name)*** eat yogurt? *If 7 or more times, record '7'.*	NUMBER OF TIMES ATE YOGURT.....__ DK.....8			
[B] Any baby food, such as Cerelac, Bledina, Gerber, Hero or Nestum?	FORTIFIED BABY FOOD	1	2	8
[C] Bread, rice, noodles, porridge, oats, bulgur, kuskus, hreesa, freeka or other foods made from grains?	FOODS MADE FROM GRAINS	1	2	8
[D] Pumpkin, carrots, squash, or sweet potatoes that are yellow or orange inside?	PUMPKIN, CARROTS, SQUASH, ETC.	1	2	8
[E] White potatoes, parsnips, beetroot, radish or any other foods made from roots?	FOODS MADE FROM ROOTS	1	2	8
[F] Any dark green, leafy vegetables, such as rocca, spinach, parsley, mlokhiah, vine leaves, khobaizah, lettuce, Swiss chard?	DARK GREEN, LEAFY VEGETABLES	1	2	8
[G] Ripe mangoes, ripe papayas, watermelon, melon, or apricots?	RIPE MANGO, RIPE PAPAYA	1	2	8

[H] Any other fruits or vegetables, such as apple, banana, pear, tomato, zucchini, raddish cauliflower, cabbage, oranges, or cucumber?	OTHER FRUITS OR VEGETABLES	1	2	8	
[I] Liver, kidney, heart or other organ meats?	ORGAN MEATS	1	2	8	
[J] Any other meat, such as beef, pork, lamb, goat, chicken, duck or sausages made from these meats?	OTHER MEATS	1	2	8	
[K] Eggs?	EGGS	1	2	8	
[L] Fish or shellfish, either fresh or dried?	FRESH OR DRIED FISH	1	2	8	
[M] Beans, peas, lentils, chickpeas, fava beans, termos, peanuts or other nuts, including any foods made from these?	FOODS MADE FROM BEANS, PEAS, NUTS, ETC.	1	2	8	
[N] Cheese or other food made from animal milk?	CHEESE OR OTHER FOOD MADE FROM MILK	1	2	8	
[X] Other solid, semi-solid, or soft food?	OTHER SOLID, SEMI-SOLID, OR SOFT FOOD	1	2 ⇩ *BD9*	8 ⇩ *BD9*	
[X1] *Record all other solid, semi-solid, or soft food that do not fit food groups above.*	(*Specify*) _____				
BD9. How many times did (***name***) eat any solid, semi-solid or soft foods yesterday during the day or night? *If BD8[A] is 'Yes', ensure that the response here includes the number of times recorded for yogurt in BD8[A1].* *If 7 or more times, record '7'.*	NUMBER OF TIMES .....__ DK 8				

CARE OF ILLNESS		CA
CA1. In the last two weeks, has (***name***) had diarrhoea?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*CA14* 8 ⇨*CA14*
CA2. *Check BD3: Is child still breastfeeding?*	YES OR BLANK, BD3=1 OR BLANK ..... 1 NO OR DK, BD3=2 OR 8 2	1 ⇨*CA3A* 2 ⇨*CA3B*
CA3A. I would like to know how much (***name***) was given to drink during the diarrhoea. This includes breastmilk, Oral Rehydration Salt solution (ORS) and other liquids given with medicine. During the time (***name***) had diarrhoea, was (he/she) given less than usual to drink, about the same amount, or more than usual? *If 'less', probe*: Was (he/she) given much less than usual to drink, or somewhat less? **CA3B**. I would like to know how much (***name***) was given to drink during the diarrhoea. This includes Oral Rehydration Salt solution (ORS) and other liquids given with medicine. During the time (***name***) had diarrhoea, was (he/she) given less than usual to drink, about the same amount, or more than usual? *If 'less', probe*: Was (he/she) given much less than usual to drink, or somewhat less?	MUCH LESS ..... 1 SOMEWHAT LESS ..... 2 ABOUT THE SAME ..... 3 MORE ..... 4 NOTHING TO DRINK ..... 5 DK 8	
CA4. During the time (***name***) had diarrhoea, was (he/she) given less than usual to eat, about the same amount, more than usual, or nothing to eat? *If 'less', probe:* Was (he/she) given much less than usual to eat or somewhat less?	MUCH LESS ..... 1 SOMEWHAT LESS ..... 2 ABOUT THE SAME ..... 3 MORE ..... 4 STOPPED FOOD ..... 5 NEVER GAVE FOOD ..... 7 DK 8	
CA5. Did you seek any advice or treatment for the diarrhoea from any source?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*CA7* 8 ⇨*CA7*

