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Somali Health and Demographic Survey

## Benadir <br> Report 2020

## \%ige BHDS



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# Somali Health and Demographic Survey Benadir Report 2020 

## BHDS

With technical support from:


With financial contribution from:
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SWEDEN
앙
Ministry for foreign
affairs of fintand

Schweizerische Eidgenossenschaft
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## Preface

The Somalia National Bureau of Statistics (SNBS) in cooperation with the Ministry of Health and Human Services of the Federal Government of Somalia is pleased to present the findings of the Benadir Health and Demographic Survey (BHDS) 2020. It is a series of the reports generated from the Somali Health and Demographic Survey. The results of this survey provides the long-awaited information required by policy and decision makers, and all other relevant stakeholders to make evidence-based programme and policy decisions that deliver effective services to the population of Benadir.

The report findings will enable the Benadir Regional Administration as well as the Federal Government of Somalia to monitor their respective sectors in Somalia's National Development Plans, including those relating to improving the lives of women, children and the overall health of Benadir's population. It presents more than just numbers-offering valuable information to the Federal Government of Somalia and our partners to strive at all levels to promote universal access to reproductive health care and rights. This will be achieved by promoting international maternal health standards and providing guidance and support to health systems that will help us define strategic plans and programmes for Benadir.

The findings from the BHDS show that around 64 percent of Benadir's population is below 20 years of age and around 78 percent is below 30 years of age. It also shows that about 35 percent of female household members are within the childbearing age. This can have implications on Benadir's future birth rates. The large number of potential mothers creates a population momentum and is a strong indication of a potential spike in population growth that Benadir is likely to experience in the coming years.

Furthermore, the survey results indicate that 49 percent of women aged 15-49 who had a live birth in the 5 years prior to the survey received antenatal care from skilled health personnel during the pregnancy of their most recent birth. Forty-nine percent of births delivered with the assistance of trained health personnel and 38 percent were delivered at a health facility. According to the three

The survey findings will enable the Federal Government of Somalia and Benadir region to monitor their development goals
anthropometric indices of nutritional status of children, 26 percent of children under-five are stunted, 8 percent are wasted and 12 percent are underweight. These crucial findings are a result of the great efforts of UNFPA Somalia's Population and Development unit, Ministry of Health and Social Services, and Benadir Regional Administration that collaborated with the Directorate of National Statistics at every stage of the survey - along with all the personnel who worked on this survey. These professionals worked together diligently to complete every phase of the survey within the planned time and in a challenging environment. The BHDS heroes include more than 50 female health professionals who knocked on doors of pre-sampled households in Benadir to collect rich, diverse information from more than 1,800 households for this report. The findings will also offer a glimpse into social behaviour in our communities and encourage our people to adopt positive behavioural changes to improve their own lives.

Thanks to our strong collaboration with UNFPA, Somalia now has a legacy of information, and skilled statistical staff who are able to lay a strong foundation of statistics for our future generations. We also remain grateful to the donors of this undertaking-the UK Department for International Development (DFID), the Government of Sweden, the Government of Finland, the Government of Italy, the Italian Agency for Development Cooperation (AICS), the Swiss Agency for Development and Cooperation for their generous contributions, which have created a product that will help turn the dreams of the Somalis to reality. We look forward to seeing the findings from this report shaping vital plans in Somalia, including the response of the international community to support the Somalia National Development Plan 9 to attain the Sustainable Development Goals, and response plans for diseases and emergencies, such as the ongoing COVID-19 pandemic, displacement of people due to recurrent droughts, floods and conflicts.

SNBS invites all users of data such as government institutions, international organizations, the donor community, civil society organizations, universities, researchers and the public to play an important role in utilizing the valuable data showcased in the Benadir regional report for making their policies, programmes as well as monitoring and evaluating their progress in order to contribute to the development of the region and the country at large.

## Acknowledgments

The Benadir report was accomplished through the contribution, commitment and dedication of several organisations and individuals.

A team of subject specialists from the Somalia National Bureau of Statistics (SNBS) under the leadership of the Deputy DirectorGeneral Abdirahman Omara Dahir drafted the chapters for this report. We would like to acknowledge Nur Ahmed Weheliye (SHDS Coordinator), Dr. Abdulkadir Wehliye Afrah (Deputy National SHDS Coordinator), Said Abdilaahi Abdi (Technical Lead), Mohamed AbdinurMohamed (Statistician), and Abdulrazak Abdullahi Karie (Demographer) from SNBS for steering this process.

The UNFPA Somalia technical team under the leadership of A Mariam Alwi (Head of Population and Development Unit) provided technical support in the form of advice, review, editing, and proof reading of the document. These are Richard Ng'etich (Statistician), Felix Mulama (Demographer), Zena Lyaga (Demographer), and Kamal Ahmed (Advocacy and Communications).

We express our sincere appreciation to the team for working together with us every step of the way, and for developing our capacity and skills in several areas.

Our gratitude also goes to the Ministry of Health \& Human Services who extensively provided support in the SHDS training and fieldwork in the Benadir region as well as validation of the report. We would like to single out Nur Ali Mohamud (SHDS National Director) and Dr. Abdikadir Afrah Weheliye (Deputy SHDS Coordinator) who led the team from the Ministry. Other members who undertook the validation of the report included: Ibrahim Mohamed Nur (Director Human Resource), Hassan Sheikh (HMIS), Hamdi Osman Aden (MoH), Habib Aden Nur (Global Financing Facility Liaison Officer)

We express our gratitude to the late Mayor and Governor of the Benadir Regional Administration (BRA), Eng Abdirahman, Omar Osman (Yariisow), officials, and all the district commissioners for the support and cooperation extended to the team especially during fieldwork.

## Acronyms

| AIDS | Acquired Immunodeficiency Syndrome |
| :---: | :---: |
| ANC | Antenatal Care |
| ARI | Acute Respiratory Infections |
| ART | Antiretroviral Therapy |
| ASFRs | Age-Specific Fertility Rates |
| BCG | Bacillus Calmette-Guérin [tuberculosis vaccine] |
| BHDS | Benadir Health and Demographic Survey |
| BMI | Body Mass Index |
| BRA | Benadir Regional Administration |
| CAPI | Computer-Assisted Personal Interviewing |
| CBR | Crude Birth Rate |
| CEB | Children Ever Born |
| CM | Centimeter |
| CPR | Contraceptive Prevalence Rate |
| CRVS | Civil Registration and Vital Statistics |
| C-section | Cesarean Section |
| CSPro | Census and Survey Processing System |
| DANIDA | Danish International Development Agency |
| DfID | Department for International Development |
| DHS | Demographic and Health Surveys |
| DNS | Directorate of National Statistics |
| DPT | Diphtheria, Pertussis and Tetanus Vaccine |
| EAs | Enumeration Areas |
| EPHS | Essential Package of Health Services |
| FGM/C | Female Genital Mutilation/Cutting |
| FGS | Federal Government of Somalia |
| GAR | Gross Attendance Ratios |
| GBV | Gender-Based Violence |
| GDP | Gross Domestic Product |
| GFR | General Fertility Rate |
| GIS | Geographic Information System |
| GPI | Gender Parity Index |
| HC | Health Centers |
| HIV | Human Immunodeficiency Virus |
| ICPD | Internal Conference on Population Development |
| IUD | Intra Uterine Device |
| IYCF | Infant and Young Child Feeding |
| KG | Kilogram |
| LAM | Lactational Amenorrhea |


| MCH | Maternal Child Health |
| :---: | :---: |
| MICS | Multiple Indicator Cluster |
| MMR | Maternal Mortality Ratio |
| MOH | Ministry of Health |
| MoPIED | Ministry of Planning, Investment and Economic Development |
| MTCT | Mother-to-child transmission |
| NA | Not Applicable |
| NAR | Net Attendance Ratios |
| NDP | National Development Plan |
| NLWs | Nomadic Link Workers |
| ORS | Oral Rehydration Salts |
| ORT | Oral Rehydration Therapy |
| P \& D | Population and Development |
| PAPFAM | Pan Arab Project for Family Health |
| PESS | Population Estimation Survey of Somalia |
| PHU | Primary Health Unit |
| PNC | Postnatal Care |
| PPS | Probability Proportional to Size |
| PSU | Primary Sampling Units |
| RHF | Recommended Home Fluids |
| SD | Standard Deviation |
| SDGs | Sustainable Development Goals |
| SGBV | Sexual and Gender-Based Violence |
| SHDS | Somali Health and Demographic Survey |
| SHS | Second-Hand Smoke |
| SNBS | Somali National Bureau of Statistics |
| SPSS | Statistical Package for the Social Science |
| SSUs | Secondary Sampling Units |
| STD | Sexually Transmitted Diseases |
| STIS | Sexually Transmitted Infections |
| TBA | Traditional Birth Attendant |
| TFR | Total Fertility Rate |
| TNG | Transitional National Government |
| ToTs | Training of Trainers |
| TTI | Tetanus Toxoid injections |
| UNFPA | United Nations Population Fund |
| UNICEF | United Nations Children's Fund |
| US | United States |
| USD | United States Dollar |
| USUs | Ultimate Sampling Units |
| WHO | World Health Organization |

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## Sustainable Development Goal Indicators

| Goal | Indicator | Male | Female | Total |
| :--- | :--- | :--- | :--- | :--- | :---: | :---: |
| HERO |  |  |  |  |
| HUNER |  |  |  |  |

## ? GOOD HEALTH <br> AND WELL-BEING



## Good health and well-being

| 3.1.2 | Proportion of births attended by skilled birth <br> personnel | na | na | 48.6 |
| :---: | :--- | :---: | :---: | :---: |
| 3.7.1 | Proportion of women of reproductive age <br> (aged 15-49 years) who have their need for <br> birth spacing satisfied with modern methods | na | 2.3 | na |
| 3.7.2 | Adolescent birth rates per 1,000 women <br> a) Women aged 15-19 years | na | 143 | na |
| 3.b.1 | Age-standardized prevalence of current <br> tobacco use among persons aged 15 years <br> and older | 7.2 | 1.0 | 4.2 |
|  | Proportion of the target population covered <br> by all vaccines included in their national <br> programme | 10.8 | 9.9 | 10.4 |

## $\Lambda$ QUALITY EDUCATION



## Inclusive and equitable quality education and lifelong learning opportunities for all

4.3.1 Participation rate of youth and adults in formal and non-formal education and training in the last 12 months

| a) Net Attendance Ratio (primary) | 19.3 | 14.7 | 17.1 |
| :--- | :--- | :--- | :--- |
| b) Net Attendance Ratio (secondary) | 22.6 | 19.4 | 21 |

4.6.1 Percentage of population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills
a) Adult literacy
48.2

| Goal |  | Indicator | Male | Female | Total |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |

## Ensure availability and sustainable management of water

CLEAN WATER
AND SANITATION

and sanitation for all

6.1.1 \begin{tabular}{llllll}

6.2.1 \& | Percentage of population using safely |
| :--- |
| managed drinking water services | \& na \& na \& \& 98.0 <br>

| Percentage of population using safely |
| :--- |
| managed sanitation services, including a |
| hand-washing facility with soap and water |
| a) Percentage with basic sanitation service | \& na \& na \& 55.4 <br>

\& | b) Percentage with fixed or mobile |
| :--- | :--- |
| handwashing facility | \& na \& na \& 93.8 <br>

| c) Percentage with a handwashing facility |
| :--- |
| with water and soap available | \& na \& na \& 15.1

\end{tabular}

## Affordable and clean energy

| 7.1.1 | Proportion of population with access to <br> electricity | na | na | 81.6 |
| :--- | :--- | :---: | :---: | :---: |
| 7.1.2 | Proportion of population with primary <br> reliance on clean fuels and technology | na | na | 5.3 |
|  |  |  |  |  |


| Goal | Indicator |  | Male | Female | Total |
| :---: | :---: | :---: | :---: | :---: | :---: |
| (0) DECENT WORK AND <br> ECONOMIC GROWTH | Decent work and economic growth |  |  |  |  |
|  | 8.10.2 | Proportion of adults (15 years and older) with an account at a bank or other financial institution or with a mobile-money-service provider |  |  |  |
|  |  | a) Proportion of adults ( 15 years and older) with an account at a bank or other financial institution | na | 4.7 | na |
|  |  | b) Proportion of adults ( 15 years and older) with with a mobile-money account | na | 87.2 | na |



## Peaceful and inclusive societies for sustainable development, access to justice for all and effective, accountable and inclusive institutions

| 16.1.3 | Proportion of population subjected to <br> physical, psychological or sexual violence in <br> the previous 12 months |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| a) Percentage of women aged 15-49 who <br> have experienced physical violence in the <br> last 12 months | na | 15.7 | na |  |
| b) Percentage of women aged 15-49 who <br> have experienced sexual violence in the last <br> 12 months | na | 2.6 | na |  |
| Proportion of children under 5 years of age <br> whose births have been registered with a <br> civil authority | 6.4 | 5.5 | 6 |  |

Partnerships for the goals

| 17.8.1 | Proportion of individuals who used Internet <br> in the last 12 months | na | 36.9 | na |
| :--- | :--- | :--- | :--- | :--- | in the last 12 months




## Chapter 1

## Introduction

Mogadishu is one of the old cities in East Africa along the coast of the Indian Ocean. Over many centuries, it has emerged as the most important urban trade centre in Somalia. Geographically, Mogadishu is, situated strategically along the Indian Ocean coast. Since independence, Mogadishu is the capital city of Somalia.

The name Benadir is used for administrative purpose, and is derived from the former "Benadir Region" which consisted of the two Shabelle regions and capital city Mogadishu and it is now one of the 18 pre-war regions. Thus, in this report, Benadir is used instead of Mogadishu. In the post-independence period, the city continued to expand its role and having a large population it became the political, economic and cultural centre of the country. Furthermore, all government institutions providing services to people were present and it was the hub of commercial, financial and industrial processing activities. Before the civil war erupted, Mogadishu had all the economic, social and cultural facilities that a modern city is supposed to have.

Following the fall of the former military regime, Benadir region, suffered most from the civil war that engulfed Somalia in the 1990s. All the economic and social facilities were destroyed or made dysfunctional; especially the government owned institutions and the population of the region was severely affected by the civil conflict, in a sense that a large number of its population was forced to leave the region, while others left voluntarily to find safe places.

Because of the long civil conflict, the city lost its role of being the political and economic centre of the country, but because of its resourcefulness, it continued to maintain over time certain level of economic and social activities. After the formation of the Transitional National Government (TNG) in 2000, certain activities geared towards economic recovery and the revival of public institutions were initiated.

As Somalia's capital city, many important national institutions are based in Mogadishu. It was the seat of the internationally recognized Transitional Federal Government (TFG); it constituted the executive branch of government. With the end of TFG's interim mandate, The Federal Government of Somalia was established on the 20th August 2012, it represents the first central Federal government in the country since the start of the civil war.

The security situation has significantly improved. This has had a positive impact in the revival and reconstruction of public institutions (such as Mogadishu Port, Airport, and main road networks) and attracted private sector investment that has contributed to remarkable achievements in areas of real estate construction and social service sectors over the last 10 years. This has resulted in reopening of processing factories, a number of large communication, remittances, security, finance and real estate firms are established. Among the very significant ones are banking services via a swift code system.

In addition, the region has experienced a population influx, comprising of former residents as well as new comers. It is also important to note that a number of countries have reopened their embassies and consulates in Benadir.

## Survey Objectives and Organization

The main objective of the Somali Health and Demographic Survey (SHDS) was to provide evidence on the health and demographic characteristics of the Somali population that will guide the development of programmes and formulation of effective policies. This information will also help monitor and evaluate international, national, sub-national and sector development plans, including the Sustainable Development Goals (SDGs), both by the government and development partners. The specific objectives were to:

- Estimate maternal and adult mortality

O Examine basic indicators of maternal and child health

- Measure fertility and birth spacing
- Describe patterns of knowledge and awareness of the Human Immunodeficiency Virus (HIV) and other sexually transmitted infections
- Estimate infant and child mortality
- Understand the extent and patterns of gender-based violence and female circumcision


## Sample Design

The sample was designed to provide estimates of key indicators for the country as a whole, for each of the eighteen pre-war geographical regions, which are the country's first-level administrative divisions, as well as separately for urban, rural and nomadic areas, with the exception of Benadir, which is considered urban. Through the use of up-to-date, high-resolution satellite imagery, as well as on-the-ground knowledge of staff from the respective ministries of planning, all dwelling structures digitized in urban and rural areas. Enumeration Areas (EAs) were formed onscreen through a spatial count of dwelling structures in a Geographic Information System (GIS) software. Thereafter, a sample ground verification of the

A total of 3,015 EAs were
digitized in Benadir and
each EA created had a
minimum of 50 and a
maximum of 149 dwelling
structures.
digitized structures was carried out for Benadir and necessary adjustments made to the frame.

A total of 3,015 EAs were digitized in Benadir and each EA created had a minimum of 50 and a maximum of 149 dwelling structures. Two hundred and ten (210) EAs were sampled for household listing. Due to security and accessibility constraints, 198 EAs were visited during the household listing. All households were listed and information on births and deaths recorded using the maternal mortality questionnaire. The data collected in this first phase was cleaned and a summary of households listed per EA produced which formed the sampling frame for the second phase. In the second stage, 60 EAs were sampled out of the possible 198 that were listed, using probability proportional to the number of EAs. All households in each of these 60 EAs were serialized based on their location in the EA. On Average, 30 households were selected from each EA using probability proportional to the number of households, yielding 1,800 households for the survey.

## Questionnaires

Four types of questionnaires were used; the Maternal Mortality Questionnaire (MMR), the Household Questionnaire and two individual questionnaires—Ever Married Woman's Questionnaire and Never Married Woman's Questionnaire.

## Maternal Mortality Questionnaire

A stand-alone Maternal Mortality Questionnaire was used in all households during the listing phase to identify maternal deaths in the two years preceding the survey. This allowed the estimation of the Maternal Mortality Ratio (MMR) using a direct method. The methodology was adopted from the Yemen National Health and Demographic Survey carried out in 2013 and was used to obtain a more current estimate of the maternal mortality in Somalia.

## Household and Individual Questionnaires

The Household Questionnaire, Ever-married Woman's Questionnaire, and Never-married Woman's Questionnaire were based on Yemen Health and Demographic Survey 2013 instruments, and were adapted to reflect the relevant population and health issues in the Somali context. The questionnaires were further updated with relevant sections of the Demographic and Health Surveys (DHS) Program's standard Demographic and Health Survey Questionnaires (DHS7). Input was solicited from various stakeholders representing government agencies, particularly the ministries of health and planning, as well as international development partners. After the preparation of the questionnaires in English, they were translated into Somali. The questionnaires were further tested and refined in the field to ensure that culturally and religiously sensitive questions
were appropriately worded. The Household Questionnaire was used to list all of the members of and visitors to the selected households. Basic demographic information was collected on the characteristics of each person listed, including his or her age, sex, marital status, education, and relationship to the head of the household. For children under the age of 18, parents' survival status was determined. The data obtained from the Household Questionnaire was used to identify ever and never-married women eligible to be interviewed with the relevant individual questionnaire and those persons eligible for anthropometric measurements. The Household Questionnaire also collected information on the characteristics of the household's dwelling unit, such as their source of drinking water; type of sanitation facility; materials used for the floor, walls, and roof of the dwelling unit; and ownership of various durable goods. In addition, the questionnaire included questions about disability, as well as out-of-pocket expenditure on health.

The Ever-married Woman's Questionnaire was used to collect information from all women aged 12 to 49 years who were currently married, divorced, abandoned, or widowed. In all households, eligible women were asked questions on the following topics:

Background characteristics, such as age, education, literacy and media exposure | Birth history and child mortality
O Knowledge and use of family planning methods

- Antenatal care, delivery, and postnatal care

O Breastfeeding and infant feeding practices

- Vaccinations and children's illnesses
- Marriage and sexual activity
- Fertility preferences
- Women's work and partners' background characteristics

O Knowledge of HIV/AIDS and methods of HIV transmission

- Adult and pregnancy-related mortality The Never-married Woman's Questionnaire was used to collect information from all women aged 15 to 49 years who had never been married. In all households, eligible women were asked questions on the following topics:
- Background characteristics, such as age, education, literacy and media exposure
O Violence against women

In this survey, Computer-Assisted Personal Interviewing (CAPI) was used, with interviewers using smart phones to record responses during interviews. The phones were equipped with Bluetooth technology to enable remote electronic transfer of completed questionnaires from interviewers to supervisors. Supervisors transferred completed files to the CSWeb server 1 instances whenever internet connectivity was available. Any revision to the questionnaire was received by the supervisors and interviewers by simply synchronizing their phones with the CSWeb server, which was created specifically for the survey. The CAPI data collection

In this survey, ComputerAssisted Personal Interviewing (CAPI) was used, with interviewers using smart phones to record responses during interviews.
system employed iwas developed by UNFPA using the mobile version of the Census and Survey Processing System (CSPro)2. The CSPro software was developed jointly by the U.S. Census Bureau, the DHS Program and Serpro S.A.

## Training

Household listing and MMR Training was conducted in Benadir. 50 participants took part in the training and was facilitated by SHDS technical team from Directorate of National Statistics. The participants were trained in household listing concepts (identification of structures, dwelling units, and EA boundaries), interview techniques, interviewers' and supervisors' roles, age probing techniques, fieldwork procedures, sampling techniques, importance of data on births and deaths, recognizing and handling age inconsistencies, identification of maternal deaths and CSPro mobile data collection application. A pretest was carried out using both paper questionnaires and CAPI to assess the understanding of the trainees. Modifications were made to the questionnaire and survey methods, based on lessons drawn from the pretest. Participants were assessed through both theoretical evaluations in class as well as observations made on their survey implementation during the pretest.

For the Main Survey Training, SHDS technical team from the ministry of Health facilitated the Benadir Main Survey training in Benadir 50 participants took part in the training. More interestingly, all data collectors were female health professionals (nurses, midwives and doctors). At the end of training, a pretest was conducted using manual questionnaires and CAPI to ensure that all the trainees had acquired a minimum level of knowledge and skills required for the SHDS. The selection of supervisors was based on performance in both in-class assessments and field pretests.

## Fieldwork

The listing of households and MMR data collection began on 3rd May, 2018 and completed on 6th June, 2018. It took 27 days excluding Fridays, and three other days that field staff was attending interviews conducted by the National civil service authority in the ministry of planning as an employee assessment. The Fieldwork was carried out by 9 teams, each consisting of one supervisor and four enumerators.

The Main Survey Fieldwork in Benadir began on 1st November and completed on 9th December, 2018. Selected households were obtained from a complete list of households in the EA. Data collectors were supported by the listing team who were well-versed in reading maps and could identify the EA boundaries as well as the selected households. Each interviewer collected data from approximately two households per day.

## Response Rates

A total of 1,800 households were selected for the sample, of which 1,720 were successfully interviewed yielding a response rate of 96 percent.

Table 1.1 Results of the household and individual interviews

Number of households, number of interviews, and response rates,(unweighted), SHDS 2020
Result Total

Household interviews
Selected households 1800
Households interviewed 1720
Household response rate 95.6
Interviews with all women aged
15-49
Number of eligible women 2323
Number of eligible women 2255
interviewed
Eligible women response rate 97.1


## Key Findings

AGE STRUCTURE
53\%
of household members are below 15 years of age

HOUSEHOLD HEADSHIP
31\%
of household heads are women.

EDUCATION


52\%
of Benadir household members aged 6 and above have never been to school

DRINKING WATER
98\%
of households use an improved source of drinking water.

SANITATION
85\%
of households have an improved sanitation facility.

MOBILE PHONE OWNERSHIP
of households own a mobile phone.

BIRTH REGISTRATION


6\%
of children under the age of 5 have their birth registered.

## Chapter 2

# Household and Housing Characteristics 


#### Abstract

The BHDS 2020 collected information from all usual residents of a selected household (de jure population) and persons who had stayed in the surveyed household the night before the interview (de facto population). Although the difference between these two populations is small, to avoid double counting, all tables in this report refer to the de facto population, unless otherwise specified.


## 3OX 2.1 Key definitions

## Household

A person or group of related or unrelated persons who live together in the same dwelling unit(s) or in connected premises, who acknowledge one adult, male or female, as the head of the household, who share the same housekeeping arrangements, and who are considered a single unit.

## De facto population

All persons who stayed in the selected households the night before the interview (whether usual residents or visitors).

## De jure population

All persons who are usual residents of the selected households, whether or not they stayed in the household the night before the interview.

Age in completed years (Age at last birthday)

This is the most common definition of age, where it is expressed as the number of completed years lived by a person. Other definitions include exact age, which is used mostly for modelling purposes, and age reached during the year.

## Household and Housing Characteristics

## Age and Sex Composition:

Age and sex are important demographic variables that are the primary basis of demographic classification in vital statistics, census and surveys. They are the basis for studying patterns of mortality, fertility, fertility preference, age at first marriage and other information about the inhabitants of a country.

Information on age in completed years for each household member was collected. When the age was not known, interviewers asked for dates of birth in the Gregorian calendar/Somali historical calendar. Age was then calculated using conversion charts, specifically designed for this purpose.

Table 2.1 presents the distribution of households members, by age and sex. The age structure of the household members is typical of a society with a young population. Benadir has a broad-based age pyramid, with 53 percent of household members below 15 years of age. The sex and age distribution of the household members is presented in the population pyramid in (Figure 2.1).

The population pyramids in Figure 2.1 is in line with a developing country's population where there is a high fertility and mortality rate, which demographically represents a young population. There are more boys than girls among children under the age of 15 .

The age pyramids in Figure 2.1 sharply taper to become narrower above age 64. This indicates high mortality rates among the older age groups. Sixty-four percent of Benadir's population is below 20 years of age and 78 percent are below the age of 30 . Youth between 15-29 years of age constitute 26 percent of household members, while older people ( 65 years and above) constitute only 3 percent of the household members. Forty-five percent of household members


## 39\%

of female household members are within childbearing age (15-49 years)
are within the working age population (15-64 years), highlighting the need to create jobs and ensure that training or education offered addresses the needs of the labour market (Table 2.1).

The findings show that 39 percent of female household members are within childbearing age (15-49 years) as shown in Table 2.1. The large number of potential mothers creates a population momentum and is a strong indication of a potential spike in population growth that Benadir is likely to experience in the coming years.

## Household Composition

Table 2.2 shows the distribution of households covered by sex of head of household and number of household members. The average household size in Benadir is 6.9 persons compared to 6.2 persons nationally according to the Somali Health and Demographic Survey Report (SHDS, 2020). Table 2.2 also indicates that 36 percent of households have a foster child and/or orphaned children, 19 percent have foster children, 19 percent have single orphans and 4 percent have double orphans.

## Education

The level of education is an important characteristic, as it affects behaviour, including health-related behaviours and choices made in relation to reproduction, contraceptive use, child health, and hygiene. Access to education is considered a human right that inherently influences the development of a country. It is one of the key national services that would guarantee orphans and children from different backgrounds equal access to better lives as they grow up.

> 40\%
> of children are
> attending primary
> school. $17 \%$ are of the appropriate age.

Information on educational attainment of the total, male and female household members aged six and above is presented in Tables 2.3a, 2.3 b , and 2.3 c . The results show that educational attainment varies across age groups.

Table 2.3a shows 52 percent of Benadir household members have never gone to school. Twenty-two percent of household members went to primary school, whereas 16 percent went to secondary school, in comparison to 9 percent who went to higher education. The age groups with the least number of people with no education are 15-19 and 20-24 years at 26 percent.

Overall, 55 percent of the female population aged 6 and above have never been to school, in comparison to 50 percent of males. Twenty-four percent of female household members and 21 percent of male household members have had primary education. Fourteen percent of women have attained secondary education, compared to 17 percent of men (Table 2.3b and Table 2.3c).

## School Attendance Ratios

Table 2.4 presents data on net attendance ratios (NARs) and gross attendance ratios (GARs) by school level and sex. The NAR for primary schooling is measured as the proportion of children aged 6-13 attending primary school, and for secondary schooling the population aged 14-17. The GAR for primary schooling is measured as the total number of primary school students relative to the official primary-school-age population; similarly, GAR for secondary schooling refers to the number of secondary school students relative to the official secondary-school-age population. The GAR is nearly always higher than the NAR for the same level because the GAR includes participation by those who may be older or younger than the official age range for that level. A NAR of 100 would indicate that all those in the official age range for the specific level are attending school at that level. The GAR can exceed 100 if there is significant overage or underage participation at a given level of schooling. Overall GAR at primary and secondary levels are at 40 and 32 percent respectively. Both at the primary and secondary levels, the GAR is higher among males than females.

Seventeen percent of children attending primary school are of the right age for that level. At secondary level, 21 percent of children attending are of the right age for that level. The NAR is relatively higher for boys than girls at primary level at 19 percent and 15 percent respectively. Similarly, the NAR is also higher for males than females at secondary level, at 23 percent and 19 percent respectively (Table 2.4).

The Gender Parity Index (GPI) measures sex-related differences in school attendance ratios. It is the ratio of female to male attendance. A GPI of 1 indicates parity, or equality, between school participation
ratios for males and females. A GPI lower than 1 indicates a gender disparity in favour of males, this means a higher proportion of males compared to females attend that level of schooling. A GPI higher than 1 indicates a gender disparity in favour of females. GPI for primary school attendance is slightly lower than 1 ( 0.8 for NAR and 0.8 for GAR). For secondary school attendance it is also lower than 1 ( 0.9 for both NAR and 0.8 for GAR). This indicates that the gender gap is almost the same at the primary and secondary levels of schooling (Table 2.4).

## Housing Characteristics

## Water Supply

Somalia's National Development Plan (NDP9), as well as SDG's addresses access to clean water. The different types of water sources and sanitation facilities available to a population are determinants of health, particularly among children. Good hygienic and sanitation practices can reduce exposure to and repercussions of preventable diseases. Conversely, poor quality of water and water scarcity also shape livelihood choices.

The source of drinking water for a household is an indicator of how safe it is to consume. Safe water sources include piped water, protected dug wells, tube wells or boreholes, rainwater, and bottled water. Lack of access to a water source may limit the quantity of suitable drinking water that is available to a household. Even where water is obtained from an improved source, if it is fetched from a source that is not immediately accessible to a household, it may be contaminated during transportation or storage. By treating water effectively at home, families can improve the quality of household drinking water.

Figure 2.2 Improved sources of drinking water
Percent distribution of population by improved sources of drinking water


85\%
percent of
households in
Benadir use improved toilet facilities

Figure 2.3 Household sanitation facilities

Percent distribution of households by type of toilet/latrine facilities in use

## 1.3



The prevalence of preventable water-borne diseases such as diarrhoea and dysentery in Benadir and the country as a whole can be reduced by introducing and using improved water sources that are readily available to the households. Table 2.5a shows that 98 percent of households in Benadir get their drinking water from improved water sources as compared to 65 percent nationally (SHDS, 2020).

Eighty-Four percent of population in Benadir have access to piped water into their dwelling, yard or plot (Figure 2.2). One percent of households travel for at least 30 minutes or more to get water. As shown in Table 2.5b, 31 percent of households treat their water before drinking it. The most common method of water treatment is bleaching/chlorination, used by thirty percent of households.

## Sanitation Facilities

With adequate sanitation and means of disposal of human excreta, which are both fundamental needs and human rights, as well as with personal hygiene, people are assured the ability to maintain their dignity and protection from a large number of diseases.

Inadequate disposal of human excreta and personal hygiene is associated with a range of diseases including diarrhoeal diseases. Improved sanitation can reduce diarrheal disease by more than a third (Cairncross S., Hunt C., Boisson S., et al., 2010), and can significantly lessen the adverse health impacts of other disorders responsible for death and disease among millions of children in developing countries. An improved sanitation facility is defined as one that hygienically separates human excreta from human contact. Improved sanitation facilities for excreta disposal include flush or pour flush to a piped sewer system, septic tank, or pit latrine, ventilated improved pit latrine, pit latrine with slab and the use of a composting toilet. The survey considers improved toilets as those that flush or pour flush into a septic tank. A household is classified as having a basic toilet facility if the toilet is used by only members of one household (i.e. it is not shared) and if the facility used by the household separates the waste from human contact.

Figure 2.3 shows that 85 percent of households in Benadir use sanitation facilities with sanitation services that would be considered as improved toilet facilities. However, 51 percent of households have access to basic sanitation services (improved toilet facilities that are not shared with other households) (Table 2.6) as compared to 21 percent nationally (SHDS, 2020). As indicated in Figure 2.3, the prevalence of open defecation in Benadir is one percent while the national prevalence is at 21 percent (SHDS, 2020).

## Keeping up with

technological advances
and connecting with friends and family is a top priority for many households in Benadir

## Flooring Material, Lighting and Cooking Arrangements

Table 2.7 presents the distribution of households by dwelling characteristics and amenities. Seventy-nine percent of households use electricity. The kind of flooring used in a house can be indicative of the lifestyle its inhabitants live. Fifty-two percent of dwellings have floors made of earth or sand while 34 percent of households have floors made of cement. Charcoal is the most common source of fuel used for cooking at 82 percent, followed by firewood and electricity at 9 percent and 4 percent respectively.

## Household Possessions

Information on the ownership of durable goods and other possessions is presented in Table 2.8. The availability of durable consumer goods is an indicator of a household's socioeconomic status and access to various benefits. For example, access to the radio can increase exposure to innovative ideas, whereas transport vehicles can provide access to services outside of a local area.

Keeping up with technological advances and connecting with friends and family is a top priority for many households in Benadir. As shown in Figure 2.4, 36 percent of households in Benadir own a television, 80 percent own a mobile telephone while 28 percent of households have internet connectivity.

## Household Wealth

The survey did not collect data on consumption or income, but the information collected on dwelling and household population characteristics, consumer goods, and assets is used as a measure of socioeconomic status. Wealth index is an indicator of the relative


> Six percent of children under the age of two were registered, of which less than 1 percent had a birth certificate. These figures may be significantly low due to the lack of civil registration and the lack of vital statistical systems.
level of wealth that is used as a proxy for expenditure and income measures. Each household asset for which information is collected is assigned a 'weight' or 'factor score' generated through principal components analysis. The resulting asset scores are standardized in relation to a standard normal distribution with a mean of zero and a standard deviation of one.

Table 2.9 shows the distribution of the household population into five wealth quintiles. The middle and fourth quintile have the highest proportion of household population at 25 and 24 percent respectively. The lowest quintile has the least proportion of the household population at 12 percent.

## Birth Registration

Registration of birth is the inscription of the facts of a birth into an official log. A birth certificate is issued as proof of the registration. Information on registration of births was collected in the household interviews by asking whether children under the age of 5 had a birth certificate. If the interviewer was informed that the child did not have a birth certificate, then he/she probed further to ascertain whether the child's birth had been registered with the civil authority. Almost all children did not have a birth certificate. Six percent of children under the age of two were registered, of which less than 1 percent had a birth certificate. These figures may be significantly low due to the lack of civil registration and the lack of vital statistical systems. The levels of registration were generally low as presented in Table 2.10.


Table 2.1
Household population by age and sex
Percent distribution of the de facto household population by various age groups and percentage of the de facto household population age, according to sex, BHDS 2020

| Background characteristics | Male | Female | Total |
| :---: | :---: | :---: | :---: |
| Age |  |  |  |
| <5 | 18.9 | 17.4 | 18.1 |
| 5-9 | 18.5 | 17.4 | 17.9 |
| 10-14 | 16.5 | 16.4 | 16.4 |
| 15-19 | 11.9 | 11.7 | 11.8 |
| 20-24 | 7.8 | 7.5 | 7.6 |
| 25-29 | 5.4 | 7.0 | 6.2 |
| 30-34 | 4.2 | 4.9 | 4.6 |
| 35-39 | 3.7 | 4.0 | 3.8 |
| 40-44 | 3.1 | 2.3 | 2.7 |
| 45-49 | 1.6 | 1.5 | 1.5 |
| 50-54 | 2.2 | 4.2 | 3.2 |
| 55-59 | 1.4 | 1.3 | 1.3 |
| 60-64 | 2.2 | 1.7 | 2.0 |
| 65-69 | 0.7 | 0.6 | 0.7 |
| 70-74 | 1.0 | 1.2 | 1.1 |
| 75-79 | 0.3 | 0.3 | 0.3 |
| 80+ | 0.5 | 0.9 | 0.7 |
| Total | 100 | 100 | 100 |

Dependency age groups

| 0-14 | 53.9 | 51.1 | 52.5 |
| :--- | ---: | ---: | ---: |
| $15-64$ | 43.6 | 46.0 | 44.8 |
| 65+ | 2.5 | 2.9 | 2.7 |
| Total | $\mathbf{1 0 0 . 0}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{1 0 0 . 0}$ |
| Child and adult populations |  |  |  |
| 0-17 | 61.1 | 58.2 | 59.6 |
| 18+ | 38.9 | 41.8 | 40.4 |
| Total | $\mathbf{1 0 0 . 0}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{1 0 0 . 0}$ |
| Adolescents 10-19 | 28.4 | 28.0 | $\mathbf{2 8 . 2}$ |
| Number of persons | 5,872 | 5,994 | $\mathbf{1 1 , 8 6 6}$ |


| Table 2.2 |  |
| :--- | :--- |
| Percent distribution of households by sex of household head, household size; mean household size, and percentage of households |  |
| with orphans and foster children under 18 years of age, BHDS 2020 |  |
| Background characteristics | Percent |
| Household headship |  |
| Male | 69.2 |
| Female | 30.8 |
| Total | $\mathbf{1 0 0 . 0}$ |
| Number of usual members | 1.9 |
| 1 | 4.2 |
| 2 | 6.6 |
| 3 | 10.3 |
| 4 | 12.6 |
| 5 | 13.5 |
| 6 | 13.5 |
| 7 | 9.9 |
| 8 | 27.4 |
| $9+$ | $\mathbf{1 0 0}$ |
| Total | 6.9 |
| Mean household size | 19.0 |
| Percentage of households with orphans and foster children under 18 | 4.1 |
| Foster children ${ }^{1}$ | 18.8 |
| Double orphans | 35.5 |
| Single orphans ${ }^{2}$ | 1,720 |
| Foster and/or orphan children |  |
| Number of households |  |
| Note: Table is based on de jure household members, i.e., usual residents |  |
| ${ }^{1}$ Foster children are those under age 18 years of age living in households with neither their mother nor their father present |  |

Table 2.3a Educational attainment of the household population
Percent distribution of the de facto household populations age six and over by highest level of schooling attended or completed, according to background characteristics, BHDS 2020

| Background characteristic | Educational attainment of the household members |  |  |  |  | Total | Number of household members |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No education | Primary ${ }^{1}$ | Secondary ${ }^{2}$ | Higher education | Don't know |  |  |
| Age |  |  |  |  |  |  |  |
| 6-9 | 90.0 | 10.0 | 0.0 | 0.0 | 0.0 | 100 | 1,331 |
| 10-14 | 50.3 | 41.7 | 7.6 | 0.0 | 0.4 | 100 | 1,654 |
| 15-19 | 25.8 | 22.2 | 37.7 | 13.4 | 0.9 | 100 | 1,106 |
| 20-24 | 25.8 | 15.1 | 22.2 | 35.9 | 1.1 | 100 | 644 |
| 25-29 | 40.0 | 17.9 | 21.5 | 20.4 | 0.2 | 100 | 442 |
| 30-34 | 47.3 | 14.9 | 19.6 | 16.4 | 1.8 | 100 | 275 |
| 35-39 | 60.9 | 14.5 | 15.9 | 6.8 | 1.9 | 100 | 207 |
| 40-44 | 59.2 | 15.5 | 18.3 | 6.3 | 0.7 | 100 | 142 |
| 45-49 | 49.4 | 16.9 | 19.3 | 12.0 | 2.4 | 100 | 83 |
| 50-54 | 52.7 | 19.5 | 20.7 | 5.9 | 1.2 | 100 | 169 |
| 55-59 | 50.0 | 12.9 | 20.0 | 15.7 | 1.4 | 100 | 70 |
| 60-64 | 64.4 | 10.3 | 14.9 | 9.2 | 1.1 | 100 | 87 |
| 65+ | 74.5 | 5.1 | 11.2 | 8.2 | 1.0 | 100 | 98 |
| Total | 52.2 | 22.3 | 15.6 | 9.3 | 0.7 | 100.0 | 6,308 |

${ }^{1}$ Completed $8^{\text {th }}$ grade at the primary level
${ }^{2}$ Completed $122^{\text {th }}$ grade at the secondary level

Table 2.3b Educational attainment of the male household population

Percent distribution of the de facto male household populations age six and over by highest level of schooling attended or completed, according to background characteristics, BHDS 2020

Educational attainment of the male household members
Background
characteristic
No education Primary ${ }^{1} \quad$ Secondary ${ }^{2}$

Age

| $6-9$ | 88.8 | 11.2 | 0.0 | 0.0 | 0.0 | 100.0 | 734 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| $10-14$ | 48.8 | 43.9 | 7.0 | 0.0 | 0.4 | 100.0 | 855 |
| $15-19$ | 25.3 | 21.5 | 37.1 | 14.9 | 1.2 | 100.0 | 590 |
| $20-24$ | 22.5 | 10.1 | 25.9 | 40.0 | 1.4 | 100.0 | 355 |
| $25-29$ | 31.4 | 12.3 | 27.3 | 28.6 | 0.5 | 100.0 | 220 |
| $30-34$ | 41.5 | 13.4 | 20.7 | 21.3 | 3.0 | 100.0 | 164 |
| $35-39$ | 56.5 | 9.7 | 20.2 | 10.5 | 3.2 | 100.0 | 124 |
| $40-44$ | 60.0 | 11.0 | 19.0 | 9.0 | 1.0 | 100.0 | 100 |
| $45-49$ | 49.0 | 12.2 | 22.4 | 16.3 | 0.0 | 100.0 | 49 |
| $50-54$ | 48.8 | 13.8 | 27.5 | 10.0 | 0.0 | 100.0 | 80 |
| $55-59$ | 44.9 | 8.2 | 22.4 | 22.4 | 2.0 | 100.0 | 49 |
| $60-64$ | 53.2 | 12.9 | 19.4 | 12.9 | 1.6 | 100.0 | 62 |
| $65+$ | 71.4 | 3.2 | 14.3 | 9.5 | 1.6 | 100.0 | 63 |
| Total | $\mathbf{5 0 . 2}$ | $\mathbf{2 1 . 0}$ | $\mathbf{1 6 . 7}$ | $\mathbf{1 1 . 3}$ | $\mathbf{0 . 8}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{3 . 4 4 5}$ |

[^0]Table 2.3c Educational attainment of the female household population
Percent distribution of the de facto female household populations age six and over by highest level of schooling attended or completed, according to background characteristics, BHDS 2020

| Background characteristics | Educational attainment of the female household members |  |  |  |  | Total | Number of females |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No education | Primary ${ }^{1}$ | Secondary ${ }^{2}$ | Higher education | Don't know |  |  |
| Age |  |  |  |  |  |  |  |
| 6-9 | 91.5 | 8.5 | 0.0 | 0.0 | 0.0 | 100.0 | 597 |
| 10-14 | 51.9 | 39.3 | 8.3 | 0.0 | 0.5 | 100.0 | 799 |
| 15-19 | 26.4 | 23.1 | 38.4 | 11.6 | 0.6 | 100.0 | 516 |
| 20-24 | 29.8 | 21.1 | 17.6 | 30.8 | 0.7 | 100.0 | 289 |
| 25-29 | 48.6 | 23.4 | 15.8 | 12.2 | 0.0 | 100.0 | 222 |
| 30-34 | 55.9 | 17.1 | 18.0 | 9.0 | 0.0 | 100.0 | 111 |
| 35-39 | 67.5 | 21.7 | 9.6 | 1.2 | 0.0 | 100.0 | 83 |
| 40-44 | 57.1 | 26.2 | 16.7 | 0.0 | 0.0 | 100.0 | 42 |
| 45-49 | 50.0 | 23.5 | 14.7 | 5.9 | 5.9 | 100.0 | 34 |
| 50-54 | 56.2 | 24.7 | 14.6 | 2.2 | 2.2 | 100.0 | 89 |
| 55-59 | 61.9 | 23.8 | 14.3 | 0.0 | 0.0 | 100.0 | 21 |
| 60-64 | 92.0 | 4.0 | 4.0 | 0.0 | 0.0 | 100.0 | 25 |
| 65+ | 80.0 | 8.6 | 5.7 | 5.7 | 0.0 | 100.0 | 35 |
| Total | 54.6 | 23.9 | 14.3 | 6.7 | 0.5 | 100.0 | 2,863 |
| ${ }^{1}$ Completed $8^{\text {th }}$ grade at the primary level |  |  |  |  |  |  |  |
| ${ }^{2}$ Completed $12{ }^{\text {th }}$ | rade at the seco | ry level |  |  |  |  |  |

Table 2.4
School attendance ratio

Net attendance ratios (NAR) and gross attendance ratios (GAR) for the defacto household population by sex and level of schooling and Gender Parity Index (GPI), according to background characteristics, BHDS 2020

|  | Net Attendance Ratio ${ }^{1}$ |  |  |  | Gross Attendance Ratio ${ }^{\mathbf{2}}$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Male | Female | Total | Gender Parity Index ${ }^{3}$ | Male | Female | Total | Gender Parity Index ${ }^{3}$ |
| PRIMARY |  |  |  |  |  |  |  |  |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 4.8 | 26.3 | 15.0 | 5.5 | 4.8 | 31.6 | 20.0 | 6.6 |
| Second | 7.2 | 5.7 | 6.6 | 0.8 | 12.6 | 10.3 | 19.7 | 0.8 |
| Middle | 16.0 | 8.4 | 12.4 | 0.5 | 29.6 | 18.5 | 29.8 | 0.6 |
| Fourth | 18.1 | 14.6 | 16.4 | 0.8 | 37.7 | 30.7 | 40.9 | 0.8 |
| Highest | 29.4 | 22.2 | 25.8 | 0.8 | 54.6 | 45.3 | 55.5 | 0.8 |
| TOTAL | 19.3 | 14.7 | 17.1 | 0.8 | 36.9 | 30.2 | 39.9 | 0.8 |
| SECONDARY |  |  |  |  |  |  |  |  |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 8.3 | 0.0 | 5.3 | 0.0 | 8.3 | 0.0 | 5.3 | 0.0 |
| Second | 1.2 | 2.7 | 1.9 | 2.4 | 3.5 | 4.1 | 3.8 | 1.2 |
| Middle | 14.7 | 11.4 | 13.0 | 0.8 | 20.0 | 15.1 | 17.4 | 0.8 |
| Fourth | 21.8 | 19.1 | 20.4 | 0.9 | 32.2 | 26.5 | 29.2 | 0.8 |
| Highest | 34.4 | 27.9 | 31.0 | 0.8 | 58.8 | 41.1 | 49.4 | 0.7 |
| TOTAL | 22.6 | 19.4 | 21.0 | 0.9 | 36.1 | 27.7 | 31.8 | 0.8 |

${ }^{1}$ The NAR for primary school is the percentage of the primary-school age (6-13 years) population that is attending primary school. The NAR for secondary school is the percentage of the secondary-school age (14-17 years) population that is attending secondary school. By definition the NAR cannot exceed 100 percent
${ }^{2}$ The GAR for primary school is the total number of primary school students, expressed as a percentage of the official primary-school-age population.
The GAR for secondary school is the total number of secondary school students, expressed as a percentage of the official secondary-school-age population.
If there are significant numbers of overage and underage students at a given level of schooling, the GAR can exceed 100 percent
${ }^{3}$ The Gender Parity Index for primary school is the ratio of the primary school NAR (GAR) for females to the NAR(GAR) for males. The Gender Parity Index for secondary school is the ratio of the secondary school NAR (GAR) for females to the NAR(GAR) for males.

## Table 2.5a <br> Household drinking water

Percent distribution of households and de jure population by source of drinking water and by time to obtain drinking water; percentage of households and de jure population with basic drinking water service and percentage with limited drinking water service, BHDS, 2020

| Background characteristics | Households | Population |
| :---: | :---: | :---: |
| Source of drinking water |  |  |
| Improved source | 97.7 | 98.0 |
| Piped water into dwelling/ yard/plot | 82.2 | 84.2 |
| Piped to neighbor | 3.8 | 2.9 |
| Public tab/ standpipe | 5.1 | 4.7 |
| Tube well/ borehole | 1.8 | 1.7 |
| Protected dug well | 4.4 | 4.1 |
| Protected spring | 0.1 | 0.1 |
| Rainwater | 0.0 | 0.0 |
| Bottled water | 0.3 | 0.3 |
| Un-improved source | 2.3 | 2.0 |
| Unprotected dug well | 1.5 | 1.3 |
| Unprotected spring | 0.1 | 0.0 |
| Tanker truck/cart with drum | 0.6 | 0.5 |
| Water Kiosk | 0.0 | 0.0 |
| Surface water | 0.0 | 0.0 |
| Other source | 0.2 | 0.2 |
| Missing | 0.0 | 0.0 |
| Total | 100.0 | 100.0 |
| Time to obtain drinking water (round trip) |  |  |
| Water on premises ${ }^{1}$ | 91.3 | 92.1 |
| 30 minutes or less | 7.6 | 6.8 |
| More than 30 minutes | 0.9 | 1.0 |
| DK/Missing | 0.1 | 0.1 |
| Total | 100.0 | 100.0 |
| Drinking water service |  |  |
| Percentage with basic drinking water service ${ }^{2}$ | 96.6 | 96.9 |
| Percentage with limited drinking water service ${ }^{3}$ | 0.9 | 1.0 |
| Number of households | 1,720 | 11,985 |
| ${ }^{1}$ Includes water piped to a neighbor and those reporting a round trip collection time of zero minutes |  |  |
| ${ }^{2}$ Defined as drinking water from an improved source, provided either water is on the premises or round-trip collection time is 30 minutes or less Includes safely managed |  |  |
| ${ }^{3}$ Drinking water from an improved source, provided round-trip collection time is more than 30 minutes |  |  |

Table 2.5b Treatment of household drinking water

Percent distribution of households and de jure population by using various methods to treat drinking water, and percentage using an appropriate treatment method, BHDS 2020

| Water treatment method | Households | Population |
| :--- | ---: | ---: |
| Water treatment prior to drinking ${ }^{1}$ |  |  |
| Boiled | 2.7 | 2.9 |
| Bleach/chlorine added | 29.6 | 30.9 |
| Strained through cloth | 0.2 | 0.2 |
| Ceramic, sand or other filter | 0.1 | 0.1 |
| Solar disinfection | 0.2 | 0.1 |
| Let it stand and settle | 0.1 | 0.1 |
| Other treatment | 0.1 | 0.0 |
| No treatment | 68.0 | 66.6 |
| Don't Know | 31.5 | 32.9 |
| Percentage using an appropriate treatment method | 31.2 | 32.5 |
| Population | 1,720 | 11,985 |

Respondents may report multiple treatment methods so the sum of treatment may exceed 100 percent.

[^1]
## Table 2.6

Household sanitation facilities

Percent distribution of households and de jure population by type of toilet/latrine facilities, percent distribution of households and de jure population with a toilet/latrine facility by location of the facility, percentage of households and de jure population with basic sanitation services, and percentage with limited sanitation services, BHDS 2020

|  | Households | Population |
| :---: | :---: | :---: |
| Type and location of toilet/latrine facility |  |  |
| Improved facility | 85.1 | 86.0 |
| Flush/pour to septic tank | 14.3 | 14.7 |
| Flush/pour to a pit latrine | 19.0 | 19.4 |
| Ventilated improved pit (VIP) latrine | 3.0 | 2.8 |
| Pit latrine with a slab | 48.8 | 49.1 |
| Non-improved facility | 13.5 | 13.0 |
| Flush to some where else | 0.5 | 0.6 |
| Flush/pour flush, don't know where | 0.7 | 0.7 |
| Pit latrine without slab/Open latrine | 11.9 | 11.4 |
| Others | 0.5 | 0.3 |
| Open Defecation | 1.3 | 1.0 |
| Total | 100.0 | 100.0 |
| Number of households/population | 1,720 | 11,985 |
| Location of the facility |  |  |
| In own dwelling | 78.7 | 80.5 |
| In own yard/plot | 11.9 | 11.1 |
| Elsewhere | 7.0 | 6.2 |
| Total | 100.0 | 100.0 |
| Number of households/population with a toilet/latrine facility | 1,720 | 11,985 |
| Percentage with basic sanitation service ${ }^{1}$ | 50.6 | 55.4 |
| Percentage with limited sanitation service ${ }^{2}$ | 33.4 | 29.3 |

[^2]Table 2.7
Household characteristics and social amenities

| Percent distribution of households and de jure population by housing characteristics and percentage using solid fuel for cooking, BHDS 2020 |  |  |
| :---: | :---: | :---: |
|  | Households | Population |
| Housing characteristics |  |  |
| Electricity |  |  |
| Yes | 79.0 | 81.6 |
| No | 21.0 | 18.4 |
| Total | 100.0 | 100.0 |
| Flooring material |  |  |
| Earth/Sand | 52.3 | 51.1 |
| Dung | 1.0 | 1.2 |
| Grass | 1.3 | 1.0 |
| Wooden Planks | 3.0 | 2.9 |
| Palm/Bamboo | 1.3 | 1.2 |
| Parquet/Polished wood | 0.3 | 0.3 |
| Ceramic Tiles | 3.9 | 4.2 |
| Cement | 34.2 | 35.5 |
| Carpet | 0.8 | 0.7 |
| Others | 1.9 | 1.9 |
| Total | 100.0 | 100.0 |
| Rooms used for sleeping |  |  |
| One | 23.7 | 17.6 |
| Two | 33.8 | 32.0 |
| Three or more | 42.4 | 50.4 |
| Total | 100.0 | 100.0 |
| Place for cooking |  |  |
| In the house | 84.5 | 84.9 |
| In a separate building | 8.7 | 8.9 |
| Outdoors | 6.1 | 5.9 |
| Others | 0.6 | 0.3 |
| Total | 100.0 | 100.0 |
| Cooking fuel |  |  |
| Electricity | 4.2 | 4.8 |
| LPG/natural gas/ biogas | 1.0 | 1.4 |
| Kerosene | 1.3 | 1.3 |
| Firewood | 9.2 | 8.1 |
| Charcoal | 82.0 | 82.4 |
| Straw/shrubs/grass | 0.2 | 0.1 |
| Agricultural crop | 1.5 | 1.5 |
| No food cooked in the household | 0.3 | 0.1 |
| Other | 0.2 | 0.3 |
| Total | 100.0 | 100.0 |
| Percentage using solid fuel for cooking ${ }^{1}$ | 92.9 | 92.2 |
| Percentage using clean fuel for cooking ${ }^{2}$ | 5.3 | 6.2 |
| Population | 1,720 | 11,985 |
| LPG = Liquid petroleum gas |  |  |
| ${ }^{1}$ Includes coal/lignite, charcoal, wood, straw/shrubs/grass, agricultural crops, and animal dung |  |  |
| ${ }^{2}$ Includes electricity and LPG/natural gas/bioga |  |  |



## Table 2.9 Wealth quintiles

| Percent distribution of de-jure population by wealth quintiles and the Gini coefficient, according to residence and region, BHDS 2020 |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Benadir | Wealth quintile |  |  |  |  |  | Number of persons | Gini coefficient |
|  | Lowest | Second | Middle | Fourth | Highest | Total |  |  |
| Total | 12.1 | 17.8 | 24.8 | 24.4 | 20.9 | 100.0 | 11,985 | 0.0 |

Table 2.10 Birth registration of children under age five

Percentage of de jure children under five years of age whose births are registered with the civil authorities, according to background characteristics, BHDS 2020

Children whose births are registered

| Background <br> characteristics | Percentage <br> who had birth <br> certificate | Percentage who <br> did not have birth <br> certificate | Percentage <br> registered | Number of children |
| :--- | :---: | :---: | :---: | :---: |
| Age | 0.4 | 6.7 | 7.1 |  |
| $<2$ | 0.6 | 4.8 | 5.4 | 778 |
| $2-4$ | 0.5 | 5.9 | 6.4 | 1,359 |
| Sex | 0.5 | 5.0 | 5.5 | 1,102 |
| Male | $\mathbf{0 . 5}$ | $\mathbf{5 . 5}$ | $\mathbf{6 . 0}$ | $\mathbf{1 , 0 3 5}$ |
| Female |  |  | $\mathbf{2 , 1 3 7}$ |  |
| Total |  |  |  |  |




## Key Findings

EDUCATIONAL ATTAINMENT


66\%
of women have never attended school.

LITERACY
48\%
of women are literate.

ACCESS TO MEDIA


63\%
of women have no access
to newspapers, radio, or television at least once a week.

INTERNET USE
41\%
of women had used the internet at least once.

EMPLOYMENT
10\%
of ever-married women are currently employed.

Chapter 3

## Characteristics of the Respondents

This chapter presents information on the individual demographic and socioeconomic characteristics of the survey respondents who were interviewed for the BHDS 2020. For information presented in this chapter, enumerators administered questions to never-married and ever-married women. Questions on educational attainment, literacy, exposure to mass media and internet use were administered to both never-married and evermarried women, whereas questions on employment status, occupation, and use of tobacco were only administered to evermarried women.

This information is useful in understanding the factors that affect the life of women in the reproductive age group, and provides a context for the interpretation of demographic and health indicators

## Background characteristics of respondents

Information on the background characteristics of women aged 1549 interviewed in the survey is presented in Table 3.1 by age, marital status, education and wealth quintile. Twenty-nine percent of women were aged 15-19 (77 percent among never-married women and 10 percent among ever-married women). Fifty-eight percent of women were currently married, 28 percent had never been married, 10 percent were divorced or separated and 3 percent were widowed.

Educational attainment among respondents was low; 65 percent of women had never attended school. Seventy-seven percent of evermarried women had no education compared to 35 percent of nevermarried women. Twenty-two percent of never-married women and 19 percent of ever-married women were from the wealthiest households.

## Educational Attainment

Table 3.2 presents the distribution of women aged $15-49$ by educational attainment and median years of schooling completed according to background characteristics. The findings show that educational attainment among women is very low. Overall, 66 percent of women aged 15-49 have not attended any formal schooling. Nine percent of women had some levels of primary education, but only 4 percent completed primary schooling. Furthermore, 7 percent of women attended secondary school, but

Educational attainment increases with increasing levels of wealth. The proportion of women with no education is highest among women in the lowest wealth quintile

Figure 3.1 Educational Attainment
Percent distribution of women age 15-49 by highest level of schooling attended or completed

only 6 percent completed secondary education. Seven percent of the respondents have completed higher levels of education (Figure 3.1).

Educational attainment decreases as the age of women increases. Percentage of women who have completed primary education is highest among women aged 15-19 at 6 percent and lowest among women aged 30-34 at1 percent.

Educational attainment increases with increasing levels of wealth. The proportion of women with no education is highest among women in the lowest wealth quintile at 82 percent and lowest among women in the highest wealth quintile at 60 percent. The proportion of women who have attained higher education also increases with increasing wealth levels.

## Literacy

Adult literacy is defined as the percentage of the population aged 15 years and over who are both able to read and write with an understanding a short simple statement in their everyday lives (UNESCO Institute for Statistics, 2013).

The BHDS 2020 assessed literacy levels among women aged 15-49 who had never been to school or who had primary or secondary levels of education by asking them to read all or part of a sentence in English or Somali. Anyone who could read a sentence in any other language was also considered a literate person. Those with a higher level of education were assumed to be literate without being administering a reading test. Table 3.3 presents the literacy of respondents by background characteristics. The table shows that

63\%
of respondents did not access any of the three forms of media (newspaper, radio and television) at least once a week

Figure 3.2 Literacy
Percent distribution of women aged 15-49 by level of literacy and age
64.4


48 percent of women aged 15-49 are literate.

As shown in Figure 3.2, literacy levels generally decrease with age; literacy is highest among women aged 15-19 at 64 percent and lowest among those aged 45-49 at 26 percent.

Further analysis by wealth levels show that literacy levels increase with wealth status. Women from wealthier households are more literate at 56 percent compared to women from the poorest households at 24 percent (Table 3.3).

## Exposure to Mass Media

The survey collected information on the exposure of respondents to both broadcast and print media. Respondents were asked how often they read a newspaper, watch television, or listen to the radio. This information indicates the extent to which women are regularly exposed to mass media and how effective this media can be in the development of educational programmes, to convey messages to the public about government policies, disseminate health information, report the opinions of people on health issues and other societal matters, as well as serve as a tool to observe public sentiments on important issues.

Table 3.4 shows that 63 percent of respondents did not access any of the three forms of media (newspaper, radio and television) at least once a week. Watching television was the most common use of media, 28 percent of respondents reported watching television at least once a week, 19 percent listen to the radio at least once a week and 7 percent read newspapers at least once a week. Overall, 37 percent of respondents aged 15-49 are exposed to one of the three types of media at least once a week.

## Figure 3.3 Exposure to mass media

Percent of all women aged 15-49 who are exposed to specific media on a weekly basis


## 97\%

of women with higher education had ever used the internet, compared to 21 percent of women with no education

Exposure to media increases with both education and wealth. While only two percent of respondents with no education read a newspaper at least once a week, 29 percent of the respondents with higher education do so. Similarly, while 19 percent of respondents with no education watch television at least once a week, 49 percent of respondents with higher education watch television at least once a week.

Figure 3.3 presents the percentage of women aged 15-49 that are exposed to mass media by wealth quintile. Fourteen percent of the respondents in the lowest wealth quintile watch television at least once a week, compared to 36 percent in the highest quintile. Likewise, 11 percent of respondents in the lowest quintile listen to the radio at least once a week, compared to 22 percent in the highest quintile.

## Internet Use

Globally, women are 23 percent less likely than men to use mobile internet, and in Sub-Saharan Africa, women are 41 percent less likely than men to use mobile internet (GSMA, 2019 ). The internet is an important tool for accessing information. Studies have shown that women use the internet more often for health-related information searches than men.

The survey collected information on women's use of the internet: women aged 15-49 were asked whether they had ever used the internet and, if they had, whether they used it in the 12 months preceding the survey. Interviewers also asked how often women had used the internet in the month preceding the survey.

Table 3.5 shows that 41 percent of respondents had used the internet at least once and 37 percent had used the internet in the

Figure 3.4 Internet Usage
Percent of women aged 15-49 who have ever used the Internet by level of education

past 12 months preceding the survey.
Ever use of internet is highest among women aged 20-24 at 56 percent, and lowest among those aged 40-44 at 15 percent.

Internet usage also increases with an increase in educational attainment and wealth status. Ninety-seven percent of women with higher education had ever used the internet, compared to 21 percent of women with no education (Figure 3.4). Moreover, 51 percent of women in the highest wealth quintile had ever used the internet, compared to 15 percent of women in the lowest wealth quintile.

## Employment Status of ever married women

Ever-married women aged 15-49 were asked about their employment status in the seven days preceding the survey, as well as whether they had done any work in the 12 months prior to the survey. Respondents were categorized as currently employed if they had worked in the seven days preceding the survey. Table 3.6 shows the employment status of ever-married women by background characteristics.

The employment status of respondents was low. Ten percent of evermarried women were currently employed at the time the survey was conducted, while two percent were not currently employed but had worked in the 12 months preceding the survey. Eighty-eight percent of the respondents had not done any work in the 12 months prior to the survey.

Figure 3.5 Employment Status
Percent of ever married women aged 15-49 currently employed by age


Women who smoke are more likely than nonsmokers to experience infertility and delays in conceiving.

The proportion of ever-married women who are currently employed increases with age; it is lowest among ever-married women aged 1519 at 2 percent and highest among those aged $35-39$ at 16 percent however there is a decline in the proportion among those aged 4049. (Figure 3.5).

Employment increases with an increase in the number of living children, 4 percent for both women with no living children and women with one to two children, 10 percent for those with three to four children and 14 percent for women with 5 or more children.

## Use of Tobacco

Tobacco use and second-hand smoke (SHS) exposure during pregnancy has adverse health effects on women and infants. Women who smoke are more likely than non-smokers to experience infertility and delays in conceiving. Maternal smoking during pregnancy increases risks of prematurity, stillbirth, and neonatal death and may cause a reduction in breast milk (WHO, 2010).

Ever-married women aged 15-49 were asked about their smoking habits. Table 3.7 shows the distribution of cigarette smokers and the percentage of women who use various types of tobacco by background characteristics.

Overall, 1 percent of ever-married women smoke cigarettes or use any type of tobacco. There is a slight variation among women of various age groups. One percent of women in all age groups except 20-24, 30-34 and 40-44 use any type of tobacco.

