

Tajikistan



Demographic and
Health Survey

2017



REPUBLIC OF TAJIKISTAN

TAJIKISTAN

Demographic and Health Survey 2017

Statistical Agency under the President of the Republic of Tajikistan
Dushanbe, Republic of Tajikistan

Ministry of Health and Social Protection of Population
of the Republic of Tajikistan
Dushanbe, Republic of Tajikistan

The DHS Program
ICF
Rockville, Maryland, USA

November 2018



The 2017 Tajikistan Demographic and Health Survey (TjDHS) was implemented by the Statistical Agency under the President of the Republic of Tajikistan from August 8 to November 11, 2017. The funding for the 2017 TjDHS was provided by the United States Agency for International Development (USAID). Additional funding for the survey was provided by the United Nations Children’s Fund (UNICEF) and the United Nations Population Fund (UNFPA). ICF provided technical assistance through The DHS Program, a USAID-funded project providing support and technical assistance in the implementation of population and health surveys in countries worldwide.

Additional information about the 2017 TjDHS may be obtained from the Statistical Agency under the President of the Republic of Tajikistan: 17 Bokhtar Street, Dushanbe, Republic of Tajikistan; telephone: 992-372-23-02-45; fax: 992-372-21-43-75; email: stat@tojikiston.com.

Information about The DHS Program may be obtained from ICF, 530 Gaither Road, Suite 500, Rockville, MD 20850, USA; telephone: +1-301-407-6500; fax: +1-301-407-6501; email: info@DHSprogram.com; internet: www.DHSprogram.com.

Cover photo: “Hauz-e Sangin Mosque, Istaravshan, Tajikistan.” © 2015 Robert Wilson. Used under Creative Commons (CC BY-ND 2.0) license. Available at <https://flic.kr/p/rR2Ndn>.

Recommended citation:

Statistical Agency under the President of the Republic of Tajikistan, Ministry of Health and Social Protection of Population of the Republic of Tajikistan, and ICF. 2018. *Tajikistan Demographic and Health Survey 2017*. Dushanbe, Republic of Tajikistan, and Rockville, Maryland, USA: Statistical Agency under the President of the Republic of Tajikistan (SA), Ministry of Health and Social Protection of Population of the Republic of Tajikistan (MOHSP), and ICF.

CONTENTS

TABLES AND FIGURES	vii
ACKNOWLEDGMENTS	xiii
ACRONYMS AND ABBREVIATIONS.....	xv
READING AND UNDERSTANDING TABLES FROM THE 2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY (TjDHS).....	xvii
SUSTAINABLE DEVELOPMENT GOAL INDICATORS	xxv
MAP OF TAJIKISTAN	xxviii
1 INTRODUCTION AND SURVEY METHODOLOGY	1
1.1 Survey Objectives.....	1
1.2 Sample Design.....	1
1.3 Questionnaires	2
1.4 Anthropometry, Anemia Testing, and Blood Pressure Measurement	3
1.5 Pretest	3
1.6 Training of Field Staff	4
1.7 Fieldwork.....	5
1.8 Data Processing	5
1.9 Response Rates.....	5
2 HOUSING CHARACTERISTICS AND HOUSEHOLD POPULATION	7
2.1 Drinking Water Sources and Treatment	7
2.2 Sanitation.....	8
2.3 Exposure to Smoke inside the Home and Other Household Characteristics	9
2.3.1 Exposure to Smoke inside the Home	9
2.3.2 Other Housing Characteristics	9
2.3.3 Household Possessions	9
2.4 Household Wealth	9
2.5 Handwashing	10
2.6 Household Population and Composition	10
2.7 Children’s Living Arrangements and Orphanhood	11
2.8 Birth Registration	11
2.9 Education.....	12
2.9.1 Educational Attainment	12
2.9.2 School Attendance	12
2.10 Child Discipline.....	13
3 CHARACTERISTICS OF RESPONDENTS	29
3.1 Basic Characteristics of Survey Respondents.....	29
3.2 Education and Literacy	29
3.3 Mass Media Exposure and Internet Usage	31
3.4 Employment	32
3.5 Occupation.....	32
3.6 Type of Employment.....	33
3.7 Employment Abroad.....	34
3.8 History of Diabetes.....	34
3.9 History of High Blood Pressure.....	35
3.10 High Blood Pressure.....	36
3.11 Tobacco Use	38

4	MARRIAGE AND SEXUAL ACTIVITY	51
4.1	Marital Status.....	51
4.2	Polygyny.....	52
4.3	Age at First Marriage.....	52
4.4	Age at First Sexual Intercourse	52
4.5	Recent Sexual Activity	53
5	FERTILITY.....	59
5.1	Current Fertility	59
5.2	Children Ever Born and Living	61
5.3	Birth Intervals.....	61
5.4	Insusceptibility to Pregnancy.....	61
5.5	Age at First Birth	62
5.6	Teenage Childbearing.....	63
6	FERTILITY PREFERENCES.....	71
6.1	Desire for Another Child	71
6.2	Ideal Family Size	72
6.3	Fertility Planning Status	73
6.4	Wanted Fertility Rates	74
7	FAMILY PLANNING	79
7.1	Contraceptive Knowledge and Use	79
7.2	Knowledge of the Fertile Period.....	81
7.3	Source of Modern Contraceptive Methods.....	81
7.4	Informed Choice.....	82
7.5	Discontinuation of Contraceptives	82
7.6	Demand for Family Planning	83
7.7	Decision Making about Family Planning	85
7.8	Future Use of Contraception.....	85
7.9	Exposure to Family Planning Messages in the Media.....	85
7.10	Contact of Nonusers with Family Planning Providers.....	85
8	ABORTION.....	97
8.1	Pregnancies Ending in Induced Abortion	97
8.2	Lifetime Experience with Induced Abortion	98
8.3	Rates of Induced Abortion.....	98
8.4	Use of Contraception before Abortion	99
8.5	Reasons for Abortion.....	99
9	INFANT AND CHILD MORTALITY.....	107
9.1	Infant and Child Mortality.....	108
9.2	Sociodemographic and Biodemographic Risk Factors	108
9.3	Perinatal Mortality.....	110
9.4	High-risk Fertility Behavior	111
9.5	Registration of Child Deaths	112
10	MATERNAL HEALTH CARE	117
10.1	Antenatal Care Coverage and Content	118
	10.1.1 Skilled Providers.....	118
	10.1.2 Timing and Number of ANC Visits.....	119
10.2	Components of ANC Visits.....	119