CA6. Where did you seek advice or treatment? *Probe:* Anywhere else? *Record all providers mentioned, but do <u>not</u> prompt with any suggestions.* *Probe to identify each type of provider.* *<u>If unable to determine if public or private sector</u>, write the name of the place and then temporarily record 'W' until you learn the appropriate category for the response.* _____ (*Name of place*)	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL ..... A OTHER PUBLIC MEDICAL (*specify*) _____ H **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL / CLINIC ..... I OTHER PRIVATE MEDICAL (*specify*) _____ O DK PUBLIC OR PRIVATE ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER ..... Z	
CA7. During the time (***name***) had diarrhoea, was (he/she) given: [A] A fluid made from a special packet called ORS packet solution? [B] A pre-packaged ORS fluid called ORS fluid? [C] Zinc tablets or syrup? [D] Sage or Artemisia herb?	Y N DK FLUID FROM ORS PACKET ..... 1 2 8 PRE-PACKAGED ORS FLUID ..... 1 2 8 ZINC TABLETS OR SYRUP ..... 1 2 8 SAGE OR ARTEMISIA HERB 1 2 8	
CA8. *Check CA7[A] and CA7[B]: Was child given any ORS?*	YES, YES IN CA7[A] OR CA7[B] ..... 1 NO, 'NO' OR 'DK' IN BOTH CA7[A] AND CA7[B] 2	2 ⇨*CA10*
CA9. Where did you get the (*ORS mentioned in CA7[A] and/or CA7[B]*)? *Probe to identify the type of source.* *If 'Already had at home', probe to learn if the source is known.* *<u>If unable to determine whether public or private</u>, write the name of the place and then temporarily record 'W' until you learn the appropriate category for the response.* _____ *(Name of place)*	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL ..... A OTHER PUBLIC MEDICAL (*specify*) _____ H **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL / CLINIC ..... I OTHER PRIVATE MEDICAL (*specify*) _____ O DK PUBLIC OR PRIVATE ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER ..... Z	
CA10. *Check CA7[C]: Was child given any zinc?*	YES, CA7[C]=1 ..... 1 NO, CA7[C] ≠1 2	2 ⇨*CA12*

CA11. Where did you get the zinc? *Probe to identify the type of source.* *If 'Already had at home', probe to learn if the source is known.* *If unable to determine whether public or private, write the name of the place and then temporarily record 'W' until you learn the appropriate category for the response.* _____ *(Name of place)*	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL ..... A OTHER PUBLIC MEDICAL (*specify*) _____ H **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL / CLINIC ..... I OTHER PRIVATE MEDICAL (*specify*) _____ O DK PUBLIC OR PRIVATE ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER ..... Z	
CA12. Was anything else given to treat the diarrhoea?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*CA14* 8 ⇨*CA14*
CA13. What else was given to treat the diarrhoea? *Probe*: Anything else? *Record all treatments given. Write brand name(s) of all medicines mentioned.* _____ *(Name of brand)* _____ *(Name of brand)*	**PILL OR SYRUP** ANTIBIOTIC/AUGMENTINE ..... A ANTIMOTILITY (ANTI-DIARRHOEA) ..... B OTHER PILL OR SYRUP ..... G UNKNOWN PILL OR SYRUP ..... H **INJECTION** ANTIBIOTIC/AUGMENTINE ..... L NON-ANTIBIOTIC ..... M UNKNOWN INJECTION ..... N INTRAVENOUS (IV) ..... O HOME REMEDY / HERBAL MEDICINE ..... Q OTHER (*specify*)_____ X	
CA14. At any time in the last two weeks, has (***name***) been ill with a fever?	YES ..... 1 NO ..... 2 DK 8	
CA16. At any time in the last two weeks, has (***name***) had an illness with a cough?	YES ..... 1 NO ..... 2 DK 8	
CA17. At any time in the last two weeks, has (***name***) had fast, short, rapid breaths or difficulty breathing?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*CA19* 8 ⇨*CA19*