Table 3.1 Background characteristics of respondents

| Percentage of All women age 15-49 selected background characteristics, BHDS 2020 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Ever-married Women |  | Never-married women |  | All women |  |
|  | percent | number | percent | number | percent | number |
| Age |  |  |  |  |  |  |
| 15-19 | 9.6 | 155 | 77.4 | 496 | 28.9 | 651 |
| 20-24 | 19.6 | 317 | 17.5 | 112 | 19.0 | 429 |
| 25-29 | 23.8 | 384 | 4.5 | 29 | 18.3 | 413 |
| 30-34 | 18.6 | 301 | * | 2 | 13.4 | 303 |
| 35-39 | 14.4 | 232 | * | 1 | 10.3 | 233 |
| 40-44 | 8.6 | 139 | * | 1 | 6.2 | 140 |
| 45-49 | 5.3 | 86 | * | 0 | 3.8 | 86 |
| Marital status |  |  |  |  |  |  |
| Never married | na | na | 100.0 | 641 | 28.4 | 641 |
| Married | 81.4 | 1,313 | na | na | 58.2 | 1,313 |
| Divorced/separated | 14.5 | 234 | na | na | 10.4 | 234 |
| Widowed | 4.2 | 67 | na | na | 3.0 | 67 |
| Education |  |  |  |  |  |  |
| No Education | 77.2 | 1,246 | 35.4 | 227 | 65.3 | 1,473 |
| Primary | 10.8 | 174 | 20.1 | 129 | 13.4 | 303 |
| Secondary | 8.4 | 136 | 27.5 | 176 | 13.8 | 312 |
| Higher | 3.6 | 58 | 17.0 | 109 | 7.4 | 167 |
| Wealth quintile |  |  |  |  |  |  |
| Lowest | 11.2 | 181 | 6.1 | 39 | 9.8 | 220 |
| Second | 18.4 | 297 | 18.7 | 120 | 18.5 | 417 |
| Middle | 27.9 | 450 | 29.2 | 187 | 28.2 | 637 |
| Fourth | 23.7 | 382 | 24.5 | 157 | 23.9 | 539 |
| Highest | 18.8 | 304 | 21.5 | 138 | 19.6 | 442 |
| Total 15-49 | 100.0 | 1,614 | 100.0 | 641 | 100.0 | 2,255 |

Note: Education categories refer to the highest level of education attended, whether or not that level was completed na = Not applicable"

* Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed


## Table 3.2 Educational attainment: Women

Percent distribution of women aged 15-49 by highest level of schooling attended or completed, and median years completed, according to background characteristics, BHDS 2020

| Background characteristics | No education | Some primary | Completed primary ${ }^{1}$ | Some secondary | Completed secondary ${ }^{2}$ | Higher education | Total | Median years completed | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age |  |  |  |  |  |  |  |  |  |
| 15-24 | 50.0 | 12.5 | 5.1 | 12.8 | 8.1 | 11.5 | 100.0 | 3.0 | 1,080 |
| 15-19 | 46.5 | 14.0 | 5.5 | 17.7 | 8.9 | 7.4 | 100.0 | 4.5 | 651 |
| 20-24 | 55.2 | 10.3 | 4.4 | 5.4 | 7.0 | 17.7 | 100.0 | 0.0 | 429 |
| 25-29 | 71.9 | 9.9 | 3.9 | 3.6 | 3.6 | 7.0 | 100.0 | 0.0 | 413 |
| 30-34 | 85.1 | 4.6 | 1.0 | 2.6 | 3.6 | 3.0 | 100.0 | 0.0 | 303 |
| 35-39 | 90.6 | 5.2 | 1.7 | 0.0 | 1.7 | 0.9 | 100.0 | 0.0 | 233 |
| 40-44 | 85.0 | 6.4 | 2.1 | 2.1 | 4.3 | 0.0 | 100.0 | 0.0 | 140 |
| 45-49 | 83.7 | 2.3 | 3.5 | 1.2 | 5.8 | 3.5 | 100.0 | 0.0 | 86 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |
| Lowest | 82.3 | 6.8 | 2.3 | 1.8 | 2.3 | 4.5 | 100.0 | 0.0 | 220 |
| Second | 70.0 | 8.4 | 3.8 | 6.2 | 5.8 | 5.8 | 100.0 | 0.0 | 417 |
| Middle | 65.3 | 11.3 | 2.7 | 7.8 | 6.4 | 6.4 | 100.0 | 0.0 | 637 |
| Fourth | 63.8 | 8.9 | 4.8 | 9.8 | 5.8 | 6.9 | 100.0 | 0.0 | 539 |
| Highest | 59.7 | 9.7 | 4.5 | 7.2 | 6.3 | 12.4 | 100.0 | 0.0 | 442 |
| Total | 66.4 | 9.4 | 3.7 | 7.3 | 5.7 | 7.4 | 100.0 | 0.0 | 2,255 |

${ }^{1}$ Completed 8 th grade at the primary level
${ }^{2}$ Completed 12th grade at the secondary level

Table 3.3 Literacy: Women

Percent distribution of women aged 15-49 by level of schooling attended and level of literacy, and percentage literate, according to background characteristics, BHDS 2020

| Background characteristics | No schooling or primary school or Secondary |  |  |  |  |  | Percentage literate ${ }^{1}$ | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Higher Education | Can read a whole sentence | Can read part of the sentence | Cannot read at all | No card with required language | Total |  |  |
| Age |  |  |  |  |  |  |  |  |
| 15-24 | 11.5 | 30.0 | 20.6 | 37.4 | 0.5 | 100.0 | 62.1 | 1,080 |
| 15-19 | 7.4 | 37.0 | 20.0 | 35.3 | 0.3 | 100.0 | 64.4 | 651 |
| 20-24 | 17.7 | 19.3 | 21.7 | 40.6 | 0.7 | 100.0 | 58.7 | 429 |
| 25-29 | 7.0 | 16.5 | 22.0 | 52.8 | 1.7 | 100.0 | 45.5 | 413 |
| 30-34 | 3.0 | 11.9 | 19.1 | 65.3 | 0.7 | 100.0 | 34.0 | 303 |
| 35-39 | 0.9 | 9.0 | 16.7 | 72.5 | 0.9 | 100.0 | 26.6 | 233 |
| 40-44 | 0.0 | 11.4 | 18.6 | 67.9 | 2.1 | 100.0 | 30.0 | 140 |
| 45-49 | 3.5 | 9.3 | 12.8 | 73.3 | 1.2 | 100.0 | 25.6 | 86 |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 4.5 | 9.5 | 9.5 | 75.5 | 0.9 | 100.0 | 23.6 | 220 |
| Second | 5.8 | 18.2 | 18.0 | 56.8 | 1.2 | 100.0 | 42.0 | 417 |
| Middle | 6.4 | 22.1 | 21.8 | 48.4 | 1.3 | 100.0 | 50.4 | 637 |
| Fourth | 6.9 | 26.0 | 21.2 | 45.6 | 0.4 | 100.0 | 54.0 | 539 |
| Highest | 12.4 | 21.5 | 22.4 | 43.0 | 0.7 | 100.0 | 56.3 | 442 |
| Total | 7.4 | 21.0 | 19.9 | 50.9 | 0.9 | 100.0 | 48.2 | 2,255 |

${ }^{1}$ Refers to women who attended higher education and women who can read a whole sentence or part of the sentence

Table 3.4 Exposure to mass media: Women

Percentage of All women aged 15-49 who are exposed to specific media on a weekly basis, according to background characteristics, BHDS 2020

| Background characteristics | Reads a newspaper at least once a week | Watches television at least once a week | Listens to radio at least once a week | Accesses all three media at least once a week | Accesses any one of the three media at least once a week | Accesses none of the three media at least once a week | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age |  |  |  |  |  |  |  |
| 15-19 | 8.9 | 36.9 | 21.4 | 5.2 | 45.2 | 54.8 | 651 |
| 20-24 | 12.6 | 31.5 | 22.4 | 6.3 | 42.4 | 57.6 | 429 |
| 25-29 | 6.8 | 24.0 | 15.3 | 3.6 | 31.5 | 68.5 | 413 |
| 30-34 | 4.3 | 24.4 | 16.5 | 3.0 | 33.0 | 67.0 | 303 |
| 35-39 | 2.6 | 18.9 | 13.7 | 0.9 | 27.5 | 72.5 | 233 |
| 40-44 | 0.7 | 16.4 | 16.4 |  | 26.4 | 73.6 | 140 |
| 45-49 | 4.7 | 23.3 | 17.4 | 2.3 | 32.6 | 67.4 | 86 |
| Education |  |  |  |  |  |  |  |
| No Education | 2.2 | 19.1 | 14.0 | 1.0 | 27.4 | 72.6 | 1,473 |
| Primary | 12.9 | 41.6 | 25.1 | 5.9 | 50.8 | 49.2 | 303 |
| Secondary | 14.4 | 46.5 | 28.5 | 9.9 | 57.4 | 42.6 | 312 |
| Higher | 28.7 | 49.1 | 28.1 | 15.6 | 59.3 | 40.7 | 167 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 4.5 | 13.6 | 11.4 | 2.3 | 21.8 | 78.2 | 220 |
| Second | 6.2 | 20.4 | 13.9 | 2.9 | 28.5 | 71.5 | 417 |
| Middle | 8.3 | 27.8 | 19.3 | 4.7 | 37.0 | 63.0 | 637 |
| Fourth | 5.9 | 34.3 | 21.0 | 2.8 | 44.5 | 55.5 | 539 |
| Highest | 9.7 | 35.7 | 22.4 | 6.1 | 43.4 | 56.6 | 442 |
| Total | 7.3 | 28.2 | 18.5 | 3.9 | 37.0 | 63.0 | 2,255 |

Table 3.5 Internet usage: Women

Percentage of all women aged 15-49 who have ever used the internet, and percentage who have used the internet in the past 12 months; and among women who have used the internet in the past 12 months, percent distribution by frequency of internet use in the past month, according to background characteristics, BHDS 2020

| Background characteristics | Among women who have used the internet in the past 12 months, percentage who, in the past month, used the internet |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Ever used the internet | Used the internet in the past 12 months | Number of women | Almost every day | At least once a week | Less than once a week | Not at all | Total | Number of women |
| Age |  |  |  |  |  |  |  |  |  |
| 15-19 | 54.4 | 50.2 | 651 | 78.9 | 14.1 | 3.7 | 3.4 | 100 | 327 |
| 20-24 | 56.4 | 53.6 | 429 | 77.4 | 13.5 | 4.3 | 4.8 | 100 | 230 |
| 25-29 | 40.9 | 35.4 | 413 | 71.9 | 18.5 | 4.1 | 5.5 | 100 | 146 |
| 30-34 | 23.4 | 21.1 | 303 | 67.2 | 20.3 | 10.9 | 1.6 | 100 | 64 |
| 35-39 | 17.2 | 15.0 | 233 | 60.0 | 20.0 | 14.3 | 5.7 | 100 | 35 |
| 40-44 | 15 | 11.4 | 140 | * | * | * | * | * | 16 |
| 45-49 | 19.8 | 15.1 | 86 | * | * | * | * | * | 13 |
| Education |  |  |  |  |  |  |  |  |  |
| No Education | 21.1 | 18.1 | 1,473 | 64.8 | 19.1 | 8.2 | 7.9 | 100 | 267 |
| Primary | 60.7 | 54.5 | 303 | 73.3 | 15.8 | 7.3 | 3.6 | 100 | 165 |
| Secondary | 82.4 | 77.9 | 312 | 80.2 | 15.2 | 2.1 | 2.5 | 100 | 243 |
| Higher | 97.0 | 93.4 | 167 | 86.5 | 9.0 | 1.3 | 3.2 | 100 | 156 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |
| Lowest | 14.5 | 12.7 | 220 | 71.4 | 17.9 | 3.6 | 7.1 | 100 | 28 |
| Second | 32.4 | 30.2 | 417 | 80.2 | 11.1 | 5.6 | 3.2 | 100 | 126 |
| Middle | 40.8 | 37.2 | 637 | 76.4 | 15.6 | 4.6 | 3.4 | 100 | 237 |
| Fourth | 48.2 | 44.3 | 539 | 73.2 | 15.1 | 6.7 | 5.0 | 100 | 239 |
| Highest | 51.4 | 45.5 | 442 | 73.1 | 17.9 | 3.0 | 6.0 | 100 | 201 |
| Total | 40.5 | 36.9 | 2,255 | 75.1 | 15.4 | 4.9 | 4.6 | 100 | 831 |

* Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed

Table 3.6 Employment status: Ever-married women

| Percent distribution of ever-married women aged 15-49 by employment status, according to background characteristics, BHDS 2020 |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Employed in the 12 months preceding the survey |  | Not employed in the $\mathbf{1 2}$ months preceding the survey | Total | Number of ever married women |
|  | Currently employed ${ }^{1}$ | Not currently employed |  |  |  |
| Age |  |  |  |  |  |
| 15-19 | 1.9 | 1.9 | 96.1 | 100.0 | 155 |
| 20-24 | 2.8 | 1.3 | 95.9 | 100.0 | 317 |
| 25-29 | 8.1 | 1.8 | 90.1 | 100.0 | 384 |
| 30-34 | 13.6 | 2.3 | 84.1 | 100.0 | 301 |
| 35-39 | 15.9 | 2.6 | 81.5 | 100.0 | 232 |
| 40-44 | 15.1 | 1.4 | 83.5 | 100.0 | 139 |
| 45-49 | 14.0 | 3.5 | 82.6 | 100.0 | 86 |
| Number of living children |  |  |  |  |  |
| 0 | 4.0 | 1.1 | 94.9 | 100.0 | 175 |
| 1-2 | 4.0 | 2.0 | 94.0 | 100.0 | 400 |
| 3-4 | 9.9 | 1.4 | 88.7 | 100.0 | 415 |
| 5+ | 14.4 | 2.6 | 83.0 | 100.0 | 624 |
| Education |  |  |  |  |  |
| No Education | 10.3 | 2.2 | 87.6 | 100.0 | 1,246 |
| Primary | 5.2 | 1.1 | 93.7 | 100.0 | 174 |
| Secondary | 5.9 | 1.5 | 92.6 | 100.0 | 136 |
| Higher | 15.5 | 1.7 | 82.8 | 100.0 | 58 |
| Wealth quintile |  |  |  |  |  |
| Lowest | 13.3 | 5.0 | 81.8 | 100.0 | 181 |
| Second | 8.4 | 1.7 | 89.9 | 100.0 | 297 |
| Middle | 9.8 | 2.4 | 87.8 | 100.0 | 450 |
| Fourth | 8.4 | 1.0 | 90.6 | 100.0 | 382 |
| Highest | 9.5 | 1.0 | 89.5 | 100.0 | 304 |
| Total | 9.5 | 2.0 | 88.5 | 100.0 | 1,614 |

${ }^{1}$ Currently employed' is defined as having done work in the past seven days. Includes persons who did not work in the past seven days but who are regularly employed and were absent from work for leave illness, vacation or any other such a reason

Table 3.7 Use of tobacco: Ever Married Women

Percentage of ever-married women aged 15-49 who smoke various tobacco products,according to background characteristics, BHDS 2020

| Background characteristics | Percentage who Smoke <br> Other types of tobacco |  |  | Any type of topacco |
| :--- | :---: | :---: | :---: | :---: | Number of women


| Education |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
| No Education | 0.6 | 0.4 | 0.7 | 1,246 |
| Primary | 0.0 | 0.0 | 0.0 | 174 |
| Secondary | 1.5 | 0.7 | 1.5 | 136 |
| Higher | 0.0 | 0.0 | 0.0 | 58 |
| Wealth quintile | 0.6 | 0.6 | 0.6 | 181 |
| Lowest | 0.7 | 0.3 | 0.7 | 297 |
| Second | 0.7 | 0.7 | 0.9 | 450 |
| Middle | 0.8 | 0.3 | 0.8 | 382 |
| Fourth | 0.3 | 0.0 | 0.3 | 304 |
| Highest | $\mathbf{0 . 6}$ | $\mathbf{0 . 4}$ | $\mathbf{0 . 7}$ | $\mathbf{1 , 6 1 4}$ |
| Total |  |  |  |  |



## Key Findings

AGE AT FIRST MARRIAGE
The median age at first marriage is 21 for women and 21 for men

EARLY MARRIAGE


4\%
of ever-married women aged 20-49 are married by age 15, and 13 percent are married by the age of 18 .

TOTAL FERTILITY RATE (TFR)
6.4 children per woman

BIRTH SPACING
Somali women in Benadir have a median gap of 24 months between two births

AGE AT FIRST BIRTH
Median age at first birth is 22 for those aged 25-49

TEENAGE PREGNANCY AND MOTHERHOOD


## 3\%

of women aged 15 and 33 percent of women aged 18 have either given birth or are pregnant with their first child

FERTILITY PLANNING


76\%
of births were reported by the mother to have been wanted at the time of conception, and 20 percent were mistimed (wanted later) while only 4 percent of births were unintended at the time of conception

CURRENT USE OF CONTRACEPTION


## 6\%

of currently married women are using a form of contraception method while only 1 percent are using modern methods.

Chapter 4

# Marriage, Fertility, Fertility Preference and Birth Spacing 


#### Abstract

Data on marriage and fertility collected as part of the BHDS 2020 helps gain better insight into what is behind fertility levels and trends. Some of these factors, including proximate determinants such as age at marriage, timing of fertility, birth spacing, age at first birth and inter-birth intervals among others, are presented in this chapter. It further examines the key factors that determine the exposure to the risk of pregnancy. Information presented in this chapter pertains to women of reproductive age.


In general, populations in which women marry at a young age tend to initiate childbearing early, and thus have higher fertility rates.

## Marriage

Information on marriage helps to determine the extent to which a woman is exposed to the risk of pregnancy, and informs fertility levels and trends. In general, populations in which women marry at a young age tend to initiate childbearing early, and thus have higher fertility rates. In Somalia, marriage and fertility are closely linked, because childbearing takes place within the context of marriage.

## Marital status

The survey classified marital status as never-married, currently married, divorced or widowed. Table 4.1 and Figure 4.1 show the distribution of women aged 15-49 by their current marital status and according to age. Marriage among women is virtually universal. The percentage of women who have never married declines sharply with an increase in age, from 76 percent among those aged 15-19 to 26 percent for women aged 20-24. Almost all women in Benadir are married by the age of 30 . The percentage of currently married women increases with age and peaks in the 30-34 age cohort. Additionally, widowhood significantly increases and peaks among women aged 45-49 years at 15 percent. Divorce among women aged between $15-19$ years is 5 percent and 10 percent among all women of reproductive ages (15-49 years).

## Age at first marriage

Age at first marriage is an important indicator of exposure to the risk of conception and childbirth, especially in a society in which almost all births occur within marriage. Women who marry early will, on average, have a longer exposure to the risk of pregnancy and

In Somalia, marriage and fertility are closely linked, because childbearing takes place within the context of marriage.
a greater number of births in their reproductive years. Information on age at first marriage was obtained by asking all ever-married women, the month and year in which they got married to their first husbands, while information for men was obtained from the household roster.

Table 4.2 shows the percentage of ever-married women aged 1549 by specific exact ages and median age at first marriage. Four percent of women in the age group of 20-49 entered their first marriage by the age of 15 . Thirteen percent of women aged 20-49 were married for the first time by the age of 18 , while 24 percent married for the first time by the time they turned 20 . The median age at first marriage for women of reproductive ages is 21 years.

Table 4.3 shows the percentage of men aged 15-64 who were first married, by specific exact ages and the median age at first marriage.

## Figure 4.1 Current marital status of women aged 15-49

Percent distribution of women aged 15-49 by current marital status


Figure 4.2 Age at First Marriage
Percent of women age 15-49 who were first married by specific exact ages


> 4\%
> of women aged 2049 and 25-49 had entered into marital union by the time they turned 15

About 1 percent of men in the age bracket 20-49 entered into their first marriage by age 15 and 10 percent by age 18 . Twelve percent of men aged 25-64 had never married. The median age at first marriage for men aged $25-64$ is 21 years.

## Early Marriage

Early marriage is still widely practised in many parts of the world, including in Benadir, even though it violates the rights of children (especially girls) and has widespread and long-term consequences, Somali parents encourage the marriage of their daughters while still young, in the hope that the marriage will benefit the girls both financially and socially, while also relieving financial burdens on the family. This traditional practice prevents young girls from realizing their full potential in life, limiting their physical, psychological and economic development. Early marriages often result in early childbearing, which has a detrimental effect on the health of both the mother and the child. It also leads to a longer reproductive period and of higher levels of fertility. Postponement of marriage greatly reduces childbearing rates. In Benadir, 4 percent of women aged 20-49 and 25-49 had entered into marital union by the time they turned 15 as compared to 16 percent nationally (SHDS, 2020). Thirteen percent of women aged 20-49 and 25-49 were first married by the age of 18 (Figure 4.2 \& Table 4.2).

## Fertility

This section examines a number of issues relating to fertility and childbearing, including fertility levels, age at which women initiate childbearing, fertility preference, and other determinants of fertility. The knowledge of current and cumulative fertility is central to understanding population dynamics and the factors that influence the size and age structure of a population. It is also essential in monitoring the progress and evaluating the impact of population and health programmes in Benadir. Using the information collected during the survey, it is possible to estimate the current level of fertility, identify trends, and highlight variations in fertility, according to certain characteristics. Interviewers asked all evermarried women aged 15-49 in the sampled households the total number of children they had ever given birth to, alive or dead, the sex of the children, those that are living within the household, and children living elsewhere. Interviewers then compiled a complete history of births for each respondent, from the earliest to the most recent birth, recording for each of them the type of birth (single or multiple), survival status, gender and date of birth.

## Current fertility

The most commonly used measures of current fertility are the total fertility rate (TFR) and one of its components-age-specific fertility rates (ASFRs). The TFR is a summary measure of fertility

## Fertility peaks at ages of 25-29 (335 births per 1,000 women) and drops thereafter to 46 births per 1,000 women in the 40-44 age group

and is interpreted as the number of children a woman would have by the end of her child-bearing years if she were to experience the currently observed ASFRs. The TFR estimates compiled during the BHDS 2020 refer to the three years preceding the survey. The ASFR was calculated as the number of live births by women in a given age group divided by the number of woman-years in that age group during the specified period. Other important measures of current fertility are the general fertility rate (GFR) and crude birth rate (CBR). The GFR is the annual number of live births in a population per 1,000 women aged 15-49, while the CBR is the ratio of the number of live births occurring in a given year per 1,000 population.

Table 4.4 presents the ASFRs and aggregate fertility measures (TFR, GFR, and CBR) for Benadir. The age-specific fertility rate in the 15-19 age group is 143 births per 1,000 women. Fertility peaks at ages of 25-29 ( 335 births per 1,000 women) and drops thereafter to 46 births per 1,000 women in the 40-44 age group (Figure 4.3). The Total Fertility Rate (TFR) for Benadir is 6.4 children per woman compared to a TFR of 6.9 at a national level (SHDS, 2020). Furthermore, the General Fertility Rate (GFR) in Benadir region is 233 while the Crude Birth Rate (CBR) is 43.

Table 4.5 presents the TFR and the mean number of children ever born (CEB) by background characteristics of women. It is important to keep in mind that the two indicators capture two different perspectives on fertility. The TFR is a "period" indicator, which shows the number of children that would be born per woman if she was subject to the current schedule of age-specific fertility rates. The CEB is a cohort indicator, which measures the mean number of children born alive to women in a given age group. The number of children ever born to a particular woman is a measure of her lifetime


Figure 4.4 Fertility by educational background

fertility experience up to the moment the survey was carried out. Table 4.5 presents the CEB for women aged 40 to 49 years, as they are nearing the end of their reproductive lives and thus could be interpreted as a measure of the average completed fertility. It is important to keep in mind that reporting of children ever born is subject to recall and other biases, and this is particularly pronounced among older women. The table also presents data for women who reported they were pregnant at the time of the survey.

Comparing the TFR (a measure of period/ current fertility) with the mean number of CEB among women aged 40 to 49/completed fertility (a measure of cohort/past fertility) provides important insights in fertility patterns and trends. If fertility remained stable over time and women accurately reported the number of children, they have ever born alive, the TFR and mean CEB for women aged 40-49 would be equal. BHDS indicates that there is a very slight difference between the TFR (6.4) and mean CEB for women aged 40-49 years (7.0). This could mean fertility is declining slightly, or a lower recall bias.

As presented in Figure 4.4 and Table 4.5, the largest fertility differentials are associated with education. For women with no education, the TFR is almost twice as high at 7.1 compared to that of women with higher education (3.7). Notably, the difference in TFR between women with no education and those with primary education is relatively small.

Another measure of fertility is the proportion of women who were pregnant at the time the survey was conducted. This represents, in a sense, the most current level of fertility, since it anticipates fertility during the months following the survey. However, this measure of current fertility should also be treated with caution as pregnancies

It is important to keep in mind that reporting of children ever born is subject to recall and other biases, and this is particularly pronounced among older women.

> The mean number of children ever born increases with age, reflecting the natural family building process.
are generally under-reported. Some women in the early stages of pregnancy may be unaware or uncertain that they are pregnant, and others may deliberately avoid mentioning their status due to local customs and tradition.

Table 4.5 presents the percentage of women aged 15-49 who were pregnant at the time of the survey. Overall, 17 percent of the evermarried women were pregnant at the time of the survey.

Table 4.6 presents information on the mean number of children ever born for ever-married women and currently married women in Benadir. On average, ever-married women aged 45-49 have given birth to 6.3 children, of whom 5.2 survived up until the time the survey was conducted. Of the 6.7 children born on average to currently married women aged 45-49, 5.6 survived up until the time the survey was conducted.

The mean number of children ever born increases with age, reflecting the natural family building process. For example, among ever-married women, the average number of live births for the age group 25-29 is 3.9, while women of 35-39 years reported an average of 6.4 children. Among currently married women, the mean number of children ever born to women aged 25-29 years is $4.1,6.5$ for women in the 35-39 age group and 6.7 among women aged 45-49.

## Inter-Birth Intervals

The inter-birth interval, defined as the period of time between two consecutive births, has important implications both for the health of the mother and child as well as for the fertility levels in a population. After a live birth, the recommended interval before attempting the next pregnancy is at least 24 months, in order to reduce the risk of adverse maternal, perinatal and infant outcomes (WHO, 2005). Children born too close together have long been associated with an increased risk of adverse health outcomes, including infant, child and maternal mortality (B.K. Dabal, P. a., 2007).

Table 4.7 presents the distribution of non-first births that occurred in the five years preceding the survey by the number of months since the previous birth, according to background characteristics. It shows that the median spacing between births is 24 months. Twenty-four percent of births reported spacing of 60 months and above. Births with a spacing of less than 18 months accounted for 28 percent of the total number. There is a marginal difference in the mean birth interval in relation to sex of the last birth.

## Menopause

Women are considered to have reached menopause if they are neither pregnant nor postpartum amenorrhoeic and have not had a menstrual period in the 6 months before the survey, if they report

## 10\%

of women aged 2049 and 25-49 had first given birth by the age of 18

Pregnancy under the age
of 20 also has adverse social consequences, especially for female education, as women who become mothers under the age of 20 are likely not to complete their education.
being menopausal, or having had a hysterectomy, or if they have never menstruated. Table 4.8 shows that, overall, 15 percent of women aged 30-49 are menopausal. As could be expected, the proportion of menopausal women increases with age.

## Age at First Birth

The age at which childbearing commences is an important determinant of the overall level of fertility, as well as the health and well-being of both the mother and child. The data on age at first birth is affected by reporting errors, such as misreporting the woman's age, underreporting of first births, and misreporting the first child's date of birth. Such errors are usually more pronounced among older women. Table 4.9 shows the percentage of women by age at first birth according to their current age.

Two percent of women aged 20-49 and 25-49 had given birth by the time they turned 15. Ten percent of women aged 20-49 and 2549 had first given birth by the age of 18 , while the median age at first birth for women aged 25-49 is 22 years (Table 4.9).

Table 4.10 summarizes the median age at first birth for women aged 20-49 and 25-49 across educational, and wealth status subgroups. The results show that the median age at first birth of women with higher education, which as expected had their first children later, at 23 and 24 years, respectively, compared to women with primary education, who had their first children at 20 and 21 years respectively.

## Teenage Pregnancy and Motherhood

Teenage pregnancy and motherhood are defined as the percentage of women aged 15-19 who are pregnant with their first child at the time of the survey, or have had a live birth or have begun childbearing, according to the DHS program (Croft T et al., 2018).

Childbearing under the age of 20 has major health implications for both the mother and child. Pregnancy under the age of 20 also has adverse social consequences, especially for female education, as women who become mothers under the age of 20 are likely not to complete their education.

The percentage of teenage women aged 15-19 who are mothers or are pregnant with their first child is shown in Table 4.11, the data indicates that 18 percent of girls aged 15-19 fall in this category, 14 percent having already given birth to a child and 3 percent being pregnant with their first child. The proportion of teenagers who have begun childbearing rises rapidly with age. Three percent of women aged 15 have started childbearing, but by the age of 19, 42 percent of women have had a baby, or are pregnant with their first child. There are significant differences by background characteristics.

Figure 4.5 Teenage pregnancy and motherhood by Educational Level Percentage of women age 15-19 who have begun childbearing


Twenty-six percent of girls aged 15-19 without education have had a baby or are pregnant, compared to 8 percent of girls with higher education who fall in this category (Figure 4.5). Furthermore, 31 percent of girls aged 15-19 in the poorest households have started childbearing, compared to 17 percent of girls aged 15-19 in the wealthiest households.

## Fertility Preferences

Information on fertility preferences can help assess desire for children, ideal number of children, as well as the extent of wanted, mistimed and unintended pregnancies. Data on fertility preferences may suggest the way in which fertility trends and patterns are likely to evolve in the future. This section presents data on whether and when married women desire more children and their desire to limit children by background characteristics. It also presents the reported ideal number of children, the mean ideal number of children, and whether the last birth was intended at the time of conception.

## Fertility Preferences by Number of Living Children

Table 4.12 presents the percent distribution of currently married women by their desire for more children, according to the number of living children, and as stated at the time the survey was conducted. Seventy-eight percent of currently married women want to have a child soon, 9 percent are undecided on whether to have another child, and 8 percent do not want any more children. Eighty percent of currently married women with no living children want to have a child soon, while 70 percent of women with six or more children want to have another child soon. Only 3 percent of currently married women reported they want to have another child later.

## 90\% <br> of women interviewed consider six or more children to be the ideal family size

Table 4.13 shows the percentage of currently married women who want no more children by the number of living children they already have according to background characteristics. Eight percent of currently married women are willing to stop childbearing. The desire to limit childbearing increases as the number of living children increases, from 2 percent among married women with one living child to 15 percent among women with six or more living children.

## Ideal number of children

In order to obtain a greater insight into fertility preferences among Somali women, interviewers asked all ever-married women, regardless of the number of living children they have, a hypothetical question about the number of children they would choose to have if they could start their reproductive lives again. Respondents with no children were asked: "If you could choose exactly the number of children to have in your whole life, how many would that be?" Respondents who had children were asked: "If you could go back to the time when you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?"

Table 4.14 shows the percent distribution of women aged 15-49 by their opinion on their ideal number of children, mean ideal number of children for all respondents, as well as for currently married respondents, according to the number of living children they have. The results indicate that the Somali women in Benadir desire large families. Ninety-three percent of women interviewed consider six or more children to be the ideal family size. Two percent stated their ideal number of children is four.

If currently married women in Benadir could choose their ideal number of children, they would have 12.1 children on average, compared to the national figure of 10.8 (SHDS, 2020). There is no substantial difference between the mean ideal number of children for ever-married women and currently married women.

Among currently married women who have no living children, the mean ideal number of children is 11.1 , while among ever-married women the mean ideal number of children is 10.6 . It is interesting to note that women with 4 and more living children are more likely to desire more children than women with 3 and fewer living children.

## Fertility Planning

The information collected provides an opportunity to estimate the levels of unintended fertility. This information provides insight into the degree to which couples are able to control fertility. Women aged 15-49 were asked a series of questions about each child born to them in the five years preceding the survey, as well as any current pregnancy, to determine whether the birth or pregnancy was

## Figure 4.6 Fertility planning status

Percent distribution of births to women aged 15-49 in the five years preceding the survey by planning status of the birth

## 3.8

Wanted no more

## 20.4

Wanted later
75.8

Wanted them
intended at the time of conception, intended later, or not intended at all. In assessing these results, it is important to recognise that women may declare a previously unintended birth or current pregnancy as intended, and this rationalisation would result in an underestimate of the true extent of unintended births.

Table 4.15 summarizes the planning status of births in the 5 years preceding the survey: whether the birth was intended at the time of conception, intended later, or not intended at all. Seventy-six percent of births were wanted at the time they occurred, while 20 percent were intended later and only 4 percent were to mothers who intended to have no more children (Figure 4.6). First- and second- order births were more likely to have been intended at 78 percent and 79 percent, respectively compared to third or higher order births at 73 and 67 percent respectively. The proportion of unintended births is greater for births that are fourth in order or higher at 6 percent than for first births at 4 percent. Similarly, a larger proportion of births to older women are unintended in comparison to those for younger women. While only 3 percent of births to women under age 20 are unintended, 8 percent of births to women age 35-39 are unintended.

## Birth Spacing

Couples can use contraceptive methods to better space their children. Information on contraceptive use is of particular interest to policymakers, programme managers, and researchers in population and birth spacing. This section describes women's knowledge and use of contraceptive methods and the need and demand for birth spacing.

# 73\% <br> of ever married women have heard of at least one method of contraception 

## Knowledge of contraceptive methods

Knowledge of contraceptive methods is a precondition for their use. Information regarding knowledge of birth spacing methods was gathered by asking respondent firstly about ways or methods by which the couple could delay or avoid pregnancy. If the respondent failed to mention any of the methods included in the questionnaire, the interviewer described the method and asked the respondent whether she had heard about it. No questions were asked to obtain information about the depth of knowledge.

Contraceptive methods used for the survey were classified into two broad categories: modern methods and traditional methods. Modern methods include the pill, the intrauterine device (IUD), injectables, implants, the male and the female condom, the diaphragm, the lactational amenorrhea method (LAM), and emergency contraception. Traditional methods include rhythm (periodic abstinence) and withdrawal.

Table 4.16 presents data on the knowledge of contraceptive methods. It shows that 73 percent of ever married women have heard of at least one method of contraception. Modern methods are more widely known than traditional methods. Seventy-three percent for both ever-married women and currently married women know of any modern method, while 20 percent and 19 percent of ever-married women and currently married women know of a

Figure 4.7 Knowledge of contraceptive methods
Percentage of all ever married women, currently married women 15-49 who have heard of any contraceptive method, by specific method


## The Lactational

Amenorrhea (LAM), pill, injectables, implants and condoms are the contraceptive methods most widely known among women in Benadir

Figure 4.8 Knowledge of contraceptive methods by education Percentage of currently married women aged 15-49 who have heard of at least one contraceptive method

traditional method respectively (Figure 4.7). Nationally, 63 percent of ever married women have heard of at least one method while 62 percent of ever-married women know of at least one modern method (SHDS, 2020).

The Lactational Amenorrhea (LAM), pill, injectables, implants and condoms are the contraceptive methods most widely known among women in Benadir. Sixty-six percent of women have heard of lactational amenorrhea, 48 percent have heard of the pill, 45 percent have heard of injectables, 37 percent have heard of implants, and 24 percent have heard of the male condom.

Table 4.17 presents data on the knowledge of contraceptive methods by background characteristics. It shows that knowledge of contraception is highest among younger mothers, with 80 percent of mothers aged 20-24 having heard of contraceptive methods. As expected, women with higher education are best informed about contraception, with 98 percent of them having heard of at least one method (Figure 4.8).

## Contraceptive Use

One of the most frequently used indicators for assessing the success of birth spacing programmes is the current level of contraceptive use. It is also widely used as a measure in the analysis of determinants of fertility.

Table 4.18 shows the distribution of currently married women who were using modern contraception by age. Six percent of currently married women are using any contraception method and less than one percent are using modern methods, this is the exact same at a national level (SHDS, 2020). Among the 20-24-year olds, 7 percent are using contraceptives compared to one percent of those aged 40-44.

The results indicate a continued need for education about women's physiology of reproduction and effective use of contraceptive methods

## 32\%

of currently married women have an unmet need for birth spacing

## Knowledge of Fertile Period

To examine a woman's knowledge of the reproductive process, respondents were asked whether there were certain days between the menstrual periods when a woman was more likely to become pregnant if she had sexual intercourse. Those women who responded that the fertile period is "halfway between two menstrual periods" were considered to have correct knowledge of their fertile period. Table 4.19 shows the percentage of ever-married women aged 1549 with correct knowledge of the fertile period during the ovulatory cycle, according to age. Overall, only 16 percent of ever- married women correctly reported the most fertile time as being halfway between two menstrual periods.

Among young ever-married women aged 15-19, 10 percent had correct knowledge of the fertile period. Around 18 percent of women in the age group of 30-34 and 35-39 were able to correctly identify a woman's monthly cycle, while 12 percent of women aged 45-49 reported the correct fertile period. These results indicate a continued need for education about women's physiology of reproduction and effective use of contraceptive methods.

## Need and Demand for Birth Spacing

One of the major concerns of birth spacing programmes is to assess the size of the potential demand for contraception and to identify women who are in need of contraceptive services. Table 4.20 presents estimates of unmet need, met need, and the total demand for birth spacing in Benadir. The table also shows the percentage of the total demand that is satisfied.

Women who are currently married and who either do not want any more children or want to wait two or more years before having another child, but are not using contraception, are considered to have an 'unmet need' for family planning. Women with a 'met need' for birth spacing are those who are currently using contraception. The total demand for birth spacing is the sum of unmet needs and met needs.

Table 4.20 shows that 32 percent of currently married women have an unmet need for birth spacing services (28 percent for spacing births and 4 percent for stopping childbearing). Nationally, 37 percent of currently married women have an unmet need for birth spacing with 29 percent accounting for inter-birth spacing while 8 percent want to stop child bearing (SHDS, 2020). The unmet need is lower for Benadir than that at the national level. Two percent of married women are currently using a contraceptive method or have a met need for either birth spacing or limiting childbearing. Thirtyfour percent of currently married women have a demand for birth spacing, 30 percent for birth spacing and 4 percent for limiting childbearing. At present, only 6 percent of the potential demand

The role of the media in promoting birth spacing is essential in bringing information to different target groups
for birth spacing is being met. This means that if all married women who said they want to space the births of their children, or limit their number of children were to use birth spacing methods, the contraceptive prevalence rate would increase from 7 percent to 32 percent.

By age, unmet need for birth spacing is highest among women aged 25-29 at 35 percent, and lowest among women aged 45-49 at 23 percent.

Unmet needs are higher among women with primary education, at 37 percent, followed by women with secondary education, at 34 percent. Women with higher education have the lowest unmet needs at 30 percent. Moreover, unmet need is lowest among women from poorest households at 25 percent, and highest among women in the second wealth quintile at 39 percent.

## Exposure to Birth Spacing Messages

The role of the media in promoting birth spacing is essential in bringing information to different target groups. Data on the level of exposure to media, such as the radio, television, and papers/ magazines is important for programme managers and planners to effectively target population subgroups for information, education, and communication campaigns. To assess the effectiveness of such media on the dissemination of birth spacing information, interviewing teams asked ever-married women whether they had heard messages about birth spacing on the radio or seen related messages on television or in newspapers/magazines during the few months preceding the survey.

Table 4.21 shows that women's exposure to all three media is very low. About 15 percent of women have heard a message related to birth spacing on the radio. Twelve percent of women reported having seen a message on birth spacing on television, and 4 percent saw a message on birth spacing in a newspaper. Eighty-one percent of women were not exposed to birth spacing messages in any of these media.

Table 4.1 Current marital status

| Percent distribution of women age 15-49 by current marital status, according to age, BHDS 2020 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age | Never-married | Currently married | Divorced | Widowed | Total | Number of women |
| 15-19 | 76.2 | 18.3 | 5.1 | 0.5 | 100.0 | 651 |
| 20-24 | 26.1 | 59.0 | 13.5 | 1.4 | 100.0 | 429 |
| 25-29 | 7.0 | 77.0 | 14.0 | 1.9 | 100.0 | 413 |
| 30-34 | 0.7 | 84.8 | 12.2 | 2.3 | 100.0 | 303 |
| 35-39 | 0.4 | 83.3 | 9.0 | 7.3 | 100.0 | 233 |
| 40-44 | 0.7 | 78.6 | 11.4 | 9.3 | 100.0 | 140 |
| 45-49 | 0.0 | 72.1 | 12.8 | 15.1 | 100.0 | 86 |
| Total | 28.4 | 58.2 | 10.4 | 3.0 | 100.0 | 2,255 |

## Table 4.2 Age at first marriage - Women

Percentage of women aged 15-49 who were first married by specific exact ages, and median age at first marriage, according to current age, BHDS 2020

| Current age | Percentage first married by exact age: |  |  |  |  |  | Number of respondents | Median age at first marriage |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 15 | 18 | 20 | 22 | 25 | Percentage of never married |  |  |
| 15-19 | 3.5 | na | na | na | na | 76.2 | 651 | a |
| 20-24 | 4.4 | 14.2 | 24.5 | na | na | 26.1 | 429 | a |
| 25-29 | 5.3 | 10.7 | 21.1 | 38.5 | 61.5 | 7.0 | 413 | 21.0 |
| 30-34 | 3.3 | 8.3 | 21.1 | 44.6 | 67.7 | 0.7 | 303 | 21.0 |
| 35-39 | 4.7 | 14.6 | 30.5 | 49.8 | 79.4 | 0.4 | 233 | 21.0 |
| 40-44 | 3.6 | 19.3 | 25.0 | 44.3 | 63.6 | 0.7 | 140 | 22.0 |
| 45-49 | 3.5 | 19.8 | 34.9 | 46.5 | 73.3 | 0.0 | 86 | 22.0 |
| 20-49 | 4.4 | 13.0 | 24.4 | na | na | 9.0 | 1,604 | a |
| 25-49 | 4.3 | 12.5 | 24.4 | 43.6 | 67.7 | 2.8 | 1,175 | 21.0 |

Note: The age at first marriage is defined as the age at which the respondent got married to her first spouse na $=$ Not applicable due to censoring $a=$ Omitted because less than 50 percent of the women got married for the first time before reaching the beginning of the age group

## Table 4.3 Age at first marriage - Men

Percentage of men aged 15-49 who were first married by specific exact ages, and median age at first marriage, according to current age, BHDS 2020

| Current age | Percentage first married by exact age: |  |  |  |  |  | Number of respondents | Median age at first marriage |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 15 | 18 | 20 | 22 | 25 | Percentage of never married |  |  |
| 15-19 | 0.3 | na | na | na | na | 95.6 | 703 | 16.0 |
| 20-24 | 0.7 | 7.0 | 16.5 |  |  | 71.5 | 460 | 19.0 |
| 25-29 | 0.9 | 10.7 | 25.2 | 39.0 | 56.0 | 34.9 | 318 | 20.0 |
| 30-34 | 0.4 | 12.7 | 21.9 | 45.0 | 58.5 | 11.5 | 260 | 21.0 |
| 35-39 | 1.3 | 12.4 | 24.9 | 47.1 | 58.2 | 4.9 | 225 | 22.0 |
| 40-44 | 1.5 | 7.7 | 20.6 | 47.4 | 56.7 | 5.7 | 194 | 21.0 |
| 45-49 |  | 9.1 | 22.2 | 48.5 | 59.6 | 1.0 | 99 | 22.0 |
| 50-54 | 0.7 | 6.5 | 13.7 | 44.6 | 50.4 | 2.9 | 139 | 24.0 |
| 55-59 |  | 7.3 | 20.7 | 45.1 | 54.9 |  | 82 | 22.5 |
| 60-64 | 0.7 | 8.2 | 19.4 | 46.3 | 51.5 | 3.0 | 134 | 22.0 |
| 20-49 | 0.8 | 9.7 | 21.3 | 31.3 | 40.5 | 31.7 | 1,556 | 20.0 |
| 25-49 | 0.9 | 10.9 | 23.3 | 44.4 | 57.5 | 15.0 | 1,096 | 21.0 |
| 20-64 | 0.8 | 9.3 | 20.6 | 33.9 | 42.6 | 26.2 | 1,911 | 20.0 |
| 25-64 | 0.8 | 10.0 | 21.8 | 44.7 | 56.1 | 11.9 | 1,451 | 21.0 |

Note: The age at first marriage is defined as the age at which the respondent got married to his first spouse na $=$ Not applicable due to censoring
$a=$ Omitted because less than 50 percent of the men go married for the first time before reaching the beginning of the age group

## Table 4.4 Current Fertility

Age-specific and total fertility rate, the general fertility rate, and the curde birth rate for the three years preceding the survey, BHDS

## 2020

| Age group | Total |
| :--- | :---: |
| $15-19$ | 143 |
| $20-24$ | 332 |
| $25-29$ | 335 |
| $30-34$ | 277 |
| $35-39$ | 151 |
| $40-44$ | 46 |
| $45-49$ | 0 |
| TFR (15-49) | 6.4 |
| GFR | 233 |
| CBR | 43 |

Notes: Age-specific fertility rates are per 1,000 women
Rates for age group 45-49 may be slightly biased due to truncation. Rates are for the period 1-36 months prior to interview.
TFR: Total fertility rate expressed per women GFR: General fertility rate expressed per 1,000 women age 15-49 CBR: Crude birth rate expressed per 1,000 population

Table 4.5 Selected fertility indicators by background characteristics

Total fertility rate for the three years preceding the survey, percentage of women age 15-49 currently pregnant, and mean number of children ever born to women aged 40-49 years, by background characteristics, SHDS 2020

|  | Total Fertility Rate | Percentage women age 15- <br> 49 currently pregnant | Mean number of children <br> ever born to women age <br> 40-49 |
| :--- | :---: | :---: | :---: |
| Education |  |  |  |
| No Education | 7.1 | 15.6 | 8.1 |
| Primary | 6.5 | 17.6 | 6.7 |
| Secondary | 5.7 | 26.5 | 5.1 |
| Higher | 3.7 | 21.6 | 4.8 |
| Wealth quintile |  |  |  |
| Lowest | 7.7 | 19.5 | 7.4 |
| Second | 6.5 | 15.2 | 6.5 |
| Middle | 6.0 | 18.4 | 7.3 |
| Fourth | 5.9 | 16.1 | 6.7 |
| Highest | $\mathbf{6 . 4}$ | 15.5 | $\mathbf{7 . 4}$ |
| Total | $\mathbf{1 6 . 9}$ | $\mathbf{7 . 0}$ |  |
| Note: Total fertility rates are for the period 1-36 months preceding the interview |  |  |  |

## Table 4.6 Children ever born and living

Percent distribution of all women and currently married women aged 15-49 by number of children ever born, mean number of children ever born and mean number of living children, according to age group, BHDS 2020

| Age | Number of children ever born |  |  |  |  |  |  |  |  |  |  | Total | Number of women | Mean number of children ever born | Mean number of living children |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10+ |  |  |  |  |
| All women |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 42.6 | 33.5 | 18.1 | 5.8 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 155 | 0.9 | 0.9 |
| 20-24 | 14.8 | 22.1 | 24.9 | 19.9 | 15.5 | 2.8 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 317 | 2.1 | 2.1 |
| 25-29 | 6.3 | 7.8 | 14.8 | 13.3 | 17.4 | 16.1 | 10.9 | 8.3 | 3.1 | 1.3 | 0.5 | 100.0 | 384 | 3.9 | 3.6 |
| 30-34 | 2.7 | 3.3 | 6.0 | 12.3 | 15.0 | 14.0 | 12.6 | 16.3 | 8.3 | 4.3 | 5.3 | 100.0 | 301 | 5.4 | 4.9 |
| 35-39 | 3.9 | 1.3 | 6.0 | 2.6 | 7.8 | 16.8 | 13.4 | 12.5 | 11.6 | 12.1 | 12.1 | 100.0 | 232 | 6.4 | 5.8 |
| 40-44 | 10.8 | 2.2 | 0.7 | 5.0 | 10.8 | 7.2 | 14.4 | 9.4 | 13.7 | 10.8 | 15.1 | 100.0 | 139 | 6.2 | 5.6 |
| 45-49 | 2.3 | 1.2 | 2.3 | 12.8 | 14.0 | 10.5 | 15.1 | 12.8 | 4.7 | 5.8 | 18.6 | 100.0 | 86 | 6.3 | 5.2 |
| Total | 10.6 | 10.5 | 12.3 | 11.4 | 12.8 | 10.6 | 8.9 | 8.3 | 5.4 | 4.1 | 5.1 | 100.0 | 1,614 | 4.2 | 3.9 |
| Currently married women |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 46.2 | 30.3 | 17.6 | 5.9 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 119 | 0.8 | 0.8 |
| 20-24 | 15.8 | 17.8 | 25.3 | 21.3 | 16.6 | 3.2 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 253 | 2.1 | 2.3 |
| 25-29 | 5.3 | 6.6 | 12.9 | 14.5 | 17.9 | 17.3 | 11.0 | 9.1 | 3.5 | 1.3 | 0.6 | 100.0 | 318 | 4.1 | 3.8 |
| 30-34 | 1.6 | 2.3 | 4.7 | 10.9 | 15.2 | 14.0 | 13.2 | 17.9 | 9.7 | 4.7 | 5.8 | 100.0 | 257 | 5.6 | 5.2 |
| 35-39 | 4.1 | 1.0 | 5.2 | 3.1 | 6.2 | 16.5 | 13.9 | 11.9 | 10.8 | 13.9 | 13.4 | 100.0 | 194 | 6.5 | 6.0 |
| 40-44 | 9.1 | 0.9 |  | 4.5 | 10.0 | 6.4 | 17.3 | 7.3 | 15.5 | 11.8 | 17.3 | 100.0 | 110 | 6.6 | 6.1 |
| 45-49 | 1.6 | 1.6 | 1.6 | 8.1 | 12.9 | 12.9 | 12.9 | 14.5 | 6.5 | 6.5 | 21.0 | 100.0 | 62 | 6.7 | 5.6 |
| Total | 10.3 | 8.5 | 11.3 | 11.5 | 12.9 | 11.1 | 9.4 | 8.8 | 5.9 | 4.6 | 5.7 | 100.0 | 1,313 | 4.4 | 4.1 |

## Table 4.7 Birth intervals

Percent distribution of non-first births in the five years preceding the survey by number of months since preceding birth, and median number of months since preceding birth, according to background characteristics, BHDS 2020

|  | Birth order |  |  |  |  |  | Total |  | Median |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | 7-17 | 18-23 | 24-35 | 36-47 | 48-59 | 60+ |  | Number of nonfirst births | number of months since preceding |


| Age |  |  |  |  |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 15-19 | 13.2 | 7.5 | 9.4 | $*$ | 1.9 | 67.9 | 100.0 | 53 | 20.0 |
| $20-29$ | 28.8 | 12.8 | 19.9 | 8.6 | 3.0 | 27.0 | 100.0 | 690 | 22.0 |
| $30-39$ | 28.1 | 12.3 | 24.2 | 15.1 | 6.9 | 13.3 | 100.0 | 405 | 26.0 |
| $40-49$ | 20.8 | 9.4 | 26.4 | 17.0 | 1.9 | 24.5 | 100.0 | 53 | 28.8 |

Sex of preceding
birth

| Male | 27.1 | 11.8 | 22.0 | 11.1 | 4.6 | 23.4 | 100.0 | 650 | 24.0 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Female | 28.1 | 12.7 | 20.1 | 10.3 | 3.8 | 24.9 | 100.0 | 551 | 23.0 |

## Survival of <br> preceding birth

| Living | 28.8 | 12.9 | 21.1 | 9.9 | 3.4 | 23.8 | 100.0 | 961 | 23.0 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Dead <br> Birth order | 22.5 | 9.6 | 21.3 | 14.2 | 7.5 | 25.0 | 100.0 | 240 | 26.0 |
| 2-3 | 27.9 | 12.1 | 21.6 | 10.5 | 4.4 | 23.6 | 100.0 | 1,029 | 24.0 |
| 4-6 | 23.3 | 13.8 | 20.1 | 12.6 | 3.8 | 26.4 | 100.0 | 159 | 25.2 |
| 7+ | 53.8 | 7.7 |  | 7.7 |  | 30.8 | 100.0 | 13 | 12.0 |
| Education |  |  |  |  |  |  |  |  |  |
| No Education | 27.0 | 12.5 | 20.8 | 12.1 | 4.8 | 22.8 | 100.0 | 947 | 24.0 |
| Primary | 34.2 | 11.6 | 24.0 | 6.8 | 1.4 | 21.9 | 100.0 | 146 | 21.0 |
| Secondary | 21.3 | 13.3 | 21.3 | 5.3 | 5.3 | 33.3 | 100.0 | 75 | 28.2 |
| Higher | 27.3 | 6.1 | 18.2 |  |  | 48.5 | 100.0 | 33 | 23.4 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |
| Lowest | 29.8 | 7.8 | 17.7 | 11.3 | 7.1 | 26.2 | 100.0 | 141 | 24.0 |
| Second | 28.3 | 11.5 | 22.5 | 11.5 | 2.9 | 23.4 | 100.0 | 244 | 24.0 |
| Middle | 28.0 | 13.0 | 22.3 | 10.2 | 4.0 | 22.6 | 100.0 | 354 | 24.0 |
| Fourth | 22.5 | 15.1 | 22.5 | 10.9 | 6.2 | 22.9 | 100.0 | 258 | 24.0 |
| Highest | 30.9 | 11.3 | 18.1 | 10.3 | 2.0 | 27.5 | 100.0 | 204 | 22.1 |
| Total | $\mathbf{2 7 . 6}$ | $\mathbf{1 2 . 2}$ | $\mathbf{2 1 . 1}$ | $\mathbf{1 0 . 7}$ | $\mathbf{4 . 2}$ | $\mathbf{2 4 . 1}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{1 , 2 0 1}$ | $\mathbf{2 4 . 0}$ |

Note: First-order births are excluded. The interval for multiple births is the number of months since the preceding pregnancy that ended in a live birth.
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

## Table 4.8 Menopause

| Percentage of women aged 30-49 who are menopausal, by age, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Age | Percentage Menopausal ${ }^{1}$ | Number of women |
| 30-34 | 8.6 | 303 |
| 35-39 | 11.6 | 233 |
| 40-41 | 20.4 | 103 |
| 42-43 | 22.2 | 27 |
| 44-45 | 29.9 | 67 |
| 46-47 | * | 10 |
| 48-49 | * | 19 |
| Total | 14.8 | 762 |
| ${ }^{1}$ Percentage of women who are not pregnant and not postpartum amenorrheic whose last menstrual period occurred six or more months preceding the survey <br> Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed |  |  |

Table 4.9 Age at first birth

Percentage of women aged 15-49 who gave birth by specific exact ages, percentage who have never given birth, and median age at first birth, according to current age, BHDS 2020

| Current age | Percentage who gave birth by exact age: |  |  |  |  | Percentage who never given birth | Number of women | Median age at first birth |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 15 | 18 | 20 | 22 | 25 |  |  |  |
| 15-19 | 0.6 | 0.0 | 0.0 | 0.0 | 0.0 | 85.6 | 651 | 19.5 |
| 20-24 | 1.6 | 10.0 | 21.7 | 0.0 | 0.0 | 33.8 | 429 | 21.0 |
| 25-29 | 1.9 | 13.3 | 27.1 | 46.7 | 72.6 | 12.8 | 413 | 21.0 |
| 30-34 | 2.6 | 11.2 | 28.1 | 52.1 | 78.2 | 3.3 | 303 | 21.0 |
| 35-39 | 0.4 | 7.7 | 16.3 | 38.6 | 70.0 | 4.3 | 233 | 22.0 |
| 40-44 | 1.4 | 9.3 | 15.7 | 32.1 | 52.9 | 11.4 | 140 | 23.0 |
| 45-49 | 0.0 | 2.3 | 8.1 | 16.3 | 40.7 | 2.3 | 86 | 25.0 |
| 20-49 | 1.6 | 10.3 | 22.3 | 31.2 | 50.4 | 14.7 | 1,604 | 21.0 |
| 25-49 | 1.6 | 10.4 | 22.5 | 42.6 | 68.9 | 7.7 | 1,175 | 22.0 |
| na $=$ Not applicable due to censoring <br> $a=$ Omitted because less than 50 percent of women had a birth before reaching the beginning of the age group |  |  |  |  |  |  |  |  |

Table 4.10 Median age at first birth


Table 4.11 Teenage pregnancy and motherhood
Percentage of women aged 15-19 who have had a live birth or who are pregnant with their first child, and percentage who have begun childbearing, BHDS 2020

| Background characteristics | Percentage of women age 15-19 who |  | Percentage who have begun childbearing | Number of women |
| :---: | :---: | :---: | :---: | :---: |
|  | Have had a live birth | Are pregnant with first child |  |  |
| Age group |  |  |  |  |
| 15-19 | 14.4 | 3.4 | 17.8 | 651 |
| 15 | 2.5 | 0.0 | 2.5 | 158 |
| 16 | 2.2 | 0.7 | 2.9 | 137 |
| 17 | 13.0 | 4.6 | 17.6 | 108 |
| 18 | 24.4 | 8.5 | 32.9 | 164 |
| 19 | 39.3 | 2.4 | 41.7 | 84 |
| Education |  |  |  |  |
| No Education | 21.8 | 4.1 | 25.9 | 294 |
| Primary | 12.0 | 3.8 | 15.8 | 133 |
| Secondary | 5.7 | 2.8 | 8.5 | 176 |
| Higher | 8.3 | 0.0 | 8.3 | 48 |
| Wealth quintile |  |  |  |  |
| Lowest | 25.0 | 6.3 | 31.3 | 48 |
| Second | 15.7 | 3.3 | 19.0 | 121 |
| Middle | 10.7 | 3.2 | 13.9 | 187 |
| Fourth | 15.2 | 3.0 | 18.2 | 165 |
| Highest | 13.8 | 3.1 | 16.9 | 130 |
| Total | 14.4 | 3.4 | 17.8 | 651 |

Table 4.12 Fertility preferences by number of living children

| Percent distribution of currently married women aged 15-49 by desire for children, according to number of living children, BHDS 2020 |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Desire for children | Number of living children ${ }^{1}$ |  |  |  |  |  |  | Total 15-49 |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6+ |  |
| Have another soon ${ }^{2}$ | 80.0 | 90.6 | 81.8 | 82.8 | 80.3 | 75.5 | 69.9 | 77.8 |
| Have another later ${ }^{3}$ | 2.1 | 0.0 | 3.1 | 4.1 | 3.4 | 3.9 | 4.2 | 3.4 |
| Undecided | 12.6 | 6.3 | 8.8 | 7.1 | 9.0 | 10.3 | 10.0 | 9.2 |
| Want no more | 0.0 | 1.6 | 5.0 | 3.6 | 5.6 | 9.7 | 14.5 | 7.8 |
| Declared infecund | 5.3 | 1.6 | 1.3 | 2.4 | 1.7 | 0.6 | 1.4 | 1.8 |
| Total | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Number of respondents | 95 | 128 | 159 | 169 | 178 | 155 | 429 | 1,313 |

${ }^{1}$ The number of living children includes current pregnancy for women
${ }^{2}$ Wants next birth within 2 years
${ }^{3}$ Wants to delay next birth for 2 or more years

## Table 4.13 Desire to limit childbearing: Women

Percentage of currently married women aged 15-49 who want no more children, by number of living children, according to background characteristics, BHDS 2020

| Background characteristics | Number of living children ${ }^{1}$ |  |  |  |  |  |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6+ |  |
| Education |  |  |  |  |  |  |  |  |
| No education | 0.0 | 0.0 | 3.5 | 3.1 | 5.3 | 8.5 | 14.6 | 7.8 |
| Primary | 0.0 | 5.6 | 10.5 | 5.9 | 7.1 | 13.3 | 16.7 | 9.7 |
| Secondary | 0.0 | 5.0 | 6.3 | 6.3 | 7.7 | 22.2 | 12.0 | 8.3 |
| Higher | 0.0 | 0.0 | 9.1 | 0.0 | 0.0 | 0.0 | 0.0 | 2.3 |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 0.0 | 0.0 | 0.0 | 5.9 | 4.3 | 4.5 | 17.6 | 8.0 |
| Second | 0.0 | 4.8 | 8.0 | 9.7 | 3.6 | 4.0 | 10.7 | 7.4 |
| Middle | 0.0 | 0.0 | 4.5 | 2.1 | 6.3 | 14.3 | 16.5 | 9.2 |
| Fourth | 0.0 | 0.0 | 8.6 | 0.0 | 4.5 | 5.6 | 11.8 | 5.9 |
| Highest | 0.0 | 4.5 | 2.5 | 3.0 | 8.6 | 17.4 | 16.9 | 8.7 |
| Total | 0.0 | 1.6 | 5.0 | 3.6 | 5.6 | 9.7 | 14.5 | 7.8 |

Note: ${ }^{1}$ The number of living children includes the current pregnancy

Table 4.14 Ideal number of children

Percent distribution of women aged 15-49 by ideal number of children, and mean ideal number of children for all respondents and for currently married respondents, according to the number of living children, BHDS 2020

Number of living children ${ }^{1}$

|  | Number of living children ${ }^{1}$ |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6+ | Total |
| Ideal number of children |  |  |  |  |  |  |  |  |
| 1 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.8 | 0.0 | 0.1 |
| 2 | 2.3 | 0.7 | 2.6 | 0.6 | 0.6 | 0.8 | 0.6 | 1.0 |
| 3 | 1.2 | 0.0 | 0.0 | 1.2 | 0.6 | 0.0 | 0.6 | 0.5 |
| 4 | 5.8 | 2.1 | 4.5 | 0.6 | 0.0 | 0.8 | 0.9 | 1.7 |
| 5 | 9.3 | 6.3 | 5.2 | 7.9 | 1.9 | 1.5 | 1.5 | 4.1 |
| 6+ | 81.4 | 91.0 | 87.7 | 89.7 | 96.9 | 96.2 | 96.4 | 92.6 |
| Total | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Number of women | 86 | 144 | 155 | 165 | 162 | 130 | 333 | 1,175 |
| Mean ideal number of children for: ${ }^{2}$ |  |  |  |  |  |  |  |  |
| All Ever Married women | 10.6 | 10.4 | 10.9 | 11.7 | 12.5 | 12.2 | 13.9 | 12.1 |
| Number of women | 86 | 144 | 155 | 165 | 162 | 130 | 333 | 1,175 |
| Mean ideal number of children for currently married women |  |  |  |  |  |  |  |  |
| Currently married women | 11.1 | 10.7 | 11.2 | 11.7 | 12.4 | 12.4 | 14.0 | 12.4 |
| Number of currently married women | 58 | 93 | 118 | 136 | 133 | 111 | 297 | 946 |
| ${ }^{1}$ The number of living children includes current pregnancy for women <br> ${ }^{2}$ Means are calculated excluding respondents who gave non-numeric responses." |  |  |  |  |  |  |  |  |

## Table 4.15 Fertility planning status

Percent distribution of births to women aged 15-49 in the five years preceding the survey (including current pregnancies), by planning status of the birth, according to birth order and mother's age at birth, BHDS, 2020

| Birth order and mother's age at birth | Planning status of birth |  |  | Total | Number of births |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Wanted then | Wanted later | Wanted no more |  |  |
| Birth Order |  |  |  |  |  |
| 1 | 77.8 | 18.5 | 3.6 | 100.0 | 740 |
| 2 | 78.6 | 18.8 | 2.5 | 100.0 | 637 |
| 3 | 72.7 | 22.7 | 4.6 | 100.0 | 410 |
| 4+ | 66.7 | 26.9 | 6.4 | 100.0 | 234 |
| Mother's age at birth |  |  |  |  |  |
| <20 | 74.9 | 22.0 | 3.1 | 100.0 | 386 |
| 20-24 | 77.2 | 19.3 | 3.5 | 100.0 | 659 |
| 25-29 | 79.0 | 18.8 | 2.2 | 100.0 | 537 |
| 30-34 | 70.3 | 23.1 | 6.6 | 100.0 | 286 |
| 35-39 | 66.9 | 24.8 | 8.3 | 100.0 | 133 |
| 40-44 | 95.0 | 5.0 |  | 100.0 | 20 |
| 45-49 | * | * | * | * | 0 |
| Total 15-49 | 75.8 | 20.4 | 3.8 | 100.0 | 2,021 |

Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

## Table 4.16 Knowledge of contraceptive methods

| Percentage of all ever married women and currently married women aged $15-49$ who have heard of any contraceptive method, by |  |  |
| :--- | :---: | :---: |
| specific method, BHDS 2020 |  |  |
| Method | All women | Currently married women |
| Any method | 73.0 | 73.5 |
| Any modern method | 72.6 | 73.1 |
| IUD | 25.7 | 25.2 |
| Injectables | 44.7 | 44.8 |
| Implants | 36.9 | 36.7 |
| pills | 48.1 | 47.7 |
| Male condom | 24.2 | 23.8 |
| Female condom | 13.8 | 13.7 |
| Emergency contraception | 11.0 | 10.8 |
| Standard days method | 11.1 | 10.8 |
| Lactational Amenorrhea (LAM) | 66.0 | 66.3 |
| Other modern method | 2.5 | 2.7 |
| Any traditional method | 19.7 | 19.3 |
| Rythm | 10.9 | 11.0 |
| Withdrawal | 16.6 | 16.1 |
| Traditional method | 1.9 | 2.1 |
| Mean number of methods known by women 15-49 | 3.1 | 3.1 |
| Number of respondents | 1,614 | 1,313 |

Table 4.17 Knowledge of contraceptive methods by background characteristics

| Percentage of currently married women aged 15-49 who have heard of at least one contraceptive method and who have heard of at least one modern method, by background characteristics, BHDS 2020 |  |  |  |
| :---: | :---: | :---: | :---: |
| Background characteristics | Heard of any method | Heard of any modern method | Number of women |
| Age |  |  |  |
| 15-19 | 61.3 | 61.3 | 119 |
| 20-24 | 80.2 | 79.8 | 253 |
| 25-29 | 77.0 | 76.4 | 318 |
| 30-34 | 75.1 | 74.7 | 257 |
| 35-39 | 71.1 | 70.6 | 194 |
| 40-44 | 64.5 | 64.5 | 110 |
| 45-49 | 67.7 | 67.7 | 62 |
| Education |  |  |  |
| No education | 69.7 | 69.2 | 1,027 |
| Primary | 82.1 | 82.1 | 134 |
| Secondary | 89.0 | 89.0 | 109 |
| Higher | 97.7 | 97.7 | 43 |
| Wealth quintile |  |  |  |
| Lowest | 75.3 | 74.7 | 150 |
| Second | 70.9 | 70.9 | 230 |
| Middle | 72.9 | 72.9 | 358 |
| Fourth | 75.1 | 74.8 | 321 |
| Highest | 73.6 | 72.4 | 254 |
| Total 15-49 | 73.5 | 73.1 | 1,313 |

Table 4.18 Current use of contraception by age

| Percent distribution of all women, currently married women aged 15-49 by contraceptive method currently used, according to age, BHDS 2020 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Contraceptive method |  |  |  |  |  |
| Age | Percentage of currently married women using any contraceptive method | Any modern method | Any traditional method | Not currently using | Total | Number of women currently married |
| 15-19 | 4.2 | 0.0 | 4.2 | 95.8 | 100.0 | 119 |
| 20-24 | 7.1 | 0.8 | 6.3 | 92.9 | 100.0 | 253 |
| 25-29 | 7.9 | 0.6 | 7.2 | 92.1 | 100.0 | 318 |
| 30-34 | 5.1 | 1.2 | 3.9 | 94.9 | 100.0 | 257 |
| 35-39 | 6.2 | 0.5 | 5.7 | 93.8 | 100.0 | 194 |
| 40-44 | 0.9 | 0.0 | 0.9 | 99.1 | 100.0 | 110 |
| 45-49 | 0.0 | 0.0 | 0.0 | 100.0 | 100.0 | 62 |
| Total | 5.6 | 0.6 | 5.0 | 94.4 | 100.0 | 1,313 |

Note: If more than one method is used, only the most effective method is considered in this tabulation na $=$ Not applicable
LAM = Lactational amenorrhoea method

## Table 4.19 Knowledge of fertile period by age

Percentage of ever-married women age 15-49 with correct knowledge of the fertile period during the ovulatory cycle, according to age, BHDS 2020

| Age | Percentage with correct knowledge of the <br> fertile period | Number of ever Married women |
| :--- | :---: | :---: |
| $15-19$ | 10.3 | 155 |
| $20-24$ | 15.1 | 317 |
| $25-29$ | 16.7 | 384 |
| $30-34$ | 17.6 | 301 |
| $35-39$ | 17.7 | 232 |
| $40-44$ | 14.4 | 139 |
| 45-49 | 11.6 | 86 |
| Total | $\mathbf{1 5 . 6}$ | $\mathbf{1 , 6 1 4}$ |
| Note: Correct knowledge of the fertile period is defined as halfway between two menstrual periods |  |  |

Table 4.20 Need and demand for birth spacing among currently married women
Percentage of currently married women aged 15-49 with unmet need for birth spacing, percentage with met need for birth spacing, the total demand for birth spacing, and the percentage of the demand for contraception that is satisfied, by background characteristics, BHDS 2020

| Background characteristics | Unmet need for birth spacing |  | Total | Met need for birth spacing (currently using) |  | Total | Total demand for birth spacing ${ }^{1}$ |  | Total | Percentage of demand satisfied ${ }^{2}$ | Percentage of demand satisfied by modern method ${ }^{3}$ | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | For spacing | For limiting |  | For spacing | For limiting |  | For spacing | For limiting |  |  |  |  |
| Age |  |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 24.4 | 0.0 | 24.4 | 0.8 | 0.0 | 0.8 | 25.2 | 0.0 | 25.2 | 3.3 | 0.0 | 119 |
| 20-24 | 31.6 | 1.2 | 32.8 | 3.6 | 0.0 | 3.6 | 35.2 | 1.2 | 36.4 | 9.8 | 3.3 | 253 |
| 25-29 | 32.4 | 2.5 | 34.9 | 1.6 | 0.3 | 1.9 | 34.0 | 2.8 | 36.8 | 5.1 | 1.7 | 318 |
| 30-34 | 31.1 | 2.7 | 33.9 | 1.9 | 0.4 | 2.3 | 33.1 | 3.1 | 36.2 | 6.5 | 3.2 | 257 |
| 35-39 | 25.8 | 4.6 | 30.4 | 1.5 | 0.5 | 2.1 | 27.3 | 5.2 | 32.5 | 6.3 | 3.2 | 194 |
| 40-44 | 14.5 | 17.3 | 31.8 | 0.0 | 0.0 | 0.0 | 14.5 | 17.3 | 31.8 | 0.0 | 0.0 | 110 |
| 45-49 | 14.5 | 8.1 | 22.6 | 0.0 | 0.0 | 0.0 | 14.5 | 8.1 | 22.6 | 0.0 | 0.0 | 62 |
| Education |  |  |  |  |  |  |  |  |  |  |  |  |
| No Education | 26.8 | 4.3 | 31.1 | 1.3 | 0.2 | 1.5 | 28.0 | 4.5 | 32.5 | 4.5 | 2.1 | 1,027 |
| Primary | 33.6 | 3.0 | 36.6 | 1.5 | 0.7 | 2.2 | 35.1 | 3.7 | 38.8 | 5.8 | 3.8 | 134 |
| Secondary | 31.2 | 2.8 | 33.9 | 1.8 | 0.0 | 1.8 | 33.0 | 2.8 | 35.8 | 5.1 | 0.0 | 109 |
| Higher | 30.2 | 0.0 | 30.2 | 14.0 | 0.0 | 14.0 | 44.2 | 0.0 | 44.2 | 31.6 | 5.3 | 43 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 21.3 | 4.0 | 25.3 | 2.0 | 0.0 | 2.0 | 23.3 | 4.0 | 27.3 | 7.3 | 2.4 | 150 |
| Second | 35.7 | 3.0 | 38.7 | 1.3 | 0.4 | 1.7 | 37.0 | 3.5 | 40.4 | 4.3 | 1.1 | 230 |
| Middle | 29.1 | 4.5 | 33.5 | 0.8 | 0.3 | 1.1 | 29.9 | 4.7 | 34.6 | 3.2 | 0.8 | 358 |
| Fourth | 26.5 | 2.8 | 29.3 | 2.2 | 0.0 | 2.2 | 28.7 | 2.8 | 31.5 | 6.9 | 3.0 | 321 |
| Highest | 25.2 | 5.1 | 30.3 | 2.8 | 0.4 | 3.1 | 28.0 | 5.5 | 33.5 | 9.4 | 4.7 | 254 |
| Total | 28.0 | 3.9 | 31.8 | 1.8 | 0.2 | 2.0 | 29.7 | 4.1 | 33.8 | 5.9 | 2.3 | 1,313 |
| "Note: Numbers in this table correspond to the revised definition of unmet need described in Bradley et al., 2012. <br> ${ }^{1}$ Total demand is the sum of unmet need and met need <br> ${ }^{2}$ Percentage of demand satisfied is met need divided by total demand <br> ${ }^{3}$ Modern methods include pill, IUD, injectables, implants, male condom, female condom, and lactational amenorrhea method (LAM)" |  |  |  |  |  |  |  |  |  |  |  |  |

## Table 4.21 Exposure to Birth Spacing messages

Percentage of ever-married women aged 15-49 who heard or saw a birth spacing message on radio, on television, in a newspaper or magazine, or on a mobile phone in the past few months, according to background characteristics, BHDS 2020

| Background <br> characteristics | Radio | Television | Newspaper | Any of these <br> three media <br> source | All of these <br> three media <br> source | None of <br> these three <br> media <br> sources | Number of <br> women |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Education |  |  |  |  |  |  |  |
| No Education | 12.4 | 8.5 | 2.6 | 15.2 | 2.0 | 84.8 | 1,246 |
| Primary | 17.2 | 20.7 | 4.6 | 28.7 | 3.4 | 71.3 | 174 |
| Secondary | 25.0 | 20.6 | 9.6 | 32.4 | 5.9 | 67.6 | 136 |
| Higher | 31.0 | 46.6 | 19.0 | 51.7 | 13.8 | 48.3 | 58 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 11.6 | 4.4 | 1.7 | 12.2 | 1.1 | 87.8 | 181 |
| Second | 13.1 | 9.8 | 3.7 | 17.5 | 2.7 | 82.5 | 297 |
| Middle | 15.1 | 13.6 | 4.4 | 21.3 | 3.1 | 78.7 | 450 |
| Fourth | 15.2 | 14.1 | 5.0 | 19.6 | 3.7 | 80.4 | 382 |
| Highest | 16.4 | 14.8 | 3.9 | 22.4 | 3.0 | 77.6 | 304 |
| Total 15-49 | 14.6 | 12.2 | 4.0 | 19.4 | 2.9 | 80.6 | 1,614 |

CHAPTER 5
Maternal and Newborn Health

## Key Findings

ANTENATAL CARE COVERAGE


49\%
of women aged 15-49 who had a live birth in the 5 years before the survey received antenatal care from a skilled health personnel during the pregnancy of their most recent birth.