10.3	Delivery Services.....	119
10.3.1	Institutional Deliveries.....	120
10.3.2	Skilled Assistance during Delivery.....	121
10.3.3	Delivery by Cesarean.....	121
10.4	Postnatal Care.....	122
10.4.1	Postnatal Health Check for Mothers.....	122
10.4.2	Postnatal Health Check for Newborns.....	123
10.5	Knowledge of Danger Signs.....	123
10.6	Problems in Accessing Health Care.....	124
11	CHILD HEALTH.....	139
11.1	Birth Weight.....	139
11.2	Vaccination of Children.....	140
11.2.1	Vaccination Card Ownership and Availability.....	140
11.2.2	Vaccination Coverage.....	140
11.3	Symptoms of Acute Respiratory Infection.....	142
11.4	Fever.....	143
11.5	Diarrheal Disease.....	143
11.5.1	Prevalence of Diarrhea and Treatment or Advice Seeking.....	143
11.5.2	Feeding Practices.....	144
11.5.3	Treatment of Diarrhea.....	144
11.5.4	Knowledge of ORS Packets (Rehydron).....	145
11.6	Treatment of Childhood Illness.....	145
11.7	Disposal of Children’s Stools.....	145
11.8	Knowledge of Danger Signs and Symptoms of Childhood Illness.....	146
12	NUTRITION OF CHILDREN AND WOMEN.....	159
12.1	Nutritional Status of Children.....	159
12.1.1	Measurement of Nutritional Status among Young Children.....	159
12.1.2	Data Collection.....	161
12.1.3	Levels of Child Malnutrition.....	161
12.2	Infant and Young Child Feeding Practices.....	162
12.2.1	Breastfeeding.....	162
12.2.2	Complementary Feeding.....	164
12.2.3	Minimum Acceptable Diet.....	165
12.3	Anemia Prevalence in Children.....	166
12.4	Presence of Iodized Salt in Households.....	167
12.5	Micronutrient Intake and Supplementation among Children.....	168
12.6	Nutritional Status of Women.....	169
12.7	Anemia Prevalence in Women.....	170
12.8	Dietary Diversity in Women.....	172
12.9	Micronutrient Supplementation and Deworming during Pregnancy.....	173
13	HIV/AIDS-RELATED KNOWLEDGE, ATTITUDES, AND BEHAVIOR.....	189
13.1	HIV/AIDS Knowledge, Transmission, and Prevention Methods.....	189
13.2	Knowledge about Mother-to-Child Transmission.....	191
13.3	Discriminatory Attitudes towards People Living with HIV.....	191
13.4	Multiple Sexual Partners.....	192
13.5	Coverage of HIV Testing Services.....	192
13.5.1	Awareness of HIV Testing Services and Experience with HIV Testing.....	193
13.5.2	HIV Testing of Pregnant Women.....	193
13.5.3	Knowledge and Use of HIV Self-test Kits.....	194
13.6	Self-reporting of Sexually Transmitted Infections.....	194

13.7	HIV/AIDS-related Knowledge and Behavior among Young Women.....	195
13.7.1	Knowledge.....	195
13.7.2	First Sex.....	195
13.7.3	Coverage of HIV Testing Services.....	196
14	DOMESTIC VIOLENCE.....	207
14.1	Measurement of Violence.....	208
14.2	Experience of Physical Violence.....	208
14.2.1	Perpetrators of Physical Violence.....	209
14.3	Experience of Sexual Violence.....	209
14.3.1	Prevalence of Sexual Violence.....	209
14.3.2	Perpetrators of Sexual Violence.....	210
14.4	Experience of Different Forms of Violence.....	210
14.5	Marital Control by Spouse.....	210
14.6	Forms of Spousal Violence.....	211
14.6.1	Prevalence of Spousal Violence.....	211
14.6.2	Injuries due to Spousal Violence.....	214
14.6.3	Violence Initiated by Women against Their Husbands.....	214
14.7	Help Seeking among Those Who Have Experienced Violence.....	215
15	WOMEN'S EMPOWERMENT.....	231
15.1	Married Women's Employment.....	232
15.2	Control over Women's Earnings.....	232
15.3	Control over Husband's Earnings.....	233
15.4	Women's Ownership of a House.....	234
15.5	Bank Accounts and Mobile Phones.....	235
15.6	Participation in Decision Making.....	235
15.7	Attitudes toward Wife Beating.....	236
15.8	Negotiating Sexual Relations.....	237
	REFERENCES.....	251
	APPENDIX A SAMPLE DESIGN.....	253
A.1	Introduction.....	253
A.2	Sample Frame.....	253
A.3	Sample Design and Implementation.....	254
A.4	Sample Probabilities and Sampling Weights.....	255
A.5	Survey Implementation.....	257
	APPENDIX B ESTIMATES OF SAMPLING ERRORS.....	259
	APPENDIX C DATA QUALITY TABLES.....	271
	APPENDIX D SURVEY PERSONNEL.....	275
	APPENDIX E QUESTIONNAIRES.....	279
	Household.....	281
	Women.....	299
	Biomarker.....	387
	Fieldworker.....	397