CA18. Was the fast or difficult breathing due to a problem in the chest or a blocked or runny nose?	PROBLEM IN CHEST ONLY ..... 1 BLOCKED OR RUNNY NOSE ONLY ..... 2 BOTH ..... 3 OTHER (*specify*)_____ 6 DK 8	1 ⇨*CA20* 2 ⇨*CA20* 3 ⇨*CA20* 6 ⇨*CA20* 8 ⇨*CA20*
CA19. *Check CA14: Did child have fever?*	YES, CA14=1 ..... 1 NO OR DK, CA14=2 OR 8 2	 2 ⇨ *End*
CA20. Did you seek any advice or treatment for the illness from any source?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨*CA22* 8 ⇨*CA22*
CA21. From where did you seek advice or treatment? *Probe:* Anywhere else? *Record all providers mentioned, but do <u>not</u> prompt with any suggestions.* *Probe to identify each type of provider.* *<u>If unable to determine if public or private sector</u>, write the name of the place and then temporarily record 'W' until you learn the appropriate category for the response.* _____ *(Name of place)*	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL ..... A OTHER PUBLIC MEDICAL (*specify*) _____ H **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL / CLINIC ..... I OTHER PRIVATE MEDICAL (*specify*) _____ O DK PUBLIC OR PRIVATE ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER ..... Z	
CA22. At any time during the illness, was (***name***) given any medicine for the illness?	YES ..... 1 NO ..... 2 DK 8	 2 ⇨ *End* 8 ⇨ *End*
CA23. What medicine was (***name***) given? *Probe:* Any other medicine? *Record all medicines given.* *<u>If unable to determine type of medicine</u>, write the brand name and then temporarily record 'W' until you learn the appropriate category for the response.* _____ *(Name of brand)* _____ *(Name of brand)*	**ANTIBIOTICS** AMOXICILLIN ..... L COTRIMOXAZOLE ..... M OTHER ANTIBIOTIC PILL/SYRUP ..... N OTHER ANTIBIOTIC INJECTION/IV ..... O **OTHER MEDICATIONS** PARACETAMOL/PANADOL/ ACETAMINOPHEN ..... R ASPIRIN ..... S IBUPROFEN ..... T ONLY BRAND NAME RECORDED ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER ..... Z	

CA24. *Check CA23: Antibiotics mentioned?*	YES, ANTIBIOTICS MENTIONED, CA23=L-O ..... 1 NO, ANTIBIOTICS NOT MENTIONED 2	2 ⇨ *End*
CA25. Where did you get the (***name of medicine from CA23, codes L to O***)? *Probe to identify the type of source.* *If 'Already had at home', probe to learn if the source is known.* *<u>If unable to determine whether public or private</u>, write the name of the place and then temporarily record 'W' until you learn the appropriate category for the response.* _____ *(Name of place)*	**PUBLIC MEDICAL SECTOR** GOVERNMENT HOSPITAL..... A OTHER PUBLIC MEDICAL (*specify*) _____ H **PRIVATE MEDICAL SECTOR** PRIVATE HOSPITAL / CLINIC .....I OTHER PRIVATE MEDICAL (*specify*) _____ O DK PUBLIC OR PRIVATE ..... W OTHER (*specify*)_____ X DK / DON'T REMEMBER .....Z	