TETANUS TOXOID INJECTIONS
30\%
of women aged 15-49 had received at two tetanus toxoid injections during the pregnancy of their most recent birth.

DELIVERY SERVICES
48\%
births are delivered with the assistance of a trained health personnel; 38 percent are delivered at the health facility of which ( 28 percent are in public and 9 percent are in private facilities)

POSTNATAL CHECKS
8\%
of mothers had a postnatal check during the first 2 days after deliver

## 7\%

of new-borns had a postnatal check during the first 2 days after deliver

ACCESS PROBLEMS


70\%
of women reported that they face at least one problem accessing health care.

# Maternal and Newborn Health 


#### Abstract

This chapter presents crucial findings on maternal health, including information on the provision of antenatal care (ANC), delivery, and postnatal care (PNC). These services support key strategic and health policy objectives in Benadir, particularly the reduction of maternal morbidity and mortality.


> Well-designed and well-implemented ANC programmes facilitate the timely detection and treatment of problems during pregnancy.

The survey results provide an opportunity to identify critical issues affecting the health status of women and children in Benadir. This information will assist policymakers, planners and other collaborators in the health sector to formulate appropriate strategies and interventions to improve maternal, new-born and child health services in Benadir.

## Antenatal Care

The health care that a mother receives during pregnancy and at the time of delivery, known as antenatal care, is important for the survival and well-being of both the mother and new-born child. ANC from nurse or trained personnel is vital for monitoring a pregnancy and reducing the risks related to morbidity and mortality for the mother and child during pregnancy and delivery.

Well-designed and well-implemented ANC programmes facilitate the timely detection and treatment of problems during pregnancy. In developing countries in particular, the prevention and treatment of malaria in pregnant women, management of anaemia during pregnancy, and treatment of sexually transmitted infections (STIs) can significantly improve foetal outcomes and improve maternal health. During the antenatal period, interventions such as the administering of tetanus immunization can be life-saving for both the mother and child.

Women who had given birth in the five years preceding the survey were asked about the type of ANC provider they had used, the number of ANC visits they had made, the stage of pregnancy they were in at the time of their first visit and services and information provided to them during ANC visits. For women with two or more live births during the five -year period, data on ANC refers to the most recent birth only.

## Figure 5.1 Source of Antenatal Care

Percent distribution of mothers who had children in the five years before the survey, by source of antenatal care received during pregnancy


Figure 5.2 ANC visits made by pregnant women

Percent distribution of women age 15-49 who had a live birth in the five years preceding the survey by number of antenatal care (ANC) visits for the most recent live birth

## Antenatal Care Coverage

Table 5.1 and Figure 5.1 show the percent distribution of women who had a birth five years preceding the survey, by ANC provider during pregnancy. Forty-seven percent of women in Benadir did not make ANC visits during their most recent pregnancy in the five years prior to the survey, compared to 68 percent countrywide (SHDS, 2020). Among those who made ANC visits, 49 percent received ANC from trained personnel (doctors/clinical officers or nurses/midwives/ auxiliary midwives) at least once. Twenty-four percent of women received ANC from a doctor/clinical officer, while 24 percent received care from a midwife, nurse or auxiliary midwife.

Education levels and wealth status of women were associated with the use of ANC from a skilled health care provider. Seventy-nine percent of women with higher education received antenatal care from a skilled provider, compared to 44 percent of women with no education. Similarly, 58 percent of women in the highest wealth quintiles received antenatal care from a skilled provider, compared to 40 percent of women in the lowest wealth quintiles.

Generally, younger mothers aged between 20-34 years received more ANC from skilled medical personnel than older women aged 35-49 years at 50 percent and 40 percent respectively.

## Number and Timing of Antenatal Visits

ANC is more beneficial in preventing adverse outcomes of pregnancy when it is sought early and is continued throughout pregnancy. Health professionals recommend that the first antenatal visit should occur within the first three months of the pregnancy and that visits should continue on a monthly basis through week 28 of pregnancy, and then every two weeks up to week 36 (or until birth). If the first antenatal visit is made during the third month of pregnancy and then visits occur as regularly as recommended, a total of at least 12 to 13 antenatal visits should have taken place.

Table 5.2 and Figure 5.2 show that among women who had a live birth in the five years preceding the survey, 8 percent had made four or more antenatal care visits, while 36 percent made between two and three visits in their most recent pregnancy in the five years preceding the survey. Nationally, 24 percent of women who had a live birth in the five years preceding the survey made four or more ANC visits (SHDS, 2020).

Fifteen percent of women made their first antenatal care visit before the fourth month of pregnancy while 16 percent of women had their first ANC visit in (4-5 months). The median length of pregnancy at the first antenatal care visit is 5 months.

## Components of Antenatal Care

The content of ANC is an essential component of the quality of maternal health services being delivered. In addition to receiving basic care, every pregnant woman should be monitored for complications. Ensuring that pregnant women receive information and undergo screening for complications should be a routine part of all antenatal care visits. To assess ANC services, respondents were asked whether they had been advised of complications or received certain screening tests during at least one of the ANC visits.

Table 5.3 and Figure 5.3 present information on the content of antenatal services, including the percentages of women who took iron supplements, took drugs for intestinal parasites, were informed of the signs of pregnancy complications, and received selected routine services during antenatal care visits for their most recent birth in the five years preceding the survey.

Overall, 52 percent of women took iron tablets during their last pregnancy while only 12 percent of women took drugs to treat intestinal worms during their last pregnancy. On the other hand, among other antenatal care services, 82 percent of women who received antenatal care had their blood pressure measured, 65 percent had a urine sample taken, and 69 percent had a blood sample taken (Figure 5.3).

Figure 5.3 Components of antenatal care
Percent of women who received different components of antenatal care


> 79\%
> of mothers with higher education have births protected against neonatal tetanus

Figure 5.4 Assistance during delivery

Percent distribution of live births in the five years preceding the survey by person providing assistance during delivery


## Tetanus Toxoid

Tetanus toxoid injections are given during pregnancy to prevent neonatal tetanus, a leading cause of early infant death in many developing countries, often attributed to poor hygiene during delivery. For full protection of her new-born baby, a pregnant woman should receive at least two injections of the vaccine during pregnancy. If a woman has been vaccinated during a previous pregnancy, she may only require one or no doses for the next pregnancy. Five doses are considered to provide protection for a lifetime.

Table 5.4 presents the percentage of women aged $15-49$ with a live birth in the five years preceding the survey who received two or more tetanus toxoid injections during their most recent pregnancy and the percentage whose last birth was protected against neonatal tetanus. Thirty percent of women in Benadir received two or more tetanus toxoid injections during the pregnancy of their last live birth; this is higher than the national rate of 17 percent (SHDS, 2020).

Forty-five percent of births were protected against neonatal tetanus compared to 27 percent nationally (SHDS, 2020). The proportion of births protected against tetanus increases with a mother's educational level: 79 percent of mothers with higher education have births protected against neonatal tetanus, as compared to 40 percent of women with no education.

## Assistance at Delivery

To reduce maternal and neonatal morbidity and mortality, there is a need for every child to be delivered with the assistance of trained skilled birth attendants. Table 5.5 shows the percent distribution of births in the five years preceding the survey by type of medical assistance available at the time of delivery, the percentage of births attended by a skilled health provider, and the percentage of births delivered by caesarean section (C-section), according to background characteristics.

Table 5.5 shows that 48 percent of births in Benadir are delivered with the assistance of a skilled health professional, which includes a doctor/clinical officer or a nurse/midwife or auxiliary midwife, compared to 32 percent nationally (SHDS, 2020). According to survey findings, the percentage of women who delivered babies by C -section is at 3 percent. Among births in the five years preceding the survey, 12 percent of the deliveries were assisted by a doctor, 37 percent by a nurse or midwife or auxiliary, and 2 percent by relatives or friends. Forty-nine percent of births were assisted by a traditional birth attendant (Figure 5.4)

As expected, the number of ANC visits influences the likelihood of a woman to seek skilled attendance during delivery. Among women

## Fourth and fifth order births are much more likely to be home deliveries

## Figure 5.5 Place of delivery

Percent distribution of live births in the five years preceding the survey by place of delivery

who attended at least four ANC visits, 77 percent were delivered by a skilled attendant compared to 35 percent of those who did not attend any ANC visits. Moreover, first-birth order is more likely to be delivered by skilled health personnel compared to higher birth orders.

Mother's education and household wealth have an impact on the type of delivery care received. Births to women with higher education are more likely to be assisted by skilled personnel at 91 percent, compared to women with no education at 42 percent. Similarly, in the wealthiest households, 55 percent of women were assisted by a skilled birth attendant, compared to only 30 percent of women from the poorest households.

## Place of Delivery

Delivery within a health facility is vital in reducing health risks to both mother and baby. Proper medical attention and hygienic conditions during delivery reduce the risks of complications and infection that can cause mortality in either the mother or baby.

Table 5.6 shows the percent distribution of live births in the five years preceding the survey by place of delivery and percentage delivered in a health facility according to background characteristics in Benadir. According to the findings, 38 percent of births in the five years preceding the survey were delivered in a health facility and 62 percent were delivered at home (Figure 5.5). Health facility deliveries are higher in Benadir as compared to the national rate which was reported at 21 percent (SHDS, 2020).

Birth order of 4-5 are much more likely to be home deliveries; 77 percent occurred at home compared to 57 percent of first births (Table 5.6).

Deliveries are more common in public health facilities at 28 percent, compared to in facilities supported by the private sector at 9 percent. Education and wealth have an impact on the uptake of delivery services at health facilities. Eighty-three percent of those with higher education deliver at health facilities, whereas 32 percent of those with no educational background deliver at health facilities. Within the wealthiest households, 47 percent of women deliver at facilities, compared to 25 percent of women from the poorest households.

## Postnatal Care and Practices

A large number of maternal and neonatal deaths occur during the first 48 hours after delivery. To address this, safe motherhood programmes have increased their emphasis on the importance of postnatal care, encouraging all women to receive a health check-up within two days of delivery. To assess the extent of use of postnatal care in Benadir, respondents who had given birth in the five years

## A large number of maternal and neonatal deaths occur during the first 48 hours after delivery.

Figure 5.6 Timing of first postnatal check-up for the mothers Percent distribution of last births in the two years preceding the survey by time after birth of first postnatal checkup
91.7

preceding the survey were asked whether they had received a health check after the delivery of their last birth. Table 5.7 and Figure 5.6 show the timing of the first postnatal check-up for women giving birth in the two years preceding the survey.

Table 5.7 shows that only 8 percent of mothers had a postnatal check within the first two days after birth. Ninety-two percent of the mothers did not receive any postnatal check-up. Additionally, women with secondary education were more likely to receive postnatal care within two days after delivery at 15 percent compared to women with no education at 5 percent. Seven percent of mothers had received a postnatal check within 4 hours of delivery (Figure 5.6).

Table 5.8 shows the timing of the first postnatal check-up for newborns born in the two years preceding the survey. Only 7 percent of new-borns received postnatal care within the first two days after delivery. This is slightly lower than the national figure of 9 percent (SHDS, 2020).

## Problems in Accessing Health Care

The SHDS 2020 included a series of questions designed to collect information on the problems women face in obtaining health care for themselves. This information is particularly important in understanding and addressing the hindrances women may face in seeking care during pregnancy and, particularly, during child delivery. To collect this information, women aged 15-49 were asked whether each of the following factors would be a major problem or not for them in obtaining health services: getting permission to go facilities, getting money for treatment, the distance to the health facility, and not wanting to go alone to seek health care. Table 5.9

Percent of women aged 15-49 who reported that they have problems accessing health care

shows the percentages of respondents who consider individual factors to be a problem, and the percentages reporting at least one of the specified factors to be a challenge, according to background characteristics.

Seventy percent of women reported that they face at least one problem on accessing health care. The majority perceived lack of money as a hindrance at 65 percent, 60 percent cited the distance to a health facility as a challenge, while 55 percent mentioned not wanting to go alone to seek health care as a deterrent. Fifty-four percent of all women cited obtaining permission required from the husband, as a major problem (Figure 5.7)

## Obstetric Fistula

Obstetric Fistula is a medical condition consisting of an abnormal opening between the vagina and bladder or between the vagina and rectum. A woman with fistula experiences an uncontrollable leakage of urine and/or feces from her vagina. Although largely eradicated in the developed world due to improved obstetric care, fistula continues to have devastating effects on the lives of many women in developing countries including Somalia.

Table 5.10 shows the percentage of ever-married women aged 15-49 that have heard of obstetric fistula and percentage who have experienced obstetric fistula, according to background characteristics. Seventy-three percent of ever-married women have heard of obstetric fistula and one percent have experienced obstetric fistula.

Analysis of educational level shows that 93 percent of women with higher education have heard of fistula compared to 70 percent of those with no education.

The survey results provide an opportunity to identify critical issues affecting the health status of women and children in Benadir.

## Table 5.1 Antenatal care

Percent distribution of ever-married women age 15-49 who had a live birth in the 5 years preceding the survey by antenatal care (ANC) provider, BHDS 2020

| Background characteristics | Person providing assistance during ANC |  |  |  | Total | Skilled assistance during ANC $^{2}$ | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Doctor/ Clinical Officer | Nurse/ <br> Auxilliary <br> Midwife/ <br> Midwife | TBA¹/other/ relative | No ANC |  |  |  |
| Mother's age at birth |  |  |  |  |  |  |  |
| <20 | 23.2 | 24.4 | 4.8 | 47.6 | 100.0 | 47.6 | 271 |
| 20-34 | 26.2 | 24.1 | 3.5 | 46.3 | 100.0 | 50.3 | 780 |
| 35-49 | 13.9 | 26.1 | 5.2 | 54.8 | 100.0 | 40.0 | 115 |
| Birth order |  |  |  |  |  |  |  |
| 1 | 26.3 | 30.7 | 2.8 | 40.2 | 100.0 | 57.0 | 574 |
| 2-3 | 22.5 | 18.7 | 4.9 | 53.8 | 100.0 | 41.2 | 507 |
| 4-5 | 22.8 | 12.7 | 6.3 | 58.2 | 100.0 | 35.4 | 79 |
| 6+ | * | * | * | * | * | * | 6 |
| Education |  |  |  |  |  |  |  |
| No education | 20.6 | 23.3 | 4.0 | 52.1 | 100.0 | 43.9 | 904 |
| Primary | 30.5 | 25.8 | 5.5 | 38.3 | 100.0 | 56.3 | 128 |
| Secondary | 44.6 | 26.1 | 2.2 | 27.2 | 100.0 | 70.7 | 92 |
| Higher | 40.5 | 38.1 | 2.4 | 19.0 | 100.0 | 78.6 | 42 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 18.8 | 21.5 | 4.2 | 55.6 | 100.0 | 40.3 | 144 |
| Second | 22.1 | 24.4 | 3.3 | 50.2 | 100.0 | 46.5 | 213 |
| Middle | 27.1 | 19.3 | 3.6 | 50.0 | 100.0 | 46.4 | 336 |
| Fourth | 23.1 | 27.8 | 5.1 | 44.0 | 100.0 | 50.9 | 273 |
| Highest | 27.5 | 30.0 | 3.5 | 39.0 | 100.0 | 57.5 | 200 |
| Total | 24.3 | 24.4 | 3.9 | 47.4 | 100.0 | 48.6 | 1,166 |

Note: If more than one source of ANC was mentioned, only the provider with the highest qualifications is considered in this tabulation.
${ }^{1}$ TBA: Traditional Birth Attendants
${ }^{2}$ Skilled provider includes doctor/clinical officer, nurse and midwife
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 5.2 Number of antenatal care visits and timing of first visit

| Percent distribution of women aged 15-49 who had a live birth in the five years preceding the survey by number of antenatal care |
| :--- |
| (ANC) visis for the most recent live birth, and by the timing of the first visit, and among women with ANC, median months pregnant |
| at first visit, BHDS 2020 |
| Number and timing of ANC visits |
| Number of ANC visits |
| No |
| $\mathbf{1}$ |
| 2-3 |
| 4+ |
| Don't know/missing |
| Total |
| Number of months pregnant at time of first ANC visit |
| No antenatal care |
| <4 |
| 4-5 |
| 6-7 |
| 8+ |
| Don't know/missing |
| Total |
| Number of women |
| Median months pregnant at first visit (for those with ANC |
| Number of women with ANC |

## Table 5.3 Components of antenatal care

Among women aged 15-49 with a live birth in the five years preceding the survey, the percentage who took iron tablets or syrup and drugs for intestinal parasites during the pregnancy of the most recent birth, and among women receiving antenatal care (ANC) for the most recent live birth in the five years preceding the survey, the percentage receiving specific antenatal services, according to background characteristics, BHDS 2020

| Background characteristics | Among women with a live birth in the past five years, the percentage who during the pregnancy for their last birth: |  | Number of women with a live birth in the past five years | Among women who received ANC for their most recent birth in the past 5 years, the percentage with the selected services: |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Took iron tablets or syrup | Took intestinal parasite drugs |  | Blood preasure measured | Urine sample taken | Blood sample taken | Number of women with ANC for their most recent birth |
| Mother's age at birth |  |  |  |  |  |  |  |
| <20 | 55.4 | 11.1 | 271 | 83.8 | 63.4 | 66.9 | 142 |
| 20-34 | 51.9 | 12.2 | 780 | 81.9 | 65.2 | 69.2 | 419 |
| 35-49 | 48.7 | 11.3 | 115 | 76.9 | 67.3 | 69.2 | 52 |
| Birth order |  |  |  |  |  |  |  |
| 1 | 61.1 | 12.3 | 373 | 83.5 | 63.9 | 72.2 | 230 |
| 2-3 | 50.5 | 11.0 | 281 | 80.7 | 65.7 | 65.7 | 140 |
| 4-5 | 44.3 | 10.2 | 246 | 80.2 | 64.0 | 64.9 | 111 |
| 6+ | 49.6 | 13.5 | 266 | 81.8 | 66.7 | 68.9 | 132 |
| Education |  |  |  |  |  |  |  |
| No Education | 46.8 | 9.6 | 904 | 78.5 | 60.7 | 63.7 | 433 |
| Primary | 69.5 | 16.4 | 128 | 87.3 | 69.6 | 74.7 | 79 |
| Secondary | 67.4 | 21.7 | 92 | 89.6 | 76.1 | 80.6 | 67 |
| Higher | 88.1 | 23.8 | 42 | 97.1 | 85.3 | 94.1 | 34 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 54.9 | 15.3 | 144 | 73.4 | 48.4 | 56.3 | 64 |
| Second | 49.8 | 10.8 | 213 | 75.5 | 58.5 | 62.3 | 106 |
| Middle | 47.6 | 10.7 | 336 | 82.7 | 67.3 | 71.4 | 168 |
| Fourth | 54.9 | 15.4 | 273 | 83.7 | 71.2 | 70.6 | 153 |
| Highest | 58.0 | 7.5 | 200 | 88.5 | 68.0 | 74.6 | 122 |
| Total 15-49 | 52.4 | 11.8 | 1,166 | 81.9 | 64.9 | 68.7 | 613 |

Table 5.4 Tetanus toxoid injections

Among mothers aged 15-49 with a live birth in the five years preceding the survey, the percentage receiving two or more tetanus toxoid injections (TTI) during the pregnancy for the last live birth and the percentage whose last live birth was protected against neonatal tetanus, according to background characteristics, BHDS 2020

| Background characteristics | Percentage receiving two or more injections during last pregnancy | Percentage whose last live birth was protected against neonatal tetanus ${ }^{1}$ | Number of mothers |
| :---: | :---: | :---: | :---: |
| Mother's age at birth |  |  |  |
| <20 | 37.3 | 55.0 | 271 |
| 20-34 | 29.5 | 44.5 | 782 |
| 35-49 | 18.3 | 27.0 | 115 |
| Birth order |  |  |  |
| 1 | 37.2 | 48.9 | 325 |
| 2-3 | 27.9 | 43.1 | 657 |
| 4-5 | 28.1 | 48.0 | 171 |
| 6+ | 6.7 | 26.7 | 15 |
| Education |  |  |  |
| No Education | 26.3 | 40.4 | 906 |
| Primary | 38.3 | 59.4 | 128 |
| Secondary | 45.7 | 57.6 | 92 |
| Higher | 57.1 | 78.6 | 42 |
| Wealth quintile |  |  |  |
| Lowest | 29.2 | 43.1 | 144 |
| Second | 26.5 | 40.0 | 215 |
| Middle | 31.0 | 44.9 | 336 |
| Fourth | 30.0 | 45.8 | 273 |
| Highest | 34.0 | 52.0 | 200 |
| Total | 30.2 | 45.2 | 1,168 |

${ }^{1}$ Includes mothers with two injections during the pregnancy of her last birth, or two or more injections (the last within 3 years of the last live birth), or three or more injections (the last within 5 years of the last birth), or four or more injections (the last within 10 years of the last live birth), or five or more injections at any time prior to the last birth Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 5.5 Assistance during delivery

Percent distribution of live births in the five years preceding the survey by person providing assistance during delivery, percentage of births assisted by a skilled provider, and the percentage delivered by caesarian-section, according to background characteristics,
BHDS 2020

| Background characteristics | Person providing assistance during delivery |  |  |  |  | Total | Percentage delivered by skilled provider ${ }^{1}$ | Percentage delivered by C-section | Number of birth |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Doctor/ Clinical Officer | Nurse/ <br> Auxiliary <br> Midwife/ <br> Midwife | Traditional birth attendant | Relative/ other | No one |  |  |  |  |
| Mother's age at birth |  |  |  |  |  |  |  |  |  |
| <20 | 11.7 | 38.5 | 48.2 | 1.3 | 0.3 | 100.0 | 50.3 | 2.9 | 384 |
| 20-34 | 12.4 | 35.4 | 50.0 | 1.6 | 0.7 | 100.0 | 47.8 | 3.6 | 1472 |
| 35-49 | 11.0 | 38.8 | 47.3 | 3.0 |  | 100.0 | 49.8 | 3.0 | 237 |
| Birth order |  |  |  |  |  |  |  |  |  |
| 1 | 14.7 | 38.2 | 44.8 | 1.8 | 0.5 | 100.0 | 52.9 | 4.6 | 796 |
| 2-3 | 11.3 | 36.3 | 50.0 | 1.7 | 0.7 | 100.0 | 47.6 | 3.0 | 1059 |
| 4-5 | 5.8 | 31.7 | 61.1 | 1.4 |  | 100.0 | 37.5 | 1.0 | 208 |
| 6+ | 13.3 | 23.3 | 63.3 | * |  | 100.0 | 36.7 | * | 30 |

Antenatal care
visits ${ }^{2}$

| None | 7.3 | 27.8 | 60.6 | 3.4 | 0.9 | 100.0 | 35.0 | 2.4 | 551 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | 11.0 | 46.2 | 40.7 | 2.2 |  | 100.0 | 57.1 | 4.4 | 91 |
| 1-3 | 15.0 | 46.7 | 37.3 | 0.7 | 0.2 | 100.0 | 61.7 | 5.1 | 413 |
| 4+ | 34.3 | 42.4 | 23.2 | * |  | 100.0 | 76.8 | 10.1 | 99 |
| Don't know/ missing | 22.2 | 55.6 | 22.2 | * |  | 100.0 | 77.8 | * | 9 |
| Place of delivery | 33.3 | * | 66.7 | * | 100.0 | 33.3 | 9 | * | * |
| Health facility | 29.6 | 68.2 | 2.0 | * | 0.1 | 100.0 | 97.8 | 9.0 | 790 |
| Elsewhere | 1.5 | 17.0 | 78.1 | 2.7 | 0.8 | 100.0 | 18.5 | * | 1303 |
| Education | 35.1 | 13.5 | 51.4 |  | 100.0 | 48.6 | 251 |  |  |
| No Education | 9.6 | 32.5 | 55.3 | 2.0 | 0.6 | 100.0 | 42.2 | 2.5 | 1618 |
| Primary | 14.7 | 46.6 | 37.8 | 0.4 | 0.4 | 100.0 | 61.4 | 2.8 | 251 |
| Secondary | 23.2 | 51.0 | 24.5 | 0.6 | 0.6 | 100.0 | 74.2 | 7.7 | 155 |
| Higher | 34.8 | 56.5 | 8.7 | * | * | 100.0 | 91.3 | 17.4 | 69 |

Wealth
quintile

| Lowest | 8.1 | 22.3 | 66.4 | 2.4 | 0.8 | 100.0 | 30.4 | 0.8 | 247 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Second | 13.1 | 34.9 | 50.3 | 1.8 |  | 100.0 | 48.0 | 3.0 | 398 |
| Middle | 12.5 | 35.7 | 48.3 | 2.8 | 0.7 | 100.0 | 48.3 | 3.0 | 607 |
| Fourth | 12.2 | 41.5 | 45.0 | 0.2 | 1.0 | 100.0 | 53.7 | 2.5 | 482 |
| Highest | 12.8 | 41.8 | 44.3 | 1.1 |  | 100.0 | 54.6 | 7.5 | 359 |
| Total | $\mathbf{1 2 . 1}$ | $\mathbf{3 6 . 4}$ | $\mathbf{4 9 . 4}$ | $\mathbf{1 . 7}$ | $\mathbf{0 . 5}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{4 8 . 4}$ | $\mathbf{3 . 4}$ | $\mathbf{2 , 0 9 3}$ |

Note: If the respondent mentioned more than one person attending during delivery, only the most qualified person is considered in this tabulation.
${ }^{1}$ Skilled provider includes doctor, nurse, midwife, and auxiliary nurse/midwife
${ }^{2}$ Includes only the most recent birth in the five years preceding the survey
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 5.6 Place of delivery

Percent distribution of live births in the five years preceding the survey by place of delivery and percentage delivered in a health facility, according to background characteristics, BHDS 2020

| Background characteristics | Health facility |  | Home | Other | Total | Percentage delivered in a health facility | Number of births |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Public sector | Private sector |  |  |  |  |  |
| Mother's age at birth |  |  |  |  |  |  |  |
| <20 | 28.9 | 9.4 | 61.7 |  | 100.0 | 38.3 | 384 |
| 20-34 | 27.8 | 9.6 | 62.4 | 0.1 | 100.0 | 37.4 | 1,472 |
| 35-49 | 30.8 | 8.0 | 60.8 | 0.4 | 100.0 | 38.8 | 237 |
| Birth order |  |  |  |  |  |  |  |
| 1 | 32.5 | 10.4 | 56.8 | 0.3 | 100.0 | 42.9 | 960 |
| 2-3 | 26.0 | 8.8 | 65.3 | * | 100.0 | 34.7 | 1,013 |
| 4-5 | 15.8 | 7.0 | 77.2 | * | 100.0 | 22.8 | 114 |
| 6+ | * | * | 100.0 | * | 100.0 | * | 6 |

Antenatal care
visits ${ }^{1}$

| None | 18.5 | 6.2 | 75.0 | 0.4 | 100.0 | 24.7 | 551 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 1 | 33.0 | 13.2 | 53.8 |  | 100.0 | 46.2 | 91 |
| $1-3$ | 37.0 | 14.0 | 48.7 | 0.2 | 100.0 | 51.1 | 413 |
| $4+$ | 48.5 | 19.2 | 32.3 | $*$ | 100.0 | 67.7 | 99 |
| Don't know/ <br> missing | 33.3 | $*$ | 66.7 | $*$ | 100.0 | 33.3 | 9 |
| Education |  |  |  |  |  |  |  |
| No Education | 25.0 | 7.0 | 67.7 | 0.2 | 100.0 | 32.1 | 1,618 |
| Primary | 35.1 | 13.5 | 51.4 | $*$ | 100.0 | 48.6 | 251 |
| Secondary | 40.6 | 18.7 | 40.6 | $*$ | 100.0 | 59.4 | 155 |
| Higher | 53.6 | 29.0 | 17.4 | $*$ | 100.0 | 82.6 | 69 |

Wealth
quintile

| Lowest | 19.4 | 5.3 | 74.9 | 0.4 | 100.0 | 24.7 | 247 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Second | 26.9 | 8.0 | 64.8 | 0.3 | 100.0 | 34.9 | 398 |
| Middle | 28.2 | 8.9 | 62.8 | 0.2 | 100.0 | 37.1 | 607 |
| Fourth | 29.3 | 11.4 | 59.3 | $*$ | 100.0 | 40.7 | 482 |
| Highest | 35.1 | 12.0 | 52.9 | $*$ | 100.0 | 47.1 | 359 |
| Total | $\mathbf{2 8 . 3}$ | $\mathbf{9 . 4}$ | $\mathbf{6 2 . 1}$ | $\mathbf{0 . 1}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{3 7 . 7}$ | $\mathbf{2 , 0 9 3}$ |

${ }^{1}$ Includes only the most recent birth in the five years preceding the survey.
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 5.7 Timing of first postnatal checkup for the mother

Among women aged 15-49 giving birth in the two years preceding the survey, the percent distribution of the mother's first postnatal checkup for the last live birth by time after delivery, and the percentage of woman with a live birth in the two years preceding the survey who received a postnatal checkup in the first two days after giving birth, according to background characteristics, BHDS 2020

| Background characteristics | Time after delivery of mother's first postnatal checkup |  |  |  |  | Total | Percentage of women with a postnatal checkup in the first two days after birth | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Less than 4 hours | 4-23 hours | 1-2 days | Don't know | No postnatal checkup ${ }^{1}$ |  |  |  |
| Mother's age at birth |  |  |  |  |  |  |  |  |
| <20 | 7.6 | 0.0 | 0.0 | 0.0 | 92.4 | 100.0 | 7.6 | 119 |
| 20-34 | 7.1 | 0.5 | 0.8 | 0.5 | 91.2 | 100.0 | 8.3 | 396 |
| 35-49 | 2.8 | 0.0 | 2.8 | 0.0 | 94.4 | 100.0 | 5.6 | 36 |
| Birth order |  |  |  |  |  |  |  |  |
| 1 | 5.0 | 0.6 | 1.1 | 0.6 | 92.8 | 100.0 | 6.7 | 359 |
| 2-3 | 9.9 | 0.0 | 0.0 | 0.0 | 90.1 | 100.0 | 9.9 | 152 |
| 4+ | 12.5 | 0.0 | 0.0 | 0.0 | 87.5 | 100.0 | 12.5 | 40 |

Place of
delivery

| Health facility | 15.8 | 0.8 | 1.7 | 0.8 | 80.9 | 100.0 | 18.3 | 241 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Elsewhere | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 100.0 | 0.0 | 310 |
| Education |  |  |  |  |  |  |  |  |
| No education | 4.4 | 0.2 | 0.2 | 0.2 | 94.9 | 100.0 | 4.9 | 408 |
| Primary | 10.6 | 0.0 | 1.5 | 0.0 | 87.9 | 100.0 | 12.1 | 66 |
| Secondary | 11.3 | 1.9 | 1.9 | 0.0 | 84.9 | 100.0 | 15.1 | 53 |
| Higher Education | * | * | * | * | * | * | * | 24 |

Wealth quintile

| Lowest | 3.5 | 1.8 | 0.0 | 0.0 | 94.7 | 100.0 | 5.3 | 57 |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Second | 7.0 | 0.0 | 0.9 | 0.0 | 92.1 | 100.0 | 7.9 | 114 |
| Middle | 6.8 | 0.7 | 1.4 | 0.0 | 91.1 | 100.0 | 8.9 | 146 |
| Fourth | 9.4 | 0.0 | 0.0 | 0.0 | 90.6 | 100.0 | 9.4 | 139 |
| Highest | 5.3 | 0.0 | 1.1 | 2.1 | 91.6 | 100.0 | 6.3 | 95 |
| Total | 6.9 | 0.4 | 0.7 | 0.4 | 91.7 | 100.0 | 8.0 | 551 |

[^3]Table 5.8 Timing of first postnatal checkup for the newborn

Percent distribution of last births in the two years preceding the survey by time after birth of first postnatal checkup, and the percentage of births with a postnatal checkup in the first two days after birth, according to background characteristics, BHDS 2020


Mother's age at
birth

| $<20$ | 9.2 | 0.0 | 0.0 | 0.8 | 89.9 | 100.0 | 9.2 | 119 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| $20-34$ | 5.8 | 0.8 | 0.0 | 1.5 | 91.9 | 100.0 | 6.6 | 396 |
| $35-49$ | 2.8 | 0.0 | 2.8 | 0.0 | 94.4 | 100.0 | 5.6 | 36 |
| Birth order |  |  |  |  |  |  |  |  |
| 1 | 5.0 | 0.8 | 0.3 | 1.4 | 92.5 | 100.0 | 6.1 | 359 |
| $2-3$ | 8.6 | 0.0 | 0.0 | 1.3 | 90.1 | 100.0 | 8.6 | 152 |
| $4+$ | 10.0 | 0.0 | 0.0 | 0.0 | 90.0 | 100.0 | 10.0 | 40 |

Place of
delivery

| Health facility | 14.5 | 1.2 | 0.4 | 2.9 | 80.9 | 100.0 | 16.2 | 241 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Elsewhere | 0.0 | 0.0 | 0.0 | 0.0 | 100.0 | 100.0 | 0.0 | 310 |
| Education |  |  |  |  |  |  |  |  |
| No Education | 4.4 | 0.2 | 0.0 | 0.7 | 94.6 | 100.0 | 4.7 | 408 |
| Primary | 10.6 | 0.0 | 1.5 | 1.5 | 86.4 | 100.0 | 12.1 | 66 |
| Secondary | 7.5 | 3.8 |  | 1.9 | 86.8 | 100.0 | 11.3 | 53 |
| Higher | $*$ | $*$ | $*$ | $*$ | $*$ | $*$ | $*$ | 24 |

Wealth quintile

| Lowest | 5.3 | 0.0 | 0.0 | 0.0 | 94.7 | 100.0 | 5.3 | 57 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Second | 4.4 | 0.0 | 0.0 | 1.8 | 93.9 | 100.0 | 4.4 | 114 |
| Middle | 5.5 | 2.1 | 0.0 | 2.1 | 90.4 | 100.0 | 7.5 | 146 |
| Fourth | 8.6 | 0.0 | 0.0 | 0.0 | 91.4 | 100.0 | 8.6 | 139 |
| Highest | 7.4 | 0.0 | 1.1 | 2.1 | 89.5 | 100.0 | 8.4 | 95 |
| Total | 6.4 | 0.5 | 0.2 | 1.3 | 91.7 | 100.0 | 7.1 | 551 |

${ }^{1}$ Includes newborns who received a checkup after the first week
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 5.9 Problems in accessing health care

Percentage of women aged 15-49 who reported that they have serious problems in accessing health care for themselves when they are sick, by type of problem, according to background characteristics, BHDS 2020

Problems in accessing health care

| Background <br> characteristics | Getting <br> permission <br> to go for <br> treatment | Getting money <br> fortreatment | Distance to <br> health facility | Not wanting to <br> go alone | At least one <br> problem <br> accessing <br> health care | Number of <br> Ever Married <br> Women |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age |  |  |  |  |  |  |
| $15-19$ | 58.7 | 69.0 | 62.6 | 58.7 | 72.9 | 155 |
| $20-34$ | 52.1 | 62.8 | 58.2 | 53.5 | 69.0 | 1,002 |
| $35-49$ | 55.4 | 67.0 | 62.8 | 55.8 | 71.6 | 457 |

Number of living
children

| $1-2$ | 53.1 | 71.9 | 59.4 | 53.1 | 78.1 | 32 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| $3-4$ | 48.1 | 62.3 | 62.3 | 53.2 | 68.8 | 77 |
| $5+$ | 54.0 | 64.5 | 59.8 | 54.8 | 70.0 | 1,505 |

Marital status

| Married | 53.2 | 64.0 | 60.4 | 55.1 | 69.7 | 1,313 |
| :--- | :--- | :---: | :---: | :---: | :---: | :---: |
| Divorced/widowed | 55.5 | 67.1 | 57.8 | 52.8 | 71.8 | 301 |

Employed past 12
months

| Not employed | 53.1 | 63.3 | 59.1 | 54.1 | 69.0 | 1,406 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Employed for cash | 58.9 | 74.2 | 66.8 | 58.9 | 78.9 | 190 |
| Employed not for cash | $*$ | $*$ | $*$ | $*$ | $*$ | 18 |

Education

| No Education | 55.3 | 67.6 | 62.5 | 57.1 | 73.0 | 1,246 |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| Primary | 54.6 | 60.9 | 55.2 | 52.3 | 66.7 | 174 |
| Secondary | 44.9 | 55.1 | 51.5 | 44.1 | 61.8 | 136 |
| Higher | 36.2 | 32.8 | 37.9 | 34.5 | 37.9 | 58 |
| Wealth quintile |  |  |  |  |  |  |
| Lowest | 69.6 | 81.8 | 75.1 | 69.1 | 87.8 | 181 |
| Second | 59.3 | 66.3 | 62.6 | 56.9 | 72.1 | 297 |
| Middle | 54.4 | 66.2 | 60.7 | 56.0 | 70.4 | 450 |
| Fourth | 49.5 | 60.5 | 57.6 | 52.1 | 67.8 | 382 |
| Highest | 42.8 | 55.3 | 50.0 | 45.1 | 59.9 | 304 |
| Total | $\mathbf{5 3 . 7}$ | $\mathbf{6 4 . 6}$ | $\mathbf{5 9 . 9}$ | $\mathbf{5 4 . 6}$ | $\mathbf{7 0 . 1}$ | $\mathbf{1 , 6 1 4}$ |

Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

## Table 5.10 Obstetric fistula

Percentage of ever-married women aged 15-49 who have heard of obstetric fistula and percentage who have experienced obstetric fistula, according to background characteristics, BHDS 2020

| Background characteristic | heard obstetric fistula | experienced obstetric fistula |
| :--- | :---: | :---: | :---: | | Number of ever married <br> women |
| :---: |
| Age |
| $15-19$ |
| 63.2 |
| $20-24$ |
| $25-29$ |

CHAPTER 6
Child Health

## Key Findings

BIRTH WEIGHT


5\%
of births in the five years preceding the survey had a low birth weight (less than 2.5 kg )

VACCINATIONS


10\%
of children aged 12-23 months had received all basic vaccinations (Bacillus Calmette-Guérin (BCG), three doses of pentavalent and polio vaccines, and one dose of the measles vaccine) at any time before the survey. 37 percent of children had received BCG at any time before the survey, 37 percent had received the first dose of pentavalent vaccine, 17 percent received the first dose of polio vaccine and 13 percent had received the third does of polio. Twelve percent had received the measles vaccine.

SYMPTOMS OF ACUTE RESPIRATORY INFECTION (ARI

## 5\%

of children under the age of five had symptoms of ARI in the two weeks before the survey, 25 percent of these children had treatment or advice sought on the same or next day.

FEVER
8\%
of children under-five had a fever during the two weeks preceding the survey; 45 percent of these children, advice or treatment was sought on the same or next day.

## DIARRHOEA

8\%
of children under age five had had diarrhoea in the 2 weeks before the survey; 56 percent of these children advice or treatment was sought from a health facility.

STOOL DISPOSAL


## 89\%

of children under-five living with their mothers had their last stool safely disposed of.

Chapter 6

## Child Health

This chapter presents findings from the BHDS that relate to children's health. These include the characteristics of newborns (birth weight), vaccination status of children, symptoms of acute respiratory infection (ARI), fever,diarrhoea, and treatment of childhood illnesses. Information collected on child health from the SHDS 2020 is expected to assist policymakers and programme managers in formulating appropriate strategies and interventions to improve the health of children in Benadir region.

Birth weight is, used as a summary indicator of the challenges that a public health system faces

Figure 6.1 Child's weight and size at birth

Births with a reported birth weight of less than 2.5 kg by mother's age

## 6.0



## Birth Weight

Birth weight is a major determinant of infant and child health, as low birth weight is associated with fetal and neonatal morbidity, inhibited physical and cognitive development, and chronic diseases later in life. Birth weight is, used as a summary indicator of the challenges that a public health system faces, including long-term maternal malnutrition, ill health, and poor health care during pregnancy. Children whose birth weight is less than 2.5 kilograms, or children reported to be "very small" or "smaller than average," are considered to have a higher risk of early childhood death than average children (WHO, 2014).

The BHDS 2020 recorded births occurring during the five years preceding the survey. Birth weight was recorded in the Ever-Married Woman's Questionnaire, based on either a written record or the mother's report. Mother's estimate of the baby's size at birth was obtained for babies with unknown birth weight.

Table 6.1 presents information on child weight at birth by background characteristics. Twenty-two percent of births occurring in the five years preceding the survey had a reported birth weight, 5 percent of which were low birth weight (less than 2.5 kg ), this is compared to the national figure of 9 (SHDS, 2020). More underweight births were reported among younger mothers, at 6 percent for mothers younger than 20 years compared to 5 percent reported by mothers of ages 20-34 (Figure 6.1).

## Vaccination of Children

According to WHO , a child is considered fully vaccinated if he or she has received BCG vaccination against tuberculosis; three

## 10\% <br> of children aged 1223 months are fully vaccinated

doses of the DPT-HepB-Hib; at least three doses of polio; and one dose of the measles. The SHDS 2020 collected information on the coverage of these vaccinations among children born in the five years preceding the survey.

Following internationally recommended procedures, information on vaccination coverage was obtained from child health cards and from mothers' verbal reports. All mothers were asked to show the interviewer the child health cards on which immunization dates were recorded for all children born in the five years preceding the survey. If a card was available, the interviewer recorded the dates of each vaccination received by the child. If a card showed that the child was not fully vaccinated, the mother was asked whether the child had received any other vaccinations not recorded on the card, and these too were noted. If a child never received a health card or if the mother was unable to show the card to the interviewer, the vaccination information obtained for the child was based on the mother's report. Questions were asked for each type of vaccine. Mothers were asked to recall whether the child had received BCG, polio, pentavalent and measles vaccinations. If the mother indicated that the child had received the polio or pentavalent vaccines, she was asked about the number of doses that the child received. The results presented here are based on both information from the health card and the mother's report for those without a card.

Table 6.2 and Figure 6.2 present findings on the vaccination coverage

Figure 6.2 Vaccination coverage for children aged 12-23 months Percent of children aged 12-23 months who received specific vaccines at any time before the survey

$5 \%$
of children under the age of 5 years experienced ARI symptoms during the two weeks preceding the survey
for children aged 12-23 months, the age by which they should have received all vaccinations. Mothers were able to present health cards for 6 percent of children aged 12-23 months. Overall, 10 percent of children aged 12-23 months are fully vaccinated, meaning that they received all the basic vaccinations (one BCG vaccine, three doses of pentavalent and polio vaccines, and one dose of measles vaccine). Nationally, 11 percent of children in this same age category were fully immunized (SHDS, 2020). Thirty-seven percent of children had received BCG, 37 percent received the first dose of pentavalent vaccine, and 17 percent received the first dose of polio. Fifteen percent of children completed the required three doses of the pentavalent vaccine and 13 percent of the children received the three doses of polio vaccine. Twelve percent of children had received measles vaccine.

## Symptoms of Acute Respiratory Infection

Acute Respiratory Infection (ARI) is a serious infection that prevents normal breathing. It usually begins as a viral infection in the nose, trachea (windpipe) or lungs. If the infection is not treated, it can spread to the entire respiratory system. Early diagnosis and treatment with antibiotics can prevent a large proportion of deaths caused by ARI. According to WHO, ARI is one of the leading causes of childhood morbidity and mortality throughout the world. In the BHDS 2020, the prevalence of ARI was estimated by asking mothers whether their children under the age of 5 had been ill with a cough accompanied by short, rapid breathing in the two weeks preceding the survey and these are typical symptoms of ARI.

Figure 6.3 Children with ARI symptoms by age
Percent of children with ARI symptoms in the two weeks preceding the survey
6.0


## 8\%

of the under-fives had a fever in the two weeks preceding the survey

Table 6.3 shows the percentage of children who had symptoms of ARI in the two weeks before the survey. Five percent of children under the age of 5 years experienced ARI symptoms during the two weeks preceding the survey as compared 4 percent nationally (SHDS, 2020).

The prevalence of ARI increases after age 6 months, from 2 percent 4 percent among those gaed 6-11 months and starts to decline among older age groups from 6 percent among children aged 24-35 months to 5 percent among those aged 36-47months (Figure 6.3).

## Fever

Fever is a symptom of many illnesses, including malaria, pneumonia, common cold, COVID-19 and influenza among others. In the BHDS 2020, mothers were asked whether their children under the age of five had been ill with fever in the two weeks prior to the survey.

Table 6.4 shows the percentage of children under the age of five who had fever during the two weeks preceding the survey by selected background characteristics. Overall, 8 percent of the under-fives had a fever in the two weeks preceding the survey. The prevalence of fever was slightly higher among girls than boys 9 and 7 percent respectively. The prevalence of fever varies with the age of the child, it is more prevalent among children aged 12-23 months at 10 percent and lowest among children between 0-5 months at 4 percent (Figure 6.4).

Figure 6.4 Children with fever by age
Percent of children with fever in the two weeks preceeding the survey
10.4

The prevalence of fever varies with the age of the child, it is more prevalent among children aged 1223 months


Figure 6.5 Percent of children with diarrhoea by age
Percent of children who had diarrhoea in the two weeks preceding the survey


## Diarrhoeal Disease

Dehydration caused by severe diarrhoea is a major cause of morbidity and mortality among young children, although the condition can be easily treated with oral rehydration therapy (ORT). Cases of diarrhoea are related to the use of contaminated water and unhygienic practices in food preparation and disposal of excreta. The BHDS 2020 collected information on the prevalence of diarrhoea among children by asking mothers whether their underfives had diarrhoea during the two weeks preceding the survey.

Table 6.5 presents data on the percentage of children under-five who had diarrhea during the two weeks preceding the survey, by selected background characteristics. Overall, 8 percent of children under-five had diarrhoea. The prevalence of diarrhoea varied with household wealth. Eight percent of children in the highest wealth quintile had diarrhea compared to 18 percent of children in the lowest wealth quintile. For children below two years, the prevalence of diarrhoea increases with age ( 2 percent among those aged 0-5 months and 13 percent among those aged 12-23 months) but shows a declining trend after 23 months form12 percent among those aged 24-35 months to 6 percent among the older children(Figure 6.5).

## Treatment of Childhood IIInesses

Figure 6.6 shows that the percentages of children presenting ARI symptoms, fever, and
diarrhoea among children under the age of 5 in the 2 weeks preceding the survey. Most children reported to have had diarrhoea,

Figure 6.6 Percent of children with diarrhoea by age

Percent of children who had diarrhoea in the two weeks preceding the survey


Figure 6.7 Sought Advice or Treatment of childhood illnesses

Among children with childhood illnesses, the percentage for whom advice or treatment was sought from a health facility or provider

followed by fever and ARI. Figure 6.7 shows the advice from a health facility or treatment sought 2 weeks before the survey for children with ARI, fever and diarrhoea. Children presenting with diarrhoea are more likely to be treated while children presenting with ARI are the least likely to be treated (56 and 25 percent respectively).

## Disposal of Children's Stools

The proper disposal of children's feces is important in preventing the spread of disease. If human feces are left uncontained, disease may spread by others who come into direct contact with it, or by animals that are exposed to the feces.

Table 6.6 presents information on the disposal of the stools of children under-five by background characteristics. The information was derived by asking ever-married women what was done to dispose of the stool the last time their youngest child under the age of 5 passed stool. Eighty-nine percent of children who live with their mothers had their last stool disposed of safely. Nationally, 46 percent of children who live with their mother had their last stool disposed of safely (SHDS, 2020).

As expected, mothers with higher education are more likely to report safe stool disposal than among children of mothers with no education, primary education or secondary.

The most common method of disposal of children faeces is child used toilet or latrine (56 percent) followed by rinsing into toilet or latrine ( 32 percent) while the least reported method of disposal was burying the faeces at 0.3 percent (Figure 6.8).

## Figure 6.8 Disposal of children's stools

Percent distribution of youngest children under age five, living with the mother, by the manner of disposal of the child's last faecal matter


Table 6.1 Child's weight and size at birth

Percentage of live births in the five years preceding the survey that have a reported birth weight; among live births in the five years preceding the survey with a reported birth weight, percent distribution by birth weight; and percent distribution of all live births in the five years preceding the survey by mother's estimate of baby's size at birth, according to background characteristics, BHDS 2020

| Background characteristics | Percent distribution of all live births by size of child at birth |  |  |  | Total | Percentage of all births that have Number of a reported births |  | Births with a reported birth weight1 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Very small | Smaller than average | Average or larger | Don't know |  |  |  | Less than 2.5 kg | Number of births |

Mother's age at
birth

| $<20$ | 7.3 | 10.9 | 64.2 | 17.6 | 100.0 | 21.8 | 386 | 6.0 | 84 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| $20-34$ | 5.9 | 8.4 | 67.2 | 18.4 | 100.0 | 22.2 | 1,482 | 4.6 | 329 |
| $35-49$ | 6.8 | 6.3 | 67.1 | 19.8 | 100.0 | 18.6 | 237 | 4.5 | 44 |


| Birth order |  |  |  |  |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 1 | 6.6 | 9.3 | 65.7 | 18.4 | 100.0 | 23.9 | 960 | 6.6 | 229 |
| $2-3$ | 6.0 | 8.1 | 67.6 | 18.3 | 100.0 | 20.4 | 1,013 | 2.9 | 207 |
| $4-5$ | 5.3 | 9.6 | 65.8 | 19.3 | 100.0 | 15.8 | 114 | 5.6 | 18 |
| $6+$ | 11.1 | $*$ | 66.7 | 22.2 | 100.0 | 16.7 | 18 | $*$ | 3 |
| Education |  |  |  |  |  |  |  |  |  |
| No Education | 6.5 | 8.7 | 64.5 | 20.3 | 100.0 | 15.9 | 1,622 | 3.1 | 258 |
| Primary | 5.4 | 9.7 | 68.3 | 16.6 | 100.0 | 31.7 | 259 | 6.1 | 82 |
| Secondary | 5.2 | 7.1 | 80.0 | 7.7 | 100.0 | 45.2 | 155 | 8.6 | 70 |
| Higher | 7.2 | 7.2 | 79.7 | 5.8 | 100.0 | 68.1 | 69 | 6.4 | 47 |

Wealth quintile

| Lowest | 8.9 | 15.8 | 62.3 | 13.0 | 100.0 | 13.0 | 247 | 6.3 | 32 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Second | 6.5 | 7.0 | 63.1 | 23.4 | 100.0 | 19.3 | 398 | 5.2 | 77 |
| Middle | 5.7 | 9.8 | 65.9 | 18.6 | 100.0 | 20.4 | 613 | 2.4 | 125 |
| Fourth | 7.0 | 7.0 | 68.4 | 17.6 | 100.0 | 25.4 | 488 | 3.2 | 124 |
| Highest | 4.2 | 5.8 | 72.4 | 17.5 | 100.0 | 27.6 | 359 | 9.1 | 99 |
| Total | $\mathbf{6 . 3}$ | $\mathbf{8 . 6}$ | $\mathbf{6 6 . 7}$ | $\mathbf{1 8 . 4}$ | $\mathbf{1 0 0 . 0}$ | $\mathbf{2 1 . 7}$ | $\mathbf{2 , 1 0 5}$ | $\mathbf{4 . 8}$ | $\mathbf{4 5 7}$ |

[^4]Table 6.2 Vaccinations by background characteristics

| Table 6.2 |
| :--- |
|  |
| Percentage |

Percentage of children age 12-23 months who received specific
vaccination card, by background characteristics, BHDS 2020
DPT-HepB-Hib

| Background characteristics | BCG | DPT-HepB-Hib |  |  | Polio |  |  | Measles | All basic vaccinations ${ }^{2}$ | No percentage <br> with a  <br> vaccinations vaccination <br> card seen |  | Number of children |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 1 | 2 | 3 | 1 | 2 | 3 |  |  |  |  |  |
| Sex |  |  |  |  |  |  |  |  |  |  |  |  |
| Female | 40.4 | 40.4 | 19.9 | 15.8 | 17.5 | 15.8 | 14.6 | 12.3 | 9.9 | 59.1 | 7.0 | 171 |
| Male | 33.5 | 33.5 | 17.0 | 13.6 | 17.0 | 13.6 | 11.4 | 10.8 | 10.8 | 66.5 | 4.5 | 176 |
| Birth order |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 | 48.7 | 48.7 | 30.8 | 20.5 | 30.8 | 20.5 | 17.9 | 7.7 | 7.7 | 51.3 | 28.2 | 39 |
| 2-3 | 50.5 | 50.5 | 25.2 | 21.6 | 23.4 | 21.6 | 19.8 | 18.9 | 17.1 | 49.5 | 4.5 | 111 |
| 4-5 | 31.8 | 31.8 | 15.3 | 11.8 | 12.9 | 11.8 | 9.4 | 9.4 | 7.1 | 68.2 | 2.4 | 85 |
| 6+ | 23.2 | 23.2 | 9.8 | 8.0 | 9.8 | 8.0 | 7.1 | 7.1 | 7.1 | 75.9 | 1.8 | 112 |
| Mother's education |  |  |  |  |  |  |  |  |  |  |  |  |
| No Education | 34.1 | 34.1 | 16.1 | 13.4 | 14.9 | 13.4 | 11.9 | 10.7 | 9.6 | 65.5 | 5.0 | 261 |
| Primary | 40.4 | 40.4 | 25.5 | 21.3 | 23.4 | 21.3 | 19.1 | 17.0 | 14.9 | 59.6 | 6.4 | 47 |
| Secondary | 48.3 | 48.3 | 24.1 | 17.2 | 24.1 | 17.2 | 13.8 | 10.3 | 10.3 | 51.7 | 6.9 | 29 |
| Higher | * | * | * | * | * | * | * | * | * | * | * | 10 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 32.4 | 32.4 | 8.1 | 2.7 | 8.1 | 2.7 | 2.7 | 2.7 | 2.7 | 67.6 | 2.7 | 37 |
| Second | 27.1 | 27.1 | 11.4 | 11.4 | 11.4 | 11.4 | 10.0 | 10.0 | 10.0 | 72.9 | 1.4 | 70 |
| Middle | 37.0 | 37.0 | 20.0 | 17.0 | 18.0 | 17.0 | 17.0 | 16.0 | 14.0 | 63.0 | 5.0 | 100 |
| Fourth | 43.2 | 43.2 | 27.2 | 21.0 | 24.7 | 21.0 | 16.0 | 13.6 | 11.1 | 55.6 | 9.9 | 81 |
| Highest | 42.4 | 42.4 | 18.6 | 13.6 | 18.6 | 13.6 | 11.9 | 8.5 | 8.5 | 57.6 | 8.5 | 59 |
| Total | 36.9 | 36.9 | 18.4 | 14.7 | 17.3 | 14.7 | 13.0 | 11.5 | 10.4 | 62.8 | 5.8 | 347 |
| ${ }^{2}$ BCG, measles, Note: An asteris | three d icates | each o <br> a figure | HepB sed on | nd pol than | (exclu <br> hted c | lio vac d has b | at bir ressed |  |  |  |  |  |

## Table 6.3 Prevalence of symptoms of ARI

| Among children under age five, the percentage who had symptoms of acute respiratory infection (ARI) in the two weeks preceding the survey according to background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background characteristics | Among children under age five: |  |
|  | Percentage with symptoms of ARI ${ }^{1}$ | Number of children |
| Age in months |  |  |
| 0-5 | 2.4 | 166 |
| 6-11 | 3.6 | 137 |
| 12-23 | 5.4 | 280 |
| 24-35 | 6.0 | 336 |
| 36-47 | 5.3 | 339 |
| 48-59 | 3.6 | 366 |
| Sex |  |  |
| Male | 4.6 | 862 |
| Female | 4.6 | 762 |
| Mother's education |  |  |
| No Education | 4.8 | 1,246 |
| Primary | 3.1 | 192 |
| Secondary | 5.5 | 128 |
| Higher | 3.4 | 58 |
| Wealth quintile |  |  |
| Lowest | 7.6 | 185 |
| Second | 4.6 | 305 |
| Middle | 4.4 | 475 |
| Fourth | 3.4 | 385 |
| Highest | 4.7 | 274 |
| Total | 4.6 | 1,624 |

${ }^{1}$ Symptoms of ARI (cough accompanied by short, rapid breathing which was chest-relatedand/or by difficult breathing which was chest-related) is considered a proxy for pneumonia

## Table 6.4 Prevalence of fever

| Among children under age five, the percentage who had a fever in the two weeks preceding the survey, by background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background characteristics | Among children under the age of five: |  |
|  | Percentage with fever | Number of children |
| Age in months |  |  |
| 0-5 | 3.6 | 166 |
| 6-11 | 6.6 | 137 |
| 12-23 | 10.4 | 280 |
| 24-35 | 9.2 | 336 |
| 36-47 | 5.9 | 339 |
| 48-59 | 7.4 | 366 |
| Sex |  |  |
| Male | 6.5 | 862 |
| Female | 8.7 | 762 |
| Education |  |  |
| No education | 8.1 | 1,246 |
| Primary | 4.7 | 192 |
| Secondary | 6.3 | 128 |
| Higher | 6.9 | 58 |
| Wealth quintile |  |  |
| Lowest | 9.2 | 185 |
| Second | 7.2 | 305 |
| Middle | 5.3 | 475 |
| Fourth | 7.5 | 385 |
| Highest | 10.6 | 274 |
| Total | 7.5 | 1,624 |

## Table 6.5 Prevalence of Diarrhea

| Among children under age five who had diarrhea in the two weeks preceding the survey,by background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background characteristics | Percentage with diarrhea | Number of children |
| Age in months |  |  |
| 0-5 | 2.4 | 166 |
| 6-11 | 11.7 | 137 |
| 12-23 | 13.2 | 280 |
| 24-35 | 11.6 | 336 |
| 36-47 | 5.6 | 339 |
| 48-59 | 5.5 | 366 |
| Sex |  |  |
| Male | 8.0 | 862 |
| Female | 8.7 | 762 |
| Mother's education |  |  |
| No Education | 8.7 | 1,246 |
| Primary | 7.3 | 192 |
| Secondary | 4.7 | 128 |
| Higher | 12.1 | 58 |
| Wealth quintile |  |  |
| Lowest | 18.4 | 185 |
| Second | 7.5 | 305 |
| Middle | 5.7 | 475 |
| Fourth | 7.3 | 385 |
| Highest | 8.4 | 274 |
| Total | 8.3 | 1,624 |

## Table 6.6 Disposal of children's stools

Percent distribution of youngest children under age five living with the mother by the manner of disposal of the child's last faecal matter, and percentage of children whose stools are disposed of safely, according to background characteristics, BHDS 2020

| Background characteristics | Manner of disposal of children's stools |  |  |  |  |  |  | Total | Percentage of children whose stools were disposed of safely ${ }^{1}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Child <br> used <br> toilet <br> latrine | Put/ rinsed into toilet or latrine | Buried | Put/ <br> rinsed into drain or ditch | Thrown into garbage | Left in the open | Other |  |  |  |
| Age of child in months |  |  |  |  |  |  |  |  |  |  |
| 0-5 | 70.1 | 22.6 | 0.0 | 3.0 | 1.8 | 0.6 | 1.8 | 100.0 | 92.7 | 164 |
| 6-11 | 65.2 | 22.2 | 0.0 | 5.2 | 5.9 | 0.7 | 0.7 | 100.0 | 87.4 | 135 |
| 12-23 | 57.8 | 32.0 | 0.4 | 4.4 | 3.3 | 0.7 | 1.5 | 100.0 | 90.2 | 275 |
| 24-35 | 52.4 | 34.8 | 0.0 | 6.1 | 4.6 | 0.6 | 1.5 | 100.0 | 87.2 | 328 |
| 36-47 | 51.1 | 34.4 | 0.6 | 6.6 | 4.7 | 1.6 | 0.9 | 100.0 | 86.1 | 317 |
| 48-59 | 52.9 | 35.8 | 0.3 | 6.4 | 4.0 | 0.0 | 0.6 | 100.0 | 89.0 | 346 |
| Mother's education |  |  |  |  |  |  |  |  |  |  |
| No Education | 54.8 | 33.4 | 0.3 | 5.9 | 3.6 | 0.9 | 1.1 | 100.0 | 88.5 | 1,208 |
| Primary | 57.1 | 27.1 | 0.0 | 6.2 | 8.5 | 0.0 | 1.1 | 100.0 | 84.2 | 177 |
| Secondary | 65.0 | 26.0 | 0.0 | 3.3 | 3.3 | 0.0 | 2.4 | 100.0 | 91.1 | 123 |
| Higher | 63.2 | 33.3 | 0.0 | 1.8 | 1.8 | 0.0 | 0.0 | 100.0 | 96.5 | 57 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |
| Lowest | 67.0 | 24.2 | 0.0 | 3.8 | 3.8 | 0.0 | 1.1 | 100.0 | 91.2 | 182 |
| Second | 60.4 | 25.8 | 1.0 | 3.7 | 5.0 | 1.0 | 3.0 | 100.0 | 87.2 | 298 |
| Middle | 55.6 | 34.8 | 0.0 | 4.9 | 2.9 | 0.7 | 1.1 | 100.0 | 90.4 | 446 |
| Fourth | 51.5 | 37.8 | 0.0 | 5.9 | 3.2 | 1.1 | 0.5 | 100.0 | 89.3 | 373 |
| Highest | 51.5 | 32.0 | 0.4 | 9.4 | 6.4 | 0.4 | 0.0 | 100.0 | 83.8 | 266 |
| Total | 56.2 | 32.1 | 0.3 | 5.6 | 4.1 | 0.7 | 1.2 | 100.0 | 88.5 | 1,565 |

${ }^{1}$ Children's stools are considered to be disposed of safely if the child used a toilet or latrine, if the faecal matter was put/rinsed into a toilet or latrine or if it was buried

Child Nutrition and Feeding Practices and Nutritional Status of Women

## Key Findings

NUTRITIONAL STATUS OF CHILDREN


27\%
of children under-five are stunted (short for their age), 8 percent are wasted (thin for their height) and 12 percent are underweight (thin for their age),

BREASTFEEDING


91\%
of children have ever breastfed.