TABLES AND FIGURES

1	INTRODUCTION AND SURVEY METHODOLOGY	1
	Table 1.1 Results of the household and individual interviews	6
2	HOUSING CHARACTERISTICS AND HOUSEHOLD POPULATION	7
	Table 2.1 Household drinking water	16
	Table 2.2 Household sanitation facilities	17
	Table 2.3 Household characteristics.....	18
	Table 2.4 Household possessions.....	19
	Table 2.5 Wealth quintiles	20
	Table 2.6 Handwashing.....	20
	Table 2.7 Household population by age, sex, and residence.....	21
	Table 2.8 Household composition.....	21
	Table 2.9 Children’s living arrangements and orphanhood	22
	Table 2.10 Birth registration of children under age 5	23
	Table 2.11.1 Educational attainment of the female household population	24
	Table 2.11.2 Educational attainment of the male household population	25
	Table 2.12 School attendance ratios.....	26
	Table 2.13 Child discipline	27
	Figure 2.1 Household drinking water by residence	8
	Figure 2.2 Household toilet facilities by residence	8
	Figure 2.3 Household wealth by residence.....	10
	Figure 2.4 Population pyramid	11
3	CHARACTERISTICS OF RESPONDENTS	29
	Table 3.1 Background characteristics of respondents	39
	Table 3.2 Educational attainment.....	40
	Table 3.3 Literacy	40
	Table 3.4 Exposure to mass media.....	41
	Table 3.5 Internet usage	42
	Table 3.6 Employment status.....	43
	Table 3.7 Occupation	44
	Table 3.8 Type of employment	45
	Table 3.9 Respondent’s and partner’s employment abroad	46
	Table 3.10 History of diabetes	47
	Table 3.11 Blood pressure measured and medication prescribed and taken.....	48
	Table 3.12 Blood pressure status	49
	Table 3.13 Controlled hypertension.....	50
	Figure 3.1 Education of survey respondents	29
	Figure 3.2 Secondary education by region	30
	Figure 3.3 Exposure to mass media.....	31
	Figure 3.4 Employment status by education	32
	Figure 3.5 Occupation	33
	Figure 3.6 Hypertension by age.....	37
	Figure 3.7 Hypertension by Body Mass Index (BMI).....	37
	Figure 3.8 Awareness of hypertension	38
4	MARRIAGE AND SEXUAL ACTIVITY	51
	Table 4.1 Current marital status	54
	Table 4.2 Number of women’s co-wives	54
	Table 4.3 Age at first marriage.....	55

Table 4.4	Median age at first marriage by background characteristics	55
Table 4.5	Age at first sexual intercourse	56
Table 4.6	Median age at first sexual intercourse by background characteristics	56
Table 4.7	Recent sexual activity	57
Figure 4.1	Marital status	51
Figure 4.2	Women's median age at marriage by region	52
Figure 4.3	Median age at first sex and first marriage	53
5	FERTILITY	59
Table 5.1	Current fertility	64
Table 5.2	Trends in age-specific and total fertility rates	64
Table 5.3	Fertility by background characteristics	65
Table 5.4	Children ever born and living	65
Table 5.5	Birth intervals	66
Table 5.6	Postpartum amenorrhea, abstinence, and insusceptibility	67
Table 5.7	Median duration of postpartum amenorrhea, abstinence, and insusceptibility	68
Table 5.8	Menopause	69
Table 5.9	Age at first birth	69
Table 5.10	Median age at first birth	70
Table 5.11	Teenage pregnancy and motherhood	70
Figure 5.1	Age-specific fertility rates	60
Figure 5.2	Trends in fertility by residence	60
Figure 5.3	Fertility by region	60
Figure 5.4	Birth intervals	61
Figure 5.5	Median age at first birth by residence	63
Figure 5.6	Teenage pregnancy and motherhood by woman's age	63
6	FERTILITY PREFERENCES	71
Table 6.1	Fertility preferences according to number of living children	76
Table 6.2	Desire to limit childbearing	76
Table 6.3	Ideal number of children by number of living children	77
Table 6.4	Mean ideal number of children according to background characteristics	77
Table 6.5	Fertility planning status	78
Table 6.6	Wanted fertility rates	78
Figure 6.1	Desire to limit childbearing by number of living children	72
Figure 6.2	Ideal family size	73
Figure 6.3	Ideal family size by number of living children	73
Figure 6.4	Fertility planning status	74
Figure 6.5	Trends in wanted and actual fertility	74
7	FAMILY PLANNING	79
Table 7.1	Knowledge of contraceptive methods	87
Table 7.2	Current use of contraception by age	87
Table 7.3	Current use of contraception according to background characteristics	88
Table 7.4	Knowledge of fertile period	88
Table 7.5	Source of modern contraceptive methods	89
Table 7.6	Informed choice	90
Table 7.7	Twelve-month contraceptive discontinuation rates	90
Table 7.8	Reasons for discontinuation	91
Table 7.9.1	Need and demand for family planning among currently married women	91
Table 7.9.2	Need and demand for family planning for all women	92
Table 7.10	Decision making about family planning	93