MICS LINK		ML
ML1. *Check UB2: Child's age?*	AGE 0, 1, OR 2 ..... 1 AGE 3 OR 4 2	2 ⇨*ML3*
ML2. Now we would like to collect data related to the vaccination and the height and weight measurements of your child. And during this survey, the ministry of health is cooperating with us by providing us with access to retrieve data about your child's vaccination, height and weight from the national health system. This process is done by linking the child's id number and date of birth to his records in the health information system. Therefore, if you consent to us obtaining this information, you will be asked to kindly show us the child's id card so that we can note down its number. Please note that we will not access the data if you do not agree to that and that the ID number of your child will be kept confidential, and will not be shared with any other person or party nor will it be used for any other purpose. Would you like to give us access to this information?		
YES ..... 1 NO 2		1 ⇨*ML4* 2 ⇨*END*
ML3. Now we would like to collect data related to the height and weight of your child. And during this survey, the ministry of health is cooperating with us by providing us with access to retrieve data about your child's height and weight from the national health system. This process is done by linking the child's id number and date of birth to his records in the health information system. Therefore, if you consent to us obtaining this information, you will be asked to kindly show us the child's id card so that we can note down its number. Please note that we will not access the data if you do not agree to that and that the ID number of your child will be kept confidential, and will not be shared with any other person or party nor will it be used for any other purpose. Would you like to give us access to this information?		
YES ..... 1 NO 2		2 ⇨*END*
ML4. Can I see (***name***)'s ID card?	YES, ID CARD WAS SEEN……1 YES, ANOTHER DOCUMENT WAS SEEN……..2 NO, NO OTHER CARD OR DOCUMENT HAS BEEN SEEN…….3	3 ⇨*END*
ML5. *Record (name)'s ID number.*	__ __ __ __ __ __ __ __ __ __ __ __	
ML6. *Record (name)'s date of birth as stated on the ID card.*	__ __ / __ __ /__ __ __ __	

UF11. *Record the time.*	HOURS AND MINUTES ..... __ __ : __ __	
UF12. *Language of the Questionnaire.*	ARABIC ..... 1 ENGLISH 2	
UF13. *Language of the Interview.*	ARABIC ..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*) _____ 6	
UF14. *Native language of the Respondent.*	ARABIC ..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*) _____ 6	

UF15. *Was a translator used for any parts of this questionnaire?*	YES, THE ENTIRE QUESTIONNAIRE.....1 YES, PARTS OF THE QUESTIONNAIRE .....2 NO, NOT USED.....3	

UF16. *Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of <u>another</u> child age 0-4 living in this household?*

☐ *Yes* ⇨ *Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent.*

☐ *No* ⇨ *Check HL6 and column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of a child age 5-17 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17 in this household?*

☐ *Yes* ⇨ *Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the same respondent.*

☐ *No* ⇨ *Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking her/him for her/his cooperation. Check to see if there are other questionnaires to be administered in this household.*

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

MICS

QUESTIONNAIRE FOR CHILDREN AGE 5-17

Qatar MICS 2023

5-17 CHILD INFORMATION PANEL		FS
FS1. *Cluster number:* ___ ___ ___	**FS2**. *Household number:* ___ ___	
FS3. *Child's name and line number:* NAME _____ ___ ___	**FS4**. *Mother's / Caretaker's name and line number:* NAME _____ ___ ___	
FS5. *Interviewer's name and number:* NAME _____ ___ ___	**FS6**. *Supervisor's name and number:* NAME _____ ___ ___	
FS7. *Day / Month / Year of interview:* ___ ___ /___ ___ / 2 0 2 3	**FS8**. *Record the time:*	HOURS : MINUTES __ __ : __ __

Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE:
If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in FS17. The respondent must be at least 15 years old. In the very few cases where a child age 15-17 has no mother or caretaker identified in the household (HL20=90), the respondent will be the child him/herself.