EARLY INITIATION OF BREASTFEEDING
35\%
of children started breastfeeding within first hour of their birth.

EXCLUSIVE BREASTFEEDING

## 16\%

of children under 6 months are exclusively breastfed

TIMELY INITIATION OF
COMPLEMENTARY FEEDING

## 56\%

of children were introduced to complementary foods at 6-8 months

VITAMIN A
71\%
of children of 6-23 months consumed foods rich in vitamin A in the day preceding the survey.

IRON SUPPLEMENTATION

## 16\%

of children of 6-59 months have received iron supplements in the 7 days preceding survey

NUTRITIONAL STATUS OF WOMEN

## 13\%

women age 15-49 are thin (a body mass index [BMI] below 18.5), while 25 percent are overweight

Chapter 7

# Child Nutrition and Feeding Practices and Nutritional Status of Women 


#### Abstract

Nutrition provides energy, promotes growth, and nourishes the body. The nutritional status of a person is determined by multifaceted interactions including food availability, affordability, accessibility and consumption and infections. It influences an individual's growth and development, productivity, reproductive success and susceptibility to diseases.


> Nutritional deficiencies among women can lead to anaemia, infections and pregnancy complications that could result in premature birth or death.

Good nutritional status is critical for the growth and development of children, particularly those who are under two years of age. Additionally, women's nutrition has a direct effect on their health and the health of their children. Nutritional deficiencies among women can lead to anaemia, infections and pregnancy complications that could result in premature birth or death. Nutritional deficiencies among children, especially those under five years of age, often lead to childhood illnesses such as diarrhoea, respiratory diseases and nutritional problems such as wasting and stunting.

## Nutrition of Children and Women

The nutritional status of women and children can be measured using different methods, such as anthropometric, biochemical, clinical and dietary methods. These techniques of assessment differ in how and when they are conducted. In the survey, the anthropometric and dietary methods were used for assessing the nutritional status of women aged 15 to 49 years and children aged zero to five years. The dietary method inquired about feeding practices of infants and children, while the anthropometric assessment measured the height and weight of women aged 15-49 and the children under the age of five in sampled households. The equipment used for height and weight measurements was the seca scale (for weight), height board (height for children aged under five) and seca (height for adults).

The survey followed the standard method of measuring the height and weight of women and children. Women's weight was measured by placing the weighing scale on a flat place to ensure it was balanced and having the woman stand on it facing forward, with a vertical posture. Children under two years of age were measured lying down (supine position), whereas children above two years of age were measured while standing upright.

> Nutritional deficiencies among women can lead to anaemia, infections and pregnancy complications that could result in premature birth or death.

The enumerating teams were trained before being deployed to the field. Their training involved class sessions and field pilot-tests on how to measure the weight and length/height of children and women respectively. The enumerators were medical professionals - midwives, nurses, public health officers and doctors. In the SHDS 2020, standardized nutritional indicators were generated using the WHO anthropometric tool for nutritional survey data analyses. The measurements below were used to generate nutritional indicators:

1. Weight for age (underweight)
2. Height for age (stunting)
3. Weight for height (wasting)

The standard assessment guideline that was used to calculate the indicators was Z-score or standard deviation scores (-2 or + 2). The weight for age index (underweight) indicator describes the children who are underweight if they are minus (2 SD) from the mean reference population. This is a crucial indicator for assessing nutritional conditions of children.

Height for age (stunting) indicator calculates the children who suffer growth retardation as a result of poor diets or recurrent infections. Stunting is a result of chronic nutritional deprivations and often results in delayed mental and motoric development, poor school performance and reduced intellectual capacity and productivity later in life. This in turn affects the economic development at national level.

Weight for height (wasting) indicator measures the children who suffer acute malnutrition, usually as consequences of insufficient food intake or a high incidence of infectious diseases especially diarrhea. Wasting in turn impairs the functioning of the immune system and increases children's morbidity and mortality.

Weight-for-age (underweight) is a composite index of height-forage and weight-for-height. It takes into account both acute and chronic malnutrition.

## Nutritional Status of Children

The nutritional status of children is affected by different factors, such as a mother's nutritional status, socioeconomic status, educational background or children's poor health conditions. The nutritional status of Somali children is relatively poor due to many reasons, such as low economic conditions, and severe drought that has affected the country in recent years. Under-nourished children are usually associated with high mortality and morbidity rates. Additionally, nutritional deficit also hinders children's long-term physical and mental development.

> 27\% of children under the age of five are stunted or too short for their age

The survey measured the height and weight of children below 5 years and inquired about their dietary intake. The weight and height measured for children that were recorded were used as anthropometric measurements using the Z-score. As per WHO standards, indicators such as height-for-age, weight-for-height and weight-for-age can be used to calculate the nutritional status of children under five years of age.

Table 7.1 and Figure 7.1 show the nutritional status of children under five years of age according to three anthropometric indices-height-for-age, weight-for-height and weight-for-age. Twentyseven percent of children under the age of five are stunted or too short for their age, and 17 percent severely stunted, while 8 percent are wasted; the Table further shows that 4 percent of the children are severely wasted. Twelve percent of children under the age of five are underweight, with 4 percent are severely underweight. At the national level 28 percent of children under-five are stunted, 12 percent wasted and 23 percent underweight (SHDS, 2020).

## Initiation of breastfeeding

The World Health Organization (WHO) recommends early initiation of breastfeeding within the first hour of birth. The first breast milk contains a substance called 'colostrum', which contains a high concentration of antibodies and nutrients. It protects babies from the onset of diseases. Breastfeeding is also beneficial for mothers as it is known to reduce the risks of breast and ovarian cancers and postpartum depression. Early suckling improves the production of milk, and creates a bond between a mother and child. As a result, WHO recommends children be exclusively breastfed in the first six months of their life and that mothers should continue breastfeeding up to two years, while providing complementary foods.

Table 7.2 shows that 35 percent of children were breastfed within the first hour of birth, this is much lower than the national rate of 60 percent (SHDS, 2020). Overall, 91 percent of children had been breastfed regardless of whether or not initiation of breastfeeding was within the first hour of birth or continued until two years.

As presented in Table 7.2, analysis by mother's educational level shows that children born of mothers with no education are less likely to be breastfed within the first hour of birth, at 33 percent compared to 40 percent of children of mothers with secondary education.

Children born in health facilities are more likely to have been breastfed in the first hour of birth compared to children born at home. The survey data shows that 39 percent of children born in health facilities were breastfed within the first hour of birth, while

of children under six months are exclusively breastfed and the percentage of exclusive breastfeeding declines with age

31 percent of children who were born at home started breastfeeding within the first hour of birth (Table 7.2).

## Breast feeding status by age

Ever-married women who had children were asked if they have ever breastfed their babies, how long after the birth did they put the baby to the breast (the last child), if anything was given other than breast milk in the first three days of life (the last child), if they are still breastfeeding the last child, if they have given their children micronutrient powder, if they are ready to use therapeutic (PLUMPYNUT), or ready to use supplemental food (PLUMYDOZ). The enumerators were using the local names of these foods in order for the respondents to clearly understand the questions.

Table 7.3 shows the percentage distribution of children less than two years of age by breastfeeding status, including those currently breastfeeding and the percentage of all children under two years of age using feeding bottles with nipples according to their age in months. Sixteen percent of children under six months are exclusively breastfed and the percentage of exclusive breastfeeding declines with age, from 26 percent for children aged 0-1 months to 15 percent among children of 4-5 months. Nationally, the proportion of children under six months who are exclusively breast- fed is higher than in Benadir at 34 percent (SHDS, 2020). Contrary to the recommendation that children under the age of six months be exclusively breastfed, many infants under six months are fed other liquids in addition to breast milk, such as water, at 16 percent, other milk, at 9 percent, and non-milk liquids, at 30 percent. Moreover,


Figure 7.2 IYCF indicators on breastfeeding status
Indicators on breastfeeding by age in months

** Predominant breastfeeding includes exclusive breastfeeding, breastfeeding plus water, and breastfeeding plus non-milk liquids/juice
**Age appropriate breastfeeding $=$ Children age 0-5 months who are exclusively breastfed + children age 6-23 months who receive breast milk and complementary foods

## Complementary feeding

 should be timely, meaning that all infants should begin receiving foods in addition to breast milk from six months onwards24 percent of infants began complementary foods before six months of age. Five percent of children below six months were not breastfeeding at the time the survey was conducted.

## Infant and Young Child Feeding (IYCF) Indicators on Breastfeeding Status

Figure 7.2 shows that 16 percent of children aged under six months were exclusively breastfed, while 40 percent of children under six months were predominantly breastfed. Twenty-two percent of children were still breastfeeding at the age of one, and only 4 percent were breastfeeding at age two. Overall, 56 percent of children were introduced to complementary foods at six to eight months and 14 percent of children under age two were breastfed appropriately for their age.

## Types of complementary Foods

Complementary foods are recommended for children when breastfeeding is no longer sufficient for their nutritional needs. The period for complementary feeding usually starts from four to six months. At this age, children are vulnerable to malnutrition. Complementary feeding should be timely, meaning that all infants should begin receiving foods in addition to breast milk from six months onwards. However, foods should be appropriate for their age and nutritional needs. Mothers or caregivers should take precaution when preparing food, ensuring its safety to minimize the

40\%<br>of breastfed children aged under two years received solid or semi-solid complementary foods in addition to breast milk

risk of food contamination.

Table 7.4 shows the foods consumed by children under two years of age who were living with their mother during the day or night preceding the survey according to their breastfeeding status. The data shows that 10 percent of breastfed children aged under two years and 30 percent of non-breastfed children aged under 2 years were fed other milk. Fifty-seven percent of the breastfed children were getting other liquids in addition to breast milk, compared to 72 percent who were not breastfed. However, infants as young as zero months, whether breastfeeding or not, have already been introduced to other foods and liquids. This contradicts the exclusive breastfeeding guidance provided by WHO for children less than six months old.

Overall, 40 percent of breastfed children aged under two years received solid or semi-solid complementary foods in addition to breast milk. Thirty-one percent of children aged 0-23 months had fruits and vegetables rich in vitamin A whereas, 24 percent of children of this age ate other fruits and vegetables. Twenty percent, 15 percent and 13 percent of children aged 0-23 months were given animal sources of food (meat, fish and poultry), eggs and milk products (cheese, yoghurt and other), and respectively. Seventy-eight percent of children aged 0-23 months who were not breastfeeding received solid or semi-solid foods from any sources.

## Infant and Young Child Feeding (IYCF) Practices

The period during pregnancy and children's first two years of life are considered as a critical window for their growth and prevention of childhood illnesses. Optimal Infant and Young Child Feeding (IYCF) Practices are essential for child growth and development. The IYCF Global Strategy was first issued in 2002 jointly by WHO and UNICEF to reverse disturbing trends of infant and child feeding practices. The main objective of the strategy is to improve and promote healthy feeding practices and, as a result, to decrease the child morbidity and mortality.

Table 7.5 shows children aged 6-23 months living with their mothers, and who are being fed according to the three IYCF practices based on the breastfeeding status, the number of food groups they receive and times they were being fed during the day or night preceding the survey. The UNICEF-recommended IYCF practices to be followed are based on breastfeeding status and the age of children. Children from six to eight months on breastfeeding are recommended to be fed four different groups of food per day, with a minimum meal frequency of two times, whereas children aged 9-23 months need to be fed four or more different groups of food per day, with a minimum meal frequency of three times. Non-breastfeeding children are

> 71\% of children aged 6-23 months had consumed foods rich in Vitamin A during the night or day preceding the survey
recommended to be given four different groups of foods, with a minimum meal frequency of four times.

Table 7.5 indicates that 29 percent of breastfed children aged 6-23 months old were fed four or more different groups of food the day or night preceding the survey and 45 percent were fed the minimum meal frequency the night or day before the survey. Only 15 percent among the breastfed children aged 6-23 months old were fed four or more different groups of foods at a minimum number of times that is required.

With regard to non-breastfeeding children, 96 percent were fed milk or milk products, whereas 57 percent were fed four or more different groups of food the night or day preceding the survey. With regard to the minimum meal frequency among non-breastfeeding children, 94 percent of them were fed the minimum meal frequency. With regard to IYCF practices, almost half (49 percent) of the nonbreastfeeding children were fed as recommended by the IYCF guidelines.

Overall, 39 percent of all children aged 6-23 months were fed in line with three IYCF practices the night or day prior to the survey, while 47 percent of children of the same age were fed four or more different groups of foods. With regard to the meal frequency, 79 percent of children aged 6-23 months had meals in line with the recommended minimum meal frequency.

## Micronutrients intake among Children

Micronutrients, which consist of vitamins and minerals, are essential for children's development and prevention against illnesses. Vitamin A and iron are key micronutrients needed for supplementation. The deficiency of these micronutrients can result in a weak immune system, blindness, stunting or anaemia. For children, the period 6-59 months is a critical window for their health and well-being.

Ever-married women were asked if children aged 6-23 months consumed foods rich in vitamin $A$ and iron the day or night preceding the survey and records were made to reflect those who had received any of these supplements.

Table 7.6 shows that 71 percent of children aged 6-23 months had consumed foods rich in Vitamin A during the night or day preceding the survey, this is almost twice the national prevalence of 33 percent (SHDS, 2020). Fifty-five percent had consumed foods rich in iron compared to 21 percent at national level (SHDS, 2020). The findings further reveal that 16 percent of children of ages 6-59 months were given iron supplements in the seven days preceding the survey. Similarly, 26 percent and 19 percent of children aged 6-59 months were given Vitamin A supplementation and deworming drugs, respectively in the six months before the survey was conducted.

## 45\%

of women have a normal body mass index (between 18.5 and 24.9)

Nationally, 6 percent of children aged 6-59 months were given iron supplements in the 7 days preceding the survey and 8 percent were given deworming drugs 6 months preceding the survey (SHDS, 2020).

In general, the proportion of children receiving iron supplements and deworming medication increase with an increase in mothers' education (Table 7.6).

## Nutritional status of women

Women's nutrition is vital for their health and pregnancy outcomes. In the survey, women's nutritional status was calculated by measuring their body mass index (BMI).

The BMI is a screening tool that can indicate whether a person is underweight, has normal weight or is overweight. The BMI is calculated by dividing the weight ( kg ) of the person by height (m) square. The ranges of BMI are <18.5 (underweight), 18.5-24.9 (normal), 25.0-29.9 (overweight) and >=30 (obese). If the person's BMI is outside of normal range, their health risks might increase significantly. Having too much weight can lead to various health conditions, such as diabetes type2, cardiovascular problems and high blood pressure. If the weight of a person is below the normal range, the risk of adverse pregnancy outcomes and overall poor health status increases.

Table 7.7 shows that 2 percent of women aged $15-49$ are of short stature (below 145 cm ). Generally, women with short stature are at a higher risk of obstructed labour, due to cephalo-pelvic disproportion. Forty-five percent of women have a normal body mass index (between 18.5 and 24.9), while 13 percent of women aged 15-49 are thin, with a BMI of less than 18.5. Twenty-four percent of women are overweight, with a body mass index of more than 25.0-29.9; 18 percent of women are obese.

## Micronutrient intake among women

Micronutrients deficiency is a global public health problem. Largely, deficiency is observed in minerals and vitamins affecting the health of mothers and, indirectly, the nutritional status and development of children. Iron supplementation for women during pregnancy is vital for mothers and babies' health. Iron supplementation has an impact on the health of the mother during pregnancy, delivery or the post-partum stage as its severe deficiency may lead to anaemia, spontaneous abortion or low birth weight. Additionally, the strategy of deworming is a public health intervention for pregnant women recommended by WHO. Preventive deworming using a single dose of Albendazole or Mebendazole is recommended for pregnant women in areas where prevalence of hookworms or T. trichiura infection and anaemia is a public health problem. This is to curb

Iron supplementation for women during pregnancy is vital for mothers and babies' health.
of women reported that they had taken iron supplementation for the recommended 90 days or more during their last pregnancy
the effects of helminths diseases on the health of pregnant women.

Table 7.8 shows that only one percent of women reported that they had taken iron supplementation for the recommended 90 days or more during their last pregnancy while 13 percent of women took deworming medication during pregnancy of their last birth. Nationally, 2 percent of women reported they had taken iron supplementation, while 4 percent took deworming medication during their last pregnancy (SHDS, 2020).

Table 7.1 Nutritional status of children

| Percentage of children under five years classified as malnourished according to three anthropometric indices of nutritional status: height-for-age, weight-for-heig background characteristics, BHDS 2020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Height-for-age ${ }^{1}$ |  |  |  | Weight-for-Height |  |  |  |  | Weight-for-age |  |  |  |  |
|  | Percentage Percentage <br> below -2 <br> below-3 SD SD $^{2}$ |  | Mean Z-score (SD) | Number of children | Percentage below -3 SD | $\begin{gathered} \text { Percentage } \\ \text { below -2 } \\ \text { SD }^{2} \end{gathered}$ | Percentage below +2 SD | Mean Z-score (SD) | Number of children | Percentage <br> below -3 SD | $\begin{gathered} \text { Percentage } \\ \text { below-2 } \\ {S D^{2}}^{2} \end{gathered}$ | Percentage below +2 SD | $\begin{gathered} \text { Mean } \\ \text { Z-score } \\ \text { (SD) } \end{gathered}$ | Number of children |
| Sex |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Male | 17.0 | 25.9 | 1.2 | 125 | 4.1 | 8.9 | 4.6 | 0.4 | 65 | 3.7 | 9.7 | 14.5 | 0.8 | 117 |
| Female | 17.4 | 27.2 | 1.1 | 133 | 3.7 | 7.8 | 6.3 | 0.8 | 69 | 5.1 | 13.9 | 12.3 | 0.8 | 128 |
| Mother's education ${ }^{5}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| No education | 21.7 | 33.6 | 1.0 | 102 | 3.0 | 6.6 | 6.3 | 0.6 | 39 | 5.3 | 13.8 | 13.8 | 0.9 | 84 |
| Primary | 13.9 | 23.5 | 1.6 | 39 | 1.8 | 10.2 | 3.0 | 0.1 | 22 | 4.2 | 11.4 | 16.3 | 1.0 | 46 |
| Secondary | 9.6 | 20.2 | 1.4 | 19 | 5.3 | 7.4 | 9.6 | 1.2 | 16 | 2.1 | 6.4 | 13.8 | 0.9 | 19 |
| Higher education | 10.6 | 18.2 | 1.1 | 12 | 9.1 | 12.1 | 4.5 | 0.9 | 11 | 4.5 | 15.2 | 10.6 | 0.3 | 17 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 55.6 | 66.7 | 2.2 | 6 |  |  | 22.2 | 5.0 | 2 |  | 11.1 |  | 0.0 | 1 |
| Second | 41.9 | 50.4 | 0.9 | 59 | 2.6 | 5.1 | 6.0 | 0.7 | 13 | 14.5 | 26.5 | 8.5 | 0.2 | 41 |
| Middle | 15.1 | 24.0 | 1.5 | 54 | 2.2 | 5.8 | 6.2 | 0.6 | 27 | 3.6 | 12.0 | 14.7 | 0.6 | 60 |
| Fourth | 15.3 | 25.0 | 1.2 | 80 | 5.6 | 9.7 | 4.7 | 0.5 | 46 | 4.4 | 12.2 | 12.5 | 0.8 | 79 |
| Highest | 10.0 | 19.6 | 0.8 | 59 | 4.0 | 10.3 | 5.0 | 0.5 | 46 | 1.3 | 5.6 | 15.6 | 1.1 | 64 |
| Total | 17.2 | 26.5 | 1.1 | 258 | 3.9 | 8.3 | 5.5 | 0.6 | 134 | 4.4 | 11.8 | 13.4 | 0.8 | 245 |
| Note: Table is based on children who stayed in the household on the night before the interview. Each of the indices is expressed in standard deviation units (SD) from the median of the WHO Child Growth <br> The indices in this table are NOT comparable to those based on the previously used 1977 NCHS/CDC/WHO Reference. <br> Table is based on children with valid dates of birth (month and year) and valid measurement of both height and weight. <br> Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. <br> 1 Recumbent length is measured for children under age 2 , or in the few cases when the age of the child is unknown and the child is less than 85 cm ; standing height is measured for all other children. <br> 2 Includes children who are below -3 standard deviations (SD) from the WHO Growth Standards population median <br> 3 Excludes children whose mothers were not interviewed <br> 4 Excludes children whose mothers were not weighed and measured. Mother's nutritional status in terms of BMI (Body Mass Index) is presented in Table 11.10. <br> 5 For women who are not interviewed, information is taken from the Household Questionnaire. Excludes children whose mothers are not listed in the Household Questionnaire. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Table 7.2 Initial breastfeeding

Among last-born children who were born in the two years preceding the survey, the percentage who were ever breastfed and the percentage who started breastfeeding within one hour and within one day of birth and a the percentage who received a pre-lacteal feed, by background characteristics, BHDS 2020

| Background characteristics | Among last-born children born in the past two years: |  |  |  | Among last-born children born in the past two years: |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage ever breastfed | Percentage who started breastfeeding within 1 hour of birth | Percentage who started breastfeeding within 1 day of birth1 | Number of last-born children | Percentage who received a pre-lacteal feed2 | Number of last-born children ever breastfed |


| Sex |  |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Male | 90.8 | 34.2 | 45.2 | 292 | 31.3 | 265 |
| Female | 90.7 | 35.1 | 45.6 | 259 | 37.4 | 235 |

Assistance at delivery

| Health personnel | 90.3 | 37.6 | 47.2 | 290 | 32.8 | 262 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Traditional birth attendant | 91.2 | 31.7 | 43.8 | 249 | 34.8 | 227 |
| Relative/friend | $*$ | $*$ | $*$ | 9 | $*$ | 8 |
| Other | $*$ | $*$ | $*$ | 2 | $*$ | 2 |
| No one | $*$ | $*$ | $*$ | 1 | $*$ | 1 |
| Place of delivery | 91.3 | 39.4 | 49.4 | 241 | 34.5 | 220 |
| Health facility | 90.3 | 30.8 | 42.2 | 308 | 33.5 | 278 |
| At home | $*$ | $*$ | $*$ | 2 | $*$ | 2 |
| Other |  |  |  |  |  |  |

Education

| No Education | 90.2 | 32.8 | 42.9 | 408 | 33.7 | 368 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Primary | 93.9 | 34.8 | 48.5 | 66 | 35.5 | 62 |
| Secondary | 92.5 | 39.6 | 54.7 | 53 | 30.6 | 49 |
| Higher | $*$ | $*$ | $*$ | 24 | $*$ | 21 |


| Wealth quintile |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| Lowest | 94.7 | 28.1 | 38.6 | 57 | 35.2 | 54 |
| Second | 92.1 | 30.7 | 42.1 | 114 | 30.5 | 105 |
| Middle | 89.0 | 38.4 | 47.3 | 146 | 33.8 | 130 |
| Fourth | 88.5 | 34.5 | 48.2 | 139 | 37.4 | 123 |
| Highest | 92.6 | 37.9 | 46.3 | 95 | 34.1 | 88 |
| Total | $\mathbf{9 0 . 7}$ | $\mathbf{3 4 . 7}$ | $\mathbf{4 5 . 4}$ | $\mathbf{5 5 1}$ | $\mathbf{3 4 . 2}$ | $\mathbf{5 0 0}$ |

[^5]|  | Breastfeeding status: |  |  |  |  |  |  |  | Number of youngest children under two years living with the mother | Percentage using a bottle with a nipple | Number of all children under two years |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Not breastfeeding | Exclusively breastfeeding | Breastfeeding and consuming plain water only | Breastfeeding and consuming non-milk liquids ${ }^{1}$ | Breastfeeding and consuming other milk | Breastfeeding and consuming complementary foods | Total | Currently breastfeeding |  |  |  |
| Age in months |  |  |  |  |  |  |  |  |  |  |  |
| 0-1 | 9.8 | 25.5 | 9.8 | 29.4 | 7.8 | 17.6 | 100.0 | 90.2 | 47 | 39.2 | 51 |
| 2-3 | 3.9 | 7.8 | 17.6 | 29.4 | 15.7 | 25.5 | 100.0 | 96.1 | 51 | 62.7 | 51 |
| 4-5 | 1.7 | 15.0 | 20.0 | 30.0 | 5.0 | 28.3 | 100.0 | 98.3 | 58 | 66.7 | 60 |
| 6-8 | 50.7 | 8.5 | 7.0 | 15.5 | 0.0 | 18.3 | 100.0 | 49.3 | 70 | 69.0 | 71 |
| 9-11 | 72.6 | 1.6 | 3.2 | 0.0 | 3.2 | 19.4 | 100.0 | 27.4 | 60 | 72.6 | 62 |
| 12-17 | 81.6 | 2.0 | 0.0 | 1.3 | 0.7 | 14.5 | 100.0 | 18.4 | 148 | 67.8 | 152 |
| 18-23 | 94.6 | 0.0 | 2.7 | 0.0 | 0.0 | 2.7 | 100.0 | 5.4 | 72 | 59.5 | 74 |
| 0-3 | 6.9 | 16.7 | 13.7 | 29.4 | 11.8 | 21.6 | 100.0 | 93.1 | 98 | 51.0 | 102 |
| 0-5 | 4.9 | 16.0 | 16.0 | 29.6 | 9.3 | 24.1 | 100.0 | 95.1 | 156 | 56.8 | 162 |
| 6-9 | 52.8 | 6.7 | 5.6 | 12.4 | 1.1 | 21.3 | 100.0 | 47.2 | 87 | 70.8 | 89 |
| 12-15 | 78.0 | 2.5 | 0.0 | 1.7 | 0.8 | 16.9 | 100.0 | 22.0 | 116 | 66.9 | 118 |
| 12-23 | 85.8 | 1.3 | 0.9 | 0.9 | 0.4 | 10.6 | 100.0 | 14.2 | 220 | 65.0 | 226 |
| 20-23 | 96.1 | 0.0 | 2.0 | 0.0 | 0.0 | 2.0 | 100.0 | 3.9 | 50 | 58.8 | 51 |
| Note: Breastfeeding status refers to a " 24 -hour" period (yesterday and last night). Children who are classified as breastfeeding and consuming plain water only supplements. The categories of not breastfeeding, <br> exclusively breastfed, breastfeeding and consuming plain water, non-milk liquids, other milk, and complementary foods (solids and semi-solids) are hierarchical their percentages add to 100 percent. <br> Thus children who receive breast milk and non-milk liquids and who do not receive other milk and who do not receive complementary foods are classified in the non-milk liquid category even though they may also get plain water. Any children who get complementary food are classified in that category as long as they are breastfeeding as well. <br> ${ }^{1}$ Non-milk liquids include juice, juice drinks, clear broth or other liquids" |  |  |  |  |  |  |  |  |  |  |  |

Table 7.4 Foods and liquids consumed by children in the day or night preceding the interview

| Percentage of youngest children under two years of age who are living with the mother by type of foods consumed in the day or night preceding the interview, aci status and age, BHDS 2020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Liquids | Solid or semi solid foods |  |  |  |  |  |  |  |  |  |  |  |
| Age in months | Infant formula | Other milk ${ }^{1}$ | Other liquids ${ }^{2}$ | Fortified baby food | Food <br> made <br> from grains ${ }^{3}$ | Fruits and vegetables rich in vitamin A $^{4}$ | Other fruits and vegetables | Food <br> made <br> from <br> roots <br> and tubers | Food made from legumes and nuts | Meat, fish and poultry | Eggs | Cheese, <br> yogurt, other milk product | Any solid or semisolid food | Number <br> of children |
| BREASTFEEDING CHILDREN |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 0-1 | * | * | 39.1 | * | * | 8.7 | 8.7 | 8.7 | 4.3 | 4.3 | 4.3 | 4.3 | 8.7 | 23 |
| 2-3 | * | 8.3 | 54.2 | * | * | 12.5 | 12.5 | 8.3 | 4.2 | 8.3 | 4.2 | 8.3 | 16.7 | 24 |
| 4-5 | * | 3.1 | 50.0 | * | 6.3 | 15.6 | 6.3 | 9.4 | 3.1 | 3.1 | 6.3 | 6.3 | 25.0 | 32 |
| 6-8 | * | 5.6 | 58.3 | * | 5.6 | 25.0 | 25.0 | 27.8 | 8.3 | 16.7 | 16.7 | 2.8 | 38.9 | 36 |
| 9-11 | 5.9 | 17.6 | 70.6 | * | 17.6 | 52.9 | 35.3 | 23.5 | 5.9 | 41.2 | 23.5 | 35.3 | 76.5 | 17 |
| 12-17 | * | 27.6 | 75.9 | * | 20.7 | 69.0 | 48.3 | 48.3 | 17.2 | 48.3 | 34.5 | 31.0 | 75.9 | 29 |
| 18-23 | * | * | 40.0 | * | * | 60.0 | 60.0 | 40.0 | * | 40.0 | 20.0 | 20.0 | 60.0 | 5 |
| 6-23 | 1.1 | 14.9 | 65.5 | * | 12.6 | 47.1 | 36.8 | 34.5 | 10.3 | 33.3 | 24.1 | 19.5 | 59.8 | 87 |
| Total | 0.6 | 9.6 | 57.2 | * | 7.8 | 30.7 | 23.5 | 22.3 | 7.2 | 19.9 | 15.1 | 13.3 | 39.8 | 166 |
| NONBREASTFEEDING CHILDREN |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 0-1 | 4.7 | 34.9 | 79.1 | 4.7 | 11.6 | 67.4 | 55.8 | 51.2 | 32.6 | 46.5 | 46.5 | 34.9 | 69.8 | 43 |
| 2-3 | 2.1 | 23.4 | 66.0 | * | 6.4 | 61.7 | 46.8 | 46.8 | 29.8 | 48.9 | 40.4 | 29.8 | 74.5 | 47 |
| 4-5 | 8.2 | 28.6 | 71.4 | 6.1 | 16.3 | 57.1 | 38.8 | 40.8 | 38.8 | 53.1 | 55.1 | 32.7 | 67.3 | 49 |
| 6-8 | 1.5 | 25.8 | 71.2 | * | 13.6 | 62.1 | 57.6 | 45.5 | 39.4 | 59.1 | 48.5 | 42.4 | 74.2 | 66 |
| 9-11 | 6.1 | 34.8 | 77.3 | 1.5 | 16.7 | 78.8 | 62.1 | 59.1 | 31.8 | 63.6 | 53.0 | 48.5 | 80.3 | 66 |
| 12-17 | 6.1 | 30.0 | 73.3 | 1.7 | 13.9 | 76.1 | 66.1 | 58.3 | 31.1 | 60.0 | 48.3 | 42.8 | 82.8 | 180 |
| 18-23 | 1.5 | 28.9 | 69.6 | 2.2 | 11.1 | 68.1 | 56.3 | 54.1 | 25.9 | 53.3 | 38.5 | 33.3 | 79.3 | 135 |
| 6-23 | 4.0 | 29.8 | 72.5 | 1.6 | 13.4 | 72.0 | 61.3 | 55.3 | 30.9 | 58.4 | 46.1 | 40.7 | 80.1 | 447 |
| Total | 4.3 | 29.5 | 72.4 | 2.0 | 13.0 | 69.6 | 57.8 | 53.1 | 31.6 | 56.3 | 46.4 | 38.7 | 77.8 | 586 |

 and last night).
2 Does not include plain water. Includes juice, juice drinks, clear broth, or other non-milk liquids.
2 Does not include plain water. Includes juice, juice drinks, clear broth, or other non-milk liquids.
${ }^{3}$ Includes fortified baby food
${ }^{4}$ Includes [list fruits and vegetables included in the questionnaire such as pumpkin, red or yellow

Table 7.5 Infant and young child feeding (IYCF) practices
 by background characteristics, BHDS 2020

| Background characteristics | Among breastfed children 6-23 months, percentage fed: |  |  |  | Among non-breastfed children 6-23 months, percentage fed: |  |  |  |  | Among all children 6-23 months, percentage fed: |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 4+ food groups ${ }^{1}$ | Minimum meal frequency ${ }^{2}$ | Both 4+ food groups and minimum meal frequency | Number of breastfed children 6-23 months | Milk or milk products ${ }^{3}$ | 4+ food groups ${ }^{1}$ | Minimum meal frequency ${ }^{4}$ | With 3 IYCF practices ${ }^{5}$ | Number of nonbreastfed children 6-23 months | Breast milk, milk or milk products ${ }^{6}$ | 4+ food groups ${ }^{1}$ | Minimum meal frequency ${ }^{7}$ | With <br> 3 IYCF <br> practices | Number of children 6-23 months |
| Age |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6-8 | 16.7 | 58.3 | 2.8 | 36 | 95.5 | 57.6 | 90.9 | 48.5 | 66 | 97.1 | 43.1 | 79.4 | 32.4 | 102 |
| 9-11 | 29.4 | 29.4 | 17.6 | 17 | 93.9 | 62.1 | 90.9 | 56.1 | 66 | 95.2 | 55.4 | 78.3 | 48.2 | 83 |
| 12-17 | 41.4 | 37.9 | 27.6 | 29 | 97.2 | 60.0 | 97.2 | 53.3 | 180 | 97.6 | 57.4 | 89.0 | 49.8 | 209 |
| 18-23 | 40.0 | 40.0 | 20.0 | 5 | 96.3 | 50.4 | 92.6 | 39.3 | 135 | 96.4 | 50.0 | 90.7 | 38.6 | 140 |
| Sex |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Male | 33.3 | 52.9 | 17.6 | 51 | 96.1 | 58.8 | 93.9 | 52.2 | 228 | 97.4 | 48.6 | 79.9 | 40.4 | 279 |
| Female | 22.2 | 33.3 | 11.1 | 36 | 96.3 | 55.3 | 94.1 | 45.2 | 219 | 97.2 | 45.5 | 77.4 | 36.6 | 255 |
| Mother's education |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| No Education | 28.6 | 41.3 | 15.9 | 63 | 96.0 | 52.5 | 93.2 | 43.8 | 324 | 97.5 | 44.1 | 79.1 | 35.9 | 387 |
| Primary | 27.3 | 54.5 | 9.1 | 11 | 93.5 | 72.6 | 95.2 | 66.1 | 62 | 94.4 | 58.4 | 80.9 | 51.7 | 73 |
| Secondary | 42.9 | 42.9 | 14.3 | 7 | 100.0 | 60.0 | 97.8 | 51.1 | 45 | 98.6 | 50.7 | 74.6 | 38.0 | 52 |
| Higher | 16.7 | 66.7 | 16.7 | 6 | 100.0 | 81.3 | 93.8 | 75.0 | 16 | 100.0 | 59.4 | 75.0 | 50.0 | 22 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 33.3 | 50.0 | 16.7 | 12 | 98.0 | 53.1 | 95.9 | 46.9 | 49 | 98.8 | 41.3 | 80.0 | 32.5 | 61 |
| Second | 22.2 | 44.4 | 16.7 | 18 | 95.8 | 47.9 | 93.8 | 41.7 | 96 | 97.4 | 42.1 | 80.3 | 34.9 | 114 |
| Middle | 22.2 | 50.0 | 5.6 | 18 | 93.9 | 60.6 | 90.2 | 50.0 | 132 | 95.8 | 51.2 | 78.1 | 40.9 | 150 |
| Fourth | 31.8 | 45.5 | 22.7 | 22 | 99.0 | 60.6 | 98.0 | 49.5 | 99 | 98.3 | 48.0 | 80.9 | 39.9 | 121 |
| Highest | 35.3 | 35.3 | 11.8 | 17 | 95.8 | 60.6 | 94.4 | 56.3 | 71 | 97.7 | 48.5 | 74.2 | 40.9 | 88 |
| Total | 28.7 | 44.8 | 14.9 | 87 | 96.2 | 57.0 | 94.0 | 48.8 | 447 | 97.3 | 47.1 | 78.7 | 38.6 | 534 |

 (and red palm oil); d. other fruits and vegetables; e. eggs;
f. meat, poultry, fish, and shellfish (and organ meats); g. legumes and nuts.
${ }_{4}^{3}$ Includes two or more feedings of commercial infant formula, fresh, tinned and powdered animal milk, and yogurt foeds at least four times a day
${ }^{5}$ Non-breastfed children age 6-23 months are considered to be fed with a minimum standard of three Infant and young child feeding practices if they receive other milk or milk products at least twice a day, receive the minimum meal frequency, and receive solid or semi-solid foods from at least four food groups not
${ }_{6}{ }^{\text {including the milk/milk product group }}$,
${ }^{6}$ Breastfeeding, or not breastfeeding and receiving two or more feedings of commercial infant formula, fresh, tinned, and powdered animal milk, and yogurt
${ }^{7}$ Children are fed the minimum recommended number of times per day according to their age and breastfeeding status as described in footnotes 2 and 4

## Table 7.6 Micronutrient intake among children

Among youngest children aged 6-23 months who are living with their mother, the percentages who consumed vitamin A-rich and iron-rich foods in the day or night preceding the survey, and among all children 6-59 months, the percentages who were given vitamin A supplements in the six months preceding the survey, who were given iron supplements in the past seven days, and who were given deworming medication by background characteristics, BHDS 2020

| Background characteristics | Among youngest children age 6-23 months living with the mother: |  |  | Among all children age 6-59 months: |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage who consumed foods rich in vitamin A in past 24 hours ${ }^{1}$ | Percentage who consumed foods rich in iron in past 24 hours ${ }^{2}$ | Number of children | Percentage given iron supple- ments in past 7 days | Percentage given deworming medication in past 6 months ${ }^{3}$ | Percentage given Vitamin A Supplementation in past 6 months | Number of children |
| Age in months |  |  |  |  |  |  |  |
| 6-8 | 47.9 | 38.4 | 73 | 5.5 | 4.1 | 11.0 | 73 |
| 9-11 | 78.1 | 62.5 | 64 | 9.4 | 7.8 | 17.2 | 64 |
| 12-17 | 76.2 | 58.3 | 168 | 18.5 | 18.5 | 31.0 | 168 |
| 18-23 | 74.1 | 56.3 | 112 | 11.6 | 15.2 | 24.1 | 112 |
| 24-35 | 0.0 | 0.0 | 0.0 | 17.0 | 21.7 | 30.1 | 336 |
| 36-47 | 0.0 | 0.0 | 0.0 | 18.3 | 22.4 | 25.1 | 339 |
| 48-59 | 0.0 | 0.0 | 0.0 | 15.0 | 20.5 | 26.8 | 366 |
| Sex |  |  |  |  |  |  |  |
| Male | 70.1 | 56.6 | 221 | 16.1 | 18.1 | 25.2 | 778 |
| Female | 71.9 | 53.1 | 196 | 15.1 | 20.4 | 27.4 | 680 |
| Breastfeeding status |  |  |  |  |  |  |  |
| Breastfeeding | 50.0 | 33.7 | 86 | 12.1 | 13.6 | 28.6 | 140 |
| Not breastfeeding | 76.4 | 60.4 | 331 | 16.0 | 19.8 | 25.9 | 1,318 |
| Mother's age |  |  |  |  |  |  |  |
| 15-19 | 70.0 | 45.0 | 40 | 17.1 | 19.7 | 19.7 | 76 |
| 20-29 | 71.9 | 56.6 | 249 | 14.4 | 19.1 | 26.6 | 817 |
| 30-39 | 70.6 | 55.5 | 119 | 16.4 | 18.8 | 26.1 | 501 |
| 40-49 | 62.5 | 50.0 | 8 | 23.8 | 22.2 | 30.2 | 63 |
| Education |  |  |  |  |  |  |  |
| No Education | 69.3 | 52.9 | 306 | 14.8 | 17.9 | 25.2 | 1,120 |
| Primary | 76.9 | 59.6 | 52 | 15.7 | 21.9 | 27.5 | 178 |
| Secondary | 70.7 | 56.1 | 41 | 18.0 | 21.6 | 33.3 | 111 |
| Higher | 83.3 | 72.2 | 18 | 28.6 | 32.7 | 28.6 | 49 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 69.6 | 54.3 | 46 | 12.4 | 17.6 | 20.6 | 170 |
| Second | 64.4 | 46.7 | 90 | 14.9 | 17.8 | 25.6 | 281 |
| Middle | 69.0 | 56.6 | 113 | 16.4 | 17.3 | 27.1 | 428 |
| Fourth | 76.7 | 55.3 | 103 | 14.9 | 20.7 | 21.9 | 343 |
| Highest | 75.4 | 63.1 | 65 | 18.6 | 23.3 | 35.6 | 236 |
| Total | 71.0 | 54.9 | 417 | 15.6 | 19.2 | 26.2 | 1,458 |

Note: Information on vitamin A is based on both mother's recall and the immunization card (where available). Information on iron supplements and deworming medication is based on the mother's recall. na = Not applicable
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.
${ }^{1}$ Includes meat (and organ meat), fish, poultry, eggs, pumpkin, red or yellow yams or squash, carrots, red sweet potatoes,
dark green leafy vegetables, mango, papaya, and other locally grown fruits and vegetables that are rich in vitamin A, and red palm oil
${ }^{2}$ Includes meat (including organ meat), fish, poultry, and eggs
${ }^{3}$ Deworming for intestinal parasites is commonly done for helminths and for schistosomiasis.
Among women aged 15-49, the percentage with height under 145 cm , mean Body Mass Index (BMI), and the percentage with specific BMI levels, by background characteristics, BHDS 2020 Body Mass Index ${ }^{1}$

| Background characteristics | Height |  | Mean body max index (BMI) | Normal <br> 18.5-24.9 <br> (Total <br> normal) | Thin |  |  | Overweight/Obese |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage below 145 cm | Number of women |  |  | <18.5 <br> (Total <br> thin) | $\begin{gathered} \text { 17.0-18.4 } \\ \text { (Mildly } \\ \text { thin) } \end{gathered}$ | $<17$ <br> (Moderately and severely thin) | $>=25.0$ <br> (Total over weight or obese) | 25.0-29.9 (Overweight) | $\begin{gathered} 30.0+ \\ \text { (obese) } \end{gathered}$ | Number of women |
| Age |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 5.1 | 588 | 21.7 | 55.9 | 26.9 | 17.7 | 9.2 | 17.2 | 13.2 | 4.0 | 553 |
| 20-29 | 1.5 | 724 | 25.6 | 48.8 | 6.8 | 5.1 | 1.7 | 44.0 | 26.4 | 17.7 | 588 |
| 30-39 | 0.4 | 458 | 27.5 | 31.8 | 5.1 | 3.3 | 1.8 | 63.1 | 30.6 | 32.6 | 396 |
| 40-49 | 0.5 | 186 | 27.8 | 28.2 | 5.3 | 4.1 | 1.2 | 66.5 | 35.9 | 30.6 | 170 |
| Education |  |  |  |  |  |  |  |  |  |  |  |
| No education | 1.7 | 407 | 25.3 | 43.5 | 13.1 | 9.4 | 3.7 | 43.2 | 23.6 | 19.6 | 352 |
| Primary | 2.4 | 248 | 24.7 | 40.6 | 18.9 | 12.3 | 6.6 | 40.6 | 18.9 | 21.7 | 212 |
| Secondary | 3.7 | 272 | 23.6 | 50.8 | 19.0 | 11.5 | 7.5 | 30.2 | 17.5 | 12.7 | 252 |
| Higher education | 1.8 | 166 | 24.4 | 59.2 | 9.5 | 6.8 | 2.7 | 30.6 | 20.4 | 10.2 | 147 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 15.0 | 20 | 25.3 | 38.9 | 11.1 | 11.1 |  | 50.0 | 33.3 | 16.7 | 18 |
| Second | 2.8 | 179 | 24.2 | 51.3 | 10.4 | 9.1 | 1.3 | 38.3 | 24.0 | 14.3 | 154 |
| Middle | 3.2 | 404 | 24.6 | 46.8 | 13.5 | 9.4 | 4.1 | 39.4 | 24.1 | 15.3 | 340 |
| Fourth | 1.4 | 655 | 25.1 | 44.8 | 11.6 | 7.4 | 4.1 | 43.6 | 26.4 | 17.2 | 580 |
| Highest | 2.0 | 698 | 25.4 | 43.1 | 14.1 | 9.3 | 4.9 | 42.6 | 21.5 | 21.1 | 615 |
| Total | 2.2 | 1,956 | 25.0 | 45.1 | 12.8 | 8.7 | 4.1 | 42.0 | 24.0 | 18.0 | 1,707 |

Table 7.8 Micronutrient intake among mothers

Among women aged 15-49 with a child born in the 5 years preceding the survey, percent distribution by number of days they took iron tablets or syrup during the pregnancy of the last child, and percentage who took deworming medication during the pregnancy of the last child according to background characteristics, BHDS 2020

| Background characteristics | Number of days women took iron tablets or syrup during pregnancy of last birth |  |  |  |  | Percentage of women who took deworming medication during pregnancy of last birth | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | None | <60 | 60-89 | 90+ | Total |  |  |
| Age |  |  |  |  |  |  |  |
| 15-19 | 31.3 | 60.4 | 6.3 | 2.1 | 100.0 | 12.5 | 48 |
| 20-29 | 41.0 | 57.6 | 0.7 | 0.7 | 100.0 | 15.8 | 139 |
| 30-39 | 55.6 | 42.4 | 1.0 | 1.0 | 100.0 | 10.1 | 99 |
| 40-49 | 44.8 | 51.7 | * | 3.4 | 100.0 | 10.3 | 29 |
| Education |  |  |  |  |  |  |  |
| No Education | 50.0 | 47.9 | 0.9 | 1.3 | 100.0 | 12.0 | 234 |
| Primary | 29.0 | 67.7 | 3.2 | * | 100.0 | 19.4 | 31 |
| Secondary | 32.4 | 64.7 | 2.9 | * | 100.0 | 8.8 | 34 |
| Higher | 18.8 | 68.8 | 6.3 | 6.3 | 100.0 | 25.0 | 16 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 48.6 | 51.4 | * | * | 100.0 | 11.4 | 35 |
| Second | 41.9 | 55.8 | * | 2.3 | 100.0 | 16.3 | 43 |
| Middle | 48.9 | 46.8 | 2.1 | 2.1 | 100.0 | 12.8 | 94 |
| Fourth | 39.8 | 58.0 | 1.1 | 1.1 | 100.0 | 15.9 | 88 |
| Highest | 43.6 | 52.7 | 3.6 |  | 100.0 | 7.3 | 55 |
| Total | 44.4 | 52.7 | 1.6 | 1.3 | 100.0 | 13.0 | 315 |
| Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. |  |  |  |  |  |  |  |

## CHAPTER 8

## HIV/AIDS-Related Knowledge, Beliefs and Attitudes

## Key Findings

KNOWLEDGE ABOUT HIV/AIDS


85\%
of women aged 15-49 in Benadir had heard of HIV/ AIDS.

COMPREHENSIVE KNOWLEDGE ABOUT HIV/AIDS

## 8\%

of women aged 15-49 have comprehensive knowledge about HIV/AIDS.

KNOWLEDGE OF MOTHER-TO-CHILD TRANSMISSION OF HIV/AIDS

## 53\%

of mothers aged 15-49 know that HIV can be transmitted from mother to child during pregnancy, 54 percent during delivery and 59 percent by breastfeeding respectively.

DISCRIMINATORY ATTITUDES
TOWARDS PEOPLE LIVING WITH HIV/ AIDS

## $52 \%$

of women aged 15-49 have discriminatory attitudes towards people living with HIV.

```
PREVALENCE OF STIS (SELFREPORTED)
```

4\%
of ever-married women aged 15-49 reported that they had STIs in the 12 months preceding the survey.

# HIV/AIDS-Related Knowledge, Beliefs and Attitudes 

The survey collected information on the knowledge of and attitudes around Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) and knowledge of other sexually transmitted infections (STIs) from all ever married women. The survey also collected data on self-reported prevalence of sexually transmitted infections among evermarried women.

The HIV/AIDS prevalence among the adult population is estimated to be very low at about 0.55 percent (UNAIDS 2014). However, there are no estimates for the Benadir region as a stand-alone.

The objective of this chapter is to provide data on HIV/AIDS knowledge, attitudes, and behaviours, including knowledge of HIV/ AIDS prevention methods, stigma and prevention of mother-tochild transmission of HIV/AIDS.

HIV/AIDS is not considered a major epidemic in Somalia and most people associate HIV/AIDS with people who commit sexual sins. The HIV/AIDS prevalence among the adult population is estimated to be very low at about 0.55 percent (UNAIDS 2014). However, there are no estimates for the Benadir region as a stand-alone.

The future course of the situation of HIV/AIDS in Benadir depends on several variables: levels of knowledge about HIV/AIDS among the general population, social stigmatization, modification of risk behaviour, access to high quality services for STIs, provision and uptake of HIV counseling and testing, and access to care and antiretroviral therapy (ART)

## HIV/AIDS-Related Knowledge, Beliefs and Attitudes and Prevention Methods

The survey obtained information from women aged 15-49 on their knowledge, perceptions, and behaviours related to HIV/AIDS, as well as awareness on modes of HIV/AIDS transmission and how to prevent it's spread. Respondents were asked whether they had heard of HIV/AIDS, how it is transmitted, stigma and discrimination and how to prevent the spread.

Table 8.1 provides information on women's awareness of HIV/AIDS. It shows that about 85 percent of women aged 15-49 have heard of HIV/AIDS. Eighty percent of women with no education had heard

## 85\%

of women aged 15-49 have heard of HIV/ AIDS.

## 8\%

of the interviewed women have comprehensive knowledge of HIV/ AIDS
about HIV/AIDS, compared to 98 percent among those with higher education. Awareness of HIV/AIDS is slightly higher among the wealthier women. At the national level 66 percent of women have heard of HIV/AIDS (SHDS, 2020).

## Misconceptions about HIV/AIDS

Table 8.2 presents data on the misconceptions about HIV/AIDS transmission in Benadir (e.g. that HIV/AIDS can be transmitted by mosquito bites or that it can be transmitted by sharing food with someone who has HIV/AIDS). Fifty percent of the interviewed women were aware that a healthy-looking person could be carrying the HIV/AIDS virus; 34 percent of women reported that HIV/AIDS could not be transmitted through mosquito bites and 50 percent of the women knew that the HIV/AIDS virus cannot be transmitted by supernatural means. Forty-one percent of the respondents understand that people cannot be infected by sharing food with a person who has HIV/AIDS

Table 8.2 also includes a composite measure of knowledge of HIV/ AIDS. It indicates that only 14 percent of all women aged 15-49 rejected the two most common misconceptions about HIV/AIDS in Benadir (i.e. HIV/AIDS can be transmitted by mosquito bites or HIV/ AIDS cannot be transmitted by supernatural means).

Only 8 percent of the interviewed women have comprehensive knowledge of HIV/AIDS. Comprehensive knowledge is knowing that consistent use of condom during sexual intercourse and having just one uninfected spouse can reduce the chance of getting the AIDS virus, knowing that a healthy-looking person can have the AIDS virus, and rejecting the two most common local misconceptions about transmission or prevention of the AIDS virus. Comprehensive knowledge is lowest among the older women (40-45 years) at 7 percent and highest among those aged 20-24 years at 9 percent. Seven percent of women with no education have comprehensive knowledge while 15 percent of those with higher level of education have comprehensive knowledge. Eleven percent of women from the highest wealth quintile have comprehensive knowledge and 4 percent of those from the second wealth quintile. At the national level, 6 percent of the women have comprehensive knowledge of HIV/AIDS (SHDS, 2020).

## Knowledge about Mother-to-Child Transmission

To assess knowledge about mother-to-child transmission of HIV/ AIDS, both ever-married and never-married women interviewed were asked whether HIV/AIDS could be transmitted from a mother to her child during pregnancy or delivery, and through breastfeeding. They were also asked whether the risk of mother-to-

Figure 8.1 Knowledge of prevention of mother-to-child transmission of HIV/ AIDS

Percentage of women aged 15-49 who know the means that HIV can be transmitted from mother to child
58.7


Figure 8.2 Discriminatory attitudes towards people living with HIV/AIDS by education

Percentage women aged 15-49 with discriminatory attitudes towards people living with HIV

## 55.0


child transmission (MTCT) of HIV/AIDS could be reduced with the mother taking special drugs during pregnancy.

Table 8.3 and Figure 8.1 presents data on the knowledge about mother-to-child transmission among women aged 15-49, Table 8.3 further shows the knowledge levels by background characteristics. Fifty-three percent of women know that HIV/AIDS is transmitted during pregnancy, 54 percent know that it can be transmitted during delivery, and 59 percent know that it can be transmitted through breastfeeding, whereas 46 percent of the respondents believe HIV/ AIDS can be transmitted by all three means. Thirty-nine percent of women know that the risk of mother-to-child transmission can be reduced if the infected mother takes special drugs during pregnancy. Knowledge of prevention of mother to child transmission of HIV/ AIDS increases with women's educational attainment, 33 percent among those with no education and 69 percent among those with higher level of education.

## Attitudes towards People Living with HIV/AIDS

Many people in Benadir believe that HIV/AIDS is a disease for people who have committed bad deeds. Extensive stigma and discrimination against people living with HIV/AIDS adversely affects both people's willingness to be tested and their adherence to ART. For instance, people may hesitate to take an HIV test because they are afraid of how other people will react if they find out the test result is positive.

HIV/AIDS-related stigma and discrimination undermines efforts to prevent the spread as people shy away from seeking information on how to reduce their risk of exposure to HIV/AIDS. Tackling stigma and discrimination is thus an important factor for the success of programmes targeting HIV/AIDS prevention and control.

In the BHDS 2020, both ever-married and never-married women who had heard of HIV/ AIDS were asked several questions to assess the level of stigma associated with HIV/ AIDS. Respondents were asked about their willingness or unwillingness to take care of a member of their family with HIV/AIDS in their own household, to buy vegetables from an infected shopkeeper or vendor, and to let others know the HIV/AIDS status of family members.

Table 8.4 presents data for women aged 15-49 who have heard of HIV/AIDS and their attitudes towards people living with HIV/ AIDS, by background characteristics. It shows that 59 percent of women think that children living with HIV/AIDS should not attend school with children who are not infected by HIV/ AIDS. Sixty-four percent of women said they would not buy fresh vegetables from a shopkeeper who is HIV positive. Furthermore, the table shows

## 52\% of the respondents have discriminatory attitudes towards people living with HIV/AIDS

## Tackling stigma and

 discrimination is thus an important factor for the success of programmes targeting HIV/AIDS prevention and control.Figure 8.3 Discriminatory attitudes towards people living with HIV/ AIDS by age
Percentage women aged 15-49 with discriminatory attitudes towards people living with HIV

that 52 percent of the respondents have discriminatory attitudes towards people living with HIV/AIDS.

Stigma against people with HIV/AIDS is higher among those with no education. The data also shows that the discriminatory attitudes towards people with HIV/AIDS decrease as educational levels increase. This means that those with no education have more negative attitudes towards people with HIV/AIDS, compared to those with higher levels of education. It also shows that the negative attitudes towards people with HIV/AIDS increase with age. Fortyseven percent of women in the age group 15-19 have discriminatory attitudes towards persons living with HIV/AIDS compared to 55 percent among those aged 45-19 (Figures 8.2 and 8.3).

## Self-reporting of Sexually Transmitted Infections

The survey collected information on sexually transmitted infections or symptoms of an STI. Ever-married women aged 15-49 were asked whether they had a sexually transmitted infection or symptoms (bad smell, abnormal discharge from the vagina, or a genital sore or ulcer) in the 12 months prior to the survey.

Table 8.5 shows the self-reported prevalence of STIs and STI symptoms. Four percent of ever-married women reported that they had an STI in the 12 months preceding the survey, 19 percent had a bad smell, or an abnormal discharge, and 14 percent had a genital sore or ulcer. In total, 24 percent of women reported having an STI/ genital discharge/sore or ulcer as symptoms. Nationally, 8 percent of ever-married women reported they had an STI in the 12 months preceding the survey (SHDS, 2020).

Figure 8.4 Source of advice or treatment for STIs
Percent of women aged 15-49 reporting an STI or symptoms of an STI in the past 12 months who sought advice or treatment


Variations in self-reported prevalence of STIs and STI symptoms by background characteristics are also presented in Table 8.5. The prevalence varies only slightly by age, education, and wealth quintile.

Table 8.6 and Figure 8.4 show the percentage of ever-married women in the 15-49 age group reporting an STI or symptoms of an STI in the 12 months preceding the survey and who sought advice or treatment. Eighty-eight percent of ever-married women in Benadir who had an STI or STI symptoms did not seek advice or treatment compared to 70 percent nationally (SHDS, 2020). Twenty-three percent of ever-married women who had an STI or STI symptoms sought advice from the public health sector and 21 percent got advice from the private sector.

Extensive stigma and discrimination against people living with HIV/AIDS adversely affects both people's willingness to be tested and their adherence to ART.


## Table 8.1 Knowledge of HIV

| Percentage of women aged 15-49 who, heard HIV/AIDS by background characteristics, BHDS 2020 |  |  |
| :--- | :---: | :---: |
| Percentage of women who ever heard <br> HIV/AIDS | Number of women |  |
| Age | 82.8 |  |
| $15-19$ | 89.7 | 651 |
| $20-24$ | 87.2 | 429 |
| $25-29$ | 84.3 | 413 |
| $30-39$ | 75.2 | 536 |
| $40-49$ |  | 226 |
| Education | 80.3 |  |
| No Education | 88.4 | 1,473 |
| Primary | 93.3 | 303 |
| Secondary | 98.2 | 312 |
| Higher | 81.8 | 167 |
| Wealth quintile | 81.8 | 220 |
| Lowest | 85.2 | 417 |
| Second | 86.5 | 637 |
| Middle | 85.1 | 539 |
| Fourth | 84.5 | 442 |
| Highest |  | 2,255 |
| Total 15-49 |  |  |

Table 8.2 Comprehensive knowledge about HIV

Percentage of women aged 15-49 who say that a healthy-looking person can have the AIDS virus and who, in response to prompted questions, correctly reject local misconceptions about transmission or prevention of the AIDS virus, and the percentage with a comprehensive knowledge about AIDS by background characteristics, BHDS 2020

| Background characteristics | Percentage of women who say that: |  |  |  |  |  | Percentage who say that a healthy-looking person can have HIV/AIDS and who reject the two most common local misconceptions ${ }^{1}$ | Percentagewith acomprehensiveknowledgeabout HIV/AIDS $^{2}$ | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Using a Condom reduces the chance of HIV infection | Having uninfected spouse can reduce the chance of HIV infection | A healthylooking person can have HIV/ AIDS | The HIV/AIDS cannot be transmitted by mosquito bites | HIV/AIDS <br> cannot be transmitted by supernatural means | A person cannot become infected by sharing food with a person who has HIV/ AIDS |  |  |  |
| Age |  |  |  |  |  |  |  |  |  |
| 15-19 | 33.2 | 48.5 | 51.6 | 36.4 | 48.7 | 39.5 | 17.1 | 8.0 | 651 |
| 20-24 | 37.1 | 62.7 | 56.9 | 38.2 | 55.9 | 45.0 | 18.2 | 9.1 | 429 |
| 25-29 | 37.5 | 54.7 | 48.9 | 28.6 | 49.6 | 43.3 | 11.4 | 8.5 | 413 |
| 30-39 | 32.3 | 50.9 | 47.6 | 32.3 | 46.5 | 39.7 | 11.2 | 7.6 | 536 |
| 40-49 | 29.2 | 47.3 | 39.8 | 28.8 | 48.2 | 37.6 | 9.7 | 7.1 | 226 |
| Education |  |  |  |  |  |  |  |  |  |
| No <br> Education | 29.1 | 46.6 | 43.3 | 27.6 | 43.9 | 34.3 | 9.8 | 6.5 | 1,473 |
| Primary | 38.0 | 58.4 | 54.8 | 35.6 | 54.8 | 47.5 | 13.2 | 9.2 | 303 |
| Secondary | 40.1 | 61.2 | 62.8 | 46.5 | 59.3 | 52.2 | 23.7 | 10.9 | 312 |
| Higher | 60.5 | 81.4 | 76.0 | 58.7 | 73.7 | 68.9 | 35.9 | 15.0 | 167 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |
| Lowest | 28.6 | 50.0 | 46.4 | 26.4 | 43.6 | 33.6 | 8.2 | 6.8 | 220 |
| Second | 31.9 | 50.8 | 48.0 | 33.1 | 46.3 | 34.3 | 12.5 | 4.1 | 417 |
| Middle | 35.2 | 56.8 | 50.9 | 32.2 | 49.1 | 41.0 | 14.1 | 9.3 | 637 |
| Fourth | 34.0 | 51.9 | 49.9 | 33.8 | 52.1 | 43.0 | 13.2 | 10.8 | 539 |
| Highest | 37.6 | 51.4 | 52.5 | 39.4 | 53.6 | 49.1 | 19.7 | 7.7 | 442 |
| Total 15-49 | 34.1 | 52.8 | 50.0 | 33.6 | 49.7 | 41.1 | 14.1 | 8.1 | 2,255 |

${ }^{1}$ The two most common local misconceptions are that HIV/AIDS can be spread by mosquitoes and supernatural means.
${ }^{2}$ Comprehensive knowledge means knowing that consistent use of condom during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV/AIDS, knowing that a healthy-looking person can have HIV/AIDS, and rejecting the two most common local misconceptions about transmission or prevention of HIV/AIDS.