Table 7.11	Future use of contraception.....	93
Table 7.12	Exposure to family planning messages.....	94
Table 7.13	Contact of nonusers with family planning providers.....	95
Figure 7.1	Contraceptive use.....	80
Figure 7.2	Trends in contraceptive use.....	80
Figure 7.3	Modern contraceptive use by region.....	81
Figure 7.4	Use of modern methods by education.....	81
Figure 7.5	Source of modern contraceptive methods.....	82
Figure 7.6	Contraceptive discontinuation rates.....	83
Figure 7.7	Demand for family planning.....	84
Figure 7.8	Trends in demand for family planning.....	84
Figure 7.9	Unmet need by region.....	84
8	ABORTION.....	97
Table 8.1	Pregnancy outcome by background characteristics.....	101
Table 8.2	Lifetime experience with induced abortion.....	102
Table 8.3	Induced abortion rates.....	103
Table 8.4	Trends in age-specific and total abortion rates.....	103
Table 8.5	Induced abortion by background characteristics.....	104
Table 8.6	Use of contraception before pregnancy.....	104
Table 8.7	Reason for abortion.....	105
Figure 8.1	Pregnancy outcome.....	97
Figure 8.2	Induced abortion by pregnancy order.....	98
Figure 8.3	Age-specific abortion rates.....	99
Figure 8.4	Reason for abortion.....	99
9	INFANT AND CHILD MORTALITY.....	107
Table 9.1	Early childhood mortality rates.....	113
Table 9.2	Five-year early childhood mortality rates according to background characteristics.....	113
Table 9.3	Ten-year early childhood mortality rates according to additional characteristics.....	114
Table 9.4	Perinatal mortality.....	115
Table 9.5	High-risk fertility behavior.....	116
Figure 9.1	Trends in early childhood mortality rates.....	108
Figure 9.2	Under-5 mortality by region.....	109
Figure 9.3	Under-5 mortality by household wealth.....	109
Figure 9.4	Childhood mortality by previous birth interval.....	110
Figure 9.5	Death registration.....	112
10	MATERNAL HEALTH CARE.....	117
Table 10.1	Antenatal care.....	125
Table 10.2	Number of antenatal care visits and timing of first visit.....	126
Table 10.3	Components of antenatal care.....	127
Table 10.4	Place of delivery.....	128
Table 10.5	Assistance during delivery.....	129
Table 10.6	Cesarean section.....	130
Table 10.7	Duration of stay in health facility after birth.....	130
Table 10.8	Timing of first postnatal check for the mother.....	131
Table 10.9	Type of provider of first postnatal check for the mother.....	132
Table 10.10	Timing of first postnatal check for the newborn.....	133
Table 10.11	Type of provider of first postnatal check for the newborn.....	134
Table 10.12	Content of postnatal care for newborns.....	135

Table 10.13	Knowledge of danger signs and complications during pregnancy and delivery	136
Table 10.14	Problems in accessing health care	137
Figure 10.1	Trends in antenatal care coverage	118
Figure 10.2	Trends in place of birth	120
Figure 10.3	Health facility births by region	120
Figure 10.4	Assistance during delivery	121
11	CHILD HEALTH.....	139
Table 11.1	Child's size and weight at birth.....	147
Table 11.2	Possession and observation of vaccination cards, according to background characteristics	148
Table 11.3	Vaccinations by source of information	149
Table 11.4	Vaccinations by background characteristics	150
Table 11.5	Prevalence and treatment of fever	151
Table 11.6	Prevalence and treatment of diarrhea	152
Table 11.7	Feeding practices during diarrhea	153
Table 11.8	Oral rehydration therapy, zinc, and other treatments for diarrhea	154
Table 11.9	Knowledge of ORS packets	155
Table 11.10	Source of advice or treatment for children with diarrhea.....	156
Table 11.11	Disposal of children's stools	157
Table 11.12	Knowledge of danger signs and symptoms of childhood illnesses	158
Figure 11.1	Childhood vaccinations.....	141
Figure 11.2	Vaccination coverage by residence	142
Figure 11.3	Basic vaccinations by region.....	142
Figure 11.4	Diarrhea prevalence by age	143
Figure 11.5	Feeding practices during diarrhea	144
Figure 11.6	Treatment of diarrhea.....	144
Figure 11.7	Prevalence and treatment of childhood illness	145
12	NUTRITION OF CHILDREN AND WOMEN.....	159
Table 12.1	Nutritional status of children.....	174
Table 12.2	Initial breastfeeding.....	175
Table 12.3	Breastfeeding status according to age	176
Table 12.4	Median duration of breastfeeding	177
Table 12.5	Foods and liquids consumed by children in the day or night preceding the interview.....	178
Table 12.6	Minimum acceptable diet.....	179
Table 12.7	Prevalence of anemia in children	180
Table 12.8	Presence of iodized salt in household	181
Table 12.9	Micronutrient intake among children	182
Table 12.10	Therapeutic and supplemental foods.....	183
Table 12.11	Nutritional status of women	184
Table 12.12	Prevalence of anemia in women	185
Table 12.13	Foods and liquids consumed by women in the day or night preceding the interview.....	186
Table 12.14	Micronutrient intake among mothers	188
Figure 12.1	Trends in nutritional status of children	161
Figure 12.3	Infant and young child feeding indicators on breastfeeding status	163
Figure 12.4	IYCF indicators on minimum acceptable diet.....	166
Figure 12.5	Childhood anemia status by residence	167
Figure 12.6	Anemia in children by region.....	167
Figure 12.7	Trends in women's nutritional status	170
Figure 12.8	Anemia in women by region	171

13	HIV/AIDS-RELATED KNOWLEDGE, ATTITUDES, AND BEHAVIOR.....	189
	Table 13.1 Knowledge of HIV or AIDS	197
	Table 13.2 Knowledge of HIV prevention methods	198
	Table 13.3 Comprehensive knowledge about HIV	199
	Table 13.4 Knowledge of prevention of mother-to-child transmission of HIV	199
	Table 13.5 Discriminatory attitudes towards people living with HIV	200
	Table 13.6 Coverage of prior HIV testing.....	201
	Table 13.7 Pregnant women counseled and tested for HIV	202
	Table 13.8 Knowledge and coverage of self-testing for HIV	203
	Table 13.9 Self-reported prevalence of sexually transmitted infections (STIs)	204
	Table 13.10 Women seeking treatment for STIs.....	205
	Table 13.11 Comprehensive knowledge about HIV among young women	205
	Table 13.12 Age at first sexual intercourse among young women	206
	Table 13.13 Recent HIV tests among young women	206
	Figure 13.1 Knowledge of HIV prevention among women by region	190
	Figure 13.2 Trends in knowledge of HIV.....	191
	Figure 13.3 Knowledge of mother-to-child transmission (MTCT)	191
	Figure 13.4 Discriminatory attitudes among women by region	192
	Figure 13.5 HIV testing.....	193
	Figure 13.6 Pregnant women counseled and tested for HIV	194
14	DOMESTIC VIOLENCE.....	207
	Table 14.1 Experience of physical violence.....	216
	Table 14.2 Persons committing physical violence	217
	Table 14.3 Experience of sexual violence.....	218
	Table 14.4 Age at first experience of sexual violence	219
	Table 14.5 Persons committing sexual violence	219
	Table 14.6 Experience of different forms of violence.....	219
	Table 14.7 Experience of violence during pregnancy	220
	Table 14.8 Marital control exercised by husbands.....	221
	Table 14.9 Forms of spousal violence.....	222
	Table 14.10 Spousal violence by background characteristics	223
	Table 14.11 Spousal violence by husband's characteristics and empowerment indicators	224
	Table 14.12 Violence by any husband in the last 12 months	225
	Table 14.13 Experience of spousal violence by duration of marriage	225
	Table 14.14 Injuries to women due to spousal violence	226
	Table 14.15 Violence by women against their husband by women's background characteristics.....	227
	Table 14.16 Violence by women against their husband by husband's characteristics and empowerment indicators	228
	Table 14.17 Help seeking to stop violence	229
	Table 14.18 Sources for help to stop the violence	230
	Figure 14.1 Women's experience of physical violence by marital status.....	209
	Figure 14.2 Experience of different forms of violence.....	210
	Figure 14.3 Marital controlling behaviors by fear of husband	211
	Figure 14.4 Forms of spousal violence.....	212
	Figure 14.5 Spousal violence by region	212
	Figure 14.6 Spousal violence by husband's alcohol consumption	213
15	WOMEN'S EMPOWERMENT	231
	Table 15.1 Employment and cash earnings of currently married women	239
	Table 15.2.1 Control over women's cash earnings and relative magnitude of women's cash earnings	239
	Table 15.2.2 Control over men's cash earnings	240