FS9. *Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?*	YES, INTERVIEWED ALREADY 1 NO, FIRST INTERVIEW..... 2	1⇨*FS10B* 2⇨*FS10A*
FS10A. Hello, my name is (***your name***). We are from Planning and Statistical Authority. We are conducting a survey about the situation of children, families and households. I would like to talk to you about (***child's name from FS3***)'s health and well-being. This interview will take about ***15*** minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	**FS10B**. Now I would like to talk to you about (***child's name from FS3***)'s health and well-being in more detail. This interview will take about ***15*** minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	
YES ..... 1 NO / NOT ASKED..... 2	1⇨*CHILD'S BACKGROUND Module* 2⇨*FS17*	

FS17. *Result of interview for child age 5-17 years* *Codes refer to the respondent.* *Discuss any result not completed with Supervisor.*	COMPLETED ..... 01 NOT AT HOME..... 02 REFUSED ..... 03 PARTLY COMPLETED ..... 04 INCAPACITATED (*specify*) _____ 05 NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17..... 06 OTHER (*specify*)_____ 96

CHILD'S BACKGROUND		CB
CB1. *Check the respondent's line number (FS4) in 5-17 CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the HOUSEHOLD QUESTIONNAIRE?*	YES, RESPONDENT IS THE SAME, FS4=HH47 ..... 1 NO, RESPONDENT IS NOT THE SAME, FS4≠HH47 2	1 ⇨*CB8*
CB2. In what month and year was (***name***) born? *Month and year must be recorded.*	DATE OF BIRTH MONTH ..... __ __ YEAR ..... 2 0 __ __	
CB3. How old is (***name***)? *Probe*: How old was (***name***) at (his/her) last birthday? *Record age in completed years.* *If responses to CB2 and CB3 are inconsistent, probe further and correct.*	AGE (IN COMPLETED YEARS) ..... __ __	
CB4. Has (***name***) ever attended school or any early childhood education programme?	YES ..... 1 NO 2	2 ⇨*CB11*
CB5. What is the highest level and grade or year of school (***name***) has ever attended?	EARLY CHILDHOOD EDUCATION ..... 000 PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	000 ⇨*CB7*
CB6. Did (he/she) ever complete that (grade/year)?	YES ..... 1 NO 2	
CB7. At any time during the current school year 2022/2023 did (***name***) attend school or any early childhood education programme?	YES ..... 1 NO 2	2 ⇨*CB9*
CB8. During this current school year 2022/2023, which level and grade or year is (***name***) attending?	EARLY CHILDHOOD EDUCATION ..... 000 PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
CB9. At any time during the previous school year 2021/2022 did (name) attend school or any early childhood education programme?	YES ..... 1 NO 2	2 ⇨*CB11*
CB10. During that previous school year 2021/2022, which level and grade or year did (***name***) attend?	EARLY CHILDHOOD EDUCATION ..... 000 PRIMARY ..... **1** __ __ PREPARATORY ..... **2** __ __ SECONDARY ..... **3** __ __ UNIVERSITY/HIGHER ..... **4** __ __	
CB11. Is (***name***) covered by any health insurance?	YES ..... 1 NO 2	2 ⇨*End*