Table 8.3 Knowledge of prevention of mother-to-child transmission of HIV

Percentage of women aged 15-49 who know that HIV can be transmitted from mother to child by breastfeeding and that the risk of mother to child transmission (MTCT) of HIV can be reduced by mother taking special drugs during pregnancy, by background characteristics, BHDS 2020

| Background characteristics | Percentage who know that HIV can be transmitted from mother to child |  |  |  | Percentage who know that the risk of MTCT can be reduced by mother taking special drugs | Number of women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | During pregnancy | During delivery | By breastfeeding | By all three means |  |  |
| Age |  |  |  |  |  |  |
| 15-19 | 49.9 | 52.1 | 60.2 | 43.3 | 36.9 | 651 |
| 20-24 | 54.8 | 58.7 | 63.2 | 48.7 | 44.3 | 429 |
| 25-29 | 58.1 | 57.9 | 59.8 | 50.4 | 41.6 | 413 |
| 30-39 | 51.5 | 53.5 | 55.8 | 45.3 | 36.9 | 536 |
| 40-49 | 48.2 | 48.2 | 50.4 | 42.5 | 32.3 | 226 |
| Education |  |  |  |  |  |  |
| No Education | 48.6 | 49.1 | 53.5 | 42.4 | 32.7 | 1,473 |
| Primary | 53.1 | 58.4 | 65.0 | 47.9 | 43.9 | 303 |
| Secondary | 59.3 | 63.1 | 65.7 | 51.9 | 45.8 | 312 |
| Higher | 73.7 | 77.2 | 79.6 | 64.1 | 68.9 | 167 |
| Total 15-49 | 52.5 | 54.4 | 58.7 | 46.0 | 38.7 | 2,255 |

Table 8.4 Discriminatory attitudes towards people living with HIV

Among women aged 15-49 who have heard of HIV or AIDS, with discriminatory attitudes towards people living with HIV, according to background characteristics, BHDS 2020

| Background characteristics | Women |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | Percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative | Percentage who would not buy fresh vegetables from a shopkeeper who has HIV | Percentage with discriminatory attitudes towards people living with HIV ${ }^{1}$ | Number of women who have heard of HIV or AIDS |
| Age |  |  |  |  |
| 15-24 | 56.4 | 62.1 | 49.4 | 924 |
| 15-19 | 55.1 | 59.2 | 47.3 | 539 |
| 20-24 | 58.2 | 66.2 | 52.2 | 385 |
| 25-29 | 59.7 | 62.8 | 51.1 | 360 |
| 30-39 | 61.3 | 65.0 | 55.3 | 452 |
| 40-49 | 61.2 | 68.2 | 54.7 | 170 |
| Marital status |  |  |  |  |
| Never-married | 54.1 | 59.6 | 46.6 | 547 |
| Married | 60.9 | 65.1 | 54.0 | 1,109 |
| Divorced/Widowed | 58.4 | 64.8 | 51.6 | 250 |
| Education |  |  |  |  |
| No Education | 62.1 | 66.1 | 55.0 | 1,183 |
| Primary | 53.7 | 61.6 | 47.4 | 268 |
| Secondary | 53.3 | 57.7 | 45.7 | 291 |
| Higher | 50.6 | 57.9 | 43.9 | 164 |
| Wealth quintile |  |  |  |  |
| Lowest | 59.4 | 63.3 | 50.6 | 180 |
| Second | 61.0 | 67.2 | 54.8 | 341 |
| Middle | 58.9 | 61.7 | 52.1 | 543 |
| Fourth | 56.4 | 59.9 | 48.3 | 466 |
| Highest | 58.2 | 67.3 | 52.4 | 376 |
| Total 15-49 | 58.6 | 63.5 | 51.6 | 1,906 |

${ }^{1}$ Percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative and/ or would not buy fresh

Table 8.5 Self-reported prevalence of sexually transmitted infections (STIs) and STI symptoms

Among ever-married women aged 15-49 the percentage reporting having an STI and/or symptoms of an STI in the 12 months preceding the survey, by background characteristics, BHDS 2020

| Background characteristics | Percentage of respondents who reported having in the past 12 months: |  |  |  | Number of ever married women |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | STI | Bad-smelling/ abnormal genital discharge | Genital sore or ulcer | STI/ genital discharge/ sore or ulcer |  |
| Age |  |  |  |  |  |
| 15-19 | 3.9 | 16.1 | 10.3 | 22.6 | 155 |
| 20-24 | 2.8 | 24.0 | 15.1 | 28.7 | 317 |
| 25-29 | 3.6 | 18.0 | 16.1 | 23.4 | 384 |
| 30-39 | 4.7 | 17.8 | 13.5 | 23.5 | 533 |
| 40-49 | 4.9 | 17.8 | 14.2 | 23.1 | 225 |


| Marital status |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Married/ living together | 3.9 | 20.4 | 15.2 | 25.5 | 1,313 |
| Divorced/separated/ 4.7 12.3 10.3 | 19.3 | 301 |  |  |  |
| widowed |  |  |  |  |  |


| Education |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: |
| No Education | 4.7 | 18.6 | 14.8 | 24.5 | 1,246 |
| Primary | 2.3 | 20.7 | 13.2 | 24.7 | 174 |
| Secondary | 2.2 | 19.1 | 13.2 | 23.5 | 136 |
| Higher | 0.0 | 19.0 | 8.6 | 22.4 | 58 |


| Wealth quintile |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Lowest | 5.5 | 22.1 | 20.4 | 29.3 | 181 |
| Second | 4.4 | 18.5 | 12.1 | 23.9 | 297 |
| Middle | 4.2 | 17.3 | 12.2 | 22.4 | 450 |
| Fourth | 3.1 | 16.8 | 13.9 | 21.7 | 382 |
| Highest | 3.6 | 22.4 | 16.1 | 28.0 | 304 |
| Total 15-49 | 4.0 | 18.9 | 14.3 | 24.3 | 1,614 |

## Table 8.6 Source of advice or treatment for STIs

| Percentage of women aged 15-49 reporting an STI or symptoms of an STI in the past 12 months who sought advice or treatment, BHDS 2020 |  |
| :---: | :---: |
| Background characteristics | Percentage of Women |
| Public Sector |  |
| Public Sector | 23.2 |
| Government Hospital | 5.3 |
| Referal Health Center | 0.0 |
| MCH/HC | 17.8 |
| Primary Health Unit (PHU) | 1.0 |
| Mobile Clinic | 1.3 |
| Other Public Sector | 0.3 |
| Private medical sector |  |
| Private sector | 20.6 |
| Clinical | 14.2 |
| Pharmacy | 6.6 |
| Other Private Medical Sector | 0.3 |
| Other sources | 0.0 |
| No advice or Treatment | 88.3 |
| Number with STD or symptoms of STD | 393 |
| Number of women | 393 |
| Note: The categories are not mutually exclusive and the sum of percentages may exceed 100 percent. |  |
| No advice or Treatment | 88.3 |
| Public Sector | 23.2 |
| Private sector | 20.6 |
| Other sources | 0.0 |

CHAPTER 9

## Gender-Based Violence

## Key Findings

EXPERIENCE OF PHYSICAL VIOLENCE
15\%
of women aged 15-49 have experienced physical violence since the age of 12

VIOLENCE DURING PREGNANCY
8\%
of the ever-married women aged 15-49 who have been pregnant have experienced physical violence during one or more pregnancies.

INJURIES DUE TO SPOUSAL VIOLENCE
47\%
of the ever-married women aged 15-49 who have experienced spousal violence sustained some form of injury

HELP SEEKING BEHAVIOR
18\%
women who experienced spousal violence and sought help.

Chapter 9

## Gender-Based Violence


#### Abstract

In 2015, the UN General Assembly adopted 17 Sustainable Developments Goals (SDGs), including Goal 5, which calls for the elimination of all forms of violence and discriminatory acts against women and girls. Violence against women can be described as a violation of human rights, and a form of discrimination against women, resulting in physical, sexual, psychological and economic harm. It may lead to depression, anxiety disorders, post-traumatic stress disorder, permanent injuries, sleeplessness and, sometimes, death. Over the years, Somali women have overlooked some forms of violence as norms, as is the case for women in many countries.


## Measurements of Violence

The survey collected information on domestic violence and other forms of discrimination against women. Information was obtained from ever-married women and never-married women aged 15-49 who were either usual residents, or guests who slept in the house the night preceding the day of the interview.

Enumerators asked the respondents questions on their opinions regarding the definition of domestic violence, opinions on the most common perpetrators of violent acts against women, experiences of violence, whether physical, sexual or emotional, perpetrators of physical violence. They also asked respondents about their experience of violence during pregnancy, spousal violence, and injuries due to spousal violence, and help-seeking behaviours for those who have experienced violence.

All women 15-49 were asked about physical violence perpetuated on them. The survey also measured sexual and emotional violence committed by the current spouse (for currently married women) and by the most recent spouse (for divorced or widowed women).

The collection of data on GBV is often biased by under-reporting due to the culture of silence around the topic. In order to encourage disclosure, respondents were asked about any experiences they have had with specific acts of violence. This ensured there were no misunderstandings on the meaning of 'violence' among respondents.

The following set of questions were asked to the respective respondents. 'Did the perpetrator ever:

Physical violence: push you, shake you, or throw something at you; kick you, drag you, or beat you up; try to choke you or burn you on purpose; or threaten or attack you with a knife, gun, or any other weapon.

Sexual violence: physically force you to have sexual intercourse with him even when you did not want to, physically force you to perform any other sexual acts you did not want to, force you with threats or in any other way to perform sexual acts you did not want to, in the last 12 months preceding the survey, or physically force you to have sexual intercourse.

Emotional violence: say or do something to humiliate you in front of others, threaten to hurt or harm you or someone close to you, or insult you or make you feel bad about yourself.

## Ethical Considerations

Ensuring the confidentiality and privacy of respondents was obligatory for the enumerators during and after the Benadir interviews. All enumerators were provided rigorous training sessions on how to build a rapport with the respondents, make a good impression, obtain respondents' consent, assure them about the confidentiality of the interview, and ensure that the respondents were interviewed alone. In addition to the general training sessions, efforts were made to continuously remind the enumerators about the need to ensure the complete privacy of respondents.

Moreover, for the GBV section, enumerators had to seek consent and explain to the respondents the aim of the survey and context, before each interview began. Respondents were informed about the use of information collected, and that the outcome of the survey would be used to inform policies and formulate programmes that address the identified gaps and needs in Somali women's lives.

The women interviewed for this section were only eligible when their privacy was completely secured. This was to avoid any repercussions to the respondent and interviewer, given the sensitivity of the subject in the Somali cultural context. In addition, the enumerators (midwives and medical practitioners) who collected this information from respondents were all women to minimize any sensitivities involved and ensure respondents felt comfortable discussing this topic.

## Opinions about Domestic Violence

The survey asked all women about their opinions about domestic violence. Specifically, they were asked whether domestic violence means:
O Physical abuse

- No participation in household decision making
- No participation in decision-making regarding children
- Better treatment of males than females
- Failure to meet basic living costs
- Denial of education
- Forced marriage
- Rape
- Sexual harassment
- Forced labour

Table 9.1 presents the percentage of women aged 15-49 by their understanding of domestic violence by background characteristics. Findings show over 60 percent of women considered denial of education, forced marriage, rape, sexual harassment and forced labour to constitute domestic violence.

Fifty-six percent of the women believe that no participation in household decision-making or no participation in decision-making for children, 58 percent believe better treatment of males than females 55 percent believe failure to meet basic living costs and 63 percent believe denial of education constitute acts of domestic violence.

As shown in Figure 9.1, ever-married women have a better understanding of acts that constitute domestic violence compared to the never married women.

Educational attainment plays a role in the understanding of domestic violence. Women with higher education have a better understanding of acts that constitute domestic violence than women with no education, primary or secondary education.

Figure 9.1 Acts that mean domestic violence
Percentage of all women aged 15-49 who understand domestic violence to mean various specified acts, according to marital status


## Figure 9.1 Physical violence

Percent of women aged 15-49 who have ever experienced physical violence since age 12 and percentage who have experienced violence during the 12 months preceding the survey by age


## 15\% <br> of women aged 1549, have experienced physical violence since the age of 12

## Women's Experience of Physical Violence

Table 9.2 presents women (15-49 years of age) who had experienced physical violence since the age of 12 and those that reported they experienced physical violence in the 12 months preceding the survey. It shows that 15 percent of women aged 15-49, have experienced physical violence since the age of 12 , while 8 percent reported experienced physical violence often or sometimes in the 12 months preceding the survey. Nationally, 14 percent of women in the age cohort of 15-49 years have experienced physical violence since the age of 12 , while 12 percent experienced physical violence often or somethimes in the 12 months preceding the survey (SHDS, 2020).

Older women are more likely to experience physical violence; with 17 percent of women in the 45-49 age group reporting, they had experienced violence since the age of 12. Current (in the last 12 months preceding the survey) experience of physical violence is more prevalent among younger women 8 percent among women15-19 years compared to the lowest percentage of 5 percent among women 45-49 years (Figure 9.2).

## Perpetrators of Physical Violence

Table 9.3 shows the opinions of women aged 15-49 regarding who they believe are the most common perpetrators of violence against women. Sixty-five percent of women believe that husbands commit the most violent acts against women in the community, and that daughters and sons as well as employers or someone at work are the least likely perpetrators at 4 percent. Thirty-two percent

8\%
of ever-married women aged 15-49 who had been pregnant reported they had experienced physical violence during their pregnancies
of women believe that mother/stepmother commits the acts of violence against them.

## Violence during Pregnancy

Ever-married women who had been pregnant before were asked about their experiences of physical violence during pregnancy. Specifically, they were asked whether anyone had ever hit, slapped, kicked or done anything else that hurt them physically during pregnancy.

Table 9.4 presents the findings on ever-married women aged 15-49 who had experienced violence during pregnancy. It shows that 8 percent of ever-married women aged 15-49 who had been pregnant reported they had experienced physical violence during their pregnancies. Eleven percent of currently divorced women reported they had experienced violence during pregnancy. Nationally 6 percent of women reported violence during pregnancy (SHDS, 2020).

## Spousal Violence

Table 9.5 presents spousal violence experienced by ever-married women aged 15-49 who reported emotional, physical or sexual violence perpetrated by their current or most recent husband in the 12 months preceding the survey. Fifteen percent of ever-married women reported physical violence perpetrated against them by a spouse, 3 percent reported sexual violence while 2 percent reported emotional abuse by a spouse. The patterns of spousal violence vary with the number of children a woman has. Seven percent of women with five or more children reported spousal physical violence compared to 1 percent of women with no child.

## Injuries to Women due to Spousal Violence

Figure 9.3 presents findings among ever-married women aged 1549 who had sustained injuries due to domestic violence committed by their current or most recent spouses. Forty-seven percent of women had sustained at least one of the three types of injuries. Among ever-married women aged 15-49 who had experienced any form of violence, 44 percent reported they had cuts, bruises or aches; 27 percent had eye injuries, dislocations, sprains or burns; and 17 percent had deep wounds, broken bones or teeth, or any other serious wounds as a result of spousal violence.

Figure 9.3 Injuries to women due to spousal violence
Percent of ever-married women aged 15-49 who have experienced specific types of spousal violence by types of injuries resulting from the violence


## Help-seeking Behaviors

Help-seeking behaviors refer to women's responses to their experiences of violence committed by anyone. Interviewers inquired whether women who had been subjected to violence had sought any help.

Table 9.6 shows that only 18 percent of the ever-married women aged 15-49 who had experienced emotional, physical or sexual violence had sought help. The table further shows that women experiencing sexual violence were more likely to seek help (36 percent) compared to those who experienced physical violence at 18 percent.
Table 9.1 Acts that mean domestic violence

| Percentage of all women aged 15-49 who understand domestic violence to mean various specified acts, by background characteristics, BHDS 2020 |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Acts that mean domestic violence |  |  |  |  |  |  |  |  |  |  |  |  |
| Background characteristics | Physical abuse | No participation in decision making for household | No <br> participation in decision making for children | Better treatment of males than females | Failing to meet basic living costs | Denial of education | Forced Marriage | Rape | Sexual harassment | Forced labour | Other | Number of women |
| Age |  |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 64.1 | 59.6 | 59.6 | 62.1 | 57.8 | 67.1 | 69.7 | 68.5 | 65.3 | 67.1 | 8.0 | 651 |
| 20-24 | 63.6 | 59.4 | 58.7 | 60.8 | 57.1 | 67.8 | 68.5 | 68.8 | 66.0 | 65.5 | 15.9 | 429 |
| 25-29 | 57.4 | 55.2 | 54.0 | 54.5 | 54.5 | 61.0 | 64.4 | 62.7 | 58.6 | 59.8 | 17.9 | 413 |
| 30-34 | 50.5 | 48.5 | 50.8 | 53.5 | 53.1 | 58.4 | 60.4 | 62.0 | 59.7 | 58.1 | 18.2 | 303 |
| 35-39 | 56.2 | 54.9 | 54.1 | 57.5 | 54.1 | 60.9 | 62.7 | 65.7 | 62.2 | 60.5 | 16.7 | 233 |
| 40-44 | 48.6 | 46.4 | 47.1 | 49.3 | 47.1 | 53.6 | 57.1 | 54.3 | 52.1 | 53.6 | 15.7 | 140 |
| 45-49 | 64.0 | 57.0 | 59.3 | 59.3 | 57.0 | 64.0 | 66.3 | 67.4 | 65.1 | 60.5 | 23.3 | 86 |
| Marital status |  |  |  |  |  |  |  |  |  |  |  |  |
| Never Married | 19.2 | 17.6 | 17.6 | 18.2 | 16.9 | 20.1 | 20.8 | 20.5 | 19.5 | 20.0 | 1.5 | 641 |
| Married | 32.5 | 31.3 | 31.2 | 32.4 | 31.4 | 35.0 | 36.3 | 36.4 | 34.5 | 34.1 | 10.7 | 1,313 |
| Divorced | 5.9 | 5.4 | 5.5 | 5.7 | 5.5 | 6.5 | 6.5 | 6.5 | 6.3 | 6.3 | 1.6 | 234 |
| Widowed | 1.6 | 1.6 | 1.6 | 1.6 | 1.6 | 1.8 | 2.0 | 2.0 | 2.0 | 2.0 | 0.8 | 67 |
| Education |  |  |  |  |  |  |  |  |  |  |  |  |
| No Education | 55.1 | 52.5 | 52.7 | 54.7 | 53.3 | 60.1 | 62.4 | 62.8 | 59.7 | 59.5 | 16.4 | 1,473 |
| Primary | 61.7 | 59.1 | 57.4 | 59.1 | 58.1 | 66.0 | 68.6 | 66.7 | 63.4 | 63.4 | 12.9 | 303 |
| Secondary | 67.3 | 63.1 | 62.8 | 65.1 | 58.7 | 70.2 | 71.8 | 70.5 | 68.9 | 69.9 | 10.9 | 312 |
| Higher | 75.4 | 65.9 | 67.7 | 70.7 | 62.3 | 74.9 | 77.2 | 76.6 | 71.3 | 73.7 | 9.6 | 167 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 62.3 | 60.9 | 60.5 | 60.9 | 58.6 | 66.8 | 70.0 | 71.4 | 66.4 | 70.5 | 20.9 | 220 |
| Second | 56.8 | 51.3 | 52.5 | 54.0 | 52.0 | 60.0 | 60.7 | 60.9 | 56.8 | 58.0 | 13.4 | 417 |
| Middle | 59.2 | 54.9 | 56.2 | 58.7 | 54.9 | 63.4 | 65.6 | 65.9 | 63.0 | 62.3 | 16.0 | 637 |
| Fourth | 57.7 | 56.8 | 56.2 | 57.1 | 55.7 | 61.8 | 64.4 | 63.3 | 61.2 | 61.6 | 13.9 | 539 |
| Highest | 61.5 | 57.9 | 55.9 | 60.0 | 57.0 | 66.7 | 69.7 | 68.6 | 65.8 | 64.0 | 11.5 | 442 |
| Total | 59.2 | 55.9 | 55.9 | 57.9 | 55.3 | 63.4 | 65.6 | 65.4 | 62.3 | 62.5 | 14.6 | 2,255 |

## Table 9.2 Experience of physical violence

Percentage of women aged 15-49 who have ever experienced physical violence since age 12 and percentage who have experienced violence during the 12 months preceding the survey, by background characteristics BHDS 2020

| Background characteristic | Percentage who have experienced physical violence in the past 12 months |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage who have ever experienced physical violence since age 12 | Often | Sometimes | often or sometimes | Total number of Women |
| Age |  |  |  |  |  |
| 15-19 | 14.4 | 4.9 | 3.5 | 8.4 | 651 |
| 20-24 | 15.2 | 4.0 | 4.4 | 8.4 | 429 |
| 25-29 | 15.7 | 4.4 | 3.6 | 8.0 | 413 |
| 30-34 | 14.5 | 1.7 | 5.3 | 6.9 | 303 |
| 35-39 | 15.9 | 1.7 | 6.4 | 8.2 | 233 |
| 40-44 | 14.3 | 2.1 | 4.3 | 6.4 | 140 |
| 45-49 | 17.4 | 1.2 | 3.5 | 4.7 | 86 |
| Current marital status |  |  |  |  |  |
| Never-married | 3.5 | 1.2 | 0.8 | 2.1 | 641 |
| Married | 9.7 | 2.0 | 3.0 | 4.9 | 1,313 |
| Divorced | 1.5 | 0.3 | 0.4 | 0.6 | 234 |
| Widowed | 0.4 | 0.1 | 0.1 | 0.2 | 67 |
| Education |  |  |  |  |  |
| No Education | 16.3 | 3.5 | 4.8 | 8.3 | 1,473 |
| Primary | 16.5 | 4.3 | 4.3 | 8.6 | 303 |
| Secondary | 11.5 | 3.8 | 2.9 | 6.7 | 312 |
| Higher | 8.4 | 1.8 | 3.0 | 4.8 | 167 |
| Wealth quintile |  |  |  |  |  |
| Lowest | 26.8 | 6.4 | 8.6 | 15.0 | 220 |
| Second | 11.0 | 2.2 | 3.6 | 5.8 | 417 |
| Middle | 15.4 | 3.8 | 3.8 | 7.5 | 637 |
| Fourth | 13.0 | 3.0 | 3.0 | 5.9 | 539 |
| Highest | 15.2 | 3.8 | 5.2 | 9.0 | 442 |
| Total | 15.1 | 3.5 | 4.3 | 7.8 | 2,255 |

Table 9.3 Opinions regarding the most common perpetrator of violent acts against women

Percent distribution of all women according to the person who, in their opinion, is the most common perpetrator of violent acts against women, by background characteristics, BHDS 2020

| Background Characteristics | Individual who commits the most violent acts against women |  |  |  |  |  |  |  |  |  | Total number of Women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Husband | Mother/ Stepmother | Father/ Step-father | Sister/ Brother | Daughter/ Son | Other Relative | In-laws | Teacher | Employer/ Someone at work | Police/A Soldier |  |
| Age |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 69.0 | 34.6 | 25.2 | 13.2 | 5.8 | 11.8 | 7.8 | 23.8 | 4.0 | 19.4 | 651 |
| 20-24 | 68.5 | 31.0 | 26.3 | 9.1 | 3.7 | 9.6 | 9.1 | 18.4 | 4.0 | 12.6 | 429 |
| 25-29 | 60.3 | 32.9 | 25.2 | 9.9 | 3.4 | 8.7 | 6.3 | 18.6 | 3.9 | 14.5 | 413 |
| 30-34 | 61.1 | 32.0 | 20.8 | 8.6 | 4.6 | 6.6 | 7.3 | 17.5 | 3.3 | 16.2 | 303 |
| 35-39 | 63.5 | 28.8 | 25.3 | 8.2 | 4.3 | 6.4 | 9.9 | 17.6 | 5.2 | 15.5 | 233 |
| 40-44 | 61.4 | 25.0 | 11.4 | 10.7 | 4.3 | 7.9 | 7.9 | 17.9 | 0.7 | 5.7 | 140 |
| 45-49 | 65.1 | 25.6 | 17.4 | 7.0 | 2.3 | 8.1 | 3.5 | 22.1 | 5.8 | 12.8 | 86 |

Current marital
status

| Never <br> Married | 70.5 | 34.5 | 25.7 | 13.4 | 5.6 | 12.8 | 8.6 | 26.8 | 5.3 | 23.2 | 641 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Married | 62.5 | 30.5 | 22.9 | 9.1 | 4.0 | 7.9 | 7.6 | 17.3 | 3.4 | 12.4 | 1,313 |
| Divorced | 62.4 | 30.8 | 23.5 | 8.5 | 3.0 | 5.6 | 6.8 | 16.7 | 1.7 | 10.7 | 234 |
| Widowed | 73.1 | 31.3 | 19.4 | 10.4 | 6.0 | 11.9 | 6.0 | 16.4 | 6.0 | 10.4 | 67 |
| Education |  |  |  |  |  |  |  |  |  |  |  |
| No <br> Education | 63.8 | 31.6 | 23.1 | 9.9 | 4.3 | 7.5 | 7.0 | 17.3 | 3.2 | 13.0 | 1,473 |
| Primary | 67.0 | 32.3 | 26.4 | 11.6 | 5.6 | 9.9 | 9.6 | 21.5 | 5.0 | 13.2 | 303 |
| Secondary | 65.1 | 30.1 | 24.0 | 10.3 | 3.5 | 15.1 | 6.7 | 27.6 | 5.8 | 21.8 | 312 |
| Higher | 72.5 | 34.7 | 23.4 | 11.4 | 4.8 | 11.4 | 13.2 | 25.7 | 4.2 | 26.3 | 167 |

Wealth
quintile

| Lowest | 67.3 | 28.2 | 19.1 | 11.8 | 2.3 | 6.8 | 4.1 | 15.0 | 1.4 | 13.6 | 220 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Second | 63.8 | 28.3 | 23.7 | 8.2 | 5.3 | 10.8 | 8.9 | 19.7 | 3.6 | 16.1 | 417 |
| Middle | 63.3 | 26.8 | 21.4 | 10.5 | 3.8 | 7.7 | 6.1 | 20.1 | 5.2 | 15.9 | 637 |
| Fourth | 65.7 | 34.1 | 26.7 | 10.6 | 4.5 | 10.6 | 8.0 | 19.7 | 3.2 | 13.2 | 539 |
| Highest | 67.0 | 40.7 | 25.6 | 10.9 | 5.7 | 9.3 | 10.6 | 22.6 | 4.3 | 17.0 | 442 |
| Total | 65.1 | 31.7 | 23.7 | 10.3 | 4.4 | 9.2 | 7.8 | 19.9 | 3.9 | 15.3 | 2,255 |

## Table 9.4 Experience of violence During pregnancy

| Among of ever married women aged 15-49 who have ever been pregnant, percentage who have ever experienced physical violence during pregnancy, by background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background Characteristics | Percentage who have experienced violence during pregnancy | Total number of Women |
| Age |  |  |
| 15-19 | 7.4 | 122 |
| 20-24 | 9.0 | 255 |
| 25-29 | 7.9 | 304 |
| 30-34 | 4.8 | 229 |
| 35-39 | 9.7 | 186 |
| 40-44 | 8.1 | 99 |
| 45-49 | 7.2 | 69 |
| Marital Status |  |  |
| Married | 7.0 | 1,032 |
| Divorced | 10.9 | 175 |
| Widowed | 12.3 | 57 |
| Education |  |  |
| No Education | 8.4 | 973 |
| Primary | 7.8 | 141 |
| Secondary | 4.8 | 104 |
| Higher | 0.0 | 46 |
| Wealth quintile |  |  |
| Lowest | 11.9 | 151 |
| Second | 7.2 | 223 |
| Middle | 8.3 | 348 |
| Fourth | 4.8 | 290 |
| Highest | 8.3 | 252 |
| Total | 7.8 | 1,264 |

Table 9.5 Spousal violence by background characteristics

Percentage of ever-married women aged 15-49 who have ever experienced emotional, physical or sexual violence committed by their husband, by background characteristics, BHDS 2020

|  | Percentage of women whose husband did: |  |  |  |  |  |  | Number of ever married women |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Physical abuse | Sexual violence | Emotional | Physical and sexual violence | Physical and sexual and emotional violence | Physical or Sexual violence | Physical or sexual or emotional violence |  |
| Age |  |  |  |  |  |  |  |  |
| 15-19 | 16.2 | 1.3 | 1.3 | 0.0 | 0.0 | 17.5 | 17.5 | 154 |
| 20-24 | 17.1 | 2.2 | 2.8 | 1.9 | 0.6 | 17.4 | 17.4 | 316 |
| 25-29 | 15.8 | 2.4 | 1.3 | 2.1 | 0.3 | 16.1 | 16.6 | 379 |
| 30-39 | 13.2 | 3.4 | 1.9 | 1.9 | 0.2 | 14.8 | 15.7 | 522 |
| 40-49 | 12.6 | 2.3 | 4.2 | 0.9 | 0.5 | 14.0 | 14.9 | 215 |

Number of living
children

| 0 | 1.1 | 0.1 | 0.1 | 0.0 | 0.0 | 1.2 | 1.2 | 175 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| $1-2$ | 3.7 | 0.2 | 0.4 | 0.1 | 0.0 | 3.7 | 3.8 | 395 |
| $3-4$ | 4.4 | 1.1 | 0.8 | 0.8 | 0.1 | 4.7 | 4.9 | 408 |
| 5+ | 5.7 | 1.2 | 0.9 | 0.7 | 0.2 | 6.2 | 6.5 | 608 |
| Marital status |  |  |  |  |  |  |  | 17.0 |
| Currently Married | 15.1 | 2.9 | 2.7 | 1.7 | 0.4 | 16.3 | 1,296 |  |
| Formerly Married | 13.4 | 1.4 | 0.0 | 1.4 | 0.0 | 13.4 | 13.4 | 290 |

Employed in the 12
months preceding
the survey

| Employed | 15.0 | 7.2 | 3.3 | 4.4 | 1.1 | 17.8 | 18.9 | 180 |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\quad$ Not employed | 14.8 | 2.0 | 2.1 | 1.3 | 0.2 | 15.5 | 16.0 | 1,406 |
| Education |  |  |  |  |  |  |  |  |
| No Education | 14.9 | 2.8 | 2.6 | 1.8 | 0.3 | 15.9 | 16.6 | 1,223 |
| Primary | 17.2 | 3.0 | 1.8 | 1.8 | 0.6 | 18.3 | 18.3 | 169 |
| Secondary | 12.5 | 0.7 | 0.0 | 0.0 | 0.0 | 13.2 | 13.2 | 136 |
| Higher | 12.1 | 1.7 | 0.0 | 1.7 | 0.0 | 12.1 | 12.1 | 58 |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 25.6 | 8.5 | 7.4 | 5.7 | 1.1 | 28.4 | 30.7 | 176 |
| Second | 10.4 | 1.4 | 2.4 | 1.0 | 0.3 | 10.7 | 11.8 | 289 |
| Middle | 15.8 | 2.3 | 1.1 | 1.1 | 0.2 | 16.9 | 16.9 | 444 |
| Fourth | 12.2 | 2.1 | 2.1 | 1.6 | 0.3 | 12.8 | 13.0 | 376 |
| Highest | 14.6 | 1.3 | 0.7 | 0.7 | 0.0 | 15.3 | 15.6 | 301 |
| Total | 14.8 | 2.6 | 2.2 | 1.6 | 0.3 | 15.8 | 16.3 | 1,586 |

## Table 9.6 Help seeking to stop violence

Percentage of ever-married women aged 15-49 who have ever experienced emotional, physical or sexual violence committed by background characteristics, BHDS 2020

| Background characteristics | Sought help |  | Total | Number of ever married women |
| :---: | :---: | :---: | :---: | :---: |
|  | Yes | No |  |  |
| Percentage of women whose husband did: |  |  |  |  |
| Physical abuse | 17.8 | 82.2 | 100.0 | 163 |
| Sexual violence | 35.9 | 64.1 | 100.0 | 39 |
| Physical and sexual violence | 35.9 | 64.1 | 100.0 | 39 |
| Age |  |  |  |  |
| 15-19 | * | * | * | 18 |
| 20-24 | 21.1 | 78.9 | 100.0 | 38 |
| 25-29 | 17.6 | 82.4 | 100.0 | 34 |
| 30-34 | 24.1 | 75.9 | 100.0 | 29 |
| 35-39 | 24.0 | 76.0 | 100.0 | 25 |
| 40-44 | * | * | * | 15 |
| 45-49 | * | * | * | 8 |
| Number of living children |  |  |  |  |
| 0 | * | * | * | 8 |
| 1-2 | 14.3 | 85.7 | 100.0 | 42 |
| 3-4 | 27.3 | 72.7 | 100.0 | 44 |
| 5+ | 15.1 | 84.9 | 100.0 | 73 |
| Currently/formerly/never in union |  |  |  |  |
| Currently married | 12.8 | 87.2 | 100.0 | 141 |
| Formerly married | 46.2 | 53.8 | 100.0 | 26 |

Employed in the $\mathbf{1 2}$ months preceding the survey

| Employed | * | * | * | 20 |
| :---: | :---: | :---: | :---: | :---: |
| Not employed | 14.4 | 85.6 | 100.0 | 139 |
| Education |  |  |  |  |
| No Education | 17.4 | 82.6 | 100.0 | 138 |
| Primary | * | * | * | 17 |
| Secondary | * | * | * | 10 |
| Higher | * | * | * | 2 |
| Wealth quintile |  |  |  |  |
| Lowest | 26.8 | 73.2 | 100.0 | 41 |
| Second | * | * | * | 24 |
| Middle | 11.4 | 88.6 | 100.0 | 44 |
| Fourth | 21.4 | 78.6 | 100.0 | 28 |
| Highest | 13.3 | 86.7 | 100.0 | 30 |
| Total | 18.0 | 82.0 | 100.0 | 167 |

Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.


## Key Findings

99.5\%
of the Benadir women aged 15-49 have undergone Female Circumcision.

TYPES PRACTICED

## 58\%

of women aged 15-49, have undergone Pharaonic type of Female Circumcision, the most severe form, which involves the removal of the entire clitoris and flesh.

RELIGIOUS REQUIREMENT

## 67\%

of women aged 15-49 believe that Female Circumcision is a religious obligation and a rite of passage.

AGE AT FEMALE CIRCUMCISION

## 82\%

of women aged 1549 underwent Female Circumcision practice at aged of 5-9 while 16 percent underwent the same practice at age 10-14 years.

ATTITUDES

## 78\%

of the women aged 15-49 wants the Female Circumcision practice to continue.

Chapter 10

## Female Circumcision


#### Abstract

Female circumcision, also known as Female Genital Mutilation/ Cutting (FGM/C) has been practised in Somalia for decades. The practice is considered harmful, because it poses a potential risk to the health and wellbeing of women and girls who are subjected to it. FGM/C is regarded as a violation of the Convention on the Rights of the Child (United Nations General Assembly, 1990).


In the survey, both ever-married women and never-married women were asked a series of questions about female circumcision, including whether they had been subjected to it. Women who had undergone the practice were asked at which age it was done, the type of circumcision they underwent, their religious perception about the practice, and opinions on whether the practice should continue or not.

Mothers with daughters were asked if their daughters underwent female circumcision, the age at circumcision and the type of FGM/C performed.

The survey defined the different of types of female circumcision as follows:
a. Excision of the clitoral hood (prepuce), with or without excision of part or all of the clitoris (Sunni)
b. Excision of the clitoris with partial or total excision of the labia minora (Intermediate)
c. Excision of part or all of the external genitalia and stitching/ narrowing of the vaginal opening; or all other procedures that involve pricking, piercing, stretching; or incising of the clitoris and/or labia; introduction of corrosive substances into the vagina to narrow it (Pharaonic)

## Opinions on Female Circumcision

Table 10.1 presents the percentage distribution of women aged 15-49 by their religious beliefs regarding female circumcision, according to their circumcision status, age, education level, and wealth quintile. Overall, 67 percent of women believe that FGM/C is a religious requirement compared to 72 percent nationally (SHDS, 2020). There is little variation in the women's beliefs by age as 72 percent of women within the age group of 15-19 believe it is a religious requirement, compared to 69 percent of those in the age group 45-49.

The belief that female circumcision is a religious requirement

Figure 10.1 Opinions on Female Circumcision by education
Percent of women aged 15-49 by whether Female Circumcision is required by religion according to education


Figure 10.2 Opinions on Female Circumcision by wealth status
Percent of women aged 15-49 by whether FGM/C is required by religion based on wealth status
$\square$ Required by religion $\square$ Not required by religion Don't know

reduces with increase in education. Seventy percent of women with no education believe that female circumcision is a religious requirement, compared with 65 percent with primary education, 56 percent with secondary education and 45 percent with higher levels of education who hold the same belief (Figure 10.1).

Wealth status plays a role in shaping women's beliefs about female circumcision. The wealther the woman is the less likely she would hold the belief that female circumcision is a religious requirement. Seventy three percent of women from the lowest wealth quintile believe female circumcision is a religious requirement, compared to 61 percent from highest wealth quintile who hold the same belief (Figure 10.2).

## Prevalence of Female Circumcision

Table 10.2 presents the percentage of women aged 15-49 who have undergone female circumcision by background characteristics. Female circumcision in Benadir is almost universal at 99.5 compared to the national prevalence of 99.2 percent. Pharaonic is the most common type, which has been performed on 58 percent of the women. The findings show that 12 percent of women have undergone the Intermediate type, while 26 percent have undergone the Sunni type. Three percent did not know the type of female circumcision they had undergone.

Figure 10.3 Types of Female Circumcision by level of education
Percent distribution of women aged 15-49 by types of Female Circumcision
$\square$ Sunni Intermediate $\square$ Pharaonic ■ Don't know


Figure 10.4 Type of Female Circumcision by wealth status
Percent distribution of women aged 15-49 by type of Female Circumcision
$\square$ Sunni Intermediate $\square$ Pharaonic $\quad$ Don't know


> The preference for Pharaonic type of female circumcision is higher among the poor women compared to rich women, while the preference of Sunni type of female circumcision increases with increase in the wealth status

## 82\%

of women aged 1549 were circumcised when they were aged 5-9 years

While there's not much variation in the prevalence of circumcision by education level among women aged 15-49, there's a logical relationship with the type of circumcision undergone with more educated women having preference for Sunni and intermediate types of female circumcision, while the less educated women prefer Pharaonic type of circumcision. Figure 10.3 shows that 67 percent of women with no education underwent the Pharaonic type of female circumcision compared to 26 percent of women with higher education. Only 19 percent of women with no education have undergone Sunni type of female circumcision compared to nearly half ( 49 percent) of the women with the highest level of education who underwent the Sunni type of female circumcision. Further investigation is needed to understand this relationship because at the time the respondents underwent female circumcision, their guardians e.g. parents or grandparents are the ones who made the decision on the type of female circumcision to be performed.

Figure 10.4 shows a relationship between the wealth status of the household and the type of FGM/C undergone by women aged 1549. The preference for Pharaonic type of female circumcision is higher among the poor women compared to rich women, while the preference of Sunni type of female circumcision increases with increase in the wealth status. A higher percentage of women (63 percent in the lowest quintile and 60 percent in the second quintile) from poorer households underwent the Pharaonic type of FGM/C compared to slightly over half of women from the wealthier households at 52 percent.

## Age at Female Circumcision

Table 10.3 shows the percent distribution of women aged 15-49 by the age when they underwent female circumcision, according to selected background characteristics. Women were asked how old they were when they underwent female circumcision. The majority of women ( 82 percent) aged 15-49 were circumcised when they were aged 5-9 years. Sixteen percent of women underwent female circumcision at age 10-14. Less than 1 percent were circumcised when they were under 5 years and 1 percent underwent female circumcision when they were over 15 years of age. The current levels of education of women aged 15-49 and wealth status of the households they come from does not have much influence on the age at which these women underwent female circumcision.

The current levels of education of women aged 15-49 and wealth status of their households does not have much influence on the age at which these women were circumcised.

## Female Circumcision on Daughters

Ever-married women aged 15-49 who had daughters were asked if any of their daughters had undergone female circumcision and, if so,

36\%
of daughters aged 0-14 whose mothers had no education had undergone circumcision
how old the girl was when she was circumcised, and who performed it among other questions. It should be noted that mothers may not have been able to recall the exact age at which their daughters underwent female circumcision.

Table 10.4 shows the percentage of girls aged 0-14 years who underwent female circumcision by age and their mothers' background characteristics. The results indicate that about 3 percent of girls 0-4 years old, 15 percent of those at the ages of 5-9 and 16 percent of daughters within the age of 10-14 years had undergone the practice. Nationally, 3 percent of girls aged 0-4, 30 percent aged 5-9 and 76 percent aged 10-14 had undergone the practice (SHDS, 2020).

Thirty-six percent of daughters aged 0-14 whose mothers had no education had undergone circumcision, compared to 28 percent of daughters of mothers with higher education. Wealth quintile has no major impact on the prevalence of female circumcision.

## Attitudes towards Female Circumcision

Both ever-married and never-married women aged 15-49 were asked whether the FGM/C practice should be continued or stopped. Table 10.5 shows the percentage distribution of women aged 15-49 by their opinion on the practice of FGM/C. Overall, 78 percent of women believe that female circumcision should continue, while 16 percent believe that the practice should be stopped.

Figure 10.5 Opinion on continuation of Female Circumcision by levels of education
Percent of women aged 15-49 by opinion on continuation of Female Circumcision

■ Continued Stopped Depends Don't Know


82\%
of women with no education believe that female circumcision should be continued

The opinion on whether the practice of female circumcision should be continued or not is not influenced by the wealth status of the household.

Figure 10.5 presents the opinions on weather female circumcision should be continued or discontinued. Opinions in support of the discontinuation of female circumcision increases with increase in the level of education. Eighty-two percent of women with no education believe that female circumcision should be continued compared to 53 percent of women with higher education. On the other hand, less women with no education (12 percent) hold the opinion that female circumcision should be discontinued compared to 45 percent of women with higher education.


Table 10.1 Opinions on whether Female Circumcision is required by religion

| Percent distribution of women aged 15-49 by whether Female Circumcision is required by religion, according to background characteristics, BHDS 2020 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Required by religion | Not required by religion | Don't know | Total number number of women |
| FGM/C status |  |  |  |  |
| Circumcision | 67.0 | 26.9 | 6.1 | 1,482 |
| No circumcision | * | * | * | 4 |
| Age |  |  |  |  |
| 15-19 | 72.3 | 17.6 | 10.1 | 148 |
| 20-24 | 60.5 | 33.4 | 6.1 | 296 |
| 25-29 | 70.7 | 23.9 | 5.4 | 351 |
| 30-34 | 67.3 | 28.1 | 4.6 | 281 |
| 35-39 | 67.5 | 26.7 | 5.8 | 206 |
| 40-44 | 62.9 | 29.0 | 8.1 | 124 |
| 45-49 | 68.8 | 26.3 | 5.0 | 80 |
| Education |  |  |  |  |
| No education | 69.5 | 23.8 | 6.7 | 1,136 |
| Primary | 65.4 | 29.0 | 5.6 | 162 |
| Secondary | 56.2 | 39.2 | 4.6 | 130 |
| Higher | 44.8 | 55.2 | 0.0 | 58 |
| Wealth quintile |  |  |  |  |
| Lowest | 73.2 | 19.6 | 7.1 | 168 |
| Second | 68.8 | 24.2 | 7.1 | 269 |
| Middle | 67.3 | 28.2 | 4.5 | 422 |
| Fourth | 66.9 | 28.1 | 5.1 | 356 |
| Highest | 60.9 | 30.6 | 8.5 | 271 |
| Total | 67.0 | 26.9 | 6.1 | 1,486 |
| Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. |  |  |  |  |

## Table 10.2 Prevalence of Female Circumcision

Percentage of women aged 15-49 who have undergone Female Circumcision, and percent distribution of women have undergone Female Circumcision by type according to background characteristics, BHDS 2020

| Background characteristics | Type of Female Circumcision |  |  |  |  |  | Total | Number of women who have undergone Female Circumcision |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage of women who have undergone Female Circumcision | Number of women | Sunni | Intermediate | Pharaonic | Don't know |  |  |
| Age group |  |  |  |  |  |  |  |  |
| 15-19 | 98.9 | 623 | 46.4 | 12.8 | 37.2 | 3.6 | 100.0 | 616 |
| 20-24 | 99.8 | 405 | 29.0 | 17.1 | 50.2 | 3.7 | 100.0 | 404 |
| 25-29 | 99.5 | 380 | 19.6 | 11.6 | 66.1 | 2.6 | 100.0 | 378 |
| 30-34 | 100.0 | 283 | 12.7 | 9.5 | 76.3 | 1.4 | 100.0 | 283 |
| 35-39 | 100.0 | 207 | 8.7 | 11.6 | 76.8 | 2.9 | 100.0 | 207 |
| 40-44 | 100.0 | 125 | 8.0 | 9.6 | 80.0 | 2.4 | 100.0 | 125 |
| 45-49 | 100.0 | 80 | 15.0 | 3.8 | 76.3 | 5.0 | 100.0 | 80 |
| Education |  |  |  |  |  |  |  |  |
| No Education | 99.6 | 1,349 | 18.8 | 11.0 | 67.3 | 2.9 | 100.0 | 1,344 |
| Primary | 99.0 | 288 | 32.6 | 10.5 | 54.0 | 2.8 | 100.0 | 285 |
| Secondary | 99.7 | 302 | 42.9 | 14.0 | 38.9 | 4.3 | 100.0 | 301 |
| Higher | 99.4 | 164 | 48.5 | 23.3 | 25.8 | 2.5 | 100.0 | 163 |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 100.0 | 207 | 21.3 | 12.1 | 62.8 | 3.9 | 100.0 | 207 |
| Second | 99.5 | 385 | 27.2 | 11.0 | 59.8 | 2.1 | 100.0 | 383 |
| Middle | 99.8 | 601 | 24.8 | 11.8 | 60.5 | 2.8 | 100.0 | 600 |
| Fourth | 99.4 | 506 | 25.8 | 13.3 | 57.3 | 3.6 | 100.0 | 503 |
| Highest | 99.0 | 404 | 31.5 | 13.3 | 52.0 | 3.3 | 100.0 | 400 |
| Total | 99.5 | 2,103 | 26.4 | 12.3 | 58.2 | 3.1 | 100.0 | 2,093 |

Table 10.3 Age at Female Circumcision

Percent distribution of women aged 15-49 who underwent Female Circumcision by age when it was done, according to background characteristics, BHDS 2020

| Background characteristics | Age at Female Circumcision |  |  |  |  | Total | Number of women who have undergone Female Circumcision |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | <5 | 5 to 9 | 10 to 14 | 15+ | Don't know |  |  |
| Age |  |  |  |  |  |  |  |
| 15-19 | 1.1 | 81.3 | 17.4 | 0.0 | 0.2 | 100.0 | 616 |
| 20-24 | 0.0 | 84.9 | 13.9 | 1.0 | 0.2 | 100.0 | 404 |
| 25-29 | 0.3 | 84.7 | 14.3 | 0.8 | 0.0 | 100.0 | 378 |
| 30-39 | 0.0 | 80.8 | 16.7 | 2.0 | 0.4 | 100.0 | 490 |
| 40-49 | 0.0 | 79.5 | 18.0 | 2.4 | 0.0 | 100.0 | 205 |
| Education |  |  |  |  |  |  |  |
| No education | 0.1 | 82.1 | 16.4 | 1.1 | 0.2 | 100.0 | 1,344 |
| Primary | 0.0 | 85.3 | 13.7 | 0.7 | 0.4 | 100.0 | 285 |
| Secondary | 1.3 | 85.0 | 13.0 | 0.7 | 0.0 | 100.0 | 301 |
| Higher | 1.2 | 73.6 | 23.3 | 1.8 | 0.0 | 100.0 | 163 |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 0.0 | 83.1 | 15.9 | 0.5 | 0.5 | 100.0 | 207 |
| Second | 0.3 | 82.8 | 15.9 | 1.0 | 0.0 | 100.0 | 383 |
| Middle | 0.5 | 83.7 | 14.8 | 0.7 | 0.3 | 100.0 | 600 |
| Fourth | 0.2 | 83.7 | 14.7 | 1.2 | 0.2 | 100.0 | 503 |
| Highest | 0.8 | 77.8 | 19.8 | 1.8 | 0.0 | 100.0 | 400 |
| Total | 0.4 | 82.3 | 16.1 | 1.1 | 0.2 | 100.0 | 2,093 |

Table 10.4 Female Circumcision on girl's aged 0-14 by mother's background characteristics

Percentage of girls aged 0-14 who underwent Female Circumcision, according to age and mother's background characteristics, BHDS 2020

| Background characteristics | Current age of girls |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 0-4 | 5-9 | 10-14 | Total 0-14 |
| Mother's FGM/C status |  |  |  |  |
| Circumcision | 6.0 | 38.4 | 81.8 | 33.3 |
| No Circumcision | * | * | * | * |
| Education |  |  |  |  |
| No Education | 6.2 | 38.5 | 86.2 | 35.9 |
| Primary | 4.6 | 28.6 | 53.6 | 20.8 |
| Secondary | 7.5 | 41.2 | 60.5 | 28.0 |
| Higher | 4.0 | 68.4 | 37.4 | 27.7 |
| Wealth quintile |  |  |  |  |
| Lowest | 11.4 | 39.8 | 78.8 | 35.5 |
| Second | 6.6 | 35.5 | 83.0 | 31.7 |
| Middle | 4.1 | 41.8 | 81.8 | 35.5 |
| Fourth | 5.9 | 37.7 | 85.0 | 32.9 |
| Highest | 5.3 | 33.8 | 77.7 | 29.8 |
| Total | 6.0 | 38.3 | 81.8 | 33.3 |

Table 10.5 Opinions on Continuation of Female Circumcision

| Percent distribution of women aged 15-49 by whether the practice of Female Circumcision should continue by background characteristics, BHDS 2020 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Opinion to continue with Female Circumcision Practice or not |  |  |  | Total | Number of women |
|  | Continued | Stopped | Depends | Don't Know |  |  |
| FGM/C status |  |  |  |  |  |  |
| Circumcision | 78.5 | 16.2 | 4.5 | 0.9 | 100.0 | 1,482 |
| No Circumcision | * | * | * | * | * | 4 |
| Age |  |  |  |  |  |  |
| 15-19 | 86.5 | 10.8 | 2.0 | 0.7 | 100.0 | 148 |
| 20-24 | 73.6 | 22.3 | 2.4 | 1.7 | 100.0 | 296 |
| 25-29 | 78.6 | 16.0 | 5.1 | 0.3 | 100.0 | 351 |
| 30-34 | 78.6 | 14.6 | 6.0 | 0.7 | 100.0 | 281 |
| 35-39 | 82.5 | 13.1 | 3.4 | 1.0 | 100.0 | 206 |
| 40-44 | 73.4 | 16.9 | 8.1 | 1.6 | 100.0 | 124 |
| 45-49 | 76.3 | 18.8 | 5.0 | 0.0 | 100.0 | 80 |
| Education |  |  |  |  |  |  |
| No Education | 82.1 | 12.1 | 4.8 | 1.0 | 100.0 | 1,136 |
| Primary | 72.8 | 21.0 | 5.6 | 0.6 | 100.0 | 162 |
| Secondary | 63.8 | 33.8 | 1.5 | 0.8 | 100.0 | 130 |
| Higher | 53.4 | 44.8 | 1.7 | 0.0 | 100.0 | 58 |
| Wealth quintile |  |  |  |  |  |  |
| Lowest | 84.5 | 13.7 | 0.6 | 1.2 | 100.0 | 168 |
| Second | 77.0 | 16.0 | 6.3 | 0.7 | 100.0 | 269 |
| Middle | 77.3 | 15.9 | 5.9 | 0.9 | 100.0 | 422 |
| Fourth | 78.9 | 16.3 | 3.9 | 0.8 | 100.0 | 356 |
| Highest | 77.1 | 18.8 | 3.3 | 0.7 | 100.0 | 271 |
| Total 15-49 | 78.4 | 16.3 | 4.4 | 0.9 | 100.0 | 1,486 |
| Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. |  |  |  |  |  |  |

## CHAPTER 11

## Women's

 Empowerment

## Key Findings

FINANCIAL DECISIONS


## 91\%

of currently married women aged 15-49 decide on how their cash earnings will be spent either individually or jointly with their husbands and 58 percent of them jointly or individually make decisions on how the husband's cash earnings will be spent.

ACCESS TO FINANCIAL SERVICES
5\%
of ever married women aged 15-49 have a bank account. Ninety percent of women own a mobile phone and among those with a mobile phone, 87 percent use their phone for financial transactions.

PARTICIPATION IN DECISION-MAKING


45\%
of currently married women aged 15-49 make decisions on their own health care by themselves or jointly with their husband.

ATTITUDES TOWARDS WIFE BEATING


## 18\%

of ever married women aged 15-49 believe that a husband is justified in beating his wife for at least one of the six specified reasons.

Chapter 11

# Women's Empowerment 


#### Abstract

This chapter focuses on Benadir women's empowerment in terms of employment, earnings, control over earnings and ownership of assets. It also explores women's ownership and use of bank accounts and mobile phones. The survey asked specific questions to define two different indicators of women's empowerment: their participation in household decision-making and attitudes towards wife beating.


Over the years, several attempts have been made to improve life for Somali women. The Provisional Constitution of Somalia has a number of positive implications for the status of women in particular involvement of women in leadership and decision making. However, most Somali women are still either excluded from decision-making and asset ownership, or operate through a patriarchal filter in these areas - mainly due to cultural restrictions on their movement, and asset ownership.

## Married women's employment

Employment can be a source of empowerment for both women and men. It is particularly so for women if it puts them in control of the household income. In the survey, respondents were asked whether they were employed at the time of the survey and, if not, whether they were employed in the 12 months preceding the survey.

Table 11.1 shows that 12 percent of currently married women age 1549 were employed at the time of the survey or within the 12 months preceding the survey. Employment among currently married women increases with age and peaks among those age 45-49, at 24 percent.

Figure 11.1 shows the percentage distribution of currently married women who were employed in the 12 months preceding the survey by age and type of earnings. Generally, employment is assumed to go hand in hand with payment for work. However, not all women in Benadir region receive earnings for the work they do, and among those who do receive earnings, not all receive cash. Eighty-three percent of currently married women who reported being employed at any time in the 12 months preceding the survey received earnings in cash, 7 percent were paid in cash and in kind, 3 percent received their earnings in kind only and the remaining 7 percent were not paid at all.

Figure 11.1 Earnings of currently married women

Percent distribution of currently married respondents employed in past 12 months, by type of earnings

$\begin{array}{lll}7.4 & 3.1 & 6.8\end{array}$
Cash and In-kind only Not paid in-kind

Figure 11.2 Control over women's earnings

Percentage distribution of currently married aged 15-49 with income for the last 12 months preceding survey and who makes decisions over their cash earnings


Figure 11.3 Control over husband's cash earnings

Percent distributions of currently married women aged 15-49 whose husbands receive cash earnings by person who decides how husband's cash earnings are used


## 0.7

Other

## Control over Women's Earnings

Access to/and control of financial resources are critical variables for women's empowerment and poverty reduction. Employment and cash earnings are more likely to contribute to the economic and social empowerment of women, particularly if they perceive their earnings as significant relative to those of their husband and important to the welfare of the household. It can contribute to improving power and autonomy in decision making that impact on women as individuals and their families.

To assess women's autonomy, currently married women aged 1549 who earned cash for their work in the 12 months preceding the survey were asked who the main decision maker was with regard to the use of their earnings. This information allowed an assessment of women's control over their own earnings. Figure 11.2 shows the degree of control women have over the use of their earnings, 47 percent of currently married women decide jointly with their husbands on how their earnings are used, while 45 percent of currently married women reporting they decide on their own. Nine percent reported their husband is the main decision maker and controls their cash earnings.

## Control over Husbands’ Earnings

Figure 11.3 shows that 41 percent of the currently married women aged 15-49 reported that the husband is the main decision maker on how the husband's cash earnings are used, while 36 percent reported that decisions about the use of the husbands' cash earnings
are made jointly. Twenty-one percent reported that the wife is the main decision maker on how the husband's cash earnings are used.

## Ownership of Assets

Ownership of and control over assets, such as land and housing, are important factors that contribute to improving women's status. Ownership of land and property plays an important role in strengthening women's agency. Land is a key productive and economic asset. It provides opportunity, multiple benefits to individuals and households, including a secure place to live, livelihood, protection during emergencies, and collateral when needed. In the BHDS, ever-married women were asked whether they own a house and land alone or jointly with their husbands.

Table 11.2 shows the percent distribution of ever-married women aged 15-49 by ownership of a house and land. Women are more likely to own a house than land. Overall, 21 percent of women interviewed own a house, while 9 percent own land either alone or jointly. Nationally 15 percent of women own a house jointly with their husbands while 8 percent own land jointly with their husbands (SHDS, 2020). Only 7 percent and 4 percent of ever married women own house or a land alone. The ownership of property increases with age among women. For example, 31 percent of women of aged 45-49 years own a house, compared to 14 percent of women aged 15-19. A similar pattern is also observed in land ownership. Twelve percent of women aged 40-44 own land, compared to 7 percent of women aged 15-19 except women aged 45-49 years where the ownership of land decreases to 8 percent.

## Figure 11.4 Ownership of bank account and mobile phones

Percentage of women aged 15-49 who have and use a bank account and own a mobile phone by education level

■ Have and use a bank account Own a mobile phone


## 90\%

of women residing in Benadir own a mobile phone, and among those with a mobile phone

## Women from wealthier

 households are more likely to have and use a bank account, own a mobile phone and use a mobile phone for financial transactions than women from poorer households
## Ownership and Use of Bank Accounts and Mobile Phones

Ownership of a bank account and a mobile phone are reflections of autonomy, social functioning and financial independence. In the survey, women were asked if they had an account in a bank or any other financial institution that they themselves used, and if they owned a mobile phone. Those who owned a mobile phone were further asked if they used the phone for financial transactions. Table 11.3 shows that only 5 percent of women in Benadir have a bank account that they use, compared to 4 percent nationally. Ninety percent of women residing in Benadir own a mobile phone, and among those with a mobile phone, 87 percent use their phones for financial transactions. The proportion is much higher than the national average where ownership of mobile phone by Somali women stands at 75 percent out of which 64 percent use their phones for financial transactions (SHDS, 2020). This could be attributed to the devaluation of the Somali shilling and lack of small denomination, as well as convenience, which makes mobile money the preferred mode of payment for women throughout the country.

The percentage of women who have a bank account and a mobile phone increases as education levels increase. For example, among women with no education, 2 percent own and use a bank account compared to 20 percent among women with higher education. Similarly, among women with no education, 89 percent have mobile phones, while 99 percent of those with higher education own a mobile phone (Figure 11.4).

Women from wealthier households are more likely to have and use a bank account, own a mobile phone and use a mobile phone for financial transactions than women from poorer households. Of women from the wealthiest households, 6 percent own and use a bank account, compared to 1 percent in the poorest households. Eighty-four percent of women in the poorest households use a mobile phone for financial transactions, compared to 88 percent of women from the wealthiest households, who use mobile phones for financial transactions (Table 11.3).

## Women's Participation in DecisionMaking

Participation in household decision-making is an essential aspect of women's empowerment and reflects women's status and the level of agency women have within their own household and environment. As part of the survey, currently married women were asked about their participation in decisions about their own health care, major household purchases and visits they make to their family or relatives. Table 11.4 shows that 55 percent of Benadir women have decisions on their own health care made by their husbands, 30


> 23\%
> of women with no education agree that wife beating is justified in at least one of the six specified circumstances
percent make decisions regarding their own health care jointly with their husbands, while 15 percent make these decisions on their own. A similar pattern is observed regarding major household purchases and visits to family or relatives, with 54 percent of women indicating that their husbands make decisions for major household purchases. Seventy percent of women state their husbands make decisions regarding visits to family or relatives. Generally, men dominate women in household decision-making. A comparison between the national and Benadir women's autonomy in decision making shows that women in Benadir are less involved in decision making and are less likely to make decisions on their own (Figure 11.5).

## Attitudes towards Wife Beating

As part of the survey, ever-married women were asked if they agree that a husband is justified in hitting or beating his wife under each of the following six circumstances: she neglects household duties, she argues with him, she goes out without telling him, she wastes resources, she neglects the children, and she refuses to have sex with him. If respondents answered "yes" in at least one circumstance, they were considered to have attitudes justifying wife beating. Table 11.5 shows among the women interviewed, 18 percent believe that a husband is justified in beating his wife for at least one of the six specified reasons, compared to 36 percent nationally (SHDS, 2020). Overall, there are minimal variations among the above six specified reasons for justifying women's beatings. The percentage of women who justify wife beating under one of the specified circumstances decreases with increasing education levels. Twenty-three percent of women with no education agree that wife beating is justified in at

Figure 11.6 Attitude toward wife beating
Percentage of all women aged 15-49 who agree that a husband is justified in hitting or beating his wife for specific reasons, by background characteristics

least one of the six specified circumstances, compared to 8 percent of women with higher education levels (Figure 11.6).

The proportion of women justifying wife beating under any one of the specified circumstances decreases with wealth quintiles. Thirtyfive percent of women in the poorest households agree that wife beating is justified in at least one of the six specified circumstances, compared to 19 percent of women in the wealthiest households (Figure 11.6).

## Summary Indices of Women's Empowerment

Responses from women on their participation in making household decisions and their attitudes towards wife beating can be summarized into two separate indices. The first index is the number of decisions in which women participate alone or jointly with their husbands (Table 11.4 for the list of decisions). This index ranges in value from 0 to 3 and is positively related to women's empowerment. It reflects the degree of decision-making and control that women are able to exercise in areas that directly affect their lives and environments. The second index is the number of reasons why the respondent believe that a husband is justified in beating his wife (Table 11.5 for the list of reasons). This index ranges in value from 0 to 5. A lower score on this indicator is interpreted as reflecting a greater sense of autonomy, self-esteem, and a higher status.

Table 11.6 shows that there is a positive relationship between women's disapproval of wife beating and their participation in decision making. The percentage of women who disagree with all the reasons that justify wife beating rises with the number of household

There is a positive relationship between women's disapproval of wife beating and their participation in decision making
decisions in which women participate, from 69 percent among women who do not participate in any of the household decisions to 73 percent of women who participate in all three decisions.

The percentage of women participating in all the household decisions decreases with the number of reasons women accept as justifying wife beating, from 23 percent among women who do not agree that wife beating is justified for any reason to 16 percent among women who accept that wife beating is justified in all five specified reasons.