Table 15.3	Women’s control over their own earnings and over those of their husbands.....	240
Table 15.4	Ownership of assets	241
Table 15.5	Ownership of title or deed for house.....	242
Table 15.6	Ownership and use of bank accounts and mobile phones	243
Table 15.7	Participation in decision making.....	243
Table 15.8	Women’s participation in decision making by background characteristics.....	244
Table 15.9	Attitude toward wife beating.....	245
Table 15.10	Attitudes toward negotiating safer sexual relations with husband	246
Table 15.11	Ability to negotiate sexual relations with husband	247
Table 15.12	Indicators of women’s empowerment	247
Table 15.13	Current use of contraception by women’s empowerment.....	248
Table 15.14	Ideal number of children and unmet need for family planning by women’s empowerment	248
Table 15.15	Reproductive health care by women’s empowerment	249
Figure 15.1	Employment by age	232
Figure 15.2	Control over women’s earnings: Person who decides how the wife’s cash earnings are used.....	233
Figure 15.3	Ownership of assets	234
Figure 15.4	Women’s participation in decision making.....	236
Figure 15.5	Attitudes towards wife beating.....	236
APPENDIX A SAMPLE DESIGN		253
Table A.1	Households.....	254
Table A.2	Enumeration areas.....	254
Table A.3	Sample allocation of clusters and households.....	255
Table A.4	Sample allocation of completed interviews with women.....	255
Table A.5	Sample implementation.....	257
APPENDIX B ESTIMATES OF SAMPLING ERRORS		259
Table B.1	List of selected variables for sampling errors, Tajikistan DHS 2017.....	261
Table B.2	Sampling errors: Total sample, Tajikistan DHS 2017	262
Table B.3	Sampling errors: Urban sample, Tajikistan DHS 2017	263
Table B.4	Sampling errors: Rural sample, Tajikistan DHS 2017	264
Table B.5	Sampling errors: Dushanbe sample, Tajikistan DHS 2017.....	265
Table B.6	Sampling errors: GBAO sample, Tajikistan DHS 2017.....	266
Table B.7	Sampling errors: Sughd sample, Tajikistan DHS 2017.....	267
Table B.8	Sampling errors: DRS sample, Tajikistan DHS 2017	268
Table B.9	Sampling errors: Khatlon sample, Tajikistan DHS 2017	269
Table B.10	Sampling errors: Feed the Future districts (FTF), Tajikistan DHS 2017 ...	270
APPENDIX C DATA QUALITY TABLES		271
Table C.1	Household age distribution	271
Table C.2	Age distribution of eligible and interviewed women	271
Table C.3	Completeness of reporting	272
Table C.4	Births by calendar years	272
Table C.5	Reporting of age at death in days	273
Table C.6	Reporting of age at death in months.....	273
Table C.7	Height and weight data completeness and quality for children.....	274

ACKNOWLEDGMENTS

The Statistical Agency under the President of the Republic of Tajikistan is pleased to present the results of the 2017 Tajikistan Demographic and Health Survey (TjDHS). This survey was funded by the United States Agency for International Development (USAID). Additional funding was provided by the United Nations Children’s Fund (UNICEF) and United Nations Population Fund (UNFPA) in Tajikistan. The 2017 TjDHS is the second DHS survey to be undertaken in the country.

The Statistical Agency wishes to express its appreciation to the following organizations:

- Ministry of Health and Social Protection of Population of the Republic of Tajikistan.
- The Demographic and Health Surveys (DHS) Program/ICF for technical support, training of fieldwork staff, consultations, recommendations, and analysis of the data collected.
- The 2017 TjDHS Steering Committee for their technical assistance and timely support in implementation of this work.

The Statistical Agency, in particular, expresses appreciation to the following staff and consultants at The DHS Program/ICF for their technical support during all stages of survey design and implementation: Gulnara Semenov, regional coordinator; Jeremy Taglieri, 2017 TjDHS country manager; Guillermo Rojas, data processing director; Mahmoud Elkasabi, senior sampling specialist; Alexander Izmukhambetov, data processing specialist; and Ikhtier Kholmatov, data processing consultant.

We also wish to acknowledge the employees of the statistical system of the Republic of Tajikistan for their active participation in and contribution to this work. Over 200 staff members from the Statistical Agency under the President of the Republic of Tajikistan, working in regional, city, and rayon branches of the agency as well as in the State Leading Information Centre, participated in the survey.

We hereby extend our gratitude to the government of Tajikistan and to the representatives of local authorities for their support and assistance during the survey process.