CHILD DISCIPLINE		FCD
FCD1. *Check CB3: Child's age?*	AGE 5-14 YEARS ..... 1 AGE 15-17 YEARS 2	2 ⇨*End*
FCD2. Now I'd like to talk to you about something else. Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if you or any other adult in your household has used this method with ***(name)*** in the past month.	YES NO	
[A] Took away privileges, forbade something ***(name)*** liked or did not allow (him/her) to leave the house.	TOOK AWAY PRIVILEGES 1 2	
[B] Explained why ***(name)***'s behaviour was wrong.	EXPLAINED WRONG BEHAVIOR 1 2	
[C] Shook (him/her).	SHOOK HIM/HER 1 2	
[D] Shouted, yelled at or screamed at (him/her).	SHOUTED, YELLED, SCREAMED 1 2	
[E] Gave (him/her) something else to do.	GAVE SOMETHING ELSE TO DO 1 2	
[F] Spanked, hit or slapped (him/her) on the bottom with bare hand.	SPANKED, HIT, SLAPPED ON BOTTOM WITH BARE HAND 1 2	
[G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.	HIT WITH BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT 1 2	
[H] Called (him/her) dumb, lazy or another name like that.	CALLED DUMB, LAZY OR ANOTHER NAME 1 2	
[I] Hit or slapped (him/her) on the face, head or ears.	HIT / SLAPPED ON FACE, HEAD OR EARS 1 2	
[J] Hit or slapped (him/her) on the hand, arm, or leg.	HIT / SLAPPED ON HAND, ARM OR LEG 1 2	
[K] Beat (him/her) up, that is hit him/her over and over as hard as one could.	BEAT UP, HIT OVER AND OVER AS HARD AS ONE COULD 1 2	
FCD3. *Check FS4: Is this respondent the mother or caretaker of any other children under age 5?*	YES ..... 1 NO 2	2 ⇨*FCD5*
FCD4. *Check FS4: Has this respondent already responded to the following question (UCD5) for another child?*	YES ..... 1 NO 2	1 ⇨*End*
FCD5. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished?	YES ..... 1 NO ..... 2 DK / NO OPINION 8	

CHILD FUNCTIONING		FCF
FCF1. I would like to ask you some questions about difficulties (***name***) may have. Does (***name***) wear glasses or contact lenses?	YES ..... 1 NO 2	
FCF2. Does (***name***) use a hearing aid?	YES ..... 1 NO 2	
FCF3. Does (***name***) use any equipment or receive assistance for walking?	YES ..... 1 NO 2	
FCF4. In the following questions, I will ask you to answer by selecting one of four possible answers. For each question, would you say that (***name***) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all. *Repeat the categories during the individual questions whenever the respondent does not use an answer category:* Remember the four possible answers: Would you say that (***name***) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all?		
FCF5. *Check FCF1: Child wears glasses or contact lenses?*	YES, FCF1=1 ..... 1 NO, FCF1=2 2	1 ⇨*FCF6A* 2 ⇨*FCF6B*
FCF6A. When wearing (his/her) glasses or contact lenses, does (***name***) have difficulty seeing? **FCF6B**. Does (***name***) have difficulty seeing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT SEE AT ALL 4	
FCF7. *Check FCF2: Child uses a hearing aid?*	YES, FCF2=1 ..... 1 NO, FCF2=2 2	1 ⇨*FCF8A* 2 ⇨*FCF8B*
FCF8A. When using (his/her) hearing aid(s), does (***name***) have difficulty hearing sounds like peoples' voices or music? **FCF8B**. Does (***name***) have difficulty hearing sounds like peoples' voices or music?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT HEAR AT ALL 4	
FCF9. *Check FCF3: Child uses equipment or receives assistance for walking?*	YES, FCF3=1 ..... 1 NO, FCF3=2 2	2 ⇨*FCF14*

FCF10. Without (his/her) equipment or assistance, does (***name***) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field. *Note that category 'No difficulty' is not available, as the child uses equipment or receives assistance for walking.*	SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK 100 METERS AT ALL 4	3⇨*FCF12* 4⇨*FCF12*
FCF12. With (his/her) equipment or assistance, does (***name***) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field.	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK 100 METERS AT ALL 4	3⇨*FCF16* 4⇨*FCF16*
FCF14. Compared with children of the same age, does (***name***) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field.	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK 100 METERS AT ALL 4	3⇨*FCF16* 4⇨*FCF16*
FCF16. Does (***name***) have difficulty with self-care such as feeding or dressing (himself/herself)?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CARE FOR SELF AT ALL 4	
FCF17. When (***name***) speaks, does (he/she) have difficulty being understood by people inside of this household?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT BE UNDERSTOOD AT ALL 4	
FCF18. When (***name***) speaks, does (he/she) have difficulty being understood by people outside of this household?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT BE UNDERSTOOD AT ALL 4	
FCF19. Compared with children of the same age, does (***name***) have difficulty learning things?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT LEARN THINGS AT ALL 4	
FCF20. Compared with children of the same age, does (***name***) have difficulty remembering things?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT REMEMBER THINGS AT ALL 4	