Table 11.1 Employment and cash earnings of currently married women

Percentage of currently married women aged 15-49 who were employed at any time in the past 12 months and the percent
distribution of currently married women employed in the past 12 months by type of earnings, according to age, BHDS 2020

| Age | Percentage employed in past 12 months | Number of respondents | Percent distribution of currently married respondents employed in past 12 months, by type of earnings |  |  |  | Total | Number of respondents |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Cash only | Cash and in-kind | In-kind only | Not paid |  |  |
| 15-19 | 3.4 | 119 | * | * | * | * | 100.0 | 4 |
| 20-24 | 4.3 | 253 | * | * | * | * | 100.0 | 11 |
| 25-29 | 8.2 | 318 | 92.3 | 7.7 | 0.0 | 0.0 | 100.0 | 26 |
| 30-34 | 16.7 | 257 | 86.0 | 9.3 | 4.7 | 0.0 | 100.0 | 43 |
| 35-39 | 20.1 | 194 | 76.9 | 7.7 | 2.6 | 12.8 | 100.0 | 39 |
| 40-44 | 21.8 | 110 | * | * | * | * | 100.0 | 24 |
| 45-49 | 24.2 | 62 | * | * | * | * | 100.0 | 15 |
| Total 15-49 | 12.3 | 1,313 | 82.7 | 7.4 | 3.1 | 6.8 | 100.0 | 162 |

Note: Figures in parentheses are based on 25-49 unweighted cases. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 11.2 Ownership of assets

| Percent distribut <br> BHDS 2020 | of ever | married | men age | d 15-49 by | nership | housing | and land, | ccording | o backgro | char | eristics, |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | s a hous | alone or j | ointly |  |  | wns land | lone or jo | itly |  |  |
| Background characteristics | Alone | Jointly | Both alone and jointly | Does not own | Total | Alone | Jointly | Both alone and jointly | Does not own | Total | number of Women |
| Age |  |  |  |  |  |  |  |  |  |  |  |
| 15-19 | 6.5 | 4.5 | 2.6 | 86.5 | 100 | 2.6 | 2.6 | 1.3 | 93.5 | 100 | 155 |
| 20-24 | 5.7 | 5.0 | 3.8 | 85.5 | 100 | 3.2 | 2.2 | 1.3 | 93.4 | 100 | 317 |
| 25-29 | 5.2 | 6.5 | 9.1 | 79.2 | 100 | 3.4 | 1.8 | 3.9 | 90.9 | 100 | 384 |
| 30-34 | 9.6 | 5.0 | 8.6 | 76.7 | 100 | 3.3 | 3.7 | 2.7 | 90.4 | 100 | 301 |
| 35-39 | 6.9 | 8.2 | 8.2 | 76.7 | 100 | 3.9 | 3.0 | 1.3 | 91.8 | 100 | 232 |
| 40-44 | 12.2 | 5.8 | 7.2 | 74.8 | 100 | 5.8 | 2.9 | 2.9 | 88.5 | 100 | 139 |
| 45-49 | 11.6 | 7.0 | 12.8 | 68.6 | 100 | 3.5 | 2.3 | 2.3 | 91.9 | 100 | 86 |
| Education |  |  |  |  |  |  |  |  |  |  |  |
| No education | 7.1 | 5.6 | 6.6 | 80.7 | 100 | 3.3 | 2.3 | 2.5 | 91.9 | 100 | 1,246 |
| Primary | 8.0 | 5.7 | 10.3 | 75.9 | 100 | 2.9 | 4.0 | 2.3 | 90.8 | 100 | 174 |
| Secondary | 7.4 | 9.6 | 10.3 | 72.8 | 100 | 5.1 | 3.7 | 1.5 | 89.7 | 100 | 136 |
| Higher | 13.8 | 5.2 | 5.2 | 75.9 | 100 | 6.9 | 1.7 | 1.7 | 89.7 | 100 | 58 |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 7.7 | 5.0 | 5.0 | 82.3 | 100 | 5.0 | 3.3 | 1.7 | 90.1 | 100 | 181 |
| Second | 6.7 | 6.1 | 5.7 | 81.5 | 100 | 3.7 | 2.7 | 2.0 | 91.6 | 100 | 297 |
| Middle | 6.0 | 6.9 | 7.1 | 80.0 | 100 | 3.3 | 4.0 | 1.6 | 91.1 | 100 | 450 |
| Fourth | 8.6 | 5.8 | 9.4 | 76.2 | 100 | 2.1 | 1.6 | 3.4 | 92.9 | 100 | 382 |
| Highest | 8.6 | 5.3 | 7.6 | 78.6 | 100 | 4.6 | 1.3 | 3.0 | 91.1 | 100 | 304 |
| Total number of women | 7.4 | 5.9 | 7.2 | 79.4 | 100 | 3.5 | 2.6 | 2.4 | 91.5 | 100 | 1,614 |

Table 11.3 Ownership and use of bank accounts and mobile phones

Percentage of women aged 15-49 who use an account in a bank or other financial institution, percentage who own a mobile phone among women who own a mobile phone, percentage who use it for financial transactions, according to background characteristics, BHDS 2020

| Background characteristics | Have and use a bank account | Own a mobile phone | Number of women | Use mobile phone for financial transactions | Number of women who own a mobile phone |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Age |  |  |  |  |  |
| 15-19 | 3.1 | 82.0 | 651 | 79.0 | 534 |
| 20-24 | 6.8 | 93.5 | 429 | 89.5 | 401 |
| 25-29 | 6.3 | 91.3 | 413 | 89.3 | 377 |
| 30-34 | 3.3 | 94.7 | 303 | 92.4 | 287 |
| 35-39 | 3.0 | 96.1 | 233 | 92.7 | 224 |
| 40-44 | 4.3 | 91.4 | 140 | 88.6 | 128 |
| 45-49 | 8.1 | 94.2 | 86 | 93.0 | 81 |
| Education |  |  |  |  |  |
| No Education | 2.4 | 88.5 | 1,473 | 85.0 | 1,303 |
| Primary | 5.0 | 88.1 | 303 | 85.5 | 267 |
| Secondary | 7.1 | 94.9 | 312 | 93.3 | 296 |
| Higher | 19.8 | 99.4 | 167 | 98.8 | 166 |
| Wealth quintile |  |  |  |  |  |
| Lowest | 1.4 | 89.1 | 220 | 83.6 | 196 |
| Second | 3.4 | 87.1 | 417 | 83.2 | 363 |
| Middle | 5.8 | 89.8 | 637 | 86.8 | 572 |
| Fourth | 4.3 | 92.9 | 539 | 91.7 | 501 |
| Highest | 6.3 | 90.5 | 442 | 88.0 | 400 |
| Total | 4.7 | 90.1 | 2,255 | 87.2 | 2,032 |

## Table 11.4 Participation in decision making

Percent distribution of currently married women aged 15-49 by person who usually makes decisions about various issues, BHDS 2020

| Decision | Mainly wife | Wife and <br> husband <br> jointly | Mainly <br> husband | Someone else | Other | Total | Number |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Own health <br> care | 14.6 | 30.2 | 54.5 | 0.3 | 0.1 | 100 | 1,313 |
| Major <br> household <br> purchases | 16.2 | 29.8 | 53.5 | 0.0 | 0.1 | 100 | 1,313 |
| Visits to her <br> family or <br> relatives | 14.6 | 14.7 | 69.6 | 0.0 | 0.2 | 100 | 1,313 |

Table 11.5 Attitude toward wife beating: Women

Percentage of all women aged 15-49 who agree that a husband is justified in hitting or beating his wife for specific reasons, by background characteristics, BHDS 2020

|  | Husband is justified in hitting or beating his wife if she: |  |  |  |  |  | Percentage who agree with at least one specified reason |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Neglects household duties | she argues with him | Goes out without telling him | wastes resources | Neglects the children | refuses to have sex with him |  | Number of women |


| Age |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 15-19 | 5.2 | 4.5 | 4.9 | 4.3 | 5.2 | 4.8 | 6.3 | 651 |
| 20-24 | 16.6 | 15.9 | 14.7 | 17.2 | 17.0 | 15.6 | 20.7 | 429 |
| 25-29 | 16.9 | 17.4 | 18.4 | 18.6 | 17.7 | 17.4 | 23.7 | 413 |
| 30-34 | 18.8 | 16.8 | 18.5 | 17.8 | 18.5 | 16.8 | 22.4 | 303 |
| 35-39 | 19.7 | 18.0 | 18.5 | 18.5 | 19.3 | 18.9 | 25.8 | 233 |
| 40-44 | 17.1 | 15.7 | 19.3 | 19.3 | 17.1 | 17.1 | 25.0 | 140 |
| 45-49 | 19.8 | 18.6 | 17.4 | 19.8 | 16.3 | 16.3 | 24.4 | 86 |
| Employment |  |  |  |  |  |  |  |  |
| Not employed | 19.1 | 18.1 | 18.5 | 19.1 | 19.1 | 18.1 | 24.7 | 1400 |
| Employed for cash | 25.6 | 24.4 | 28.0 | 27.4 | 28.0 | 25.6 | 33.3 | 168 |
| Employed, not for cash | * | * | * | * | * | * | * | 12 |
| Missing | 1.0 | 0.7 | 0.9 | 0.9 | 0.7 | 0.9 | 1.2 | 675 |
| Number of living children |  |  |  |  |  |  |  |  |
| 0 | 3.7 | 4.0 | 3.9 | 4.0 | 4.4 | 4.2 | 5.6 | 816 |
| 1-2 | 17.0 | 14.8 | 15.0 | 16.8 | 17.0 | 16.0 | 20.0 | 400 |
| 3-4 | 22.2 | 20.7 | 22.2 | 22.9 | 21.0 | 20.7 | 27.2 | 415 |
| 5+ | 20.7 | 19.6 | 20.5 | 20.0 | 20.5 | 19.1 | 27.7 | 624 |

Mother's
education

| No education | 17.4 | 16.8 | 17.0 | 17.6 | 17.5 | 16.6 | 22.5 | 1473 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Primary | 9.6 | 8.6 | 8.6 | 9.9 | 8.6 | 9.2 | 11.6 | 303 |
| Secondary | 7.1 | 6.4 | 8.3 | 7.1 | 7.4 | 7.1 | 10.3 | 312 |
| Higher | 6.6 | 4.2 | 6.0 | 5.4 | 7.2 | 5.4 | 8.4 | 167 |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 27.7 | 29.5 | 26.8 | 28.6 | 27.3 | 26.8 | 35.0 | 220 |
| Second | 10.6 | 8.9 | 10.3 | 10.3 | 10.8 | 9.4 | 13.7 | 417 |
| Middle | 13.0 | 12.2 | 13.2 | 13.2 | 12.6 | 13.0 | 17.1 | 637 |
| Fourth | 13.4 | 11.5 | 11.9 | 12.4 | 13.5 | 11.9 | 16.1 | 539 |
| Highest | 13.3 | 13.1 | 14.0 | 14.3 | 13.8 | 13.1 | 18.6 | 442 |
| Total | $\mathbf{1 4 . 1}$ | $\mathbf{1 3 . 3}$ | $\mathbf{1 3 . 8}$ | $\mathbf{1 4 . 2}$ | $\mathbf{1 4 . 1}$ | $\mathbf{1 3 . 4}$ | $\mathbf{1 8 . 3}$ | $\mathbf{2 , 2 5 5}$ |

Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

Table 11.6 Indicators of women's empowerment

Percentage of currently married women aged 15-49 who participate in all decision making and the percentage who disagree with all of the reasons justifying wife-beating, by value on each of the indicators of women empowerment, BHDS 2020

| Empowerment indicator | Percentage who participate in all decision making | Percentage who disagree with all the reasons justifying wife beating | Number of women |
| :---: | :---: | :---: | :---: |
| Number of decisions in which women participate |  |  |  |
| 0 | na | 69.4 | 578 |
| 1-2 | na | 64.7 | 456 |
| 3 | na | 73.1 | 279 |
| Number of reasons for which wife beating is justified |  |  |  |
| 0 | 22.7 | na | 900 |
| 1-2 | 22.7 | na | 75 |
| 3-4 | 22.8 | na | 57 |
| 5 | 16.0 | na | 281 |
| na $=$ Not applicable |  |  |  |



## Key Findings

CHRONIC DISEASES


6\%
of Benadir household members suffer from at least one chronic disease

PREVALENCE OF MOST COMMON DISEASES

36\%
Blood pressure anomalies/ hypertension


28\%
diabetes

DISABILITY


5\%
prevalence of disability among Benadir Households

ONSET OF DISABILITY
Ageing and Other disease problems, injury/accident, and congenital (birth-related) defects are the main causes of disability.

CARE OF DISABLED PERSONS


43\%
of disabled people in Benadir had not received any care or support for their disability during the 12 months preceding the survey.

OUT-OF-POCKET HEALTH EXPENDITURE


## 52\%

of households interviewed that had a sick household member reported that they had paid their health expenses from household income-and most of them paid between US\$1 and US\$49 for treatment and health care services.

# Chronic Diseases, Disability, Out-Of-Pocket Health Expenditure and Social Habits 


#### Abstract

This chapter presents information on the prevalence, diagnosis and treatment of chronic diseases in Benadir region. It also offers information on the prevalence of disability, the origin and age at onset of disability, and care and support available for people with disabilities. Based on the findings of the survey, information on out-of-pocket health expenditure and selected social habits is also presented in this chapter.


Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both according to the National Center for Chronic Disease and Prevention and Health Promotion of the United States of America (CDC 2020). Chronic diseases generally cannot be prevented by vaccines or cured by medication and can lead to longterm disability. They place burdens and demands on a health care system and are a leading cause of death worldwide. The BHDS obtained information from household respondents on whether each household member suffered from one or more chronic diseases and whether the disease was diagnosed by a physician and treated. Further to this, the survey gathered information about household members suffering from any physical, mental or other state that limited them from engaging in their normal activities. Interviewers obtained information from the household respondents if any household member had been injured. If the answer to any of these questions was affirmative, follow up questions were asked about the type of disease, disability, and/or injury. Interviewers also obtained information on sicknesses that families experienced over the one month preceding the survey, in addition to expenditure on health services received.

## Prevalence of Chronic Diseases

Table 12.1 presents data on household members who have at least one chronic disease. Overall, 6 percent of Benadir household members were reported to be suffering from at least one chronic disease, which is same as the national figure (SHDS, 2020). More women than men were reported to have at least one chronic disease, at 7 percent and 5 percent respectively. Generally, disease prevalence increases with age. The prevalence of people with at


## 6\%

of Benadir household members were reported to be suffering from at least one chronic disease, which is same as the national figure

> The survey found that the percentage of household members diagnosed by a physician with at least one chronic disease and those who received treatment regularly increased as wealth levels increased.
least one chronic disease increases from 2 percent in the age group $0-4$ years to 30 percent in the age group 55-59 years (Figure 12.1).

## Diagnosis and Treatment of Chronic Diseases

Table 12.1 presents also data on the distribution of household members who have specific chronic diseases diagnosed by a physician and those who receive treatment regularly. The findings show that, overall, 5 percent of household members were reported to have been diagnosed by a physician and 4 percent are undergoing regular treatment for a chronic disease. More women were diagnosed by a physician than men at 6 percent and 4 percent respectively. Similarly, more women than men are undergoing regular treatment for the diseases, at 4 percent versus 3 percent respectively. The survey found that the percentage of household members diagnosed by a physician with at least one chronic disease and those who received treatment regularly increased as wealth levels increased. Five percent of household members in the wealthiest households were diagnosed by a physician, while 4 percent received treatment. In contrast, 2 percent of household members from the lowest wealth quintile or poorest households were diagnosed by a physician, and none of them received treatment.

Figure 12.2 compares household members whose chronic diseases were diagnosed by a physician against those who get treatment for chronic diseases regularly. The findings indicate that more of those diagnosed in the younger age groups are treated, as compared to those in the older age groups. In the age group 10-14 years, 1 percent were diagnosed by a physician, and the same 1 percent received treatment. In the age group 65-69 years, 36 percent were reported to have been diagnosed by a physician, while 31 percent received

Figure 12.2 Chronic diseases diagnosed and treated
Percentage of household members who have at least one chronic disease, diagnosed by a physician, who get treatment.
40.0


5\%
of the Benadir
population suffers
from disabilities, which is similar to the national prevalence
treatment for chronic diseases they have.

Table 12.2 presents the prevalence of the most common specific chronic diseases diagnosed by a physician, by type of condition and sex. The findings show that the most common chronic diseases were blood pressure anomalies or hypertension, diabetes, and arthritis at 36 percent, 28 percent and 10 percent of the household members respectively. While, the least common diseases were cancerous tumors, sickle cell anemia and prostatic hypertrophy at 0.5 percent, 0.3 percent, and 0.2 percent respectively.

Analysis of chronic diseases by sex shows that more men than women were reported to have been diagnosed with hypertension at 37 percent versus 35 percent. More women reported to have been diagnosed with arthritis at 13 percent against 7 percent respectively.

## Prevalence of Disability

Table 12.3 presents data on the distribution of the prevalence of disability of household members by sex, age and wealth quintiles. It should be noted that respondent's reports of disability were not verified by any clinical diagnosis; therefore, the percentages presented should be interpreted with caution. Overall, around 5 percent of the Benadir population suffers from disabilities, which is similar to the national prevalence (SHDS, 2020). The prevalence of disability among females and males is the same, at 5 percent.

Figure 12.3 shows the prevalance of the most common types of disability. The prevalance of sight disability is 52 percent, followed by mobility at 24 percent, hearing at 23 percent, mental at 11 percent and the least prevelant disability is self care at 2 percent.

## Figure 12.3 Common types of disabilities

Prevalence of household members with disabilities, percentage of people suffering from specific types of disabilities



## Origin and Age at Onset of Disability

Table 12.4 presents data on origin or causes of disability. For any household member with a disability, respondents were asked what they thought was the cause of the disability. The analysis indicates that ageing and congenital (birth-related) problems were thought to be the main cause of disabilities.

Ageing accounts for 24 percent of disabilities while other diseases and injuries/accidents account for 21 percent and 18 percent respectively. The percentage of those suffering from congenital problems account for 12 percent as shown in (Table 12.4).
The analysis indicates that ageing and congenital (birth-related) problems were thought to be the main cause of disabilities.

Figure 12.5 Support received by household members for people with disabilities
Percentage distribution of disabled people who received any kind of care and support for their disabilities in the last 12 months

## 54.2


it varies by sex. Overall, 28 percent of the household population reported onset of disability to have started when they were under the age of five (Figure 12.4). Thirty-four percent of males and 22 percent of females stated that they had first experienced their disabilities under the age of 5 . The most common disability reported to have started during this period is speech, at 50 percent.

## Care and Support for Persons with Disabilities

Table 12.6 presents the percentage distribution of persons with disabilities who received any kind of care and support for their conditions during the 12 months prior to the survey, by background characteristics. This includes medical care, welfare, financial support and nutritional support. The findings indicate that 43 percent of persons with disabilities in Benadir compared to 42 percent nationally had not received any care or support for their condition in the 12 months preceding the survey (SHDS, 2020). Fifty-four percent of disabled household members received medical care, while 2 percent received welfare, 3 percent received financial support and less than 1 percent received nutritional support (Figure 12.5). Forty-four percent of men and 43 percent of women said they had not received any support in the 12 months preceding the survey.

## Household out of-Pocket Health Expenditure and Health-Seeking Behavior

Out-of-pocket payments are expenditures borne directly by a patient where insurance does not cover the cost of the health service (OECD, 2006). These expenses could be medical as well as non-medical. Out-of-pocket medical expenditures could be payments towards doctors' fees, medicine, diagnostics, operations, ambulance services, etc. (OECD, 2006). Overall, health expenditure could amount to catastrophic levels that plunge families deeper into poverty. The World Bank defines catastrophic health expenditure as payments for health services exceeding 40 percent of household disposable income after subsistence needs are met. Since the collapse of the Somali health care infrastructure three decades ago, most of the Somali households have not had any form of financial protection, and were forced to make out-of-pocket payments when they fell sick. Often, families resort to borrowing money or selling assets to meet these expenditures.

The survey collected information on out-of-pocket expenditure. In the Household Questionnaire, households were asked whether advice or treatment was sought for any household members' health conditions and the source of this advice or treatment. They were also asked how much money the household spent on treatment and
health care services in the one month preceding the survey. The survey also collected information about what financial sources the household used to pay for any health expenditure.

Table 12.7 shows that 21 percent of households had at least one household member sick in the last month preceding the survey. Among those households, 76 percent sought advice or treatment.

Forty percent of households had visited private hospitals, clinics or doctors compared to 6 percent of who had visited a government hospital for advice or treatment of a household member. Fourteen percent of households had sought advice or treatment from pharmacies compared to 13 percent from Mother Child Health $(\mathrm{MCH})$ clinics and/or health centers (HC) (Figure 12.6).

The highest wealth quintile or wealthiest households sought more medical advice and treatment compared to the poorest, at 88 percent and 61 percent respectively. Furthermore, the survey shows that 68 percent of the wealthiest households received medical advice and treatment from a private hospital, clinic or doctor,

Figure 12.6 Source of advice or treatment
Household members who have been sick and where they sought advice/treatment


Figure 12.7 Financial sources used to pay for health Services
Financial sources used to pay for health Services

|  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |

40\%<br>of households had visited private hospitals, clinics or doctors

The economic costs of tobacco use are substantial and include significant health care costs for treating the disease caused by tobacco use as well as the lost human capital that results from tobacco-attributable morbidity and mortality
compared to 14 percent of the lowest wealth quintile or the poorest households (Table 12.7).

Table 12.8 and Figure 12.7 present data on the financial sources that households use to pay for health expenditures. Fifty-two percent of households reported they pay for their health expenses from their income. Twenty-seven percent of households reported their relatives or friends supported them to pay their health expenses. Sixteen percent borrowed money to pay for their health expenditure and 7 percent of the households sold assets to cover their health expenses. Only 3 percent of households used insurance for their health expenses. On comparing data by wealth quintiles, it can be noted that 8 percent of the wealthiest households used their insurance coverage for their health expenses. None of households from the three lowest wealth quintiles used insurance for pay healthcare expenses. Seventy one percent of the wealthiest households compared to 36 percent from the poorest households, used their income to pay for their health expenses.

Table 12.9 presents data on the amount of money the household spent on treatment and health care services during the month preceding survey. The largest proportion of respondents (44 percent) reported that they had spent between US\$1 and US\$49 for treatment and health care services in this time. Twenty-five percent of the respondents had spent between US\$50 and US\$99 for treatment and health care services during that month, 22 percent of the respondents had paid US\$100-199 for treatment and health care services, and 9 percent of the respondents had paid US $\$ 300$ or more for treatment and health care services during the month prior to the survey.

## Tobacco Use and Khat Chewing

Tobacco use is not only a risk factor for medical conditions, but it also contributes to poverty by diverting household spending from basic needs, such as food and shelter, to tobacco. This spending behaviour is difficult to curb because tobacco is addictive. The economic costs of tobacco use are substantial and include significant health care costs for treating the disease caused by tobacco use as well as the lost human capital that results from tobacco-attributable morbidity and mortality (WHO, 2019). Information about the use of tobacco and chewing of Khat was collected for household members aged 10 years or older, who were asked whether they smoke or use any kind of tobacco or chew Khat.

Table 12.10 presents the percentage of household members who smoke cigarettes or use tobacco, by background characteristics. The findings indicate that 3 percent of Benadir household members smoke cigarettes or use tobacco products. Cigarette smoking or any other use of tobacco is rare among women at one percent, whereas 5 percent of men smoke or use other tobacco products.

Figure 12.8 Household members who smoke cigarettes or use tobacco
Percentage of household members who smoke cigarettes or use tobacco, and chew khat by age
——Smoking Khat


Table 12.11 shows the percentage of household members who chew Khat, by background characteristics. Overall, 3 percent of Benadir household members chew Khat. Five percent of Benadir men reported chewing Khat compared to women at less than 1 percent.

Figure 12.8 compares the percentage of household members who chew Khat and household members who smoke cigarettes or using any sort of tobacco. It shows that both the use of tobacco and chewing of Khat generally increases with age and reaches a peak at the ages 45-49 and then declines in the older ages.

Table 12.1 Prevalence of chronic diseases by background characteristics

Percentage of household members who have at least one chronic disease, diagnosed by a physician, who get treatment regularly by background characteristics, BHDS 2020

| Background <br> Characteristics | Percentage of HH <br> members who have at <br> least one chronic disease | Percentage of HH <br> members who have <br> at least one chronic <br> diagnosed by physician | Percentage of HH <br> Members who have at <br> least one chronic and get <br> treated | Number of Persons |
| :--- | :---: | :---: | :---: | :---: |
| Sex of household <br> member |  |  |  |  |
| Male | 5.0 | 4.2 | 3.1 | 5,949 |
| Female | 7.3 | 5.7 | 4.3 | 6,036 |

Age

| $0-4$ | 1.9 | 1.2 | 0.9 | 2,157 |
| :--- | ---: | ---: | ---: | ---: |
| $5-9$ | 1.5 | 1.0 | 1.0 | 2,138 |
| $10-14$ | 1.6 | 1.0 | 0.8 | 1,964 |
| $15-19$ | 2.3 | 1.3 | 0.9 | 91407 |
| $20-24$ | 4.5 | 2.1 | 3.5 | 745 |
| $25-29$ | 7.6 | 5.3 | 3.3 | 552 |
| $30-34$ | 9.0 | 6.9 | 4.5 | 465 |
| $35-39$ | 16.6 | 13.6 | 10.2 | 332 |
| $40-44$ | 18.3 | 14.5 | 10.8 | 186 |
| $45-49$ | 23.3 | 20.0 | 14.7 | 395 |
| $50-54$ | 30.4 | 26.1 | 19.1 | 161 |
| $55-59$ | 29.4 | 26.1 | 35.3 | 238 |
| $60-64$ | 39.5 | 40.8 | 29.9 | 81 |
| $65-69$ | 41.2 |  |  | 250 |

Wealth quintile

| Lowest | 3.3 | 2.0 | 0.0 | 150 |
| :--- | ---: | ---: | ---: | ---: |
| Second | 6.6 | 3.9 | 2.7 | 1,369 |
| Middle | 6.1 | 4.5 | 3.3 | 2,543 |
| Fourth | 6.6 | 5.5 | 4.1 | 3,984 |
| Highest | 5.7 | 5.1 | 4.1 | 3,939 |
| Total | $\mathbf{6 . 2}$ | $\mathbf{4 . 9}$ | $\mathbf{3 . 7}$ | $\mathbf{1 1 , 9 8 5}$ |

${ }^{1}$ Total includes household members with missing information on age.

Table 12.2 Prevalence of specific chronic diseases

| Percentage of household members who have specific chronic diseases diagnosed by a physician, and sex, BHDS 2020 |  |  |  |
| :---: | :---: | :---: | :---: |
|  | Sex of household member |  |  |
|  | Male | Female | Total |
| Type of disease |  |  |  |
| Pressure | 36.9 | 35.3 | 36.0 |
| Diabetes | 28.2 | 27.7 | 27.9 |
| Inflammation/Ulcers | 6.0 | 7.0 | 6.6 |
| Anemia | 2.0 | 7.0 | 4.9 |
| Sickle Cell Anemia | 0.8 | 0.0 | 0.3 |
| Heart Disease | 2.8 | 5.0 | 4.0 |
| Kidney Disease | 3.6 | 4.7 | 4.2 |
| Liver Disease | 4.8 | 1.7 | 3.0 |
| Arthritis | 6.7 | 13.1 | 10.4 |
| Tuberculosis | 2.4 | 2.3 | 2.4 |
| Chronic Headache | 2.0 | 7.3 | 5.0 |
| Stroke | 0.8 | 0.9 | 0.8 |
| Epilepsy | 6.0 | 4.4 | 5.0 |
| Prostatic Hypertrophy | 0.4 | 0.0 | 0.2 |
| Cataract | 0.4 | 1.5 | 1.0 |
| Chronic Back Pain | 2.4 | 9.9 | 6.7 |
| Mental/Psychological Illness | 5.2 | 1.5 | 3.0 |
| Skin Disease | 2.0 | 2.3 | 2.2 |
| Cancerous Tumors | 0.4 | 0.6 | 0.5 |
| Asthma | 3.6 | 3.5 | 3.5 |
| Others | 5.6 | 7.3 | 6.6 |
| Total | 252 | 343 | 595 |

Table 12.3 Prevalence of disability and Common types of disability

Prevalence of household members with disabilities and percentage who suffer from specific types of disabilities, by background characteristics, BHDS 2020

| Background characteristics | Prevalence of disabled persons | Total | Among household members with disabilities, percentage who suffer from specific types of disabilities |  |  |  |  |  |  | Number of household members with disabilities ${ }^{1}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Sight | Hearing | Speech | Learning | Mobility | Self- <br> Care | Mental |  |

Sex of
household
member

| Male | 5.0 | 5,949 | 50.0 | 20.3 | 11.0 | 4.3 | 24.0 | 3.0 | 12.3 | 300 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Female | 5.2 | 6,036 | 52.8 | 25.3 | 6.0 | 4.7 | 23.1 | 1.9 | 8.9 | 316 |
| Age |  |  |  |  |  |  |  |  |  |  |
| <5 | 6.1 | 2,157 | 40.5 | 30.5 | 13.0 | 4.6 | 21.4 | 3.1 | 15.3 | 131 |
| 5-9 | 3.5 | 2,138 | 41.9 | 27.0 | 12.2 | 5.4 | 29.7 | 2.7 | 5.4 | 74 |
| 10-14 | 2.9 | 1,964 | 49.1 | 24.6 | 8.8 | 8.8 | 29.8 | 1.8 | 7.0 | 57 |
| 15-19 | 3.1 | 1,407 | 68.2 | 15.9 | 9.1 | 2.3 | 29.5 |  | 4.5 | 44 |
| 20-24 | 4.3 | 914 | 43.6 | 23.1 | 5.1 | 7.7 | 15.4 | 7.7 | 25.6 | 39 |
| 25-29 | 3.4 | 745 | 32.0 | 12.0 | 8.0 | 0.0 | 32.0 | 4.0 | 16.0 | 25 |
| 30-34 | 4.2 | 552 | * | * | * | * | * | * | * | 23 |
| 35-39 | 3.4 | 465 | * | * | * | * | * | * | * | 16 |
| 40-44 | 4.8 | 332 | * | * | * | * | * | * | * | 16 |
| 45-49 | 7.0 | 186 | * | * | * | * | * | * | * | 13 |
| 50-54 | 9.6 | 395 | 63.2 | 21.1 | * | 2.6 | 15.8 | 2.6 | 2.6 | 38 |
| 55-59 | 14.3 | 161 | * | * | * | * | * | * | * | 23 |
| 60-64 | 15.1 | 238 | 63.9 | 16.7 | 8.3 | 8.3 | 22.2 |  | 8.3 | 36 |
| 65-69 | 14.8 | 81 | * | * | * | * | * | * | * | 12 |
| 70+ | 27.6 | 250 | 71.0 | 20.3 | 2.9 | 1.4 | 29.0 | 1.4 | 5.8 | 69 |

Wealth
quintile

| Lowest | 6.0 | 150 | $\star$ | $\star$ | $\star$ | $\star$ | $\star$ | $*$ | $*$ | 9 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Second | 5.8 | 1,369 | 45.0 | 35.0 | 7.5 | 5.0 | 27.5 | 5.0 | 5.0 | 80 |
| Middle | 4.9 | 2,543 | 62.4 | 19.2 | 10.4 | 4.0 | 16.0 | 3.2 | 10.4 | 125 |
| Fourth | 5.8 | 3,984 | 50.0 | 23.5 | 6.5 | 7.4 | 23.9 | 2.2 | 10.9 | 230 |
| Highest | 4.4 | 3,939 | 50.0 | 19.8 | 10.5 | 1.2 | 26.7 | 1.2 | 11.0 | 172 |
| Total | $\mathbf{5 . 1}$ | $\mathbf{1 1 , 9 8 5}$ | $\mathbf{5 1 . 5}$ | $\mathbf{2 2 . 9}$ | $\mathbf{8 . 4}$ | $\mathbf{4 . 5}$ | $\mathbf{2 3 . 5}$ | $\mathbf{2 . 4}$ | $\mathbf{1 0 . 6}$ | $\mathbf{6 1 6}$ |

${ }^{1}$ Total includes household members with missing information on age
A person may have two reported diseases; consequently, the percentages
Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

## Table 12.4 Origin of disabilities

Percentage distribution of disabled people according to origin of disabilities, by background characteristics, BHDS 2020

| Background characteristics | Origin of disabilities |  |  |  |  |  |  |  |  |  | Number of household members with disabilities |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Congenital | Contagious | Child Birth Conditions | Other Disease | Abuse | Aging | Injury/Accident | Witchcraft | Others | Don't know |  |
| Sex of household member |  |  |  |  |  |  |  |  |  |  |  |
| Male | 14.2 | 6.8 | 3.1 | 22.8 | 3.7 | 17.3 | 16.0 | 0.0 | 5.6 | 10.5 | 162 |
| Female | 9.8 | 9.8 | 2.3 | 19.5 | 1.7 | 29.3 | 20.1 | 0.0 | 0.6 | 6.9 | 174 |
| Total | 11.9 | 8.3 | 2.7 | 21.1 | 2.7 | 23.5 | 18.2 | 0.0 | 3.0 | 8.6 | 336 |
| Percentage distribution of disabled people according to origin of disabilities |  |  |  |  |  |  |  |  |  |  |  |

Table 12.5 Age at onset of disability

| Percentage distribution of disabled people according to age at onset of disability by background characteristics, BHDS 2020 |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Background characteristics | Age at the onset of disability |  |  |  |  |  |  |  |  | Number of household members with disabilities |
|  | <5 | 5-9 | 10-19 | 20-29 | 30-39 | 40-49 | 50-59 | 60-69 | 70+ |  |
| Sex of household member |  |  |  |  |  |  |  |  |  |  |
| Male | 34.0 | 12.3 | 9.3 | 11.1 | 6.2 | 4.9 | 9.9 | 7.4 | 4.9 | 162 |
| Female | 22.4 | 9.8 | 8.6 | 8.6 | 8.6 | 13.8 | 15.5 | 10.3 | 2.3 | 174 |
| Types of disability |  |  |  |  |  |  |  |  |  |  |
| Sight | 16.4 | 8.8 | 8.2 | 9.9 | 9.4 | 12.3 | 17.0 | 12.3 | 5.8 | 171 |
| Hearing | 30.4 | 18.8 | 8.7 | 8.7 | 8.7 | 7.2 | 8.7 | 7.2 | 1.4 | 69 |
| Speech | 50.0 | 10.0 | 10.0 | 6.7 | 3.3 |  | 10.0 | 6.7 | 3.3 | 30 |
| Learning | * | * | * | * | * | * | * | * | * | 16 |
| Mobility | 32.1 | 16.7 | 3.8 | 6.4 | 5.1 | 7.7 | 12.8 | 11.5 | 3.8 | 78 |
| Self-Care | * | * | * | * | * | * | * | * | * | 8 |
| Mental | 46.7 | 3.3 | 16.7 | 16.7 | 6.7 | 6.7 | 0.0 | 3.3 | 0.0 | 30 |
| Total | 28.0 | 11.0 | 8.9 | 9.8 | 7.4 | 9.5 | 12.8 | 8.9 | 3.6 | 336 |
| Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. |  |  |  |  |  |  |  |  |  |  |

Table 12.6 Care and Support received by background characteristics

Percentage distribution of disabled people who received any kind of care, and support for their disabilities in the last 12 months by background characteristics, BHDS 2020

| Background characteristics | Care and support received |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Medical | Welfare | Financial | Nutritional | No support | Number of persons |
| Sex of household member |  |  |  |  |  |  |
| Male | 54.0 | 1.7 | 4.0 | 0.0 | 43.7 | 300 |
| Female | 54.4 | 2.8 | 2.5 | 0.3 | 42.7 | 316 |
| Age |  |  |  |  |  |  |
| 0-4 | 24.0 | 1.9 | 3.8 | 1.0 | 60.6 | 104 |
| 5-9 | 41.7 | 5.0 | 5.0 | 0.0 | 50.0 | 60 |
| 10-14 | 44.6 | 5.4 | 1.8 | 0.0 | 51.8 | 56 |
| 15-19 | 29.0 | 0.0 | 0.0 | 0.0 | 68.1 | 69 |
| 20-24 | 40.4 | 3.8 | 3.8 | 0.0 | 51.9 | 52 |
| 25-29 | 52.9 | 2.9 | 5.9 | 0.0 | 52.9 | 34 |
| 30-34 | 78.6 | 0.0 | 0.0 | 0.0 | 25.0 | 28 |
| 35-39 | * | * | * | * | * | 21 |
| 40-44 | * | * | * | * | * | 18 |
| 45-49 | * | * | * | * | * | 13 |
| 50-54 | 78.9 | 0.0 | 10.5 | 0.0 | 10.5 | 38 |
| 55-59 | * | * | * | * | * | 20 |
| 60-64 | 91.4 | 2.9 | 0.0 | 0.0 | 14.3 | 35 |
| 65-69 | * | * | * | * | * | 11 |
| 70+ | 87.7 | 1.8 | 1.8 | 0.0 | 29.8 | 57 |
| Wealth quintile |  |  |  |  |  |  |
| Lowest | 50.6 | 7.2 | 0.0 | 0.0 | 45.8 | 83 |
| Second | 54.8 | 1.9 | 1.9 | 1.0 | 47.1 | 104 |
| Middle | 54.3 | 2.1 | 5.3 | 0.0 | 42.6 | 188 |
| Fourth | 57.5 | 0.0 | 4.5 | 0.0 | 41.0 | 134 |
| Highest | 52.3 | 1.9 | 1.9 | 0.0 | 41.1 | 107 |
| Total | 54.2 | 2.3 | 3.2 | 0.2 | 43.2 | 616 |

* Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed


## Table 12.7 Sources for advice or treatment

| Percentage of households with members who have been sick in the last month, among the households with members who have been sick in the last month and ser sought advice or treatment by background characteristics, BHDS 2020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Percentage of households with members who have been sick in the last month | Number of households | Among households with members who have been sick in the last month: |  | Public Sector |  |  |  |  |  | Private Medical Sector |  |  | Other Source |  |  |  |
| Background Characteristic |  |  | Percentage who have been sick and sought any advice or treatment | Number of households with members who have been sick in the last month | Government Hospital | Referral Health Centre | $\begin{gathered} \mathrm{MCH} / \\ \mathrm{HC} \end{gathered}$ | Primary Health Unit | Mobile Clinic | Other Public Sector |  | Pharmacy | Other Private Medical Sector | Shop | Others | Percentage who have been sick and did not seek any advice or treatment | Number of <br> households <br> with members who have been sick in the last month and sought advice or treatment |
| Wealth quintile |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lowest | 28.4 | 232 | 60.6 | 66 | 3.0 | 1.5 | 36.4 | 1.5 | 0.0 | 1.5 | 13.6 | 12.1 | 0.0 | 1.5 | 0.0 | 7.3 | 40 |
| Second | 19.0 | 332 | 69.8 | 63 | 11.1 | 1.6 | 22.2 | 1.6 | 4.8 | 1.6 | 20.6 | 14.3 | 0.0 | 0.0 | 0.0 | 5.3 | 44 |
| Middle | 19.8 | 450 | 75.3 | 89 | 4.5 | 2.2 | 7.9 | 3.4 | 3.4 | 1.1 | 43.8 | 14.6 | 3.4 | 0.0 | 0.0 | 6.1 | 67 |
| Fourth | 19.2 | 386 | 83.8 | 74 | 5.4 | 1.4 | 4.1 | 2.7 | 4.1 | 0.0 | 48.6 | 16.2 | 1.4 | 0.0 | 1.4 | 3.4 | 62 |
| Highest | 20.6 | 320 | 87.9 | 66 | 7.6 | 0.0 | 0.0 | 6.1 | 0.0 | 1.5 | 68.2 | 10.6 | 0.0 | 0.0 | 0.0 | 2.2 | 58 |
| Total | 20.8 | 1720 | 75.7 | 358 | 6.1 | 1.4 | 13.4 | 3.1 | 2.5 | 1.1 | 39.7 | 13.7 | 1.1 | 0.3 | 0.3 | 24.3 | 271 |

Table 12.8 Financial sources used to pay for health services

Percentage distribution of financial sources used for health services by households in the last month by background characteristics, BHDS 2020

| Background characteristics | Financial sources for health services |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Income | Insurance | Savings | Borrowing | Relatives/ Friends | Sold Assets | Other | Number of households |
| Wealth quintile |  |  |  |  |  |  |  |  |
| Lowest | 36.4 | 0.0 | 0.0 | 15.2 | 12.1 | 9.1 | 9.1 | 33 |
| Second | 25.0 | 0.0 | 2.8 | 22.2 | 27.8 | 5.6 | 5.6 | 36 |
| Middle | 57.4 | 0.0 | 4.9 | 14.8 | 26.2 | 1.6 | 1.6 | 61 |
| Fourth | 53.4 | 3.4 | 13.8 | 19.0 | 32.8 | 13.8 | 5.2 | 58 |
| Highest | 71.2 | 7.7 | 13.5 | 9.6 | 28.8 | 5.8 | 3.8 | 52 |
| Total | 51.7 | 2.5 | 7.9 | 15.8 | 26.7 | 7.1 | 4.6 | 240 |

## Table 12.9 Amount in health expenses

| Amount of money that households incurred for health services in the last month by background characteristics, BHDS 2020 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Amount in health expenses |  |  |  |  | Total | Number of <br> Households |
|  | 1-49 | 50-99 | 100-199 | 200-299 | 300+ |  |  |
| Wealth quintile |  |  |  |  |  |  |  |
| Lowest | 73.1 | 15.4 | 0.0 | 0.0 | 11.5 | 100.0 | 26 |
| Second | 47.1 | 26.5 | 14.7 | 0.0 | 11.8 | 100.0 | 34 |
| Middle | 56.7 | 23.3 | 18.3 | 0.0 | 1.7 | 100.0 | 60 |
| Fourth | 40.4 | 26.3 | 21.1 | 1.8 | 10.5 | 100.0 | 57 |
| Highest | 15.7 | 27.5 | 41.2 | 3.9 | 11.8 | 100.0 | 51 |
| Total | 43.9 | 24.6 | 21.5 | 1.3 | 8.8 | 100.0 | 228 |

## Table 12.10 Smoking or using tobacco

| Percentage of household members who smoke cigarette or using tobacco by background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background characteristics | Percentage of household members who smoke cigarette or use tobacco | Number of Household members |
| Sex |  |  |
| Male | 5.4 | 3,746 |
| Female | 0.8 | 3,944 |
| Age |  |  |
| 10-14 | 0.3 | 1,964 |
| 15-19 | 0.6 | 1,407 |
| 20-24 | 3.1 | 914 |
| 25-29 | 5.5 | 745 |
| 30-34 | 5.3 | 552 |
| 35-39 | 8.4 | 465 |
| 40-44 | 6.9 | 332 |
| 45-49 | 7.5 | 186 |
| 50-54 | 4.8 | 395 |
| 55-59 | 5.0 | 161 |
| 60-64 | 5.0 | 238 |
| 65-69 | 2.5 | 81 |
| 70+ | 1.2 | 250 |
| Education |  |  |
| No Education | 3.5 | 4,776 |
| Primary | 2.6 | 1,302 |
| Secondary | 2.5 | 997 |
| Higher | 0.8 | 615 |
| Wealth quintile |  |  |
| Lowest | 2.3 | 86 |
| Second | 5.9 | 795 |
| Middle | 4.1 | 1,566 |
| Fourth | 2.3 | 2,553 |
| Highest | 2.3 | 2,690 |
| Total | 3.0 | 7,690 |

Table 12.11 Use of Khat

| Percentage of household members who who use Khat by background characteristics, BHDS 2020 |  |  |
| :---: | :---: | :---: |
| Background characteristics | Percentage of household members who use Khat | Number of Household members |
| Sex |  |  |
| Male | 5.2 | 3,746 |
| Female | 0.3 | 3,944 |
| Age |  |  |
| 10-14 | 0.2 | 1,964 |
| 15-19 | 0.5 | 1,407 |
| 20-24 | 3.0 | 914 |
| 25-29 | 4.6 | 745 |
| 30-34 | 5.4 | 552 |
| 35-39 | 7.1 | 465 |
| 40-44 | 6.3 | 332 |
| 45-49 | 8.1 | 186 |
| 50-54 | 3.5 | 395 |
| 55-59 | 4.3 | 161 |
| 60-64 | 5.0 | 238 |
| 65-69 | 1.2 | 81 |
| 70+ | 0.8 | 250 |
| Education level |  |  |
| No Education | 3.2 | 4,776 |
| Primary | 2.1 | 1,302 |
| Secondary | 2.1 | 997 |
| Higher | 0.8 | 615 |
| Wealth quintile |  |  |
| Lowest | 1.2 | 86 |
| Second | 5.8 | 795 |
| Middle | 3.6 | 1,566 |
| Fourth | 2.1 | 2,553 |
| Highest | 1.8 | 2,690 |
| Number of Household members | 2.7 | 7,690 |

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## Estimates of Sampling Errors

Sampling errors are important data quality parameters which give measure of the precision of the survey estimates. They aid in determining the statistical reliability of survey estimates.

The estimates from a sample survey are affected by two types of errors: non-sampling errors and sampling errors. Non-sampling errors are the results of mistakes made in implementing data collection and data processing, such as failure to locate and interview the correct household, misunderstanding of the questions on the part of either the interviewer or the respondent, and data entry errors. Although numerous efforts were made during the implementation of the Somali Health and Demographic Survey ( SHDS 2020) to minimise this type of error, non-sampling errors are impossible to avoid and difficult to evaluate statistically.

Sampling errors, on the other hand, can be evaluated statistically. The sample of respondents selected in the SHDS 2020 is only one of many samples that could have been selected from the same population, using the same design and sample size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability among all possible samples. Although the degree of variability is not known exactly, it can be estimated from the survey results.

Sampling error is usually measured in terms of the standard error for a particular statistic (mean, percentage, etc.), which is the square root of the variance. The standard error can be used to calculate confidence intervals within which the true value for the population can reasonably be assumed to fall. For example, for any given statistic calculated from a sample survey, the value of that statistic will fall within a range of plus or minus two times the standard error of that statistic in $95 \%$ of all possible samples of identical size and design.

If the sample of respondents had been selected by simple random sampling, it would have been possible to use straightforward formulas for calculating sampling errors. However, the SHDS 2020 sample was the result of a multi-stage stratified design, and, consequently, it was necessary to use more complex formulas. The variance approximation procedure that account for the complex sample design used R program was estimated sampling errors in SHDS which is Taylor series linearization. The non-linear estimates are approximated by linear ones for estimating variance. The linear approximation is derived by taking the first-order Tylor series approximation. Standard variance estimation methods for linear statistics are then used to estimate the variance of the linearized estimator.
percentage or mean as a ratio estimate, $r=y / x$, where $y$ represents the total sample value for variable $y$ and $x$ represents the total number of cases in the group or subgroup under consideration. The variance of $r$ is computed using the formula given below, with the standard error being the square root of the variance:

$$
S E^{2}(r)=\operatorname{var}(r)=\frac{1-f}{x^{2}} \sum_{h=1}^{H}\left[\frac{n_{h}}{n_{h}-1}\left(\sum_{i=1}^{n_{h}} z_{h i}^{2}-\frac{z_{h}^{2}}{n_{h}}\right)\right]
$$

in which

$$
z_{h i}=y_{h i}-r x_{h i, \text { and }} z_{h}=y_{h}-r x_{h}
$$

where $h$
nh is the total number of clusters selected in the hth stratum;
yhi is the sum of the weighted values of variable $y$ in the ith cluster in the hth stratum;
xhi is the sum of the weighted number of cases in the ith cluster in the hth stratum; and
f
is the overall sampling fraction, which is so small that it is ignored.

Sampling errors for the Benadir are calculated for selected variables considered to be of primary interest. The results are presented in this appendix for the country as a whole. For each variable, the type of statistic (proportion) and the base population are given in Table B.1. Tables B. 2 present the value of the statistic (R), its standard error (SE), the number of unweighted ( $N$ ) cases, the relative standard error (SE/R), and the 95\% confidence limits ( $\mathrm{R}+/-2 \mathrm{SE}$ ) for each variable.

The confidence interval (e.g., as calculated for Proportion with improved water) can be interpreted as follows: the overall proportion of households' access to improved water for all interviewed households from Benadir sample is 0.977 (97.7\%) and its standard error is 0.010 . Therefore, to obtain the $95 \%$ confidence limits, one adds and subtracts twice the standard error to the sample estimate, that is, $0.977+/-2 \times 0.010$. There is a high probability (95\%) that the true proportion of households access to improved water services for all households is between 0.963 (96.3\%) and 0.991 (99.1\%).

| Table A1 List of selected variables for sampling errors, Benadir 2020 |  |  |
| :--- | :--- | :--- |
| Variable |  | Estimate |
| Proportion with improved water sources | Households |  |
| Proportion with unimproved water sources | Proportion | Total households |
| Proportion with water on premises | Proportion | Total households |
| Proportion with less than 30 minutes to a drinking water source | Proportion | Total households |
| Proportion with basick drinking water service | Proportion | Total households |
| Proportion with flush to septik tank | Proportion | Total households |
| Proportion with flush to pit latrine | Proportion | Total households |
| Proportion with ventilated improved pit latrine | Proportion | Total households |
| Proportion with pit latrine with slab | Proportion | Total households |
| Proportion with pit latrine without slap/open latrine | Proportion | Total households |
| Proportion with electricity for lighting | Proportion | Total households |
| Proportion with solar for lighting | Proportion | Total households |
| Proportion torch for lighting | Proportion | Total households |
| Proportion with electricity connection | Proportion | Total households |
| Proportion with No education | Proportion | Total households |
| Proportion with Primary education | Proportion | Total women |
| Proportion with Higher education | Proportion | Total women |
| Proportion with Literacy | Proportion | Total women |
| Proportion with Currently married | Proportion | Total women |
| Proportion with never married | Proportion | Total women |
| Proportion with formerly married | Proportion | Total women |
| Proportion with pregnant | Proportion | Total women |
| Proportion Married before age 18 | Proportion | Total currently married |
|  | Proportion | women |


| Table A2 Sampling errors for all samples, Benadir 2020 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Variable | Value (R) | Standard <br> error (SE) | Number of cases |  | Confidence limits |  |
|  |  |  | Unweighted <br> (N) | Relative error (SE/R) |  |  |
|  |  |  |  |  | R-2SE | R+2SE |
| Proportion with improved water sources | 0.977 | 0.007 | 1680 | 0.007 | 0.963 | 0.991 |
| Proportion with unimproved water sources | 0.023 | 0.007 | 40 | 0.302 | 0.009 | 0.037 |
| Proportion with water on premises | 0.913 | 0.022 | 1571 | 0.024 | 0.869 | 0.958 |
| Proportion with less than 30 minutes to a drinking water source | 0.076 | 0.020 | 131 | 0.259 | 0.037 | 0.116 |
| Proportion with basick drinking water service | 0.966 | 0.008 | 1662 | 0.009 | 0.949 | 0.983 |
| Proportion with flush to septik tank | 0.143 | 0.012 | 246 | 0.087 | 0.118 | 0.168 |
| Proportion with flush to pit latrine | 0.190 | 0.015 | 327 | 0.079 | 0.160 | 0.220 |
| Proportion with ventilated improved pit latrine | 0.030 | 0.005 | 52 | 0.171 | 0.020 | 0.041 |
| Proportion with pit latrine with slab | 0.488 | 0.021 | 839 | 0.043 | 0.446 | 0.530 |
| Proportion with pit latrine without slap/ open latrine | 0.119 | 0.016 | 204 | 0.134 | 0.087 | 0.151 |
| Proportion with electricity for lighting | 0.783 | 0.038 | 1347 | 0.049 | 0.707 | 0.860 |
| Proportion with solar for lighting | 0.047 | 0.009 | 80 | 0.190 | 0.029 | 0.064 |
| Proportion torch for lighting | 0.154 | 0.031 | 265 | 0.202 | 0.092 | 0.216 |
| Proportion with electricity connection | 0.790 | 0.039 | 1358 | 0.049 | 0.712 | 0.867 |
| Proportion with No education | 0.046 | 0.008 | 38 | 0.181 | 0.030 | 0.063 |
| Proportion with Primary education | 0.370 | 0.021 | 303 | 0.057 | 0.327 | 0.412 |
| Proportion with Secondary education | 0.380 | 0.019 | 312 | 0.049 | 0.343 | 0.418 |
| Proportion with Higher education | 0.204 | 0.018 | 167 | 0.089 | 0.167 | 0.240 |
| Proportion with Literacy | 0.847 | 0.015 | 1088 | 0.017 | 0.817 | 0.876 |
| Proportion with Never married | 0.284 | 0.013 | 641 | 0.046 | 0.258 | 0.310 |
| Proportion with Currently married | 0.821 | 0.010 | 1313 | 0.012 | 0.800 | 0.841 |
| Proportion with formerly married | 0.179 | 0.010 | 301 | 0.057 | 0.159 | 0.200 |
| Proportion with pregnant | 0.163 | 0.010 | 247 | 0.063 | 0.143 | 0.184 |
| Proportion Married before age 18 | 0.279 | 0.016 | 443 | 0.059 | 0.246 | 0.311 |

Table A3 Household age distribution
Single-year age distribution of the de facto household population by sex, BSHDS 2020

| Age | Male |  | Female |  | Age | Male |  | Female |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Number | Percent | Number | Percent |  | Number | Percent | Number | Percent |
| 0 | 230 | 4.6 | 191 | 3.5 | 36 | 30 | 0.6 | 35 | 0.6 |
| 1 | 176 | 3.5 | 186 | 3.4 | 37 | 22 | 0.4 | 35 | 0.6 |
| 2 | 248 | 5.0 | 214 | 3.9 | 38 | 40 | 0.8 | 55 | 1.0 |
| 3 | 214 | 4.3 | 215 | 3.9 | 39 | 8 | 0.2 | 16 | 0.3 |
| 4 | 240 | 4.8 | 234 | 4.2 | 40 | 154 | 3.1 | 100 | 1.8 |
| 5 | 201 | 4.1 | 221 | 4.0 | 41 | 5 | 0.1 | 4 | 0.1 |
| 6 | 246 | 5.0 | 225 | 4.1 | 42 | 14 | 0.3 | 18 | 0.3 |
| 7 | 239 | 4.8 | 202 | 3.7 | 43 | 6 | 0.1 | 8 | 0.1 |
| 8 | 246 | 5.0 | 212 | 3.8 | 44 | 4 | 0.1 | 7 | 0.1 |
| 9 | 156 | 3.1 | 181 | 3.3 | 45 | 63 | 1.3 | 56 | 1.0 |
| 10 | 225 | 4.5 | 211 | 3.8 | 46 | 8 | 0.2 | 7 | 0.1 |
| 11 | 142 | 2.9 | 131 | 2.4 | 47 | 7 | 0.1 | 4 | 0.1 |
| 12 | 224 | 4.5 | 210 | 3.8 | 48 | 15 | 0.3 | 14 | 0.3 |
| 13 | 191 | 3.9 | 214 | 3.9 | 49 | 2 | 0.0 | 6 | 0.1 |
| 14 | 187 | 3.8 | 216 | 3.9 | 50 | 94 | 1.9 | 191 | 3.5 |
| 15 | 161 | 3.2 | 156 | 2.8 | 51 | 7 | 0.1 | 14 | 0.3 |
| 16 | 134 | 2.7 | 151 | 2.7 | 52 | 17 | 0.3 | 18 | 0.3 |
| 17 | 127 | 2.6 | 118 | 2.1 | 53 | 3 | 0.1 | 17 | 0.3 |
| 18 | 201 | 4.1 | 180 | 3.3 | 54 | 11 | 0.2 | 12 | 0.2 |
| 19 | 76 | 1.5 | 94 | 1.7 | 55 | 54 | 1.1 | 55 | 1.0 |
| 20 | 170 | 3.4 | 150 | 2.7 | 56 | 11 | 0.2 | 7 | 0.1 |
| 21 | 58 | 1.2 | 49 | 0.9 | 57 | 4 | 0.1 | 6 | 0.1 |
| 22 | 104 | 2.1 | 101 | 1.8 | 58 | 11 | 0.2 | 9 | 0.2 |
| 23 | 61 | 1.2 | 66 | 1.2 | 59 | 2 | 0.0 | 1 | 0.0 |
| 24 | 64 | 1.3 | 83 | 1.5 | 60 | 108 | 2.2 | 91 | 1.7 |
| 25 | 125 | 2.5 | 147 | 2.7 | 61 | 0 | 0.1 | 0 | 0.0 |
| 26 | 45 | 0.9 | 49 | 0.9 | 62 | 7 | 0.1 | 6 | 0.1 |
| 27 | 50 | 1.0 | 72 | 1.3 | 63 | 7 | 0.2 | 4 | 0.1 |
| 28 | 71 | 1.4 | 103 | 1.9 | 64 | 8 | 0.5 | 2 | 0.0 |
| 29 | 25 | 0.5 | 50 | 0.9 | 65 | 23 | 0.1 | 33 | 0.6 |
| 30 | 144 | 2.9 | 170 | 3.1 | 66 | 5 | 0.1 | 0 | 0.0 |
| 31 | 14 | 0.3 | 12 | 0.2 | 67 | 4 | 0.2 | 3 | 0.1 |
| 32 | 42 | 0.8 | 48 | 0.9 | 68 | 10 | 0.0 | 1 | 0.0 |
| 33 | 26 | 0.5 | 33 | 0.6 | 69 | 0 | 2.2 | 1 | 0.0 |
| 34 | 23 | 0.5 | 29 | 0.5 | 70+ | 107 | 2.2 | 137 | 2.5 |
| 35 | 115 | 2.3 | 97 | 1.8 | Total | 4,959 | 100.0 | 5,510 | 100.0 |

Note: The de facto population includes all residents and nonresidents who stayed in the household the night before the interview.

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- Samwel Andati (Data Management Assistant, UNFPA)
- Halima Ahmed (Project Assistant, UNFPA)


## Main Survey

## Supervision, Coordination, Verification and Quality

 Assurance (Main-survey)1. Abdifatah Abdikadir Jama
2. Abdikhaliq Ahmed Mohamed
3. Aden Mohamed Nur
4. Ahmed Abdullahi Farah
5. Ali Mohamed Bashir
6. Dr. Abdulkadir Weheliye Afrah
7. Hamdi Ahmed Al
8. Hassan Nur Mohamud
9. Hassan Sheikh Ahmed
10. Hawa Abdullahi Elmi
11. Kheiria Mohamed Ali
12. Mohamed Ali Dhaqane
13. Mohamed Ali Ibar
14. Mohamed Mohamud Mohamed
15. Abdiaziz abdilahi Ahmed

## Supervisors

1. Aamina Hassan Hussein
2. Hawa Hassan Abdullahi
3. Sadia Mohamed Isse
4. AyanAbdinur Elmi
5. Nafisa Hassan Abdulle
6. Iqra Abdullahi Ali
7. Samira Abdiwali Ali
8. Anisa Salad Abdi
9. Luul Omar Olosow
10. Raida Ali Mudey
11. Ayan Ahmed Ali
12. Ridwaan Osman Hussein

## Enumerators

1. Fosiya Mohamed Hussein
2. Faduma Adikarim
3. Halima Ali Abdi
4. Fardowsa Abdi Hassan
5. Maryama Mohamed Hassan
6. AbshiroAbdi Ali
7. Hawa Hassan Jama
8. Miski Abdirahman Osman
9. Fardowsa Mohamed Hussein
10. Faduma Haji Adan
11. Amina Abdullahi Karie
12. Iftim Ibrahim Abdirahman
13. Halima Ahmed Osoble
14. Mariam Mohamed Abdulkadir
15. Ayan Bashir Dahir
16. Muna Sharif Isse
17. Halima Adan Farah
18. Rabia Ahmed Siyar
19. Anab Dahir Hersi
20. Kowsar Abdullahi Hassan
21. Aisha Ali Hussein
22. Misra Farah Ga'al
23. ShamsaAdanlsack
24. Yasmiin Haji Hassan
25. Ramla Feysal Warsame
26. Fartum Elmi Adan
27. Naima Mohamed Hirabe
28. Safia Abdirahman Abdullahi
29. Leyla AbdiNur
30. Sadia Mohamud Mohamed
31. Seynab Ismail Abdullahi
32. Seynab Abdisatar Abdisalam
33. Fatima Omar Ibrahim
34. Qali Osman Dhaqane
35. Ismahan Olow Arale
36. Deeqo Abdi Mohamed
37. Nimco Hassan Abdulle
38. Saado ali mohamud

## Benadir Household Listing

## Supervision, Coordination, Verification and Quality Assurance

1. Abdirahman Omar Dahir
2. Nur Ahmed Weheliye
3. Hussein Elmi Gure
4. Shukri Yusuf Salad
5. Abdiaziz Ibrahim Yusuf
6. Xaliimo Mohamed Abdirahman
7. Ahmed Abdullahi Farah
8. Abdulrazaq Abdullahi Karie
9. Said Abdilaahi Abdi
10. Mohamed Husein Abdullahi
11. Abdullahi Mohamed Abdi

## Supervisors

1. A.Fatah A.qadir Jama
2. Abdikadir Hussein Hassan
3. Ahmed Hassan saciid
4. Fahad Abdiasis Elmi
5. Hassan Nor Mohamud
6. Saacid Farah Ahmed
7. Mohamed Hussein Mohamud

## Enumerators

1. Aadam Sabtow Hassan
2. Khadro Osmaan Ali
3. Bashiir Adan Abdulle
4. Ifrah Ibraahim Ali
5. Ahmed Hussein Hassan
6. Abdirahman Dahir Ahmed
7. Abdisamad Abdullah Hamuud
8. Maymoon Abdiraxman Farax
9. Mustafa Hassan Hussein
10. Sacdia abdullahi Hussein
11. Ali Mohamed Bashir
12. Mahad AbuukarMaxamed
13. Halima Mohamed Abdullahi
14. Yaasmiin Ibraahim Nageeye
15. Zahir Mohamed Omar
16. Sacdio Farah Hassan
17. Mohamed Ali Isse
18. Ardo Ismail Hussein
19. Abdikhaliq Ahmed Mohamed
20. Bisharo Shafi Rage
21. Hani Ahmed Mohamed
22. Cabdirisaaq Cismaan Cali
23. Mahad Abdullahi Muse
24. Saciido Hussein Halane
25. Baarliin Tahliil Osman
26. Abdirashid Hassan Dhorre
27. Mohed Ali Liban
28. Fatuma Abdirizak Husssein
29. Iman Jama Yussuf
30. Faiza Kassim Hassan
31. Maymoon Abdiraxman Farax
32. Mahamed Dhaqane Xalane


## Household Questionnaire



## SOMALI HEALTH \& DEMOGRAPHIC SURVEY .2018-2019

SOMALI MINISTRIE'S OF PLANNING AND HEALTH
QUESTIONNAIRE SERIAL NUMBER


HOUSEHOLD QUESTIONNAIRE




SOMALI HEALTH \&
DEMOGRAPHIC SURVEY 2018-2019

SOMALI MINISTRIE'S OF PLANNING AND HEALTH





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## INTRODUCTION AND CONSENT

Hello. My name is $\qquad$ . I am working with [NAME OF ORGANIZATION]. We are conducting a survey about health and related topics all over [NAME OF COUNTRY]. The information we collect will help the government to plan health and other services. Your household was selected for the survey. I would like to ask you some questions about your household. The questions usually take about 15 to 20 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. your participation in the survey is voluntary, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the ministry of interior/planning and/or health.

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER $\qquad$ DATE $\qquad$

## RESPONDENT AGREES

TO BE INTERVIEWED . . 1

## RESPONDENT DOES NOT AGREE

 TO BE INTERVIEWED . . $2 \longrightarrow$ END

|  |  | DEMOGRAPHIC CHARACTERISTICS |  |  |  |  |  |  |  | ELIGIBILITY |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  | IF AGE 12 OR OLDER | IF AGE 12 \& EVER MARRIED |  |  |  |
| $\begin{aligned} & \text { LINE } \\ & \text { NO. } \end{aligned}$ | USUAL RESIDENTS | RELATIONSHIP <br> TO HEAD OF household |  | RESID | NCE | AGE | YEAR OF BIRTF | MARITAL STATUS | AGE AT FIRST MARRIAGE |  | Eligibility |  |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 B | 10 | 11 | 12 |
|  | Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. <br> AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK QUESTIONS 2A-2B to be sure that the LISTING IS COMPLETE. <br> THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-32 FOR EACH PERSON. | What is the relationship of (NAME) to the head of the household? | Is <br> (NAME) male or female? | Does <br> (NAME) <br> usually <br> live <br> here? | Did <br> (NAME) <br> stay <br> here <br> last <br> night? | How old is (NAME) in completed years? <br> IF 95 OR MORE, RECORD '95'. | What is (NAME's) year of birth? | What is (NAME)'s current marital status? <br> 1 = MARRIED <br> 2 = DIVORCED <br> 3 = ABANDO- <br> NED <br> 4 = WIDOWED <br> 5 = NEVER- | How old was (NAME) when he/she got married for the first time? <br> RECORD AGE IN YEARS <br> IF 95 <br> OR MORE, RECORD '95'. | CIRCLE <br> LINE <br> NUMBER <br> OF ALL <br> EVER <br> MARRIED <br> WOMEN <br> AGE <br> 12-49 | CIRCLE <br> LINE <br> NUMBER <br> OF ALL <br> NEVER <br> MARRIED <br> WOMEN <br> AGE <br> 15-49 | CIRCLE <br> LINE <br> NUMBER <br> OF ALL <br> CHILDREI <br> AGE 0-5 |
| 01 |  |  | $\begin{array}{cc} M & F \\ 1 & 2 \end{array}$ | $\begin{array}{ll} Y & N \\ 1 & 2 \end{array}$ | $\begin{array}{ll} Y & N \\ 1 & 2 \end{array}$ | IN YEARS |  |  | IN YEARS | 01 | 01 | 01 |
| 02 |  |  | 12 | 12 | 12 | $\square$ |  |  |  | 02 | 02 | 02 |
| 03 |  | $1$ | 12 | 12 | 12 | $1$ |  |  |  | 03 | 03 | 03 |
| 04 |  | $1$ | 12 | 12 | 12 | $1$ |  |  |  | 04 | 04 | 04 |
| 05 |  |  | 12 | 12 | 12 |  |  | $\square$ |  | 05 | 05 | 05 |
| 06 |  | $\square$ | 12 | 12 | 12 |  |  |  |  | 06 | 06 | 06 |
| 07 |  | $1$ | 12 | 12 | 12 | $\square$ |  |  |  | 07 | 07 | 07 |
| 08 |  | $1$ | 12 | 12 | 12 | $7$ |  | $\square$ |  | 08 | 08 | 08 |
| 09 |  |  | 12 | 12 | 12 |  |  |  |  | 09 | 09 | 09 |
| 10 |  | $\square$ | 12 | 12 | 12 |  |     |  |  | 10 | 10 | 10 |


$\square$

| 01 = HEAD OF HOUSE NO | 08 = BROTHER OR SISTER |
| :---: | :---: |
| $02=$ SPOUSE | 09 = NEPHEW/NIECE |
| 03 = SON OR DAUGHTER | $10=$ BROTHER/SISTER-IN-LAV |
| $04=$ SON-IN-LAW OR NO DAUGHTER-IN-LAW | $\begin{aligned} & 11=\text { OTHER RELATIVE } \\ & 12=\text { ADOPTED/FOSTER/ } \end{aligned}$ |
| $05=$ GRANDCHILD | STEPCHILD |
| $06=$ PARENT | 13 = NOT RELATED |
| $07=$ PARENT-IN-LAW | 8 = DON'T KNOW |

HOUSEHOLD SCHEDULE

|  | ORPHANHOOD |  |  |  | EdUCATION CHARACTERISTICS |  |  |  | LABOUR FORCE |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | IF AGE 0-17 YEARS |  |  |  | IF AGE 6 YEARS OR OLDER |  | IF AGE 6-24 YEARS |  | IF AGE 10 YEARS OR OLDER |
| $\begin{array}{\|l\|l\|} \hline \text { LINE } \\ \text { NO. } \end{array}$ | SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS |  |  |  | EVER ATTENDEDSCHOOL |  | CURRENT/RECENT SCHOOL ATTENDANCE |  | ABOUR FORCE PARTICIPATION |
|  | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
|  | Is (NAME)'s biological mother alive? | Does <br> (NAME)'s natural mother usually live in this household? <br> IF YES: What is her name? <br> RECORD <br> MOTHER'S LINE NUMBER. <br> IF NO, RECORD '00'. | Is (NAME)'s biological father alive? | Does <br> (NAME)'s <br> biological <br> father <br> usually live <br> in this <br> household? <br> IF YES: <br> What is his name? <br> RECORD <br> FATHER'S <br> LINE <br> NUMBER. <br> IF NO, <br> RECORD <br> '00'. | Has (NAME) ever attended school? | What is the highest level of school (NAME) has attended? <br> What is the highest grade (NAME) completed at that level? | Did (NAME) attend school at any time during the [20172018] school year? | During [this/that] school year, what level and grade [is/was] (NAME) attending? | What has (NAME) mostly been doing in the last 12 months? <br> 1= WORKING (INCLUDING HOUSE WIVES HAVING ACTIVITY) <br> 2 = NOT WORKING BUT LOOKING FOR WORK 3 = HOUSEWIFE NOT WORKING <br> 4 = STUDENT <br> 5 = RETIRED <br> 6 = DISABLED <br> 7 = OTHER NOT WORKING |
| 01 | $\left\lvert\, \begin{array}{ccc} Y & N & D K \\ 1 & 2 \\ & \downarrow \\ \text { GO TO } & 15 \end{array}\right.$ | $1$ | $\left\lvert\, \begin{array}{cc} Y & \text { N DK } \\ 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } 17 \end{array}\right.$ | $\square$ | $\left\lvert\, \begin{array}{ccc} Y & N & \text { JK } \\ 1 & 2 \nabla^{8} \\ & \downarrow^{2} \\ \text { GO TO } & 21 \end{array}\right.$ | $\begin{aligned} & \text { LEVEL GRADE } \\ & \begin{array}{\|} \square \\ \hline & \\ \hline \end{array} \end{aligned}$ | $\left\lvert\, \begin{array}{cc} \text { Y } & \mathrm{N} \\ 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } & 21 \end{array}\right.$ |  |  |
| 02 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \end{array}\right.$ |  |  |  |  | $\square$ |  | $\square \square$ |  |
| 03 | $\begin{array}{cc} \begin{array}{ll} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}{ }^{2} \end{array}$ | $\qquad$ |  | $1$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } 21 \end{array}\right.$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } & 21 \end{array}\right.$ | $\square$ |  |
| 04 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}\right.$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } \nabla_{17}^{8} \end{array}\right.$ | $1$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}\right.$ |  | $\begin{array}{cc} \begin{array}{c} 1 \\ \text { GO TO } \\ \text { G } \end{array} \downarrow^{8} \end{array}$ |  |  |
| 05 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } \\ & \nabla^{8} \end{array}\right.$ | $1$ | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \\ 17 \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \\ 21 \end{array}\right.$ |  | $\begin{array}{cc} \begin{array}{cc} 2 & \nabla^{8} \\ \text { GO TO } & 21 \end{array}{ }^{2} \end{array}$ | $\square$ |  |
| 06 | $\begin{array}{cc} \begin{array}{ll} 1 & 2 \\ \text { GO TO } \\ & { }^{8} \end{array}{ }^{8} \end{array}$ |  | $\begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } 17 \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } 21 \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } & 21 \end{array}$ |  |  |
| 07 | $\begin{array}{cc} \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \end{array}{ }^{8} \\ \hline \end{array}$ | $1$ |  | $1$ | $\begin{array}{cc} \begin{array}{ll} 2 & 2 \\ \nabla^{2} \\ \text { GO TO } & 21 \end{array} \end{array}$ | $\square$ | $\begin{array}{cc} \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}{ }^{2} \end{array}$ | $\square$ |  |
| 08 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}$ | $1$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } 21 \end{array}\right.$ |  | $\begin{array}{cc} \begin{array}{cc} 2 & \downarrow^{8} \\ \text { GO TO } & 21 \end{array}{ }^{2} \end{array}$ | $\square$ |  |
| 09 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } \nabla^{8} \end{array}\right.$ |  |  |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } 21 \end{array}$ |  |  |
| 10 | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } \\ \\ 15 \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \\ 17 \end{array}$ | $\square$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ & \downarrow^{8} \\ \text { GO TO } 21 \end{array}\right.$ |  $\square$ |  |  |  |

HOUSEHOLD SCHEDULE


|  | ORPHANHOOD |  |  |  | EdUCATION CHARACTERISTICS |  |  |  | LABOUR FORCE |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | IF AGE 0-17 YEARS |  |  |  | IF AGE 6 | EARS OR OLDER | IF AG | 6-24 YEARS | IF AGE 10 YEARS OR OLDER |
| $\begin{array}{\|l\|l\|} \hline \text { LINE } \\ \text { NO. } \end{array}$ | SURVIVORSHIP AND RESIDENCE OF BIoLogical parents |  |  |  | EVER ATTENDEDSCHOOL |  | CURRENT/RECENT SCHOOL ATTENDANCE |  | LABOUR FORCE PARTICIPATION |
|  | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
|  | Is (NAME)'s biological mother alive? | Does (NAME)'s natural mother usually live in this household? <br> IF YES: <br> What is her name? <br> RECORD <br> MOTHER'S LINE NUMBER. <br> IF NO, RECORD '00'. | Is <br> (NAME)'s biological father alive? | Does <br> (NAME)'s <br> biological <br> father <br> usually live <br> in this <br> household? <br> IF YES: <br> What is his name? <br> RECORD <br> FATHER'S <br> LINE <br> NUMBER. <br> IF NO, <br> RECORD <br> '00'. | Has (NAME) ever attended school? | What is the highest level of school (NAME) has attended? <br> What is the highest grade (NAME) completed at that level? | Did (NAME) attend school at any time during the [20172018] school year? | During [this/that] school year, what level and grade [is/was] (NAME) attending? BELOW. | What has (NAME) mostly been doing in the last 12 months? <br> 1= WORKING (INCLUDING HOUSE WIVES HAVING ACTIVITY) <br> 2 = NOT WORKING BUT LOOKING FOR WORK 3 = HOUSEWIFE NOT WORKING <br> 4 = STUDENT <br> 5 = RETIRED <br> 6 = DISABLED <br> 7 = OTHER NOT WORKING |
| 11 | $\begin{array}{cc} \text { Y } & \text { N DK } \\ 1 & 2 \\ 1 & \nabla^{8} \\ \text { GO TO } & 15 \end{array}$ |  | $\begin{array}{ccc} \text { Y } & \text { N JK } \\ 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}$ | $\pm$ | $\left\lvert\, \begin{array}{cc} Y & \\ 1 & \\ 1 & 2 \\ \text { GO TO } & \nabla^{8} \\ \text { GO } \end{array}\right.$ |  | $\begin{array}{cr} \text { Y } & \text { N } \\ 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } & 21 \end{array}$ |  |  |
| 12 | $\left\lvert\, \begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } 15 \end{array}\right.$ | $\square$ | $\begin{array}{cc} 1 & 2 \\ & \nabla^{8} \\ \text { GO TO } 17 \end{array}$ | $\square$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } 21 \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}$ |  | $\square$ |
| 13 | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } \nabla^{8} \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2{ }^{2} \downarrow^{8} \\ \text { GO TO } 17 \end{array}\right.$ | $\square$ | $\begin{array}{cc} 1 & 2{ }^{1} \downarrow^{8} \\ \text { GO TO } & 21 \end{array}$ |  | $\begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } & 21 \end{array}$ |  |  |
| 14 | $\begin{array}{cc} \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array} \\ \hline \end{array}$ | $1$ | $\begin{array}{ccc} \begin{array}{lll} 2 & 2 \\ \text { GO TO } & { }^{8} \end{array}{ }^{8} \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow 1 \end{array}{ }^{8}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}$ |  | $\square$ |
| 15 | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } \nabla^{8} \end{array}$ |  | $\begin{array}{cc} 1 & 2 \nabla^{8} \\ \text { GO TO } & { }^{2} \end{array}$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}$ | $\square$ |  |
| 16 |  |  |  |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & { }^{2} \end{array}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \end{array}$ |  |  |
| 17 | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \\ 15 \end{array}$ | $\square$ | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow_{17}^{8} \end{array}\right.$ | $1$ |  |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \end{array}$ |  |  |
| 18 | $\begin{array}{cc} \begin{array}{c} 1 \\ \text { º TO } \\ \text { GO } \end{array} \downarrow^{8} \\ \hline \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow_{17}^{8} \end{array}\right.$ | $1$ | $\mid c c_{1}{ }^{2} \downarrow^{8}$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}$ | $1$ | $\bigcirc$ |
| 19 | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \nabla^{8} \\ 15 \end{array}$ |  | $\left\lvert\, \begin{array}{cc} 1 & 2 \\ \text { GO TO } & { }_{17}^{8} \end{array}\right.$ | $1$ | $\left\lvert\, c c_{\begin{array}{ll} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}}\right.$ |  | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array}$ | $1$ |  |
| 20 |  | $\square$ | $\begin{array}{ccc} \begin{array}{cc} 2 & 2 \\ \text { GO TO } & \downarrow^{8} \end{array} \\ \hline \end{array}$ |  |  | $\square$ | $\begin{array}{cc} 1 & 2 \\ \text { GO TO } & \downarrow \end{array}$ | $\square$ | $\square$ |

CODES FOR Qs. 18 AND 20: EDUCATION
$\begin{array}{ll}\text { LEVEL } & \text { GRADE } \\ 0=\text { PRESCHOOL } & 00=\text { LESS THAN } 1 \text { YEAR COMPLETED } \\ 1=\text { PRIMARY } & \text { (USE 'O0' FOR Q. } 18 \text { ONLY. } \\ 2=\text { SECONDARY } & \text { THIS CODE IS NOT ALLOWED } \\ 3 & =\text { HIGHER }\end{array} \quad$ FOR Q. 20.$)$.