Above all, we appreciate the co-operation of all the survey respondents who have made the 2017 TjDHS a success.

This report was prepared as a joint effort of the Statistical Agency under the President of the Republic of Tajikistan and The DHS Program/ICF staff.

Mrs. Hasanzoda Gulnora Kenja
Director, Statistical Agency under the President of the
Republic of Tajikistan, and National Coordinator, 2017 TjDHS

ACRONYMS AND ABBREVIATIONS

AIDS	acquired immunodeficiency syndrome
ANC	antenatal care
ARI	acute respiratory infection
ART	antiretroviral therapy
BCG	Bacille Calmette-Guérin
BFHI	Baby Friendly Hospital Initiative
BMI	body mass index
CAPI	computer-assisted personal interview
CSPro	Census and Survey Processing System
DHS	Demographic and Health Survey
DPT	diphtheria, pertussis, and tetanus
DRS	Districts of Republican Subordination
EA	enumeration area
FTF	Feed the Future
GAR	gross attendance ratio
GBAO	Gorno-Badakhshan Autonomous Oblast
GFR	general fertility rate
GPI	gender parity index
HepB	hepatitis B
Hib	<i>haemophilus influenzae</i> type B
HIV	human immunodeficiency virus
ISCO	International Standard Classification of Occupations
IFSS	internet file streaming system
IUD	intrauterine device
IYCF	infant and young child feeding
LAM	lactational amenorrhea method
LPG	liquid petroleum gas
MDD-W	Minimum Dietary Diversity for Women
MOHSP	Ministry of Health and Social Protection of Population
MR	measles and rubella
MTCT	mother-to-child transmission
NAR	net attendance ratio
NN	neonatal mortality
ORS	oral rehydration salts
ORT	oral rehydration therapy

PNN	postneonatal mortality
PSU	primary sampling unit
RHF	recommended homemade fluids
SA	Statistical Agency
SD	standard deviation
STI	sexually transmitted infection
TAR	total abortion rate
TBA	traditional birth attendant
TFR	total fertility rate
TjDHS	Tajikistan Demographic and Health Survey
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VAD	vitamin A deficiency
VIP	ventilated improved pit
WHO	World Health Organization

READING AND UNDERSTANDING TABLES FROM THE 2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY (TJDHS)

The new format of the 2017 TjDHS final report is based on approximately 185 tables of data. They are located for quick reference at the end of each chapter and through links in the text (electronic version). Additionally, this more reader-friendly version features about 80 figures that clearly highlight trends, subnational patterns, and background characteristics. Large colorful maps display breakdowns for regions in Tajikistan. The text has been simplified to highlight key points in bullets and to clearly identify indicator definitions in boxes.

While the text and figures featured in each chapter highlight some of the most important findings from the tables, not every finding can be discussed or displayed graphically. For this reason, TjDHS data users should be comfortable reading and interpreting tables.

The following pages provide an introduction to the organization of TjDHS tables, the presentation of background characteristics, and a brief summary of sampling and understanding denominators. In addition, this section provides some exercises for users as they practice their new skills in interpreting TjDHS tables.

Table 11.3 shows that 79% of children age 12-23 months and 70% of children age 24-35 months have received all of the vaccinations appropriate for their age group. The majority of children received all of the vaccinations by the appropriate age (74% of children age 12-23 months and 64% of children age 24-35 months).

Patterns by background characteristics

- Vaccination coverage is generally lower among urban children than rural children. For example, 84% of children age 24-35 months in rural areas have received all basic vaccinations compared with 76% of children in urban areas (Table 11.4 and Figure 11.2).
- Sughd has the highest proportion of children age 24-35 months who have received all basic vaccinations (92%), followed by Khatlon (86%) (Figure 11.3).

Figure 11.2 Vaccination coverage by residence

Percentage of children age 24-35 months who received all basic vaccines at any time before the survey

Residence	Percentage
Urban	76
Rural	84
Total	82

Figure 11.3 Basic vaccinations by region

Percentage of children age 24-35 months who received all basic vaccinations

Region	Percentage
Dushanbe	71%
Sughd	92%
Khatlon	86%
GBAO	70%
Other regions	69%

11.3 SYMPTOMS OF ACUTE RESPIRATORY INFECTION

Treatment of symptoms of acute respiratory infection (ARI)

Children with symptoms of ARI for whom advice or treatment was sought. ARI symptoms consist of short, rapid breathing that is chest-related, and/or difficult breathing that is chest-related.

Sample: Children under age 5 with symptoms of ARI in the 2 weeks before the survey.

One percent of children under age 5 were reported as having symptoms of an acute respiratory infection during the 2 weeks before the survey. Overall, 69% of the children ill with symptoms of ARI were taken to a health provider for advice or treatment. Treatment was sought for 36% of the children on the first day ARI symptoms were observed or the next day.