FCF21. Does (***name***) have difficulty concentrating on an activity that (he/she) enjoys doing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CONCENTRATE AT ALL 4	
FCF23. Compared with children of the same age, does (***name***) have difficulty controlling (his/her) behaviour?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CONTROL BEHAVIOUR AT ALL . 4	
FCF24. Does (***name***) have difficulty making friends?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT MAKE FRIENDS AT ALL 4	
FCF25. The next questions have different options for answers. I am going to read these to you after each question. I would like to know how often (***name***) seems very anxious, nervous or worried. Would you say: daily, weekly, monthly, a few times a year or never?	DAILY ..... 1 WEEKLY ..... 2 MONTHLY ..... 3 A FEW TIMES A YEAR ..... 4 NEVER 5	

FOUNDATIONAL LEARNING SKILLS		FL
FL0. *Check CB3: Child's age?*	AGE 5-6 YEARS ..... 1 AGE 7-14 YEARS ..... 2 AGE 15-17 YEARS 3	1 ⇨*End* 3 ⇨*End*
FL6. We will now be asking some questions about the habit of reading and language used at school and at home. First we are going to talk about reading. [A] Does ***(name)*** read books at home? [B] Does someone read to ***(name)*** at home?	YES NO READS BOOKS AT HOME ..... 1 2 READ TO AT HOME 1 2	
FL7. Which language does ***(name)*** speak most of the time at home? *Probe if necessary and read the listed languages.*	ARABIC ..... 11 ENGLISH ..... 12 FRENCH ..... 21 SPANISH ..... 22 HINDI/BENGALI ..... 23 OTHER (*specify*)_____ 96 DK 98	
FL8. *Check CB7: In the current school year, did the child attend school or any early childhood education programme?* *Check ED9 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB7 was not asked.*	YES, CB7/ED9=1 ..... 1 NO, CB7/ED9=2 OR BLANK 2	1 ⇨*FL9A*
FL8A. *Check CB4: Did the child ever attend school or any early childhood education programmes?* *Check ED4 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB4 was not asked.*	YES, CB4/ED4=1 ..... 1 NO, CB4/ED4=2 OR BLANK 2	1 ⇨*FL9B* 2 ⇨*End*
FL9A. What language do ***(name)*** teachers use most of the time when teaching ***(name)*** in class? **FL9B**. When ***(name)*** was in school, what language did ***(name)'s*** teachers use most of the time when teaching ***(name)*** in class? *Probe if necessary and read the listed languages.*	ARABIC ..... 11 ENGLISH ..... 12 FRENCH ..... 21 SPANISH ..... 22 HINDI/BENGALI ..... 23 OTHER (*specify*)_____ 96 DK 98	

FS11. *Record the time.*	HOURS AND MINUTES..... __ __ : __ __	
FS12. *Language of the Questionnaire.*	ARABIC ..... 1 ENGLISH 2	
FS13. *Language of the Interview.*	ARABIC ..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*)_____ 6	
FS14. *Native language of the Respondent.*	ARABIC ..... 1 ENGLISH ..... 2 OTHER LANGUAGE (*specify*)_____ 6	
FS15. *Was a translator used for any parts of this questionnaire?*	YES, THE ENTIRE QUESTIONNAIRE ..... 1 YES, PARTS OF THE QUESTIONNAIRE..... 2 NO, NOT USED 3	

FS16. *Thank the respondent for her/his cooperation.*

Proceed to complete the result in FS17 in the 5-17 CHILD INFORMATION PANEL and then go to the HOUSEHOLD QUESTIONNAIRE and complete HH56.