HOUSEHOLD SCHEDULE

|  | $\begin{aligned} & \text { REGISTRATION } \\ & \text { OF BIRTHS } \end{aligned}$ | CHRONIC DISEASES |  |  |  | SOCIAL HABITS |  | DISABILITY |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\begin{aligned} & \text { IF AGE 0-4 } \\ & \text { YEARS } \end{aligned}$ |  |  |  |  | IF AGE 10 OLD | EARS OR <br> R |  |  |  |  |
| $\begin{array}{\|l\|l\|} \hline \text { LINE } \\ \text { NO. } \end{array}$ | BIRTH <br> REGISTRATION |  |  |  |  |  |  |  |  |  |  |
|  | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 |
|  | Does (NAME) have a birth certificate? <br> IF NO, PROBE: Has (NAME)'s birth ever been registered with the civil authority? <br> 1 = HAS CERTIFICATE <br> 2 = REGISTERED <br> 3 = NEITHER <br> 8 = DON'T KNOW | I would now like to ask you some questions about the health of all family members. Does (NAME) suffer from any chronic disease? | What are the diseases suffered by (NAME)? <br> SEE CODES BELOW. | Has any physician informed (NAME) that (s)he suffers from this disease? | Does (NAME) get treatment regularly for this condition? | Does (NAME) smoke cigarettes, or any kind of tobacco? | Does (NAME) currently chew qat/khat? | Does (NAME) face any of the following limitations? $\begin{aligned} & \text { A= SIGHT? } \\ & \text { B= HEARING? } \\ & \text { C= SPEECH } \\ & \text { D= LEARNING } \\ & \text { E= MOBILITY } \\ & \text { F = SELF-CARE? } \\ & \text { G= MENTAL? } \\ & \text { H= NONE } \end{aligned}$ | What is the main reason for (NAME's) disability? | How old was (NAME) when this condition started? <br> IF 95 <br> OR MORE, RECORD '95'. | During the last 12 months did (NAME) get any of the following forms of support? <br> A= MEDICAL CARE <br> $\mathrm{B}=\mathrm{WELFARE}$ <br> C= FINANCIAL <br> D= NUTRITIONAL <br> Y= NO SUPPORT |
| 11 |  | $\begin{array}{llr} Y & N & \text { DK } \\ 1 & 2 & \nabla \\ & 8 \\ & \text { GO } & \text { TO } \end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | $\begin{aligned} & \mathrm{Y} N \mathrm{NDK} \\ & 1288 \end{aligned}$ | $\begin{array}{\|lll} \mathrm{Y} & \mathrm{~N} & \mathrm{DK} \\ 1 & 2 & 8 \end{array}$ | $\begin{aligned} & \text { Y N DK } \\ & 128 \end{aligned}$ | $\begin{array}{lll} \mathrm{Y} & \mathrm{~N} & \mathrm{DK} \\ 1 & 2 & 8 \end{array}$ | $$ |  | IN YEARS $\square$ | $$ |
| 12 | $\pm$ |  | $\begin{array}{llllll} A & B & C & D & E & F \\ \hline & G \\ H & I & J & K & L & M \\ O & P & Q & R & S & N \end{array}$ | 128 | 128 | 128 | 128 |  |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 13 | $\square$ | $\begin{array}{lll}1 & 2 \rrbracket & 8 \\ & \text { GO TO } 27\end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | 128 | 128 | 128 | 128 |  |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 14 |  | $\begin{array}{ll} 1 & 2 \mp \\ & \text { GO TO } 27 \end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | 128 | 128 | 128 | 128 | A B C D E F G $\downarrow$ GO TO 101 |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 15 |  | $\begin{array}{\|ccc} 1 & 2 \\ & \text { GO TO } 27 \end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | 128 | 128 | 128 | 128 | A B C D E F G $\downarrow$ GO TO 101 |  |  | $A B C D$ |
| 16 | $\pm$ |  | $\begin{array}{llllll} A & B & C & \text { E F G } \\ \text { H } & 1 & J & K & L & M \\ O & P & Q & R & S T \end{array}$ | 128 | 128 | 128 | 128 | $\begin{array}{\|r\|r\|} \text { A B C D E F G } \\ \downarrow \\ \\ \text { GO TO } 101 \end{array}$ |  | $\pm$ | $A \quad B \quad C \quad D \quad Y$ |
| 17 | $\square$ | $\begin{array}{lll}1 & 2 \\ & \downarrow & 8 \\ \text { GO TO } 27\end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | 128 | 128 | 128 | 128 | A B C D E F G $\downarrow$ GO TO 101 |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 18 |  |  |  | 128 | 128 | 128 | 128 | A B C D E F G $\begin{array}{r}\text { H } \\ \downarrow \\ \\ \\ \text { GO TO } 101\end{array}$ |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 19 | $\square$ | $\begin{array}{lll}1 & 2 \\ & \downarrow & 8 \\ \text { GO TO } 27\end{array}$ | $\begin{array}{lllllll} A & B & C & D & E & F & G \\ H & 1 & J & K & L & M & N \\ O & P & Q & R & S & T \end{array}$ | 128 | 128 | 128 | 128 | A B C D E F G $\underset{\downarrow}{\downarrow}$ |  |  | $A \quad B \quad C \quad D \quad Y$ |
| 20 |  | $\begin{array}{lll}1 & 2 \\ & \text { GO TO } 27\end{array}$ | $\begin{array}{lllllll} \text { A } & \text { B } & C & D & E & F & G \\ H & I & J & K & L & M & N \\ O & P & Q & R & S & T & Y \end{array}$ | 128 | 128 | 128 | 128 |  |  | $\square$ | $A \quad B \quad C \quad D \quad Y$ |

TICK HERE IF CONTINUATION SHEET USED $\square$

CODES FOR Q. 24: CHRONIC DISEASES
A=BLOOD PRESSURE G=KIDNEY DISEASE
B=DIABETES H=LIVER DISEASE
C=INFLAMMATION/ULC I=ARTHRITIS
D=ANEMIA J=TUBERCULOSIS (TB)
E=SICKLE CELL ANEMI. K=CHRONIC HEADACHE
THALASSEMIA L=STROKE
$\mathrm{F}=\mathrm{HEART}$ DISEASE $\mathrm{M}=$ EPILEPSY

N=PROSTATIC HYPERTROPHY O=CATARACT $P=$ CHRONIC BACK PAIN $/ Y=O T H E R$ SPINAL PROBLEM (SPECIFY) Q=MENTAL/PSYCHOLOGICAL ILLNESS

CODES FOR Q. 30: CAUSE OF DIABILITY
01=CONGENITAL 08=MAGIC
02=CONTAGIOUS 96=OTHER
$03=$ CHILD BIRTH CONDITION (SPECIFY)
04=OTHER DISEASE
05=ABUSE 98=DON'T KNOW
06=AGING
07=INJURY/ACCIDENT

OUT OF POCKET HOUSEHOLD HEALTH EXPENDITURE


OUT OF POCKET HOUSEHOLD HEALTH EXPENDITURE


HOUSEHOLD CHARACTERISTICS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 201 | What is the main source of drinking water for members of your household? |  | $\nrightarrow 206$ |
| 202 | What is the main source of water used by your household for other purposes such as cooking and handwashing? |  | $\longrightarrow 206$ |
| 203a | Where is the main source of water for drinking located? |  | $\rightarrow$ 204a |
| 203b | How long does it take to go there, get water, and come back in minutes? | MINUTES <br> DON'T KNOW |  |
| 204a | Where is the main source of water for other purposes located? |  | $\rightarrow 205$ |
| 204b | How long does it take to go there, get water, and come back in minutes? | MINUTES ........................   <br> DON'T KNOW ............................... 998   |  |

HOUSEHOLD CHARACTERISTICS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 204c | What means does your household mostly use to fetch water i.e. from source to home? |  |  |
| 205 | CHECK 201 : CODE '14' OR '21' CIRCLED? <br> YES | NO $\square$ | $\rightarrow 207$ |
| 206 | In the past two weeks, was the water from this source not available for at least one full day? |  |  |
| 207 | Do you do anything to the water to make it safer to drink? |  | $\xrightarrow{ } \rightarrow 209$ |
| 208 | What do you usually do to make the water safer to drink? <br> Anything else? <br> RECORD ALL MENTIONED. |  |  |
| 209 | What kind of toilet facility do members of your household usually use? <br> IF NOT POSSIBLE TO DETERMINE, ASK PERMISSION TO OBSERVE THE FACILITY. |  | $\rightarrow 214$ |
| 210 | Do you share this toilet facility with other households? |  | $\longrightarrow 212$ |
| 211 | Including your own household, how many households use this toilet facility? |  |  |
| 212 | Where is this toilet facility located? | IN OWN DWELLING IN OWN YARD/PLOT ELSEWHERE |  |



HOUSEHOLD CHARACTERISTICS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
| 223 | Does any member of this household own any agricultural land? | YES <br> NO | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \ldots \ldots \ldots \ldots & 2 \end{array}$ | $\rightarrow 225$ |
| 224 | How many hectares of agricultural land do members of this household own? <br> IF 95 OR MORE, CIRCLE '950'. |  |   <br>   <br>   <br>   <br>  $\cdot$$\square$ |  |
| 225 | Does your household have: <br> a) A radio? <br> b) A television? <br> c) Non-mobile telephone? <br> d) A computer? <br> e) Internet connectivity? <br> f) A refrigerator? <br> g) Air conditioner/fan? | a) RADIO <br> b) TELEVISION <br> c) NON-MOBILE TELEPHONE <br> d) COMPUTER <br> e) INTERNET <br> f) REFRIGERATOR <br> g) AIR CONDITIONER/FA |  YES NO <br> .. 1 2 <br> .. 1 2 <br> .. 1 2 <br> .. 1 2 <br> .. 1 2 <br> . 1 2 <br> . 1 2 |  |
| 226 | Does any member of this household own: <br> a) A watch? <br> b) A mobile phone? <br> c) A bicycle? <br> d) A motorcycle or motor scooter? <br> e) Donkey cart? <br> f) A car or truck? <br> g) Boat/Canoe? <br> h) Tractor? <br> i) Rickshaw? <br> j) Animal plough? | a) WATCH <br> b) MOBILE PHONE <br> c) BICYCLE <br> d) MOTORCYCLE/SCOOTER <br> e) DONKEY CART <br> f) CAR/TRUCK <br> g) BOAT/CANOE <br> h) TRACTOR <br> i) RICKSHAW <br> j) ANIMAL PLOUGH |  YES NO <br> $\ldots$ 1 2 <br> $\ldots$ 1 2 <br> $\ldots$ 1 2 <br> .. 1 2 <br> $\ldots$ 1 2 <br> $\ldots$ 1 2 <br> . 1 2 <br> $\ldots$ 1 2 <br> $\ldots$ 1 2 <br> $\ldots$ 1 2 |  |
| 227 | Does any member of this household have a bank account? | YES NO | $\begin{array}{ll} \ldots \ldots \ldots . . & 1 \\ \ldots \ldots \ldots . . & 2 \end{array}$ |  |

ADDITIONAL HOUSEHOLD CHARACTERISTICS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 228 | We would like to learn about the places that households use to wash their hands. Can you please show me where members of your household most often wash their hands? |  | $\rightarrow 231$ |
| 229 | OBSERVE PRESENCE OF WATER AT THE PLACE FOR HANDWASHING. <br> RECORD OBSERVATION. | $\begin{array}{llll}\text { WATER IS AVAILABLE } & \text {..................... . } & 1 \\ \text { WATER IS NOT AVAILABLE . . . . . . . . . . . . . } & 2\end{array}$ |  |
| 230 | OBSERVE PRESENCE OF SOAP, DETERGENT, OR OTHER CLEANSING AGENT AT THE PLACE FOR HANDWASHING. <br> RECORD OBSERVATION. | SOAP OR DETERGENT <br> (BAR, LIQUID, POWDER, PASTE) ........ A <br> ASH, MUD, SAND ............................... B <br> NONE |  |
| 231 | OBSERVE MAIN MATERIAL OF THE FLOOR OF THE DWELLING. <br> RECORD OBSERVATION. |  |  |
| 232 | OBSERVE MAIN MATERIAL OF THE ROOF OF THE DWELLING. <br> RECORD OBSERVATION. |  |  |

ADDITIONAL HOUSEHOLD CHARACTERISTICS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 233 | OBSERVE MAIN MATERIAL OF THE EXTERIOR WALLS OF THE DWELLING. <br> RECORD OBSERVATION. |  |  |
| 234 | In the past four weeks, did you worry that your household would not have enough food? |  | $\rightarrow 236$ |
| 235 | How often did this happen? | $\begin{array}{lll} \text { RARELY (ONCE OR TWICE IN } 4 \text { WKS) . . .... } & 1 \\ \text { SOMETIMES (THREE TO TEN TIMES IN4 WKS) } & 2 \\ \text { OFTEN (MORE THAN TEN TIMES IN } 4 \text { WKS) .. } & 3 \end{array}$ |  |
| 236 | In the past four weeks, did you or any household member have to eat a smaller meal than you felt you needed because there was not enough food? |  | $\rightarrow 238$ |
| 237 | How often did this happen? | $\begin{array}{lll} \text { RARELY (ONCE OR TWICE IN } 4 \text { WKS) . . .... } & 1 \\ \text { SOMETIMES (THREE TO TEN TIMES IN4 WKS) } & 2 \\ \text { OFTEN (MORE THAN TEN TIMES IN } 4 \text { WKS) .. } & 3 \end{array}$ |  |
| 238 | In the past four weeks, did you or any other household member have to eat fewer meals in a day because there was not enough food? |  | $\rightarrow 240$ |
| 239 | How often did this happen? | RARELY (ONCE OR TWICE IN 4 WKS) ....... 1  <br> SOMETIMES (THREE TO TEN TIMES IN4 WKS) 2  <br> OFTEN (MORE THAN TEN TIMES IN 4 WKS) .. 3 |  |
| 240 | In the last four weeks, were there cases where you did not have any kind of food to eat because of the lack of resources? |  | $\rightarrow 242$ |
| 241 | How often did this happen? | $\begin{array}{lll} \text { RARELY (ONCE OR TWICE IN } 4 \text { WKS) . . . . . . } & 1 \\ \text { SOMETIMES (THREE TO TEN TIMES IN4 WKS) } & 2 \\ \text { OFTEN (MORE THAN TEN TIMES IN } 4 \text { WKS) .. } & 3 \end{array}$ |  |
| 242 | In the last four weeks, were there cases where you or a family member went to bed hungry because there was not enough food or there was nothing to eat? |  | $\longrightarrow 244$ |
| 243 | How often did this happen? | $\begin{array}{lll} \hline \text { RARELY (ONCE OR TWICE IN } 4 \text { WKS) . . .... } & 1 \\ \text { SOMETIMES (THREE TO TEN TIMES IN4 WKS) } & 2 \\ \text { OFTEN (MORE THAN TEN TIMES IN } 4 \text { WKS) .. } & 3 \end{array}$ |  |
| 244 | In the last four weeks, were there cases where you or anyone from your family spent the whole day without eating because there was not enough food? |  | $\rightarrow 301$ |
| 245 | How often did this happen? | $\begin{array}{lll} \text { RARELY (ONCE OR TWICE IN } 4 \text { WKS) . . ..... } & 1 \\ \text { SOMETIMES (THREE TO TEN TIMES IN4 WKS) } & 2 \\ \text { OFTEN (MORE THAN TEN TIMES IN } 4 \text { WKS) . . } & 3 \end{array}$ |  |
| 246 | RECORD THE END TIME. | HOURS <br> MINUTES |  |


| 301 | CHECK COLUMN 1 IN HOUSEHOLD QUESTIONNAIRE. RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN 0-5 YEARS IN QUESTION 302; IF MORE THAN SIX CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S). |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | CHILD 1 |  | CHILD 2 |  | CHILD 3 |  |
| 302 | CHECK HOUSEHOLD <br> QUESTIONNAIRE: <br> LINE NUMBER FROM COLUMN 1. | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  |


| 303 | IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM BIRTH HISTORY. IF MOTHER NOT INTERVIEWED ASK: <br> What is (NAME)'s date of birth? |  |     <br> DAY $\ldots . . . .$.    <br>     <br> MONTH $\ldots . .$.    <br> YEAR ....    |  |
| :---: | :---: | :---: | :---: | :---: |
| 304 | CHECK 303: CHILD BORN IN 20142019? | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\ldots \ldots \ldots \ldots \ldots$ 2  <br>     <br>   $($ SKIP TO 311$)$  | YES $\ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots$. 2 <br>   $($ SKIP TO 311$)$ | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\ldots \ldots \ldots \ldots \ldots$ 2  <br>   $($ SKIP TO 311$)$  |
| 305 | WEIGHT IN KILOGRAMS. | KG. $\square$ <br> NOT PRESENT 9994 REFUSED $\qquad$ .9995 OTHER $\qquad$ .9996 | KG. $\square$ <br> NOT PRESENT $\qquad$ 9994 R .9995 OTHER .9996 | NOT PRESENT 9994 REFUSED . 9995 OTHER <br> .9996 |
| 306 | HEIGHT IN CENTIMETERS. |  |  |  |
| 307 | MEASURED LYING DOWN OR STANDING UP? | LYING DOWN $\ldots . .$. 1 <br> STANDING UP $\ldots . .$. 2 | LYING DOWN $\ldots . .$. 1 <br> STANDING UP $\ldots . .$. 2 | LYING DOWN $\ldots . .$. 1 <br> STANDING UP $\ldots . .$. 2 |
| 308 | MEASURER: ENTER YOUR FIELDWORKER NUMBER. |  |  |  |


| 301 | CHECK COLUMN 1 IN HOUSEHOLD QUESTIONNAIRE. RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN 0-5 YEARS IN QUESTION 302; IF MORE THAN SIX CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S). |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | CHILD 1 |  | CHILD 2 |  | CHILD 3 |  |
| 302 | CHECK HOUSEHOLD QUESTIONNAIRE: <br> LINE NUMBER FROM COLUMN 1. | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  |


| 309 | CHECK 303: CHILD AGE 0-5 MONTHS, I.E., WAS CHILD BORN IN MONTH OF INTERVIEW OR 5 PREVIOUS MONTHS? | 0-5 MONTHS $\ldots \ldots .{ }^{1}$ (SKIP TO 311) OLDER $\ldots \ldots . \ldots . .2$ |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 310 | LINE NUMBER OF PARENT/OTHER ADULT RESPONSIBLE FOR THE CHILD FROM COLUMN 1 OF HOUSEHOLD SCHEDULE. | LINE NUMBER $\square$ (RECORD '00' IF NOT LISTED) | LINE NUMBER (RECORD '00' IF NOT LISTED) | LINE NUMBER $\square$ (RECORD '00' IF NOT LISTED) |
| 311 | GO BACK TO 303 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF AN ADDITIONAL QUESTIONNAIRE; IF NO MORE CHILDREN, GO TO 401. |  |  |  |

WEIGHT AND HEIGHT FOR CHILDREN AGE 0-5

|  |  | CHILD 4 |  | CHILD 5 |  | CHILD 6 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 302 | CHECK HOUSEHOLD QUESTIONNAIRE: <br> LINE NUMBER FROM COLUMN 11. | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  | LINE NUMBER <br> NAME |  |


| 303 | IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM BIRTH HISTORY. IF MOTHER NOT INTERVIEWED ASK: <br> What is (NAME)'s date of birth? |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 304 | CHECK 303: CHILD BORN IN 20142019? | $\begin{array}{lll}\text { YES } & \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots & 2 \\ & & (\text { SKIP TO 311) }\end{array}$ | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\ldots \ldots \ldots \ldots \ldots$ 2  <br>   $($ SKIP TO 311$)$  | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\ldots \ldots \ldots \ldots \ldots$ 2  <br>   $($ SKIP TO 311)  |
| 305 | WEIGHT IN KILOGRAMS. | KG. <br> NOT PRESENT $\qquad$ 9994 <br> REFUSED . ........ 9995 <br> OTHER <br> .9996 | KG. $\square$ <br> NOT PRESENT $\qquad$ 9994 REFUSED $\qquad$ 9995 OTHER $\qquad$ 9996 | KG. $\square$ NOT PRESENT $\qquad$ 9994 R $\qquad$ 9995 OTHER $\qquad$ .9996 |
| 306 | HEIGHT IN CENTIMETERS. |  |  |  |
| 307 | MEASURED LYING DOWN OR STANDING UP? | $\begin{array}{llll}\text { LYING DOWN } & \ldots . . . & 1 \\ \text { STANDING UP } & \ldots . . . & 2\end{array}$ | $\begin{array}{lll}\text { LYING DOWN } & \ldots . . . & 1 \\ \text { STANDING UP } & \ldots . . . & 2\end{array}$ | $\begin{array}{llll}\text { LYING DOWN } & \ldots . . . & 1 \\ \text { STANDING UP } & \ldots . . . . & 2\end{array}$ |
| 308 | MEASURER: ENTER YOUR FIELDWORKER NUMBER. |  |  |  |



| 309 | CHECK 303: CHILD AGE 0-5 MONTHS, I.E., WAS CHILD BORN IN MONTH OF INTERVIEW OR 5 PREVIOUS MONTHS? | 0-5 MONTHS ....... 1(SKIP TO 311) <br> OLDER $\quad \ldots . . . . . . .$. |  | 0-5 MONTHS $\ldots \ldots . .1$(SKIP TO 311) <br> OLDER $\quad \ldots . . . . . . . .2$ |
| :---: | :---: | :---: | :---: | :---: |
| 310 | LINE NUMBER OF PARENT/OTHER ADULT RESPONSIBLE FOR THE CHILD FROM COLUMN 1 OF HOUSEHOLD SCHEDULE. | LINE NUMBER (RECORD '00' IF NOT LISTED) | LINE NUMBER (RECORD '00' IF NOT LISTED) | LINE NUMBER (RECORD '00' IF NOT LISTED) |
| 311 | GO BACK TO 303 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF AN ADDITIONAL QUESTIONNAIRE; IF NO MORE CHILDREN, GO TO 401. |  |  |  |

WEIGHT, HEIGHT MEASUREMENT FOR WOMEN AGE 12-49

| 401 | CHECK COLUMN 10 \& 11 IN ROSTER. RECORD THE LINE NUMBER, NAME AND MARITAL STATUS FOR ALL ELIGIBLE WOMEN IN 402 AND 403. <br> IF THERE ARE MORE THAN THREE WOMEN, USE ADDITIONAL QUESTIONNAIRE(S). |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  | WOMAN 1 | WOMAN 2 | WOMAN 3 |
| 402 | CHECK HOUSEHOLD QUESTIONNAIRE: <br> LINE NUMBER FROM COLUMN 1. <br> NAME FROM COLUMN 2. | LINE NUMBER $\qquad$ $\square$ <br> NAME $\qquad$ | LINE NUMBER $\qquad$ $\square$ <br> NAME $\qquad$ | LINE NUMBER $\qquad$ $\square$ <br> NAME |
| 403 | CHECK <br> HOUSEHOLD QUESTIONNAIRE COLUMN 9 (MARITAL STATUS): | CODE 5 (NEVER IN UNION). 1 OTHER MARITAL STATL... 2 | CODE 5 (NEVER IN UNION). 1 OTHER MARITAL STATL... 2 | CODE 5 (NEVER IN UNION). 1 OTHER MARITAL STATL . . . 2 |


| 404 | WEIGHT IN KILOGRAMS. |  | KG. $\square$ $\square$ <br> NOT PRESENT 99994 REFUSED $\qquad$ 99995 OTHER 99996 | KG. $\square$ $\square$ <br> NOT PRESENT <br> REFUSED $\qquad$ 99995 <br> OTHER <br> 99996 |
| :---: | :---: | :---: | :---: | :---: |
| 405 | HEIGHT IN CENTIMETERS. |  |  |  |
| 406 | CHECK 403: MARITAL STATUS | $\begin{aligned} & \text { CODE } 5 \text { (NEVER IN UNION). }{ }^{1} \\ & \text { (NEXT COLUMN) } \\ & \text { OTHER ................... } \end{aligned}$ | $\begin{aligned} & \text { CODE } 5\left(\text { (NEVER IN UNION). }{ }^{1}\right. \\ & \text { (NEXT COLUMN) } \\ & \text { OTHER } \ldots \ldots \ldots . . . . . . . . . \end{aligned}$ |  |
| 407A | ASK: <br> Are you pregnant? |  |  |  |

GO BACK TO 402 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF AN ADDITIONAL QUESTIONNAIRE;

## Ever-married Woman's Questionnaire



EVER MARRIED WOMAN'S QUESTIONNAIRE


SOMALI HEALTH \&
DEMOGRAPHIC SURVEY
2018-2019

QUESTIONNAIRE SERIAL NUMBER


EVER MARRIED WOMAN'S QUESTIONNAIRE



SECTION 1. RESPONDENT'S BACKGROUND

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
| 109 | CHECK 108: | OR '5' <br> RCLED |  | $\longrightarrow 111$ |
| 110 | Do you read a newspaper or magazine at least once a week, less than once a week or not at all? | AT LEAST ONCE A WEEK LESS THAN ONCE A WEEK NOT AT ALL | 1 2 3 |  |
| 111 | Do you listen to the radio at least once a week, less than once a week or not at all? | at least once a week LESS THAN ONCE A WEEK NOT AT ALL | 1 2 3 |  |
| 112 | Do you watch television at least once a week, less than once a week or not at all? | AT LEAST ONCE A WEEK LESS THAN ONCE A WEEK NOT AT ALL | 1 2 3 |  |
| 113 | Do you own a mobile telephone? | YES <br> NO |  | $\rightarrow 115$ |
| 114 | Do you use your mobile phone for any financial transactions? | YES <br> NO | 1 2 |  |
| 115 | Do you have an account in a bank or other financial institution that you yourself use? | YES <br> NO | 1 2 |  |
| 116 | Have you ever used the internet? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ |  | $\rightarrow 119$ |
| 117 | In the last 12 months, have you used the internet? <br> IF NECESSARY, PROBE FOR USE FROM ANY LOCATION, WITH ANY DEVICE. | YES <br> NO |  | $\rightarrow 119$ |
| 118 | During the last one month, how often did you use the internet: almost every day, at least once a week, less than once a week, or not at all? | ALMOST EVERY DAY AT LEAST ONCE A WEEK LESS THAN ONCE A WEEK NOT AT ALL | 1 2 3 4 |  |
| 119 | Are you currently married? | YES NO |  | $\longrightarrow 121$ |
| 120 | What is your marital status now: are you widowed or divorced? | WIDOWED DIVORCED |  |  |
| 121 | Have you been married only once or more than once? | ONLY ONCE MORE THAN ONCE |  |  |
| 122 | CHECK 121: <br> a) In what month and year ${ }^{\text {b }}$ ) Now I would like to ask were you legally about your first married husband. In what (Nikaax/contract)? month and year were you legally married to him (Nikaax/contract)? | MONTH <br> DON'T KNOW MONTH <br> YEAR $\qquad$ $\square$ <br> DON'T KNOW YEAR |  |  |
| 123 | How old were you when you got legally married to your (first) husband (Nikaax)? | AGE |  |  |

SECTION 1. RESPONDENT'S BACKGROUND


| SECTION 2. REPRODUCTION |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 201 | Now I would like to ask about all the births you have had during your life. Have you been pregnant? |  | $\longrightarrow 239$ |
| 202 | Do you have any sons or daughters to whom you have given birth who are now living with you? |  | $\rightarrow 204$ |
| 203 | a) How many sons live with you? <br> b) And how many daughters live with you? <br> IF NONE, RECORD '00'. | a) SONS AT HOME <br> b) DAUGHTERS AT HOME |  |
| 204 | Do you have any sons or daughters to whom you have given birth who are alive but do not live with you? |  | $\rightarrow 206$ |
| 205 | a) How many sons are alive but do not live with you? <br> b) And how many daughters are alive but do not live with you? <br> IF NONE, RECORD '00'. | a) SONS ELSEWHERE <br> b) DAUGHTERS ELSEWHERE |  |
| 206 | Have you ever given birth to a boy or girl who was born alive but later died? <br> IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life but did not survive? |  | $\rightarrow 208$ |
| 207 | a) How many boys have died? <br> b) And how many girls have died? <br> IF NONE, RECORD '00'. | a) BOYS DEAD <br> b) GIRLS DEAD |  |
| 208 | SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL. IF NONE, RECORD '00'. | TOTAL BIRTHS . ................ $\square$ |  |
| 209 | CHECK 208: <br> Just to make sure that I have this right: you have had in | TAL $\qquad$ births during your life. Is that correct? |  |
| 210 | CHECK 208: <br> ONE OR MORE BIRTHS | THS $\square$ | $\rightarrow 226$ |

SECTION 2. REPRODUCTION



SECTION 2. REPRODUCTION

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 222 | Have you had any live births since the birth of (NAME OF LAST BIRTH)? |  |  |
| 223 | COMPARE 208 WITH NUMBER OF BIRTHS IN BIRTH <br> NUMBERS <br> ARE SAME | TORY |  |
| 224 | CHECK 215: ENTER THE NUMBER OF BIRTHS IN 2014-2019 | NUMBER OF BIRTHS $\square$ <br> NONE | $\rightarrow 226$ |
| 225 | FOR EACH BIRTH IN 2014-2019, ENTER 'B' THE NAME OF THE CHILD TO THE LEFT O OF COMPLETED MONTHS THE PREGNAN PRECEDING MONTHS ACCORDING TO TH OF 'P's MUST BE ONE LESS THAN THE NU | THE MONTH OF BIRTH IN THE CALENDAR. WRITE HE 'B' CODE. FOR EACH BIRTH, ASK THE NUMBER LASTED AND RECORD 'P' IN EACH OF THE URATION OF PREGNANCY. (NOTE: THE NUMBER ER OF MONTHS THAT THE PREGNANCY LASTED.) |  |
| 226 | Are you pregnant now? |  | $\xrightarrow{\longrightarrow} 230$ |
| 227 | How many months pregnant are you? <br> PROBE: WHAT WAS YOUR LAST MENSTRUAL PERI <br> RECORD NUMBER OF COMPLETED MONTHS. ENTER 'P's IN THE CALENDAR, BEGINNING WITH THE MONTH OF INTERVIEW AND FOR THE TOTAL NUMBER OF COMPLETED MONTHS. | MONTHS $\qquad$ |  |
| 228 | When you got pregnant, were you expecting to get pregnant at that time? |  | $\longrightarrow 230$ |
| 229 | CHECK 208: TOTAL NUMBER OF BIRTHS <br> ONE OR MORE $\square$ <br> a) Did you want to have a baby later on or did you want more children? <br> NONE <br> b) Did you want to have a baby later on? | LATER $\ldots$. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . $\quad 1$ NO MORE/NONE . . . . . . . . . . . . |  |
| 230 | Have you ever had a pregnancy that miscarried or ended in a stillbirth? |  | $\longrightarrow 239$ |
| 231 | When did the last such pregnancy end? |  |  |



| SECTION 2. REPRODUCTION |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 239 | When did your last menstrual period start? <br> (DATE, IF GIVEN) <br> CIRCLE DAYS AGO AND PUT 00 IF STARTED the same day |  |  |
| 240 | How old were you when you had your first menstrual period? | AGE IN YEARS $\square$ |  |
| 241 | From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant? |  | ${ }^{243}$ |
| 242 | Is this time just before her period begins, right after her period has ended, or halfway between two periods? | JUST BEFORE HER PERIOD BEGIN . . . . . . . . . . . <br> RIGHT AFTER HER PERIOD HAS ENDE ....... 2 <br> HALFWAY BETWEEN TWO PERIODS ....... 3 <br> OTHER $\qquad$ 6 <br> (SPECIFY) <br> DON'T KNOW $\qquad$ 8 |  |
| 243 | After the birth of a child, can a woman become pregnant before her menstrual period has returned? |  |  |

SECTION 3. BIRTH SPACING

| 301 | Now I would like to talk about birth spacing - the various ways or methods that a couple can use to delay or avoid a pregnancy. Have you ever heard of (METHOD)? |  |
| :---: | :---: | :---: |
| 01 | IUD. <br> PROBE: Women can have a loop or coil placed inside them by a doctor or a nurse which can prevent pregnancy for one or more |  |
| 02 | Injectables. <br> PROBE: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months. |  |
| 03 | Implants. <br> PROBE: Women can have one or more small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for one or more years. |  |
| 04 | Pill. <br> PROBE: Women can take a pill every day to avoid becoming pregnant. |  |
| 05 | Condom. <br> PROBE: Men can put a rubber sheath on their penis before sexual intercourse. |  |
| 06 | Female Condom. <br> PROBE: Women can place a sheath in their vagina before sexual intercourse. |  |
| 07 | Emergency Contraception. <br> PROBE: As an emergency measure, within three days after they have unprotected sexual intercourse, women can take special pills to prevent pregnancy. |  |
| 08 | Standard Days Method. <br> PROBE: A woman uses a string of colored beads to know the days she can get pregnant. On the days she can get pregnant, she uses a condom or does not have sexual intercourse. |  |
| 09 | Lactational Amenorrhea Method (LAM). <br> PROBE: Up to six months after childbirth, before the menstrual period has returned, women use a method requiring frequent breastfeeding day and night. |  |
| 10 | Rhythm Method. <br> PROBE: To avoid pregnancy, women do not have sexual intercourse on the days of the month they think they can get pregnant. |  |
| 11 | Withdrawal. <br> PROBE: Men can be careful and pull out before climax. |  |
| 12 | Have you heard of any other ways or methods that women or men can use to avoid pregnancy? | YES, MODERN METHOD $\qquad$ A <br> (SPECIFY) <br> YES, TRADITIONAL METHOD $\qquad$ B <br> (SPECIFY) <br> NO $\qquad$ |


| SECTION 3. BIRTH SPACING |  |  |  |
| :---: | :---: | :---: | :---: |
| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 302 | CHECK 226: <br> NOT PREGNANT OR UNSURE | PREGNANT $\square$ | $\rightarrow 312$ |
| 303 | Are you or your husband currently doing something or using any method to delay or avoid getting pregnant? |  | ${ }_{312}$ |
| 304 | Which method are you using? <br> RECORD ALL MENTIONED. <br> IF MORE THAN ONE METHOD MENTIONED, FOLLOW SKIP INSTRUCTION FOR HIGHEST METHOD IN LIST. |  |  |
| 305 | What is the brand name of the pills you are using? <br> IF DON'T KNOW THE BRAND, ASK TO SEE THE PACKAGE. |  | $\rightarrow^{+}$ |
| 306 | What is the brand name of the condoms you are using? <br> IF DON'T KNOW THE BRAND, ASK TO SEE THE PACKAGE. |  |  |
| 307 | Since what month and year have you been using (CURRENT METHOD) without stopping? <br> PROBE: For how long have you been using (CURRENT METHOD) now without stopping? |  |  |
| 308 | CHECK 307, 215 AND 231: ANY BIRTH OR PREGNAN START OF USE OF CONTRACEPTION IN 307 <br> GO BACK TO 307 START OF CONTIN AFTER | TERMINATION AFTER MONTH AND YEAR OF <br> YES $\square$ <br> OBE AND RECORD MONTH AND YEAR AT US USE OF CURRENT METHOD (MUST BE T BIRTH OR PREGNANCY TERMINATION). |  |

SECTION 3. BIRTH SPACING (PAPER OPTION)

| 309 | YEAR IS 2014-2019 $\square$ <br> ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND IN EACH MONTH BACK TO THE DATE STARTED USING. <br> THEN CONTINUE <br> YEAR IS 2013 OR EARLIER $\square$ <br> ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND EACH MONTH BACK TO JANUARY 2014 . <br> (SKIP TO 324) |
| :---: | :---: |
| 310 | I would like to ask you some questions about the times you or your husband may have used a method to avoid getting pregnant during the last few years. <br> USE CALENDAR TO PROBE FOR EARLIER PERIODS OF USE AND NONUSE, STARTING WITH MOST RECENT USE, BACK TO JANUARY 2014. USE NAMES OF CHILDREN, DATES OF BIRTH, AND PERIODS OF PREGNANCY AS REFERENCE POINTS. <br> IN COLUMN 1, ENTER METHOD USE CODE OR '0' FOR NONUSE IN EACH BLANK MONTH. <br> ILLUSTRATIVE QUESTIONS: <br> a) When was the last time you used a method? Which method was that? <br> b) When did you start using that method? How long after the birth of (NAME)? <br> c) How long did you use the method then? <br> IN COLUMN 2, ENTER CODES FOR DISCONTINUATION NEXT TO THE LAST MONTH OF USE. NUMBER OF CODES IN COLUMN 2 MUST BE SAME AS NUMBER OF INTERRUPTIONS OF METHOD USE IN COLUMN 1. <br> ASK WHY SHE STOPPED USING THE METHOD. IF A PREGNANCY FOLLOWED, ASK WHETHER SHE BECAME PREGNANT UNINTENTIONALLY WHILE USING THE METHOD OR DELIBERATELY STOPPED TO GET PREGNANT. <br> ILLUSTRATIVE QUESTIONS: <br> d) Why did you stop using the (METHOD)? Did you become pregnant while using (METHOD), or did you stop to get pregnant, or did you stop for some other reason? <br> e) IF DELIBERATELY STOPPED TO BECOME PREGNANT, ASK: How many months did it take you to get pregnant after you stopped using (METHOD)? AND ENTER '0' IN EACH SUCH MONTH IN COLUMN 1. |

SECTION 3. BIRTH SPACING (CAPI OPTION)

| 309 | CHECK 307: <br> YEAR ENTER CODE FOR INTERVIEW IN THE MONTH BACK TO TH | THOD USED IN M ENDAR AND IN DATE STARTED <br> EN CONTINUE | $\begin{aligned} & \text { TH OF } \\ & \text { H } \end{aligned}$ | ENT OF MO | DE FOR VIEW IN ACK TO (SKIP | METHOD USED HE CALENDAR NUARY 2014. $\begin{array}{r} \text { THEN } \\ \text { O 322) } \end{array}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 310 | I would like to ask you some questions about the times you or your husband may have used a method to avoid getting pregnant during the last few years. <br> USE CALENDAR TO PROBE FOR EARLIER PERIODS OF USE AND NONUSE, STARTING WITH MOST RECENT USE, BACK TO JANUARY 2014. USE NAMES OF CHILDREN, DATES OF BIRTH, AND PERIODS OF PREGNANCY AS REFERENCE POINTS. |  |  |  |  |  |  |
|  |  | COLUMN 1 |  | COLUMN 2 |  | COLUMN 3 |  |
| 310A | MONTH AND YEAR OF START OF INTERVAL OF USE OR NON-USE. |  |  | MONTH |  |  |  |
| 310B | Between (EVENT) in (MONTH/YEAR) and (EVENT) in (MONTH/YEAR), did you or your husband use any method of contraception? | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\cdots \ldots \ldots \ldots$ 2  <br>   $($ SKIP TO 3101$)$  |  | YES $\ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\ldots \ldots \ldots \ldots .$. 2  <br>   $($ SKIP TO 310I) $\longleftarrow$ |  | YES $\ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots$ 2 <br>  $($ SKIP TO 310 ) $\leftarrow$ |  |
| 310C | Which method was that? | METHOD CODE |  | METHOD CODE .. $\square$ |  | METHOD CODE |  |
| 310D | How many months after (EVENT) in (MONTH/YEAR) did you start to use (METHOD)? <br> CIRCLE '95' IF RESPONDENT GIVES THE DATE OF STARTING TO USE THE METHOD. |  |  |  |  |  |  |
| 310E | RECORD MONTH AND YEAR RESPONDENT STARTED USING METHOD. |  |  |  |  |  |  |
| 310F | For how many months did you use (METHOD)? <br> CIRCLE '95' IF <br> RESPONDENT GIVES THE <br> DATE OF TERMINATION OF USE. | MONTHS <br> (SKIP <br> DATE GIVEN |  | HS <br> (SKIP <br> GIVEN |  | MONTHS <br> (SKIP <br> DATE GIVEN |  |
| 310G | RECORD MONTH AND YEAR RESPONDENT STOPPED USING METHOD. |  |  |  |  |  |  |
| 310H | Why did you stop using (METHOD)? | REASON STOPPED |  | ON OPPED |  | REASON STOPPED |  |
| 3101 |  | GO BACK TO 31 COLUMN; OR, IF GAPS, GO TO 3 | NEXT ORE | ACK TO 310 MN; OR, IF GO TO 31 | $\begin{aligned} & \text { IEXT } \\ & \text { JRE } \end{aligned}$ | GO BACK TO 31 QUESTIONNAIR MORE GAPS, G |  |


| SECTION 3. BIRTH SPACING |  |  |  |
| :---: | :---: | :---: | :---: |
| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 311 | CHECK THE CALENDAR FOR USE OF ANY CONTRA <br> NO METHOD USED $\square$ | PTIVE METHOD IN ANY MONTH <br> ANY METHOD USED $\square$ | $\rightarrow 313$ |
| 312 | Have you ever used anything or tried in any way to delay or avoid getting pregnant? |  | $\rightarrow 322$ |
| 313 | CHECK 304: <br> CIRCLE METHOD CODE: <br> IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST. |  | $\begin{array}{\|c} \longrightarrow 322 \\ \\ \\ \longrightarrow 319 \end{array}$ |
| 314 | You first started using (CURRENT METHOD) in (DATE FROM 307). Where did you get it at that time? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. <br> (NAME OF PLACE) | PUBLIC SECTOR <br> GOVERNMENT HOSPITAL . . . . . . . . . . . . . . . . 11 <br> REFERRAL HEALTH CENTRE . . . . . . . . . . . . . . 12 <br> MCH/HC <br> PRIMARY HEALTH UNIT (PHL . . . . . . . . . . . . . . 14 <br> MOBILE CLINIC <br> COMMUNITY HEALTH WORKER . . . . . . . . . . 16 <br> OTHER PUBLIC SECTOR $\qquad$ <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/CLINIC/DOCTO . . . . . . . 21 <br> PHARMACY $\qquad$ 22 <br> OTHER PRIVATE MEDICAL SECTOR $\qquad$ <br> OTHER SOURCE <br> SHOP <br> FRIEND/RELATIVE $\qquad$ <br> OTHER $\qquad$ 96 |  |
| 315 | CHECK 304: <br> CIRCLE METHOD CODE: <br> IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST. |  |  |


| SECTION 3. BIRTH SPACING |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 316 | At that time, were you told about side effects or problems you might have with the method? |  |  |
| 317 | Were you told what to do if you experienced side effects or problems? |  |  |
| 318 | CHECK 316: | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ NO $\quad \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ $l$ | $\rightarrow 320$ |
| 319 | Were you ever told by a health worker about other methods of birth spacing that you could use? |  |  |
| 320 | CHECK 304: <br> CIRCLE METHOD CODE: <br> IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST. |  | $\xrightarrow{\leftrightarrow} 323$ |


| SECTION 3. BIRTH SPACING |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 321 | Where did you obtain (CURRENT METHOD) the last time? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. <br> (NAME OF PLACE) |  |  |
| 322 | Do you know of a place where you can obtain a method of birth spacing? |  |  |
| 323 | In the last 12 months, were you visited by a fieldworker? |  | $\rightarrow 325$ |
| 324 | Did the fieldworker talk to you about birth spacing? |  |  |
| 325 | CHECK 202: LIVING WITH CHILDREN <br> a) In the last 12 months, have you visited a health facility for care for yourself or your children? <br> b) In the last 12 months, have you visited a health facility for care for yourself? |  | $\rightarrow 401$ |
| 326 | Did any staff member at the health facility speak to you about birth spacing methods? |  |  |

SECTION 4. PREGNANCY AND POSTNATAL CARE

| 401 | $\begin{gathered} \text { NO BIRTHS IN [ } \\ 2014-2019 \end{gathered}$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 402 | CHECK 215. RECORD THE BIRTH HISTORY NUMBER IN 403 AND THE NAME AND SURVIVAL STATUS IN 404 FOR EACH BIRTH IN 2014-2019. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. IF THERE ARE MORE THAN 2 BIRTHS, USE LAST COLUMN OF ADDITIONAL QUESTIONNAIRE(S). <br> Now I would like to ask some questions about your children born in the last five years. (We will talk about each separately) |  |  |  |
| 403 | BIRTH HISTORY NUMBER FROM 212 IN BIRTH HISTORY. | LAST BIRTH   <br> BIRTH <br> HISTORY <br> NUMBER $\ldots \ldots . . .$.   | NEXT-TO-LAST <br> BIRTH <br> HISTORY <br> NUMBER |  |
| 404 | FROM 212 AND 216: |  | NAME $\qquad$ <br> LIVING $\square$ |  |
| 405 | When you got pregnant with (NAME), did you want to get pregnant at that time? | $\begin{array}{cc} \text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \end{array}$ | $\begin{gathered} \text { YES } \\ \\ \text { NO } \\ \end{gathered}$ | $\frac{1}{2}$ |
| 406 | CHECK 208: <br> ONLY ONE BIRTH OR MORE THAN ONE BIRTH <br> a) Did you want to have a baby later on? | LATER $\ldots \ldots \ldots \ldots \ldots \ldots$ NO MORE/NONE $\ldots \ldots \ldots$ (SKIP TO 408) (SO. | LATER NO MORE/NONE (SKIP T | 1 <br> 2 |
| 407 | How much longer did you want to wait? | MONTHS YEARS $\square$ DON'T KNOW <br> .998 | $\begin{array}{llll} \text { MONTHS } \ldots \ldots & 1 \\ \text { YEARS } & \ldots \ldots & & 1 \\ \text { DON'T KNOW } & \ldots . . \end{array}$ |  |
| 408 | Did you see anyone for antenatal care for this pregnancy? | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br>    <br>  (SKIP TO 414)  |  |  |
| 409 | Whom did you see? <br> Anyone else? <br> PROBE TO IDENTIFY EACH TYPE OF PERSON AND RECORD ALL MENTIONED. |  |  |  |

SECTION 4. PREGNANCY AND POSTNATAL CARE


SECTION 4. PREGNANCY AND POSTNATAL CARE


| NO. | QUESTIONS AND FILTERS | LAST BIRTH |  | NEXT-TO-LAST BIRTH |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | NAME |  | NAME |  |
| 435 | I would like to talk to you about checks on your health after delivery, for example, someone asking you questions about your health or examining you. Did anyone check on your health while you were still in the facility? | YES <br> NO <br> (SKIP |  |  |  |
| 436 | How long after delivery did the first check take place? <br> IF LESS THAN ONE HOUR RECORD '00'; IF LESS THAN ONE DAY, RECORD HOURS; <br> IF LESS THAN ONE WEEK, RECORD DAYS. |  |  |  |  |
| 437 | Who checked on your health at that time? <br> PROBE FOR MOST QUALIFIED PERSON. | HEALTH PERSONNEL DOCTOR $\qquad$ CLINICAL OFFICER NURSE/MIDWIFE AUXILIARY MIDWIFE OTHER PERSON TRADITIONAL BIRT ATTENDANT . COMMUNITY HEALTH WORKER <br> OTHER $\qquad$ | 11 <br> 12 <br> 13 <br> 14 <br> 21 <br> 22 <br> 96 |  |  |
| 438 | Now I would like to talk to you about checks on (NAME)'s health after delivery - for example, someone examining (NAME), checking the cord, or seeing if (NAME) is OK. Did anyone check on (NAME)'s health while you were still in the facility? |  |  |  |  |
| 439 | How long after delivery was (NAME)'s health first checked? <br> IF LESS THAN ONE HOUR RECORD '00'; IF LESS THAN ONE DAY, RECORD HOURS; <br> IF LESS THAN ONE WEEK, RECORD DAYS. | HOURS $\ldots$ $\ldots$ 1 <br> DAYS $\ldots$. $\ldots$ . 2 <br> WEEKS $\ldots .$. 3 $\|$ |  |  |  |
| 440 | Who checked on (NAME)'s health at that time? <br> PROBE FOR MOST QUALIFIED PERSON. | HEALTH PERSONNEL DOCTOR. CLINICAL OFFICER NURSE/MIDWIFE AUXILIARY MIDWIFE . <br> OTHER PERSON TRADITIONAL BIRTH ATTENDANT . COMMUNITY HEAL WORKER <br> OTHER $\qquad$ | 11 <br> 12 <br> 13 <br> 14 <br> 21 <br> 22 <br> 96 |  |  |

SECTION 4. PREGNANCY AND POSTNATAL CARE

| NO. | QUESTIONS AND FILTERS | LAST BIRTH | NEXT-TO-LAST BIRTH |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  | NAME | NAME |  |
| 441 | Now I want to talk to you about what happened after you left the facility. Did anyone check on your health after you left the facility? | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br>    <br>  (SKIP TO 445$)$  |  |  |
| 442 | How long after delivery did that check take place? <br> IF LESS THAN ONE HOUR RECORD '00'; IF LESS THAN ONE DAY, RECORD HOURS; <br> IF LESS THAN ONE WEEK, RECORD DAYS. | HOURS <br> DAYS <br> WEEKS $\square$ <br> DON'T KNOW |  |  |
| 443 | Who checked on your health at that time? <br> PROBE FOR MOST QUALIFIED PERSON. |  |  |  |
| 444 | Where did the check take place? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. <br> (NAME OF PLACE) | HOME $\qquad$ <br> OTHER HOME ............ 12 <br> PUBLIC SECTOR <br> GOVERNMENT HOSPITAL . . 21 <br> REFERRAL HEALTH CENTRE 22 <br> MCH/HC .................. 23 <br> PRIMARY HEALTH UNIT (PHI 24 <br> MOBILE CLINIC ............ 25 <br> OTHER PUBLIC SECTOR $\qquad$ 26 <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/ <br> CLINIC .............. 31 <br> OTHER PRIVATE <br> MEDICAL SECTOR $\qquad$ 36 <br> (SPECIFY) <br> OTHER $\qquad$ 96 <br> (SPECIFY) |  |  |
| 445 | I would like to talk to you about checks on (NAME)'s health after you left (FACILITY IN 430). Did any health care provider or a traditional birth attendant check on (NAME)'s health in the six weeks after you left (FACILITY IN 430)? |  |  |  |



SECTION 4. PREGNANCY AND POSTNATAL CARE


| NO. |  | LAST BIRTH | NEXT-TO-LAST BIRTH |
| :---: | :---: | :---: | :---: |
|  | QUESTIONS AND FILTERS | NAME | NAME |
| 454 | How many hours, days or weeks after the birth of (NAME) did the first check take place? <br> IF LESS THAN ONE HOUR RECORD '00'; IF LESS THAN ONE DAY, RECORD HOURS; <br> IF LESS THAN ONE WEEK, RECORD DAYS. |  |  |
| 455 | Who checked on (NAME)'s health at that time? <br> PROBE FOR MOST QUALIFIED PERSON |  |  |
| 456 | Where did this first check of (NAME) take place? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. | HOME $\qquad$ <br> OTHER HOME ............ 12 <br> PUBLIC SECTOR <br> GOVERNMENT HOSPITAL . . 21 <br> REFERRAL HEALTH CENTRE 22 <br> MCH/HC .................. 23 <br> PRIMARY HEALTH UNIT (PHL 24 <br> MOBILE CLINIC ............ 25 <br> OTHER PUBLIC SECTOR $\qquad$ 26 <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/ <br> CLINIC <br> OTHER PRIVATE <br> MEDICAL SECTOR $\qquad$ 36 <br> (SPECIFY) <br> OTHER $\qquad$ 96 |  |

SECTION 4. PREGNANCY AND POSTNATAL CARE


| No. | QUESTIONS AND FILTERS | LAST BIRTH | NEXT-TO-LAST BIRTH |
| :---: | :---: | :---: | :---: |
|  |  | Name | name |
| 466 | CHECK 404: IS CHILD LIVING? | $\stackrel{\text { LIVING }}{\square} \quad \begin{aligned} & \text { DEAD } \\ & \text { (SKIP TO 468) } \\ & \square\end{aligned}$ | $\stackrel{\text { LIVING }}{\square} \quad \begin{aligned} & \text { DEAD } \\ & \square\end{aligned}$ |
| 467 | Are you still breastfeeding (NAME)? | YES ….................... 12 NO NO |  |
| 468 | Did (NAME) drink anything from a bottle with a nipple yesterday or last night? |  |  |
| 469 |  | GO BACK TO 405 IN NEXT COLUMN: OR, IF NO MORE BIRTHS, GO TO 501A. | GO BACK TO 405 IN NEXT-TOLAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 501A. |

SECTION 5A. CHILD IMMUNIZATION (LAST BIRTH)

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 501A | CHECK 215 IN THE BIRTH HISTORY: ANY BIRTHS IN ONE OR MORE BIRTHS IN 2016-2019 $\square$ | 16-2019? <br> O BIRTHS IN 2016-2019 | $\rightarrow 601$ |
| 502A | RECORD THE NAME AND BIRTH HISTORY NUMBER <br> NAME OF LAST BIRTH | OM 212 OF THE LAST CHILD BORN IN 2016-2019. <br> BIRTH HISTORY NUMBER . $\qquad$ $\square$ |  |
| 503A | CHECK 216 FOR CHILD: <br> LIVING | DEAD | $\rightarrow$ 501B |
| 504A | Do you have a card or other document where (NAME)'s vaccinations are written down? | YES, HAS ONLY A CARD <br> YES, HAS ONLY AN OTHER DOCUMENT YES, HAS CARD AND OTHER DOCUMENT . NO, NO CARD AND NO OTHER DOCUMENT | $\begin{array}{\|l} \longrightarrow 507 \mathrm{~A} \\ \\ \hline 507 \mathrm{~A} \end{array}$ |
| 505A | Did you ever have a vaccination card for (NAME)? | YES NO |  |
| 506A | CHECK 504A: <br> CODE '2' CIRCLED | CODE '4' CIRCLED | $\rightarrow$ 511A |
| 507A | May I see the card or other document where (NAME)'s vaccinations are written down? | YES, ONLY CARD SEEN <br> YES, ONLY OTHER DOCUMENT SEEN YES, CARD AND OTHER DOCUMENT SEEN No CARD AND NO OTHER DOCUMENT SEEN . | $\longrightarrow 511 \mathrm{~A}$ |

SECTION 5A. CHILD IMMUNIZATION (LAST BIRTH)


SECTION 5A. CHILD IMMUNIZATION (LAST BIRTH)

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
|  | NAME OF LAST BIRTH | BIRTH HISTORY NUMBER |  |  |
| 511A | Did (NAME) ever receive any vaccinations to prevent (NAME) from getting diseases, including vaccinations received in campaigns or immunization days or child health days? | YES NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\xrightarrow{ } \rightarrow 520 \mathrm{~A}$ |
| 512A | Has (NAME) ever received a BCG vaccination against tuberculosis, that is, an injection in the arm or shoulder that usually causes a scar? | YES <br> NO <br> DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ |  |
| 513A | Has (NAME) ever received oral polio vaccine, that is, about two drops in the mouth to prevent polio or IPV, that is an injection on the arm to prevent polio? | YES <br> NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\rightarrow$ 516A |
| 514A | Did (NAME) receive the first oral polio or IPV vaccine in the first two weeks after birth or later? | FIRST TWO WEEKS LATER | $\begin{aligned} & 1 \\ & 2 \end{aligned}$ |  |
| 515A | How many times did (NAME) receive the oral polio or IPV vaccine? | NUMBER OF TIMES DON'T KNOW |  |  |
| 516A | Has (NAME) ever received a pentavalent vaccination, that is, an injection given in the thigh sometimes at the same time as polio drops? | YES <br> NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\rightarrow$ 518A |
| 517A | How many times did (NAME) receive the pentavalent vaccine? | NUMBER OF TIMES DON'T KNOW |  |  |



SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST BIRTH)

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 501B | CHECK 215 IN THE BIRTH HISTORY: ANY MORE BIR MORE BIRTHS IN 2016-2019 $\square$ NO | IN 2016-2019? <br> E BIRTHS IN 2016-2019 | $\longrightarrow 601$ |
| 502B | RECORD THE NAME AND BIRTH HISTORY NUMBER 2016-2019. <br> NAME OF NEXT-TO- <br> LAST BIRTH | OM 212 OF THE NEXT-TO-LAST CHILD BORN IN <br> BIRTH HISTORY NUMBER $\square$ $\square$ |  |
| 503B | CHECK 216 FOR CHILD: <br> LIVING | DEAD | 521B |
| 504B | Do you have a card or other document where (NAME)'s vaccinations are written down? | YES, HAS ONLY A CARD . .................... 1  <br> YES, HAS ONLY AN OTHER DOCUMENT $\ldots \ldots$ 2 <br> YES, HAS CARD AND OTHER DOCUMENT ..... 3  <br> NO, NO CARD AND NO OTHER DOCUMENT .. 4 | $\begin{aligned} & \longrightarrow 507 \mathrm{~B} \\ & \longrightarrow 507 \mathrm{~B} \end{aligned}$ |
| 505B | Did you ever have a vaccination card for (NAME)? |  |  |
| 506B | CHECK 504B: <br> CODE '2' CIRCLED | CODE '4' CIRCLED | 511B |
| 507B | May I see the card or other document where (NAME)'s vaccinations are written down? | YES, ONLY CARD SEEN ..................... 1  <br> YES, ONLY OTHER DOCUMENT SEEN ....... 2  <br> YES, CARD AND OTHER DOCUMENT SEEN .. 3 <br> NO CARD AND NO OTHER DOCUMENT SEEN .. 4  | $\rightarrow$ 511B |



SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST BIRTH)

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
|  | NAME OF NEXT-TO- <br> LAST BIRTH $\qquad$ | BIRTH HISTORY NUMBER |  |  |
| 511B | Did (NAME) ever receive any vaccinations to prevent (NAME) from getting diseases, including vaccinations received in campaigns or immunization days or child health days? | YES <br> NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\rightarrow$ 520B |
| 512B | Has (NAME) ever received a BCG vaccination against tuberculosis, that is, an injection in the arm or shoulder that usually causes a scar? | YES <br> NO DON'T KNOW | 1 2 8 |  |
| 513B | Has (NAME) ever received oral polio vaccine, that is, about two drops in the mouth to prevent polio or IPV, that is an injection on the arm to prevent polio?+B188 | YES <br> NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\xrightarrow{\rightarrow} 516 \mathrm{~B}$ |
| 514B | Did (NAME) receive the first oral polio or IPV vaccine in the first two weeks after birth or later? | FIRST TWO WEEKS LATER |  |  |
| 515B | How many times did (NAME) receive the oral polio or IPV vaccine? | NUMBER OF TIMES DON'T KNOW |  |  |
| 516B | Has (NAME) ever received a pentavalent vaccination, that is, an injection given in the thigh sometimes at the same time as polio drops? | YES <br> NO <br> DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ | $\xrightarrow{\rightarrow} 518 \mathrm{~B}$ |
| 517B | How many times did (NAME) receive the pentavalent vaccine? | NUMBER OF TIMES DON'T KNOW |  |  |


| No. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
|  | NAME OF NEXT-TO- <br> LAST BIRTH $\qquad$ | BIRTH HISTORY NUMBER |  |  |
| 518B | Has (NAME) ever received a measles vaccination, that is, an injection in the arm to prevent measles? | YES <br> No <br> DON'T KNOW | $\begin{array}{ll} \ldots \ldots \ldots \ldots & 1 \\ \cdots \cdots \cdots \cdots & 2 \\ \cdots \ldots \ldots \ldots & 8 \end{array}$ | $\rightarrow$ 520B |
| 519B | How many times did (NAME) receive the measles vaccine? | NUMBER OF TIMES DON'T KNOW |  |  |
| 520B | In the last 7 days was (NAME) given: <br> a) [LOCAL NAME FOR MULTIPLE MICRONUTRIENT POWDER/BUSCUIT]? <br> b) [LOCAL NAME FOR READY TO USE THERAPEUTIC FOOD SUCH AS PLUMPY'NUT]? <br> c) [LOCAL NAME FOR READY TO USE SUPPLEMENTAL FOOD SUCH AS PLUMPY'DOZ]? | a) [POWDER] <br> b) [PLUMPY'NUT] <br> c) [PLUMPY'DOZ] | YES NO DK <br> 1 2 8 <br>    <br> 1 2 8 <br>    <br>  2 8 |  |
| 521B | CHECK 215 IN BIRTH HISTORY: ANY MORE BIRTHS | 2016-2019? <br> NO MORE BIRTHS <br> IN 2016-2019 $\square$ |  | $\rightarrow 601$ |