Example 1: Exposure to Mass Media

A Question Asked of All Survey Respondents

Table 3.4 Exposure to mass media						
Percentage of women age 15-49 who are exposed to specific media on a weekly basis, according to background characteristics, Tajikistan DHS 2017						
3	2					
Background characteristic	Reads a newspaper at least once a week	Watches television at least once a week	Listens to the radio at least once a week	Accesses all three media at least once a week	Accesses none of the three media at least once a week	Number of women
Age						
15-19	29.4	90.8	14.5	9.5	6.7	1,911
20-24	17.9	87.6	14.0	8.5	11.1	2,031
25-29	13.2	85.0	12.1	6.3	13.6	1,921
30-34	15.3	83.1	12.0	6.1	16.2	1,551
35-39	16.5	86.2	13.7	7.5	12.3	1,240
40-44	22.2	86.9	17.6	10.8	11.8	1,068
45-49	21.7	85.9	15.1	9.1	12.7	996
Residence						
Urban	30.0	90.0	21.6	15.2	8.2	2,694
Rural	15.7	85.5	11.3	5.7	13.1	8,024
Region						
Dushanbe	38.7	87.2	33.4	26.7	9.9	955
GBAO	41.2	86.3	6.0	5.0	8.8	209
Sughd	23.1	88.4	17.9	11.2	10.8	3,292
DRS	15.8	87.0	9.2	4.0	12.1	2,342
Khatlon	12.4	84.9	9.0	3.6	13.2	3,920
FTF districts	10.1	79.8	9.9	3.4	17.9	2,096
Education						
None/primary	6.5	72.3	8.1	3.3	27.0	619
General basic	12.4	83.9	9.6	3.9	14.8	3,615
General secondary	15.5	88.3	12.9	6.8	10.5	4,624
Professional primary/middle	34.5	90.1	18.6	12.7	6.9	860
Higher	57.3	95.3	33.4	28.2	2.3	1,000
Wealth quintile						
Lowest	10.0	79.1	6.1	2.1	19.8	2,113
Second	13.5	87.1	10.2	4.6	11.8	2,101
Middle	17.3	86.6	14.2	7.2	11.6	2,109
Fourth	20.7	89.8	15.1	9.0	9.1	2,155
Highest	34.3	90.4	23.2	17.0	7.4	2,240
Total	19.3	86.7	13.9	8.1	11.9	10,718

Step 1: Read the title and subtitle—highlighted in orange in Example 1. They tell you the topic and the specific population group being described. In this case, the table is about women’s exposure to mass media. All eligible female respondents age 15-49 were asked these questions.

Step 2: Scan the column headings—highlighted in green. They describe how the information is categorized. In this table, the first three columns of data show different types of data that women access at least once a week. The fourth column shows women who access all three types of media, while the fifth column is women who do not access any of the three media at least once a week. The last column lists the number of women interviewed in the survey.

Step 3: Scan the row headings—the first vertical column highlighted in blue in Example 1. These show the different ways the data are divided into categories based on population characteristics. In this case, the table presents women’s exposure to mass media by age, urban-rural residence, region, FTF districts, educational level, and wealth quintile. Most of the tables in the TjDHS report will be divided into these same categories.

Step 4: Look at the row at the bottom of the table highlighted in pink. These percentages represent the totals of all women age 15-49 and their exposure to mass media on a weekly basis. In this case, 19.3%* of women read the newspaper at least once a week, 86.7% watch television weekly, and 13.9% listen to the radio weekly.

Step 5: To find out what percentage of women with more higher education access all three media weekly, draw two imaginary lines, as shown on the table. This shows that 28.2% of women age 15-49 with higher education access all three types of media weekly.

Step 6: By looking at patterns by background characteristics, we can see how exposure to media varies across Tajikistan. Mass media are often used to communicate health messages. Knowing how mass media exposure varies among different groups can help program planners and policy makers determine how to most effectively reach their target populations.

* For the purpose of this document data are presented exactly as they appear in the table including decimal places. However, the text in the remainder of this report rounds data to the nearest whole percentage point.

Practice: Use the table in Example 1 to answer the following questions:

- a) What percentage of women in Tajikistan do not access any of the three media at least once a week?
- b) What age group of women are most likely to read a newspaper weekly?
- c) Compare women in urban areas and women in rural areas—which group is more likely to listen to the radio weekly?
- d) By region, what are the lowest and highest percentages (range) of women who access all three media at least once a week?
- e) Is there a clear pattern in exposure to television on a weekly basis by education level?
- f) Is there a clear pattern in exposure to radio on a weekly basis by wealth quintile?

Answers:
a) 11.9%
b) Women age 15-19: 29.4% of women in this age group read a newspaper at least once a week.
c) Women in urban areas, 21.6% listen to the radio weekly, compared to 11.3% of women in rural areas.
d) 3.6% of women in Khatlon access all three media at least once a week, compared to 26.7% in Dushanbe.
e) Watching television on a weekly basis increases with a woman's level of education; 72.3% of women with no or primary education watch television weekly, compared to 95.3% of women with higher education.
f) Listening to the radio on a weekly basis increases as household wealth increases; 6.1% of women in the lowest wealth quintile listen to the radio weekly, compared to 23.2% of women in the highest wealth quintile.

Example 2: Prevalence and Treatment of Fever

A Question Asked of a Subgroup of Survey Respondents

Table 11.5 Prevalence and treatment of fever						
Background characteristic	Among children under age 5:		Among children under age 5 with fever:			
	Percentage with fever	Number of children	Percentage for whom treatment was sought ¹			
			Percentage for whom advice or treatment was sought ¹	Percentage for whom treatment was sought same or next day	Percentage who took antibiotic drugs	Number of children with fever
Age in months						
<6	8.7	590	51.9	36.8	57.5	51
6-11	16.2	614	44.7	28.1	66.7	99
12-23	12.7	1,394	53.1	37.9	72.9	178
24-35	8.0	1,269	43.4	30.0	54.2	102
36-47	7.2	1,294	30.5	16.3	63.0	93
48-59	5.7	1,135	29.6	19.9	41.2	65
Sex						
Male	9.6	3,178	44.1	30.5	63.8	305
Female	9.1	3,118	43.4	28.2	60.5	283
Residence						
Urban	9.0	1,328	54.3	37.5	62.9	119
Rural	9.4	4,968	41.1	27.3	62.0	469
Region						
Dushanbe	6.7	407	44.2	29.2	44.1	27
GBAO	16.5	102	29.9	6.4	31.2	17
Sughd	4.0	1,803	49.0	33.6	50.7	72
DRS	9.6	1,496	44.1	29.6	56.5	143
Khatlon	13.2	2,488	43.1	29.6	70.3	328
FTF districts	6.3	1,386	57.1	37.6	64.6	88
Mother's education						
None/primary	10.5	524	(40.9)	(24.0)	(54.9)	55
General basic	10.1	2,321	44.8	29.9	64.0	233
General secondary	9.1	2,482	43.0	30.7	63.7	225
Professional primary/middle	6.5	462	(52.8)	(27.1)	(69.7)	30
Higher	8.7	507	39.4	28.5	48.8	44
Wealth quintile						
Lowest	12.5	1,165	38.6	24.0	62.9	146
Second	10.5	1,281	44.3	29.8	57.9	135
Middle	8.4	1,395	32.1	23.3	62.7	117
Fourth	7.8	1,383	57.8	38.2	69.4	107
Highest	7.8	1,072	50.1	35.2	57.9	83
Total	9.3	6,296	43.7	29.4	62.2	588

Note: Figures in parentheses are based on 25-49 unweighted cases.
¹ Includes advice or treatment from public and private health sector, pharmacy, shop, and market. Excludes advice or treatment from a traditional practitioner.