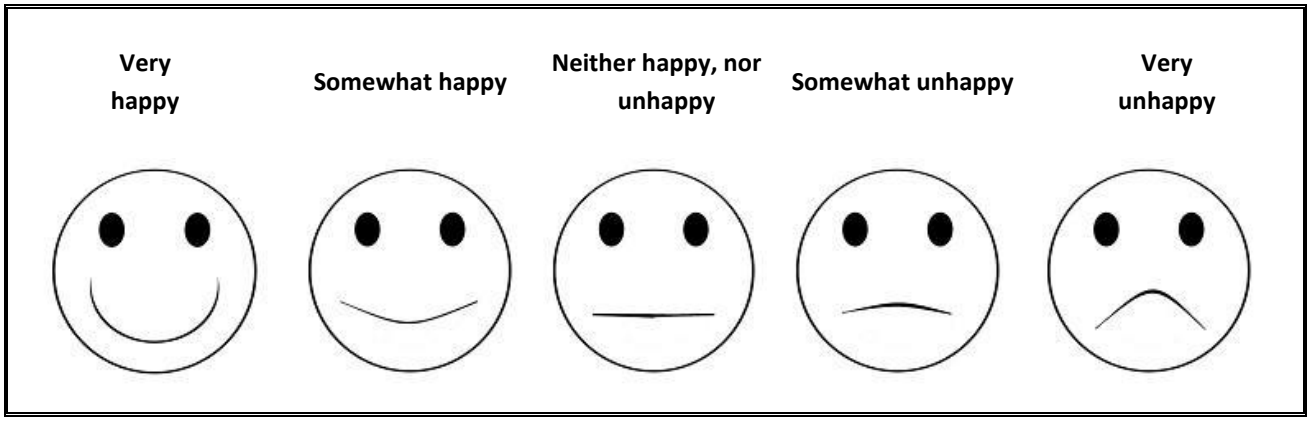
Make arrangements for the administration of the remaining questionnaire(s) in this household.

INTERVIEWER'S OBSERVATIONS

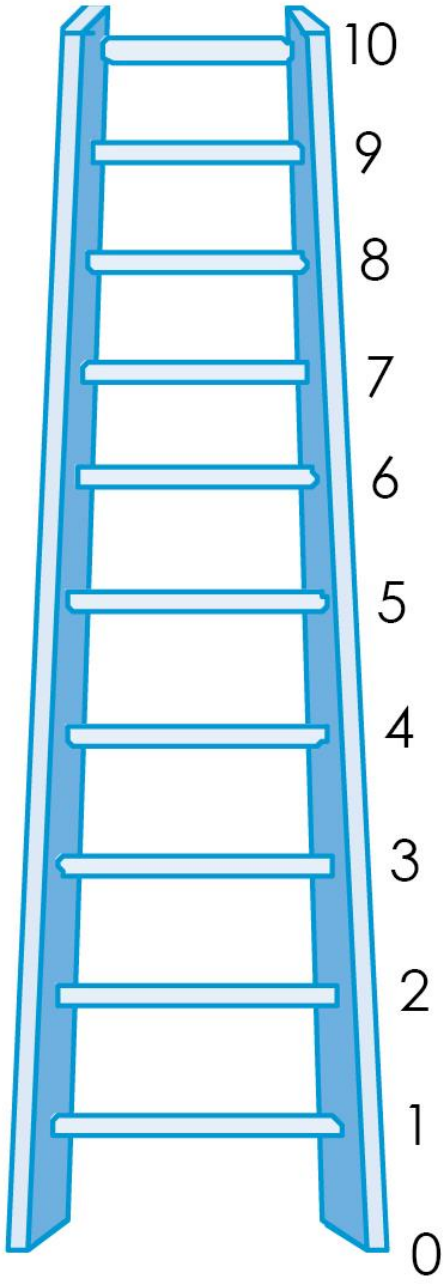
SUPERVISOR'S OBSERVATIONS

E.2 RESPONSE CARDS AND QUESTIONNAIRE AIDS

Smiley card for questions LS1 (women) and MLS1 (Men).



Best Possible Life



Worst Possible Life