SECTION 6. CHILD HEALTH AND NUTRITION

| 601 | CHECK 224: |  |  |
| :---: | :---: | :---: | :---: |
|  | ONE OR MORE BIRTHS <br> IN 2014-2019 |  |  |
| 602 | CHECK 215: RECORD THE BIRTH HISTORY NUMBER IN 603 AND THE NAME AND SURVIVAL STATUS IN 604 FOR EACH BIRTH IN 2014-2019. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. IF THERE ARE MORE THAN 2 BIRTHS, USE LAST COLUMN OF ADDITIONAL QUESTIONNAIRE(S). <br> Now I would like to ask some questions about your children born in the last five years. (We will talk about each separately) |  |  |
| 603 | BIRTH HISTORY NUMBER FROM 212 IN BIRTH HISTORY. | LAST BIRTH   <br> BIRTH <br> HISTORY <br> NUMBER $\ldots \ldots . . .$.    | NEXT-TO-LAST BIRTH <br> BIRTH <br> HISTORY <br> NUMBER |
| 604 | FROM 212 AND 216: | NAME | NAME $\qquad$ <br> LIVING <br> DEAD <br> (SKIP TO 646) $\square$ |
| 605 | In the last six months, was (NAME) given a vitamin A dose like [this/any of these]? <br> SHOW COMMON TYPES OF AMPULES/CAPSULES/SYRUPS. |  | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br> DON'T KNOW $\ldots \ldots \ldots \ldots \ldots$ 8 |
| 606 | In the last seven days, was (NAME) given iron pills, sprinkles with iron, or iron syrup like [this/any of these]? SHOW COMMON TYPES OF PILLS/SPRINKLES/SYRUPS. |  | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br> DON'T KNOW $\ldots \ldots \ldots \ldots \ldots$ 8 |
| 607 | Was (NAME) given any drug for intestinal worms in the last six months? | $\begin{array}{lclll}\text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 2 \\ \text { DON'T KNOW } & \ldots \ldots \ldots \ldots \ldots & 8\end{array}$ | YES $\quad \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1  <br> NO $\quad \ldots \ldots \ldots \ldots \ldots \ldots$ 2  <br> DON'T KNOW $\ldots \ldots \ldots \ldots$. 8 |
| 608 | Has (NAME) had diarrhea in the last 2 weeks? | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br> DON'T KNOW$($ SKIP TO 618) <br> D. <br> N.   |  |

SECTION 6. CHILD HEALTH AND NUTRITION

| NO. | QUESTIONS AND FILTERS | LAST BIRTH <br> NAME $\qquad$ | NEXT-TO-LAST BIRTH <br> NAME |
| :---: | :---: | :---: | :---: |
| 609 | CHECK 467: CURRENTLY BREASTFEEDING? |  |  |
| 610 | When (NAME) had diarrhea, was (NAME) given less than usual to eat, about the same amount, more than usual, or nothing to eat? <br> IF LESS, PROBE: Was (NAME) given much less than usual to eat or somewhat less? |  |  |
| 611 | Did you seek advice or treatment for the diarrhea from any source? | YES $\ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br>  (SKIP TO 615 )  | YES $\ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br>    <br>  (SKIP TO 615$)$  |

SECTION 6. CHILD HEALTH AND NUTRITION

| NO. | QUESTIONS AND FILTERS | LAST BIRTH <br> NAME | NEXT-TO-LAST BIRTH <br> NAME $\qquad$ |
| :---: | :---: | :---: | :---: |
| 612 | Where did you seek advice or treatment? Anywhere else? <br> PROBE TO IDENTIFY THE TYPE OF <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE(S). <br> (NAME OF PLACE(S)) | PUBLIC SECTOR <br> GOVERNMENT HOSPITAL.. A REFERRAL HEALTH CENTRE B MCH/HC PRIMARY HEALTH UNIT (PHI D MOBILE CLINIC E CHW $\qquad$ <br> OTHER PUBLIC SECTOR $\qquad$ <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/DOCTOR/ CLINIC <br> PHARMACY <br> OTHER PRIVATE <br> MEDICAL SECTOR <br> (SPECIFY) <br> OTHER SOURCE <br> SHOP .... <br> TRADITIONAL <br> PRACTITIONER....... . L <br> MARKET $\qquad$ M <br> ITINERANT DRUG SELLER $\qquad$ N <br> OTHER $\qquad$ X | PUBLIC SECTOR <br> GOVERNMENT HOSPITAL . . A REFERRAL HEALTH CENTRE B MCH/HC PRIMARY HEALTH UNIT (PHI D MOBILE CLINIC $\qquad$ E CHW $\qquad$ F <br> OTHER PUBLIC SECTOR $\qquad$ <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/DOCTOR/ CLINIC <br> PHARMACY <br> OTHER PRIVATE <br> MEDICAL SECTOR $\qquad$ <br> J <br> (SPECIFY) <br> OTHER SOURCE <br> SHOP .... <br> TRADITIONAL <br> PRACTITIONER....... L <br> MARKET $\qquad$ M <br> ITINERANT DRUG SELLER $\qquad$ N <br> OTHER $\qquad$ X (SPECIFY) |
| 613 | CHECK 612: |  |  |
| 614 | Where did you first seek advice or treatment? <br> USE LETTER CODE FROM 612. | FIRST PLACE $\quad . . . \ldots \ldots . \square$ | FIRST PLACE ......... |

SECTION 6. CHILD HEALTH AND NUTRITION

|  | QUESTIONS AND FILTERS | LAST BIRTH |  | NEXT-TO-LAST BIRTH |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NO. |  | NAmE |  | NAME |  |  |
| 615 | Was (NAME) given any of the following at any time since (NAME) started having the diarrhea: <br> a) A fluid made from a special packet called [LOCAL NAME FOR ORS PACKET]? <br> b) A pre-packaged ORS liquid? <br> c) A government-recommended homemade fluid? <br> d) Zinc tablets or syrup? | YES <br> a) FLUID FROM ORS PACKET .. 1 <br> b) ORS LIQUID .. 1 <br> c) HOMEMADE FLUID $\qquad$ <br> d) ZINC $\qquad$ | $\begin{array}{ll} \text { NO } & \text { DK } \\ & \\ 2 & 8 \\ 2 & 8 \\ 2 & 8 \\ 2 & 8 \end{array}$ | YES <br> a) FLUID FROM ORS PACKET .. 1 <br> b) ORS LIQUID .. 1 <br> c) HOMEMADE FLUID $\qquad$ <br> d) ZINC $\qquad$ | NO <br> 2 2 <br> 2 2 | DK <br> 8 <br> 8 <br> 8 8 |
| 616 | CHECK 615: | YES <br> NO <br> (SKIP T DON'T KNOW | $\begin{array}{ll} \ldots & 2 \\ 8) & 8 \\ \ldots & 8 \end{array}$ | YES <br> NO <br> (SKIP |  | $\begin{aligned} & 1 \\ & 2 \\ & \hline 8 \end{aligned}$ |
| 617 | CHECK 615: <br> RECORD ALL TREATMENTS GIVEN. | PILL OR SYRUP <br> ANTIBIOTIC ANTIMOTILITY OTHER (NOT ANTIB OR ANTIMOTILIT UNKNOWN PILL OR SYRUP <br> INJECTION ANTIBIOTIC NON-ANTIBIOTIC UNKNOWN INJECTION <br> (IV) INTRAVENOUS <br> HOME REMEDY/ <br> herbal medicine <br> OTHER | $\qquad$ | PILL OR SYRUP ANTIBIOTIC ANTIMOTILITY OTHER (NOT ANTIB OR ANTIMOTILIT UNKNOWN PILL OR SYRUP <br> INJECTION ANTIBIOTIC NON-ANTIBIOTIC UNKNOWN INJECTION <br> (IV) INTRAVENOUS <br> HOME REMEDY/ <br> herbal medicine. <br> OTHER $\qquad$ | IC | $\begin{gathered} \text { A } \\ \text { B } \\ \text { C } \\ \text { D } \\ \text { E } \\ \text { F } \\ \text { G } \\ \text { H } \\ \text { I } \end{gathered}$ |
| 618 | Has (NAME) been ill with a fever at any time in the last 2 weeks? | YES <br> NO <br> (SKIP DON'T KNOW | $\left.\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ 320) & \\ \ldots \ldots & 8 \end{array}\right]$ |  |  | $\begin{aligned} & 1 \\ & 2 \\ & \hline 8 \end{aligned}$ |
| 619 | At any time during the illness, did (NAME) have blood taken from (NAME)'s finger or heel for testing? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots & 1 \\ \ldots & 2 \\ \ldots & 8 \end{array}$ | YES <br> NO DON'T KNOW |  | 1 2 8 |
| 620 | Has (NAME) had an illness with a cough at any time in the last 2 weeks? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \cdots & 2 \\ \cdots & 8 \end{array}$ | YES <br> NO DON'T KNOW |  | 1 2 8 |
| 621 | Has (NAME) had fast, short, rapid breaths or difficulty breathing at any time in the last 2 weeks? | YES No <br> (SKIP T DON'T KNOW | $\left.\begin{array}{ll}\ldots . . & 1 \\ \ldots . . & 2 \\ \ldots . . & 8\end{array}\right]$ | YES <br> NO <br> (SKIP DON'T KNOW | $\text { 3) } \leftarrow$ | $\begin{aligned} & 1 \\ & 2 \\ & \hline 8 \end{aligned}$ |

SECTION 6. CHILD HEALTH AND NUTRITION

| NO. | QUESTIONS AND FILTERS | LAST BIRTH <br> NAME $\qquad$ | NEXT-TO-LAST BIRTH <br> NAME $\qquad$ |
| :---: | :---: | :---: | :---: |
| 622 | Was the fast or difficult breathing due to a problem in the chest or to a blocked or runny nose? |  |  |
| 623 | CHECK 618: HAD FEVER? | YES $\square$ $\square$ | YES $\square$ $\square$$\quad$ NO OR DK $\square$ |
| 624 | Did you seek advice or treatment for the illness from any source? | $\begin{array}{lll}\text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 2 \\ & (\text { SKIP TO } 629)\end{array}$ | $\begin{array}{lll}\text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 2 \\ & (\text { SKIP TO } 629) & \end{array}$ |
| 625 | Where did you seek advice or treatment? <br> Anywhere else? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE(S). <br> (NAME OF PLACE(S)) | PUBLIC SECTOR <br> GOVERNMENT HOSPITAL . A REFERRAL HEALTH CENTRE B MCH/HC ................ C PRIMARY HEALTH UNIT (PHI D MOBILE CLINIC $\qquad$ E <br> CHW $\qquad$ F <br> OTHER PUBLIC SECTOR $\qquad$ G <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/DOCTOR/ CLINIC $\qquad$ <br> PHARMACY $\qquad$ <br> OTHER PRIVATE <br> MEDICAL SECTOR $\qquad$ J <br> (SPECIFY) <br> OTHER SOURCE <br> SHOP <br> TRADITIONAL <br> PRACTITIONER....... L <br> MARKET $\qquad$ $M$ $N$ <br> OTHER $\qquad$ x | PUBLIC SECTOR <br> GOVERNMENT HOSPITAL. . A REFERRAL HEALTH CENTRE B MCH/HC ................. C PRIMARY HEALTH UNIT (PHI D MOBILE CLINIC $\qquad$ E <br> CHW $\qquad$ F <br> OTHER PUBLIC SECTOR $\qquad$ G <br> (SPECIFY) <br> PRIVATE MEDICAL SECTOR <br> PRIVATE HOSPITAL/DOCTOR/ <br> CLINIC .............. H <br> PHARMACY $\qquad$ <br> OTHER PRIVATE <br> MEDICAL SECTOR $\qquad$ J <br> (SPECIFY) <br> OTHER SOURCE <br> SHOP ................. K <br> TRADITIONAL <br> PRACTITIONER....... L <br> MARKET .................. M <br> KORAN ................. N <br> OTHER $\qquad$ x |
| 626 | CHECK 625: |  |  |

SECTION 6. CHILD HEALTH AND NUTRITION

| NO. | QUESTIONS AND FILTERS | LAST BIRTH <br> NAME | NEXT-TO-LAST BIRTH <br> NAME $\qquad$ |
| :---: | :---: | :---: | :---: |
| 632 | CHECK 630: <br> ARTEMISININ COMBINATION THERAPY ('A') GIVEN |  |  |
| 633 | How long after the fever started did (NAME) first take an artemisinin combination therapy? |  | SAME DAY <br> NEXT DAY <br> TWO DAYS AFTER <br> FEVER <br> THREE OR MORE DAYS <br> AFTER FEVER <br> DON'T KNOW |
| 634 | CHECK 630: <br> SP/FANSIDAR ('B') GIVEN |  |  |
| 635 | How long after the fever started did (NAME) first take SP/Fansidar? | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots \ldots$ 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots \ldots$ 3 <br> DON'T KNOW $\ldots \ldots . . . . .$. 8 | SAME DAY <br> NEXT DAY <br> TWO DAYS AFTER <br> FEVER <br> THREE OR MORE DAYS <br> AFTER FEVER <br> DON'T KNOW |
| 636 | CHECK 630: <br> CHLOROQUINE ('C') GIVEN |  |  |
| 637 | How long after the fever started did (NAME) first take chloroquine? | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots \ldots$ 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots \ldots$ 3 <br> DON'T KNOW $\ldots \ldots \ldots \ldots$. 8 | SAME DAY <br> NEXT DAY <br> TWO DAYS AFTER <br> FEVER <br> THREE OR MORE DAYS <br> AFTER FEVER DON'T KNOW |
| 638 | CHECK 630: <br> AMODIAQUINE ('D') GIVEN |  |  |
| 639 | How long after the fever started did (NAME) first take amodiaquine? | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$. 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots \ldots$ 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots \ldots$ 3 <br> DON'T KNOW $\ldots \ldots \ldots \ldots$. 8 | SAME DAY <br> NEXT DAY <br> TWO DAYS AFTER <br> FEVER <br> THREE OR MORE DAYS <br> AFTER FEVER DON'T KNOW |


| NO. | QUESTIONS AND FILTERS | LAST BIRTH <br> NAME $\qquad$ | NEXT-TO-LAST BIRTH <br> NAME $\qquad$ |
| :---: | :---: | :---: | :---: |
| 640 | CHECK 630: QUININE ('E' OR 'F') GIVEN |  |  |
| 641 | How long after the fever started did (NAME) first take quinine? | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots$. 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots$. 3 <br> DON'T KNOW $\ldots \ldots \ldots \ldots$. 8 | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots$. 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots$. 3 <br> DON'T KNOW $\ldots \ldots \ldots \ldots$. 8 |
| 642 | CHECK 630: <br> ARTESUNATE ('G' OR 'H') GIVEN |  |  |
| 643 | How long after the fever started did (NAME) first take artesunate? |  | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots \ldots$ 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots$. 3 <br> DON'T KNOW $\ldots \ldots \ldots .$. 8 |
| 644 | CHECK 630: <br> OTHER ANTIMALARIAL ('I') GIVEN |  |  |
| 645 | How long after the fever started did (NAME) first take (OTHER ANTIMALARIAL)? | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots$. 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots$. 3 <br> DON'T KNOW $\ldots \ldots \ldots .$. 8 | SAME DAY $\ldots \ldots \ldots \ldots \ldots$ 0 <br> NEXT DAY $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TWO DAYS AFTER  <br> FEVER $\ldots \ldots \ldots \ldots \ldots$ 2 <br> THREE OR MORE DAYS  <br> AFTER FEVER $\ldots \ldots \ldots$. 3 <br> DON'T KNOW $\ldots \ldots \ldots .$. 8 |
| 646 |  | GO BACK TO 604 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 647. | GO TO 604 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 647. |

SECTION 6. CHILD HEALTH AND NUTRITION

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 647 | CHECK 615(a) AND 615(b), ALL COLUMNS: <br> NO CHILD <br> RECEIVED FLUID $\square$ <br> FROM ORS PACKET OR <br> PRE-PACKAGED ORS LIQUID | ANY CHILD <br> RECEIVED FLUID $\square$ <br> FROM ORS PACKET OR <br> E-PACKAGED ORS LIQUID | $\rightarrow 649$ |
| 648 | Have you ever heard of a special product called [LOCAL NAME FOR ORS PACKET OR PREPACKAGED ORS LIQUID] you can get for the treatment of diarrhea? | YES NO NO. O......................... |  |
| 649 | CHECK 215 AND 218, ALL ROWS: NUMBER OF CHILDREN BORN IN 2017-2019 LIVING WITH THE RESPONDENT <br> ONE OR MORE $\square$ NONE $\square$ |  | $\rightarrow 701$ |

SECTION 6. CHILD HEALTH AND NUTRITION


SECTION 6. CHILD HEALTH AND NUTRITION

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 651 | CHECK 650 (CATEGORIES 'g' THROUGH 'v'): <br> ALL ARE "NO" $\square$ | St ONE 'YES' $\square$ | $\rightarrow 653$ |
| 652 | Did (NAME FROM 649) eat any solid, semi-solid, or soft foods yesterday during the day or at night? <br> IF 'YES' PROBE: What kind of solid, semi-solid or soft foods did (NAME) eat? |  | $\rightarrow 654$ |
| 653 | How many times did (NAME FROM 649) eat solid, semi-solid, or soft foods yesterday during the day or at night? <br> IF 7 OR MORE TIMES, RECORD ' 7 '. | NUMBER OF TIMES $\qquad$ $\square$ <br> DON'T KNOW $\qquad$ |  |
| 654 | The last time (NAME FROM 649) passed stools, what was done to dispose of the stools? |  |  |


| SECTION 7. FERTILITY PREFERENCES |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 701 | CHECK 226: <br> PREGNANT $\square$ | $\square$ OR UNSURE | $\rightarrow 703$ |
| 702 | Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children? | HAVE ANOTHER CHILD NO MORE UNDECIDED/DON'T KNOW | $\begin{aligned} & \longrightarrow 704 \\ & \longrightarrow 710 \end{aligned}$ |
| 703 | Now I have 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 NO MORE/NONE SAYS SHE CAN'T GET PREGNANT UNDECIDED/DON'T KNOW | $\begin{array}{\|l} \longrightarrow \\ \\ \hline \end{array} 711$ |
| 704 | CHECK 226: <br> NOT PREGNANT OR UNSURE <br> a) How long would you like to wait from now before the birth of (a/another) child? <br> PREGNANT $\square$ <br> b) After the birth of the child you are expecting now, how long would you like to wait before the birth of another child? |  |  |
| 705 | CHECK 226: <br> NOT PREGNANT OR UNSURE | PREGNANT | $\rightarrow 710$ |
| 706 | CHECK 303: USING A CONTRACEPTIVE METHOD? $\begin{array}{r} \text { NOT } \\ \text { CURRENTLY } \\ \text { USING } \downarrow \end{array}$ | CURRENTLY USING $\square$ | $\rightarrow 711$ |
| 707 | CHECK 704: | '00-23' MONTHS OR '00-01' YEAR $\square$ | $\rightarrow 711$ |

SECTION 7. FERTILITY PREFERENCES


## SECTION 7. FERTILITY PREFERENCES

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 713 | In the last three months have you: <br> a) Heard about birth spacing on the radio? <br> b) Seen anything about birth spacing on the television? <br> c) Read about birth spacing in a newspaper or magazine? <br> d) Received a voice or text message about birth spacing on a mobile phone? <br> e) Have you read about birth spacing on internet or social media? <br> f) Have you heard about birth spacing from a health care worker/in the health facility? |  |  |
| 714 | CHECK 303: USING A CONTRACEPTIVE METHOD? <br> CURRENTLY <br> USING <br> NOT <br> ASKED $\square$ | NOT <br> ENTLY $\square$ USING | $\begin{aligned} & \longrightarrow 716 \\ & \longrightarrow 717 \end{aligned}$ |
| 715 | Would you say that using contraception is mainly your decision, mainly your husband's decision, or did you both decide together? |  | $\rightarrow 717$ |
| 716 | Would you say that not using contraception is mainly your decision, mainly your husband's decision, or did you both decide together? | $\qquad$ |  |
| 717 | Does your husband want the same number of children that you want, or does he want more or fewer than you want? |  |  |

SECTION 8. HUSBAND'S BACKGROUND AND WOMAN'S WORK



SECTION 8. HUSBAND'S BACKGROUND AND WOMAN'S WORK

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 824 | When you are going out, who do you usually ask permission? |  |  |
| 825 | Do you own this or any other house either alone or jointly with someone else? |  | $\rightarrow 828$ |
| 826 | Do you have a title deed for any house you own? | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br> DON'TKNOW $\ldots \ldots$  | $\rightarrow 828$ |
| 827 | Is your name on the title deed? |  |  |
| 828 | Do you own any agricultural or non-agricultural land either alone or jointly with someone else? |  | $\longrightarrow 901$ |
| 829 | Do you have a title deed for any land you own? |  | $\xrightarrow{\rightarrow} 901$ |
| 830 | Is your name on the title deed? |  |  |


| SECTION 9. HIVIAIDS \& STIs |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| No. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| 901 | Now I would like to talk about something else. Have you ever heard of HIV or AIDS? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ | $\begin{array}{ll} \ldots & 1 \\ \ldots . & 2 \end{array}$ | $\rightarrow 918$ |
| 902 | HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected wives who has no other wives? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots & 8 \end{array}$ |  |
| 903 | Can people get HIV from mosquito bites? | YES <br> NO DON'T KNOW | $\begin{array}{cc} \\ \ldots \ldots \ldots & 1 \\ \ldots \ldots \ldots . & 2 \\ \ldots \ldots . & 8\end{array}$ |  |
| 904 | Can people reduce their chance of getting HIV by using a condom every time they have sex? | YES <br> NO DON'T KNOW | $\begin{array}{cc}\text {.... } & 1 \\ \ldots \ldots . & 2 \\ \cdots \cdots . & 8\end{array}$ |  |
| 905 | Can people get HIV by sharing food with a person who has HIV? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots & 8 \end{array}$ |  |
| 906 | Can people get HIV because of witchcraft or other supernatural means? | YES <br> NO <br> DON'T KNOW | $\begin{array}{ll}\text {..... } & 1 \\ \cdots \cdots . & 2 \\ \cdots \cdots . & 8\end{array}$ |  |
| 907 | Is it possible for a healthy-looking person to have HIV? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \\ \ldots \ldots . & 1 \\ \ldots \ldots . & 2 \\ \ldots \ldots & 8\end{array}$ |  |
| 908 | Can HIV be transmitted from a mother to her baby: <br> a) During pregnancy? <br> b) During delivery? <br> c) By breastfeeding? | YES <br> a) DURING PREGNANCY .. 1 <br> b) DURING DELIVERY..... 1 <br> c) BREASTFEEDING ..... 1 | NO DK <br> 2 8 <br> 2 8 <br> 2 8 |  |
| 909 | CHECK 908: <br> AT LEAST $\square$ ONE 'YES' | OTHER $\square$ |  | $\rightarrow 911$ |
| 910 | Are there any special drugs that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby? | YES NO DON'T KNOW | $\begin{array}{ll} \cdots \cdots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots & 8 \end{array}$ |  |
| 911 | Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? | YES <br> NO DON'T KNOW/NOT SURE/DEPENDS | $\begin{array}{ll} \cdots \cdots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots & 8 \end{array}$ |  |
| 912 | Do you think children living with HIV should be allowed to attend school with children who do not have HIV? | YES <br> NO <br> DON'T KNOW/NOT SURE/DEPENDS | $\begin{array}{ll} \ldots \cdots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots & 8 \end{array}$ |  |
| 913 | Do you think people hesitate to take an HIV test because they are afraid of how other people will react if the test result is positive for HIV? |  | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \cdots \cdots & 2 \\ \cdots \cdots \cdots & 8 \end{array}$ |  |
| 914 | Do people talk badly about people living with HIV, or who are thought to be living with HIV? | YES <br> NO <br> DON'T KNOW/NOT SURE/DEPENDS | $\begin{array}{ll} \ldots \ldots \cdots & 1 \\ \cdots \cdots \cdots & 2 \\ \cdots \cdots \cdots & 8 \end{array}$ |  |
| 915 | Do people living with HIV, or thought to be living with HIV, lose the respect of other people? | yes <br> NO DON'T KNOW/NOT SURE/DEPENDS | $\begin{array}{ll} \ldots \ldots \cdots & 1 \\ \cdots \cdots \cdots & 2 \\ \cdots \cdots \cdots & 8 \end{array}$ |  |
| 916 | Do you agree or disagree with the following statement: I would be ashamed if someone in my family had HIV. | AGREE <br> DISAGREE <br> DON'T KNOW/NOT SURE/DEPENDS | $\begin{array}{ll} \ldots \ldots \cdots & 1 \\ \cdots \cdots \cdots & 2 \\ \cdots \cdots \cdots & 8 \end{array}$ |  |


| SECTION 9. HIVIAIDS \& STIS |  |  |  |
| :---: | :---: | :---: | :---: |
| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 917 | Do you fear that you could get HIV if you come into contact with the saliva of a person living with HIV? |  |  |
| 918 | CHECK 901: <br> HEARD ABOUT HIV OR AIDS <br> a) Apart from HIV, have you heard about other infections that can be transmitted through sexual contact? <br> NOT HEARD ABOUT HIV OR AIDS $\square$ <br> b) Have you heard about infections that can be transmitted through sexual contact? |  |  |
| 919 | CHECK 918: HEARD ABOUT OTHER SEXUALLY TRAN <br> YES $\square$ | IITTED INFECTIONS? <br> NO $\square$ | $\rightarrow 926$ |
| 920 | Now I would like to ask you some questions about your health in the last 12 months. During the last 12 months, have you had a disease which you got through sexual contact? | YES $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 1 <br> NO $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 2 <br> DON'T KNOW $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$  |  |
| 921 | Sometimes women experience a bad-smelling abnormal genital discharge. During the last 12 months, have you had a bad-smelling abnormal genital discharge? |  |  |
| 922 | Sometimes women have a genital sore or ulcer. During the last 12 months, have you had a genital sore or ulcer? |  |  |
| 923 | CHECK 920, 921, AND 922: <br> HAS HAD AN INFECTION (ANY 'YES') | HAS NOT HAD AN $\square$ INFECTION OR DOES NOT KNOW | 926 |
| 924 | The last time you had (PROBLEM FROM 920/921/922), did you seek any kind of advice or | $\begin{array}{lll} \text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 2 \end{array}$ | $\longrightarrow 926$ |
| 925 | Where did you go? <br> Any other place? <br> PROBE TO IDENTIFY THE TYPE OF SOURCE. <br> IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. |  |  |
| 926 | If a wife knows her husband has a disease that she can get during sexual intercourse, is she justified in asking that they use a condom when they have sex? |  |  |

SECTION 10. OTHER HEALTH ISSUES

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
| 1001 | Now I would like to ask you some other questions relating to health matters. Have you had an injection for any reason in the last 12 months? <br> IF YES: How many injections have you had? <br> IF NUMBER OF INJECTIONS IS 90 OR MORE, OR DAILY FOR 3 MONTHS OR MORE, RECORD '90'. IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. | NUMBER OF INJECTIONS <br> NONE | 00 | $\rightarrow 1004$ |
| 1002 | Among these injections, how many were administered by a doctor, a nurse, a pharmacist, a dentist, or any other health worker? <br> IF NUMBER OF INJECTIONS IS 90 OR MORE, OR DAILY FOR 3 MONTHS OR MORE, RECORD '90'. IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. | NUMBER OF INJECTIONS <br> NONE | $\square$ <br> 00 | $\longrightarrow 1004$ |
| 1003 | The last time you got an injection from a health worker, did he/she take the syringe and needle from a new, unopened package? | YES <br> NO <br> DON'T KNOW | $\begin{array}{ll} \ldots . & 1 \\ \ldots . & 2 \\ \ldots . & 8 \end{array}$ |  |
| 1004 | Do you currently smoke cigarettes every day, some days, or not at all? | EVERY DAY <br> SOME DAYS <br> NOT AT ALL | $\begin{array}{ll} \ldots . & 1 \\ \ldots . & 2 \\ \ldots . & 3 \end{array}$ | $\rightarrow 1006$ |
| 1005 | On average, how many cigarettes do you currently smoke each day? | NUMBER OF CIGARETTES |  |  |
| 1006 | Do you currently smoke or use any other type of tobacco every day, some days, or not at all? | EVERY DAY <br> SOME DAYS <br> NOT AT ALL | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 3 \end{array}$ | $\longrightarrow 1008$ |
| 1007 | What other type of tobacco do you currently smoke or use? <br> RECORD ALL MENTIONED. | KRETEKS <br> PIPES FULL OF TOBACCO <br> CIGARS, CHEROOTS, OR CIGARILLOS <br> WATER PIPE <br> SNUFF BY MOUTH <br> SNUFF BY NOSE <br> CHEWING TOBACCO <br> BETEL QUID WITH TOBACCO <br> OTHER $\qquad$ |   <br> $\ldots \ldots$ $A$ <br> $\ldots \ldots$ $B$ <br> $\ldots \ldots$ $D$ <br> $\ldots \ldots$ $E$ <br> $\ldots \ldots$ $G$ <br> $\ldots \ldots$ $H$ <br>   |  |
| 1008 | Many different factors can prevent women from getting medical advice or treatment for themselves. When you are sick and want to get medical advice or treatment, is each of the following a big problem or not a big problem: <br> a) Getting permission to go to the doctor? <br> b) Getting money needed for advice or treatment? <br> c) The distance to the health facility? <br> d) Not wanting to go alone? | a) PERMISSION TO GO <br> ..... 1 <br> b) GETTING MONEY $\qquad$ <br> c) DISTANCE $\qquad$ <br> d) GO ALONE $\qquad$ | NOT A BIG PROBLEM <br> 2 <br> 2 <br> 2 <br> 2 |  |

SECTION 10. OTHER HEALTH ISSUES

| No. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 1009 | Are you covered by any health insurance? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ | $\rightarrow 1011$ |
| 1010 | What type of health insurance are you covered by? <br> RECORD ALL MENTIONED. | MUTUAL HEALTH ORGANIZATION/ COMMUNITY-BASED HEALTH INSURANCE <br> HEALTH INSURANCE THROUGH EMPLOYER SOCIAL SECURITY OTHER PRIVATELY PURCHASED COMMERCIAL HEALTH INSURANCE OTHER $\qquad$ |  |
| 1011 | FISTULA <br> Sometimes a woman can have a problem of constant leakage of urine or stool from her vagina during the day and night. This problem usually occurs after a difficult childbirth, but may also occur after a sexual assault or after pelvic surgery. <br> Have you ever experienced a constant leakage of urine or stool from your vagina during the day and night? | YES <br> NO | $\rightarrow 1013$ |
| 1012 | Have you ever heard of this problem? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ | $\xrightarrow{\rightarrow} 1101$ |
| 1013 | Did this problem start after you delivered a baby or had a stillbirth? | AFTER DELIVERED BABY AFTER HAD STILLBIRTH NEITHER | $\rightarrow 1016$ |
| 1014 | Did this problem start after a normal labor and delivery, or after a very difficult labor and delivery? | NORMAL LABOR/DELIVERY VERY DIFFICULT LABOR/DELIVERY |  |
| 1015 | How many days after delivery did the leakage start? <br> ENTER '90' IF 90 DAYS OR MORE. | NUMBER OF DAYS AFTER DELIVERY/OTHER EVENT . $\square$ |  |
| 1016 | Have you sought treatment for this condition? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ | $\rightarrow 1018$ |
| 1017 | Why have you not sought treatment? <br> PROBE AND RECORD ALL MENTIONED. | DO NOT KNOW CAN BE FIXED <br> DO NOT KNOW WHERE TO GO <br> TOO EXPENSIVE <br> TOO FAR <br> POOR QUALITY OF CARE <br> COULD NOT GET PERMISSION <br> EmbARRASSMENT <br> OTHER $\qquad$ <br> (SPECIFY) |  |
| 1018 | From whom did you last seek treatment? | HEALTH PROFESSIONAL <br> DOCTOR <br> CLINICAL OFFICER $\qquad$ <br> NURSE/MIDWIFE <br> OTHER PERSON <br> COMMUNITY/VILLAGE <br> HEALTH WORKER <br> HERBALIST <br> OTHER $\qquad$ |  |
| 1019 | Did you have an operation to fix the problem? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ |  |
| 1020 | Did the treatment stop the leakage completely? <br> IF NO: Did the treatment reduce the leakage? | YES, STOPPED COMPLETELY NOT STOPPED BUT REDUCED NOT STOPPED AT ALL DID NOT RECEIVE TREATMENT |  |

SECTION 11. FEMALE CIRCUMCISION

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 1101 | Now I would like to ask some questions about a practice known as female circumcision. Have you ever heard of female circumcision? |  | $\rightarrow 1103$ |
| 1102 | In some countries, there is a practice in which a girl may have part of her genitals cut. Have you ever heard about this practice? |  | $\rightarrow 1201$ |
| 1103 | Have you yourself ever been circumcised? |  | $\rightarrow 1109$ |
| 1104 | What type of circumcision did you undergo? |  |  |
| 1105 | Please describe what was exactly done <br> CIRCLE ONLY ONE OPTION <br> a) Excision of the clitoral hood (prepuce), with or without excision of part or all of the clitoris <br> b) Excision of the clitoris with partial or total excision of the labia minora <br> c) Excision of part or all of the external genitalia and stitching/ narrowing of the vaginal opening <br> d) All other procedures that involve pricking, piercing, stretching or incising of the clitoris and/or labia; introduction of corrosive substances into the vagina to narrow it |  |  |
| 1106 | How old were you when you were circumcised? <br> IF THE RESPONDENT DOES NOT KNOW THE EXACT AGE, PROBE TO GET AN ESTIMATE. |  |  |
| 1107 | Who performed the circumcision? |  |  |
| 1108 | CHECK 213, 215 AND 216: <br> HAS ONE OR MORE LIVING DAUGHTERS BORN IN 2007 OR LATER | AS NO LIVING DAUGHTERS $\square$ N IN 2007 OR LATER | $\rightarrow 1116$ |

SECTION 11. FEMALE CIRCUMCISION

| 1109 | CHECK 213, 215 AND 216: ENTER IN THE TABLE THE BIRTH HISTORY NUMBER AND NAME OF EACH LIVING DAUGHTER BORN IN 2007 OR LATER. ASK THE QUESTIONS ABOUT ALL OF THESE DAUGHTERS. BEGIN WITH THE YOUNGEST DAUGHTER. (IF THERE ARE MORE THAN 3 DAUGHTERS, USE ADDITIONAL QUESTIONNAIRES). <br> Now I would like to ask you some questions about your (daughter/daughters). |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1111 | BIRTH HISTORY NUMBER AND NAME OF EACH LIVING DAUGHTER BORN IN 2007 OR LATER. | YOUNGE <br> DAU <br> BIRTH <br> HISTORY <br> NUMBER <br> NAME $\qquad$ | NEXT-TO-Y LIVING D BIRTH HISTORY NUMBER. NAME $\qquad$ |  | SECOND-TO <br> LIVING D <br> BIRTH <br> HISTORY <br> NUMBER . <br> NAME $\qquad$ | T |
| 1112 | Is (NAME OF DAUGHTER) circumcised? | YES <br> NO <br> (GO <br> IN NEXT <br> OR IF N <br> DAU <br> GO | YES <br> NO | $\begin{aligned} & 1 \\ & 2 \\ & \hline \end{aligned}$ | YES <br> NO <br> (GO <br> IN FIRST <br> QUESTIONNAIR <br> O MORE DAUG <br> GO | $\begin{aligned} & 1 \\ & 2 \end{aligned}$ |
| 1113 | How old was (NAME OF DAUGHTER) when she was circumcised? <br> IF THE RESPONDENT DOES NOT KNOW THE AGE, PROBE TO GET AN <br> RECORD '00' IF LESS THAN A YEAR | AGE IN COMPLETED YRS DON'T KNOW | AGE IN COMPLETED YRS. <br> DON'T KNOW |  | AGE IN COMPLETED YRS . <br> DON'T KNOW | $98$ |
| 1114 | Was her genital area sewn closed? | $\begin{array}{lr} \text { YES } & \ldots . . . \\ \text { NO } & \ldots . \\ \text { DON'T KNOW } \end{array}$ | YES NO DON'T KNOW | 2 | $\begin{array}{lr} \text { YES } & \ldots . . . \\ \text { NO } & \ldots . \\ \text { DON'T KNOW } \end{array}$ |  |
| 1115 | Who performed the circumcision? | TRADITIONAL TRADITION CIRCU TRAD. BIR ATTEN OTHER TR <br> HEALTH PRO <br> DOCTOR <br> CLINICAL <br> NURSE/MI <br> OTHER HEAL <br> PROFE <br> (SP <br> DON'T KNOW | TRADITIONAL TRADITION CIRCUM TRAD. BIR ATTEND OTHER TR <br> HEALTH PROF DOCTOR CLINICAL NURSE/MID OTHER HE PROFE <br> DON'T KNOW |  | TRADITIONAL TRADITION CIRCU TRAD. BIR ATTEND OTHER TR <br> HEALTH PROF <br> DOCTOR <br> CLINICAL <br> NURSE/MI <br> OTHER HE <br> PROFE <br> (SP <br> DON'T KNOW | 11 <br> 12 <br> 16 <br> 21 <br> 22 <br> 23 <br> 26 <br> 98 |
| 1115 |  | GO BACK TO NEXT COLUM NO MORE DA GO TO 1116) | GO BACK TO NEXT COLUMN NO MORE DA GO TO 1116) |  | GO TO 1111 IN FIRST COLUM QUESTIONNA NO MORE DA GO TO 1116) |  |
| 1116 | Do you believe that female circ required by your religion? | cision is |  |  |  |  |
| 1117 | Do you think that female circum continued, or should it be stopp | ision should be d? |  |  |  | $\begin{aligned} & 1 \\ & 2 \\ & 3 \\ & 8 \end{aligned}$ |



| 1211 | Did (NAME) die during childbirth? |  |  |  |  |  | $\begin{array}{lr} \text { YES } & 1 \\ & \downarrow \\ & \downarrow \\ & \text { (SKIP TO } \\ & 1213) \\ \text { NO } & 2 \end{array}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1212 | Did (NAME) die within six weeks after the end of a pregnancy or childbirth? | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll}\text { YES } & 1 \\ \text { NO } & 2\end{array}$ | $\begin{array}{ll}\text { YES } & 1 \\ \text { NO } & 2\end{array}$ |
| 1213 | How many live born children did (NAME) give birth to during her lifetime? |  |  |  |  |  |  |
| 1214 | IF NO MORE BR | THERS OR SIST | ERS, GO TO 1301 |  |  |  |  |
| 1204 | What was the name given to your (oldest/ next oldest) brother or sister? | (7) | (8) | (9) | (10) | (11) | (12) |
| 1205 | Is (NAME) male or female? | $\begin{array}{ll} \hline \text { MALE } & 1 \\ \text { FEMALE } & 2 \end{array}$ | $\begin{array}{ll} \hline \text { MALE } & 1 \\ \text { FEMALE } & 2 \end{array}$ | MALE 1 FEMALE 2 | MALE 1 FEMALE 2 | $\begin{array}{ll} \hline \text { MALE } & 1 \\ \text { FEMALE } & 2 \end{array}$ | $\begin{array}{ll} \hline \text { MALE } & 1 \\ \text { FEMALE } & 2 \end{array}$ |
| 1206 | Is (NAME) still alive? |  |  |  |  |  |  |
| 1207 | How old is (NAME)? <br> RECORD '00' IF LESS <br> THAN ONE YEAR |  |  |  |  |  |  |
| 1208 | How many years ago did (NAME) die? <br> RECORD <br> '00' IF LESS <br> THAN ONE <br> YEAR |  |  |  |  |  |  |


| 1209 | How old was (NAME) when (he/she) died? | (IF MALE OR <br> DIED <br> BEFORE 12 <br> YRS GO TO <br> Q) | $\square$ <br> (IF MALE OR DIED BEFORE 12 YRS GO TO O) |  | ORDIED BEFORE 12 YRS GO TO 11) |  |   <br> IF MALE  <br> OR DIED  <br> BEFORE 12  <br> YRS GO TO  <br> 13) $\quad$${ }^{2}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1210 | Was (NAME) pregnant when she died? |  |  |  |  |  |  |
| 1211 | Did (NAME) die during childbirth? |  | $\begin{array}{lr} \text { YES } & 1 \\ & \downarrow \\ & \begin{array}{lr} \text { (SKIP TO } \\ & 1213) \\ \text { NO } & 2 \end{array} \end{array}$ |  |  |  |  |
| 1212 | Did (NAME) die within six weeks after the end of a pregnancy or childbirth? | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ | $\begin{array}{ll} \text { YES } & 1 \\ \text { NO } & 2 \end{array}$ |
| 1213 | How many live born children did (NAME) give birth to during her lifetime? |  |  |   |  |  |  |
| 1214 | IF NO MORE BR | THERS OR SIST | RS, GO TO 130 |  |  |  |  |

SECTION 13. GENDER BASED VIOLENCE (GBV)

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIE |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
| 1301 | CHECK FOR PRESENCE OF OTHERS: DO NOT CONTINUE UNTIL PRIVACY IS ENSURED. <br> PRIVACY <br> OBTAINED ........... 1 |  |  | $\longrightarrow 1331$ |
| 1302 | READ TO THE RESPONDENT: <br> Now I would like to ask you questions about some other important aspects of a woman's life. You may find some of these questions very personal. However, your answers are crucial for helping to understand the condition of women in in your country. Let me assure you that your answers are completely confidential and will not be told to anyone and no one else in your household will know that you were asked these questions. If I ask you any question you don't want to answer, just let me know and I will go on to the next question. |  |  |  |
| 1303 | First I am going to ask you about your understanding of domestic violence. What does domestic violence mean to you? Does it mean: <br> a) Physical abuse? <br> b) No participation in decision-making for household? <br> c) No participation in decision-making for children? <br> d) Better treatment of males than females? <br> e) Failing to meet basic living costs? <br> f) Denial of education? <br> g) Forced marriage? <br> h) Rape? <br> i) Sexual harassment? <br> j) Denial of inheritance? <br> k) Other |  | NO DK <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br> 2 8 <br>   <br> 2  |  |
| 1304 | Who is the person who commits the most violent acts against women in the community? | HUSBAND <br> MOTHER/STEP-MOTHER <br> FATHER/STEP-FATHE <br> SISTER/BROTHER <br> DAUGHTER/SON <br> OTHER RELATIVE <br> IN-LAWS <br> TEACHER <br> EMPLOYER/SOMEONE AT WO <br> POLICE/SOLDIER <br> OTHER | $\ldots \ldots$ $A$ <br> $\ldots \ldots$ $B$ <br> $\ldots \ldots$ $C$ <br> $\ldots \ldots$ D <br> $\ldots \ldots$ F <br> $\ldots \ldots$ G <br> $\ldots \ldots$ H <br> $\ldots \ldots$ I <br> $\ldots$ J <br>   |  |
| 1305 | Where do most violent acts take place? | AT HOME . $\qquad$ <br> WORKPLACI. <br> STREET $\qquad$ <br> SCHOOL $\qquad$ <br> WATER POINT <br> RURAL/GRAZING AREAS <br> MARKET PLACE <br> NEIGHBOURHOOD <br> OTHER $\qquad$ | $\begin{array}{ll} & \\ \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 3 \\ \ldots \ldots & 4 \\ \ldots \ldots & 5 \\ \ldots \ldots & 6 \\ \ldots . . & 7 \\ \ldots . & 9\end{array}$ <br> 96 |  |
| 1306 | CHECK 119 \& 120 <br> CURRENTLY MARRIED OR DIVORCED/ABANDONED | WIDOWED |  | $\rightarrow 1318$ |



|  | e) Try to choke you or burn you on purpose? <br> f) Threaten or attack you with a knife, gun, or other weapon? <br> g) Physically force you to have sexual intercourse with him when you did not |  $\downarrow$ <br> YES 1 <br> NO 2 <br>  $\downarrow$ <br> YES 1 <br> NO 2 <br>  $\downarrow$ <br> YES 1 <br> NO 2 <br>  $\downarrow$ |  | 1 <br> 1 <br> 1 | 2 <br> 2 <br> 2 | 3 <br> 3 <br> 3 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1311 | CHECK 1310 (a-g): <br> AT LEAST ONE 'YES' |  | OT | NGLE $\square$ 'YES' |  |  | $\rightarrow 1314$ |
| 1312 | How long after you first got married with you (this/any of these things) first happen? <br> IF LESS THAN ONE YEAR, RECORD ' 00 '. | husband did |  | ER OF YEA <br> E MARRIA |  |  |  |
| 1313 | Did the following ever happen as a result of husband did to you: <br> a) You had cuts, bruises, or aches? <br> b) You had eye injuries, sprains, dislocations <br> c) You had deep wounds, broken bones, bro other serious injury? | ur (last) <br> rns? <br> eth, or any | YES <br> NO <br> YES <br> NO <br> YES <br> NO |  |  | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 1 \\ \ldots \ldots . & 2 \end{array}$ |  |
| 1314 | Have you ever hit, slapped, kicked, or done physically hurt your (last) husband at times wh already beating or physically hurting you? | else to was not | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ |  |  | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \end{array}$ | $\rightarrow 1316$ |
| 1315 | In the last 12 months, how often have you do (last) husband: often, only sometimes, or not | to your |  | TIMES |  | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 3 \end{array}$ |  |
| 1316 | Are (Were) you afraid of your (last) husband: sometimes, or never? | f the time, |  | OF THE TI TIMES AFR AFRAID | AFRAID <br> D | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 3 \end{array}$ |  |
| 1317 | CHECK121: <br> MARRIED MORE $\square$ THAN ONCE $\square$ <br> A. So far we have been talking about the be (current/last) husband. Now I want to ask behavior of any previous husband. <br> a) Did any previous husband ever hit, slap, kick, or do anything else to hurt you physically? <br> b) Did any previous husband physically force you to have intercourse or perform any other sexual acts against your will? | ONCE $\square$ <br> of your out the | B. | w long ago <br> 0-11 <br> MONTHS <br> AGO <br> 1 <br> 1 | this last happ <br> 12+ MONTHS AGO <br> 2 <br> 2 | pen? <br> DON'T <br> REMEMBER <br> 3 <br> 3 | $\longrightarrow 1318$ |



| 1319 | Who has hurt you in this way? <br> Anyone else? <br> RECORD ALL MENTIONED. |  |  |
| :---: | :---: | :---: | :---: |
| 1320 | In the last 12 months, how often has (this person/have these persons) physically hurt you: often, only sometimes, or not at all? |  |  |
| 1321 | CHECK 201, 226, AND 230: $\begin{gathered} \text { EVER BEEN } \\ \text { PREGNANT } \\ \text { ('YES' ON 201 } \\ \text { OR } 226 \text { OR 230) } \end{gathered}$ | NEVER BEEN PREGNANT $\square$ | $\rightarrow 1324$ |
| 1322 | Has any one ever hit, slapped, kicked, or done anything else to hurt you physically while you were pregnant? | $\begin{array}{lll} \text { YES } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 1 \\ \text { NO } & \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots & 2 \end{array}$ | $\rightarrow 1324$ |
| 1323 | Who has done any of these things to physically hurt you while you were pregnant? <br> Anyone else? <br> RECORD ALL MENTIONED. |  |  |



## Never-married Woman's Questionnaire

SOMALI MINISTRIE'S OF PLANNING AND HEALTH


NEVER MARRIED WOMAN'S QUESTIONNAIRE



## INTRODUCTION AND CONSENT

Hello. My name is
I am working with [NAME OF ORGANIZATION]. We are conducting a survey about health and related topics all over [NAME OF COUNTRY]. The information we collect will help the government to plan health and other services. Your household was selected for the survey. I would like to ask you some questions about your household. The questions usually take about 45 to 60 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. your participation in the survey is voluntary, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the ministry of interior/planning and/or health.

Do you have any questions?
May I begin the interview now?

| SIGNATURE OF INTERVIEWER | DATE |
| :---: | :---: |
| RESPONDENT AGREES TO BE INTERVIEWED . . 1 1 $\downarrow$ | RESPONDENT DOES NOT AGREE <br> TO BE INTERVIEWED . . $2 \longrightarrow$ END |

SECTION 1. RESPONDENT'S BACKGROUND

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 101 | RECORD THE START TIME. | HOURS <br> MINUTES |  |
| 102 | In what month and year were you born? |  |  |
| 103 | How old were you at your last birthday? <br> COMPARE AND CORRECT 102 AND/OR 103 IF INCONSISTENT. | AGE IN COMPLETED YEARS . . . . . . $\quad$ 而 |  |
| 104 | Have you ever attended school? |  | $\rightarrow 108$ |
| 105 | What is the highest level of school you attended: primary, secondary, or higher? |  |  |
| 106 | What is the highest [GRADE/FORM/YEAR] you completed at that level? <br> IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'. |  |  |
| 107 | CHECK 105: <br> KORANIC, PRIMARY OR SECONDARY | HIGHER | - 110 |
| 108 | Now I would like you to read this sentence to me. <br> SHOW CARD TO RESPONDENT. <br> IF RESPONDENT CANNOT READ WHOLE SENTENCE, <br> PROBE: Can you read any part of the sentence to me? |  |  |


| SECTION 1. RESPONDENT'S BACKGROUND |  |  |  |
| :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| 109 | CHECK 108: | OR '5' <br> RCLED | $\rightarrow 111$ |
| 110 | Do you read a newspaper or magazine at least once a week, less than once a week or not at all? | AT LEAST ONCE A WEEK . LESS THAN ONCE A WEEK NOT AT ALL |  |
| 111 | Do you listen to the radio at least once a week, less than once a week or not at all? | at least once a week . LESS THAN ONCE A WEEK NOT AT ALL |  |
| 112 | Do you watch television at least once a week, less than once a week or not at all? | AT LEAST ONCE A WEEK LESS THAN ONCE A WEEK NOT AT ALL |  |
| 113 | Do you own a mobile telephone? |  |  |
| 114 | Do you use a mobile phone for any financial transactions? |  |  |
| 115 | Do you have an account in a bank or other financial institution that you yourself use? |  |  |
| 116 | Have you ever used the internet? |  | $\rightarrow 201$ |
| 117 | In the last 12 months, have you used the internet? <br> IF NECESSARY, PROBE FOR USE FROM ANY LOCATION, WITH ANY DEVICE. |  | $\rightarrow 201$ |
| 118 | During the last one month, how often did you use the internet: almost every day, at least once a week, less than once a week, or not at all? |  |  |

SECTION 2. HIV/AIDS AND VACCINATION

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  | SKIP |
| :---: | :---: | :---: | :---: | :---: |
| 201 | Now I would like to talk about something else. Have you ever heard of HIV or AIDS? | YES <br> NO | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \ldots \ldots & 2 \end{array}$ | $\rightarrow 218$ |
| 202 | HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected spouse who has no other relations? | YES <br> NO DON'T KNOW | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ |  |
| 203 | Can people get HIV from mosquito bites? | YES <br> NO <br> DON'T KNOW | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \ldots \ldots \ldots & 2 \\ \ldots \ldots . & 8 \end{array}$ |  |
| 204 | Can people reduce their chance of getting HIV by using a condom every time they have sex? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 205 | Can people get HIV by sharing food with a person who has HIV? | YES <br> NO <br> DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 206 | Can people get HIV because of witchcraft or other supernatural means? | YES <br> NO DON'T KNOW | $\begin{array}{ll}  & \\ \ldots \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 207 | Is it possible for a healthy-looking person to have HIV? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 208 | Can HIV be transmitted from a mother to her baby: <br> a) During pregnancy? <br> b) During delivery? <br> c) By breastfeeding? | a) DURING PREGNANCY . . <br> a) <br> b) DURING DELIVERY ..... <br> c) <br> c) BREASTFEEDING $\ldots \ldots$ | NO DK <br> 2 8 <br> 2 8 <br> 2 8 |  |
| 209 | CHECK 208: <br> AT LEAST <br> ONE 'YES' | OTHER |  | $\longrightarrow 211$ |
| 210 | Are there any special drugs that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby? | YES <br> NO DON'T KNOW | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \ldots \ldots \ldots & 2 \\ \ldots \ldots \ldots & 8 \end{array}$ |  |
| 211 | Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? | YES <br> NO DON'T KNOW/NOT SURE/DEPEND | $\begin{aligned} & 1 \\ & 2 \\ & 8 \end{aligned}$ |  |
| 212 | Do you think children living with HIV should be allowed to attend school with children who do not have HIV? | YES <br> NO <br> DON'T KNOW/NOT SURE/DEPEND | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 213 | Do you think people hesitate to take an HIV test because they are afraid of how other people will react if the test result is positive for HIV? |  | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 214 | Do people talk badly about people living with HIV, or who are thought to be living with HIV? | YES <br> NO <br> DON'T KNOW/NOT SURE/DEPEND | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 215 | Do people living with HIV, or thought to be living with HIV, lose the respect of other people? | YES <br> NO <br> DON'T KNOW/NOT SURE/DEPEND | $\begin{array}{ll} \ldots \ldots & 1 \\ \ldots \ldots \ldots & 2 \\ \ldots \ldots & 8 \end{array}$ |  |
| 216 | Do you agree or disagree with the following statement: I would be ashamed if someone in my family had HIV. | AGREE DISAGREE DON'T KNOW/NOT SURE/DEPEND | $\begin{array}{ll} \ldots \ldots \ldots & 1 \\ \cdots \cdots \cdots & 2 \\ \ldots \ldots \ldots & 8 \end{array}$ |  |
| 217 | Do you fear that you could get HIV if you come into contact with the saliva of a person living with HIV? | YES <br> NO <br> SAYS SHE HAS HIV <br> DON'T KNOW/NOT SURE/DEPEND | $\begin{array}{cc} \ldots \ldots \ldots & 1 \\ \ldots \ldots \ldots & 2 \\ \cdots \cdots \cdots & 3 \\ \ldots \ldots \ldots & 8 \end{array}$ |  |

SECTION 2. HIVIAIDS AND VACCINATION


| SECTION 3. FEMALE CIRCUMCISION |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |  |  | SKIP |
| 301 | Now I would like to ask some questions about a practice known as female circumcision. Have you ever heard of female circumcision? | YES NO |  |  | $\rightarrow 303$ |
| 302 | In some countries, there is a practice in which a girl may have part of her genitals cut. Have you ever heard about this practice? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ |  |  | $\rightarrow 401$ |
| 303 | Have you yourself ever been circumcised? | $\begin{aligned} & \text { YES } \\ & \text { NO } \end{aligned}$ |  |  | $\rightarrow 308$ |
| 304 | What type of circumcision did you undergo? | SUNN <br> INTERMEDIATE <br> PHARAONIC <br> DON'T KNOW |  | 1 2 3 8 |  |
| 305 | Please describe what was exactly done <br> a) Excision of the clitoral hood (prepuce), with or without excision of part or all of the clitoris <br> b) Excision of the clitoris with partial or total excision of the labia minora <br> c) Excision of part or all of the external genitalia and stitching/ narrowing of the vaginal opening <br> d) All other procedures that involve pricking, piercing, stretching or incising of the clitoris and/or labia; introduction of corrosive substances into the vagina to narrow it. |    <br>   YES <br> TYPE I $\ldots \ldots \ldots \ldots \ldots$ 1 <br> TYPE II $\ldots \ldots \ldots \ldots$. 1 <br> TYPE III $\ldots \ldots \ldots \ldots$. 1 <br> TYPE IV $\ldots \ldots \ldots \ldots$. 1 | NO <br> 2 <br> 2 <br> 2 <br> 2 | DK <br> 8 <br> 8 <br> 8 <br> 8 |  |
| 306 | How old were you when you were circumcised? <br> IF THE RESPONDENT DOES NOT KNOW THE EXACT AGE, PROBE TO GET AN ESTIMATE. | AGE IN COMPLETED YEARS <br> AS A BABY/DURING INFANCY DON'T KNOW |  | $\begin{aligned} & \\ & \hline \\ & \hline \\ & 95 \\ & 98 \end{aligned}$ |  |
| 307 | Who performed the circumcision? | TRADITIONAL <br> TRAD. CIRCUMCISER <br> TRAD. BIRTH ATTENDANT <br> OTHER TRAD. <br> HEALTH PROFESSIONAL <br> DOCTOR <br> NURSE/MIDWIFE <br> OTHER HEALTH <br> PROFESSIONAL $\qquad$ |  | 11 <br> 12 <br> 16 <br> 21 <br> 22 <br> 26 <br> 98 |  |
| 308 | Do you believe that female circumcision is required by your religion? | YES <br> NO <br> NO RELIGION <br> DON'T KNOW |  | 1 2 3 8 |  |
| 309 | Do you think that female circumcision should be continued, or should it be stopped? | CONTINUED <br> STOPPED <br> DEPENDS <br> DON'T KNOW |  |  |  |
| 310 | If you get married and give birth to girls in the future, would you want them to be circumcized? | YES <br> NO <br> DEPENDS <br> DON'T KNOW |  | $\begin{aligned} & 1 \\ & 2 \\ & 3 \\ & 8 \end{aligned}$ |  |

SECTION 4. VIOLENCE AGAINST WOMEN

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP |
| :---: | :---: | :---: | :---: |
| 401 | Now I am going to ask you about your understanding of domestic violence. What does domestic violence mean do you? <br> Does it mean: <br> a) Physical abuse? <br> b) No participation in decision-making for household? <br> c) No participation in decision-making for children? <br> d) Better treatment of males than females? <br> e) Failing to meet basic living costs? <br> f) Denial of education? <br> g) Forced marriage? <br> h) Rape? <br> i) Sexual harassment? <br> j) Denial of inheritance? <br> k) Other |  |  |
| 402 | Who is the person who commits the most violent acts against women? |  |  |
| 403 | Where is the place with most violent acts? |  |  |
| 404 | Does any form of violence cause damage? |  | $\rightarrow 406$ |
| 405 | What is the most serious damage caused by violence? | $\qquad$ |  |
| 406 | In your opinion, is a husband justified in hitting or beating his wife in the following situations: <br> a) If she goes out without telling him? <br> b) If she neglects the children? <br> c) If she neglects household duties including cooking? <br> d) If she argues with him? <br> e) If she wastes resources? <br> f) If she does not respect his family? |  YES NO DK <br> GOES OUT .......... 1 2 8 <br> NEGL. CHILDREN .... 1 2 8 <br> NEGL. OTHER HH DUTIE 1 2 8 <br> ARGUES ................ 1 2 8 <br> WASTE RESOURCES ... 1 2 8 <br> NOT RESP. FAMILY... 1 2 8 |  |
| 407 | A. Has anyone ever done any of the following things to you, while you were at the water point, grazing areas, at the school, at the house, at work, ETC : | B. How often did this happen during the last 12 months: often, only sometimes, or not at all? |  |
|  |   EVER <br>   YES <br> a)was slapped, pushed, shaken, or thrown <br> something at? NO 2 |  OFTEN SOME- <br> TIMES NOT IN LAST <br> 12 MONTHS <br> $\longrightarrow$ 1 2 3 |  |



$\qquad$
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$\qquad$
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## COMMENTS ON SPECIFIC QUESTIONS:

$\qquad$
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$\qquad$

ANY OTHER COMMENTS:


$\qquad$
$\qquad$
$\qquad$
$\qquad$

SUPERVISOR'S OBSERVATIONS
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EDITOR'S OBSERVATIONS
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## Maternal Mortality Questionnaire



MATERNAL MORTALITY QUESTIONNAIRE


## INTRODUCTION AND CONSENT

Hello. My name is I am working with [NAME OF ORGANIZATION]. We are conducting a survey about health and related topics all over [NAME OF COUNTRY]. The information we collect will help the government to plan health and other services. Your household was selected for the survey. I would like to ask you some questions about your household. The questions usually take about 15 to 20 minutes. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. your participation in the survey is voluntary, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the ministry of interior/planning and/or health

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER $\qquad$ DATE $\qquad$
RESPONDENT AGREES

TO BE INTERVIEWED . . | RESPONDENT DOES NOT AGREE |
| ---: |
|  |
|  |
|  |
|  |



SECTION 1: HOUSEHOLD SCHEDULE

|  |  | DEMOGRAPHIC CHARACTERISTICS |  |  |  |  | RECENT LIVE BIRTHS ( 24 MONTHS) <br> IF MARRIED \& FEMALES AGED 1249 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | IF AGE 12 OR OLDER | IF EVER MARRIED |  |  |
| LINE No. | USUAL RESIDENTS | RELATIONSHIP TO HEAD OF household | SEX | AGE | MARITAL STATUS | AGE AT FIRST MARRIAGE | PARTICULARS OF LIVE BIRTHS WITHIN THE PAST 24 MONTHS |  |
| 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 | 109 |
|  | Please give me the names of the persons who usually live in your household, starting with the head of the household. <br> AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK QUESTIONS 2A-2B TO BE SURE THAT THE LISTING IS COMPLETE. <br> THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-32 FOR EACH PERSON. | What is the relationship of (NAME) to the head of the household? <br> SEE CODES BELOW. | Is (NAME) male or female? | How old is (NAME) in completed years? <br> RECORD AGE IN COMPLETED YEARS <br> WRITE "00" IF LESS THAN ONE YEAR <br> IF 95 <br> OR MORE, <br> RECORD '95'. | $\begin{aligned} & 1=\text { MARRIED } \\ & 2=\text { DIVORCED } \\ & 3=\text { ABANDO- } \\ & \text { NED } \\ & 4=\text { WIDOWED } \\ & 5=\text { NEVER- } \\ & \text { MARRIED } \end{aligned}$ | How old was (NAME) when he/she got married for the first time? | Has (NAME) <br> had a live birth in the last 24 months? | How many children did (NAME) give birth to who were born alive in the last 24 months including those who later died? <br> RECORD MALES \& FEMALES <br> IF NONE, RECORD '00'. |
| 01 |  |  |  | IN YEARS |  |  | $\begin{array}{lc} \text { YES } & \text { NO } \\ 1 & 2 \\ 1 & \downarrow \\ & \text { NEXT LINE } \end{array}$ | male female |
| 02 |  |  | 12 |  |  |  | 1 | $\square$ |
| 03 |  | $\square$ | 12 | $\begin{array}{l\|l\|} \hline & \\ \hline \end{array}$ |  |  |  |  |
| 04 |  | $\square$ | 12 |  |  | PI | $\begin{array}{lll} 1 & \stackrel{2}{\downarrow} \\ & \text { NEXT LINE } \end{array}$ | $\begin{array}{l\|l\|} \hline \end{array}$ |
| 05 |  |  | 12 |  |  | $\begin{aligned} & \hline 1 \\ & \hline \end{aligned}$ |  |  |
| 06 |  |  | 12 |  |  | $\begin{array}{ll} \hline \end{array}$ |  | $\square$ |
| 07 |  |  | 12 | PI |  |  | $\begin{array}{ll} 1 & \stackrel{2}{\downarrow} \\ & \downarrow \\ \text { NEXT LINE } \end{array}$ |  |
| 08 |  |  | 12 |  |  |  |  | $\square$ |
| 09 |  |  | 12 |  |  |  |  | $\square$ |
| 10 |  |  | 12 |  |  |  |  | $\square$ |
|  |  | $\begin{aligned} & 01=\text { HEAD OF HOUSEHOLD } \\ & 02=\text { SPOUSE } \\ & 03=\text { SON OR DAUGHTER } \\ & 04=\text { SON-IN-LAW OR } \\ & \text { DAUGHTER-IN-LAW } \\ & 05=\text { GRANDCHID } \\ & 06=\text { PARENT } \\ & 07=\text { PARENT-IN-LAW } \end{aligned}$ |  | $\begin{aligned} 08 & =\text { BROTHER OR SISTER } \\ 09 & =\text { NEPHEW/NIECE } \\ 10 & =\text { BROTHER/SISTER-IN-LAW } \\ 11 & =\text { OTHER RELATIVE } \\ 12 & =\text { ADOPTED/FOSTER } / \\ & \text { STEPCHILD } \\ 13 & =\text { NOT RELATED } \\ 98 & =\text { DON'T KNOW } \end{aligned}$ |  |  |  |  |





Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra


[^0]:    ${ }^{1}$ Completed $8^{\text {th }}$ grade at the primary level
    ${ }^{2}$ Completed $12^{\text {th }}$ grade at the secondary level

[^1]:    ${ }^{1}$ Appropriate water treatment methods include boiling, bleaching, straining, filtering and solar disinfecting

[^2]:    ${ }^{1}$ Defined as use of improved facilities that are not shared with other households. Includes safely managed sanitation service, which is not shown separately.
    ${ }^{2}$ Defined as use of improved facilities shared by 2 or more households"

[^3]:    ${ }^{1}$ Includes women who received a checkup after 41 days
    Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

[^4]:    'Based on either a written record or the mother's recall
    Note: An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.

[^5]:    Note: Table is based on last-born children born in the two years preceding the survey regardless of whether the children are living or dead at the time of interview.
    An asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed.
    1 Includes children who started breastfeeding within one hour of birth
    2 Children given something other than breast milk during the first three days of life
    3 Doctor, nurse/midwife, or auxiliary midwife