Step 1: Read the title and subtitle. In this case, the table is about two separate groups: all children under 5 (a) and children under 5 with fever in the two weeks before the survey (b).

Step 2: Identify the two panels. First, identify the columns that refer to all children under 5 (a), and then isolate the columns that refer only to children under 5 with fever in the two weeks before the survey (b).

Step 3: Look at the first panel. What percentage of children under 5 had fever in the two weeks before the survey? It's 9.3%. Now look at the second panel. How many children under 5 had fever in the two weeks before the survey? It's 588 children or 9.3% of the 6,296 (with rounding). The second panel is a subset of the first panel.

Step 4: Only 9.3% of children under 5 had fever in the two weeks before the survey. Once these children are divided into the background characteristic categories, there may be too few cases for the percentages to be reliable.

- What percentage of children under 5 with fever in the two weeks before the survey whose mothers have no education or primary education took antibiotic drugs? 54.9%. This percentage is in parentheses because there are between 25 and 49 children under 5 with fever in the two weeks before the survey (unweighted) in this category. Readers should use this number with caution—it may not be reliable. (For more information on weighted and unweighted numbers, see Example 3.)

Note: When parentheses or asterisks are used in a table, the explanation will be noted under the table. If there are no parentheses or asterisks in a table, you can proceed with confidence that enough cases were included in all categories that the data are reliable.

Example 3: Understanding Sampling Weights in TjDHS Tables

A sample is a group of people who have been selected for a survey. In the TjDHS, the sample is designed to represent the national population age 15-49. In addition to national data, most countries want to collect and report data on smaller geographical or administrative areas. However, doing so requires a minimum sample size per area. For the 2017 TjDHS, the survey sample is representative at the national and regional levels, and for urban and rural areas.

To generate statistics that are representative of the country as a whole and the five regions, the number of women surveyed in each region should contribute to the size of the total (national) sample in proportion to size of the region. However, if some regions have small populations, then a sample allocated in proportion to each region's population may not include sufficient women from each region for analysis. To solve this problem, regions with small populations are oversampled. For example, let's say that you have enough money to interview 10,718 women and want to produce results that are representative of Tajikistan as a whole and its regions (as in Table 3.1). However, the total population of Tajikistan is not evenly distributed among the regions: some regions, such as Khatlon, are heavily populated while others, such as GBAO are not. Thus, GBAO must be oversampled.

A sampling statistician determines how many women should be interviewed in each region in order to get reliable statistics. The **blue column (1)** in the table at the right shows the actual number of women interviewed in each region. Within the regions, the number of women interviewed ranges from 973 in GBAO to 3,217 in Khatlon. The number of interviews is sufficient to get reliable results in each region.

With this distribution of interviews, some regions are overrepresented and some regions are underrepresented. For example, the population in Khatlon is about 37% of the population in Tajikistan, while GBAO's population contributes only 2% of the population in Tajikistan. But as the blue column shows, the number of women interviewed in Khatlon accounts for only about 30% of the total sample of women interviewed (3,217/10,718), while the number of women interviewed in GBAO accounts for about 9% of the total sample of women interviewed (973/10,718). This unweighted distribution of women does not accurately represent the population.

In order to get statistics that are representative of Tajikistan, the distribution of the women in the sample needs to be weighted (or mathematically adjusted) such that it resembles the true distribution in the country. Women from a small region, like GBAO, should only contribute a small amount to the national total. Women from a large region, like Khatlon, should contribute much more. Therefore, DHS statisticians mathematically calculate a "weight" which is used to adjust the number of women from each region so that each region's contribution to the total is proportional to the actual population of the region. The numbers in the **purple column (2)** represent the "weighted" values. The weighted values can be smaller or larger than the unweighted values at region level. The total national sample size of 10,718 women has not changed after weighting, but the distribution of the women in the regions has been changed to represent their contribution to the total population size.

How do statisticians weight each category? They take into account the probability that a woman was selected in the sample. If you were to compare the **green column (3)** to the actual population distribution of Tajikistan, you would see that women in each region are contributing to the total sample with the same weight that they contribute to the population of the country. The weighted number of women in the survey now accurately represents the proportion of women who live in GBAO and the proportion of women who live in Khatlon.

Table 3.1 Background characteristics of respondents

Percent distribution of women age 15-49 by selected background characteristics, Tajikistan DHS 2017

Background characteristic	Weighted percent	Weighted number	Unweighted number
Region	3	2	1
Dushanbe	8.9	955	1,814
GBAO	2.0	209	973
Sughd	30.7	3,292	2,235
DRS	21.8	2,342	2,479
Khatlon	36.6	3,920	3,217
Total	100.0	10,718	10,718

With sampling and weighting, it is possible to interview enough women to provide reliable statistics at national and region levels. In general, only the weighted numbers are shown in each of the TjDHS tables, so don't be surprised if these numbers seem low: they may actually represent a larger number of women interviewed.

SUSTAINABLE DEVELOPMENT GOAL INDICATORS

Sustainable Development Goal Indicators, Tajikistan DHS 2017

Indicator	Sex		Total	TjDHS table number
	Male	Female		
2. Zero hunger				
2.2.1 Prevalence of stunting among children under 5 years of age	17.8	17.2	17.5	12.1
2.2.2 Prevalence of malnutrition among children under 5 years of age	9.6	8.2	8.9	na
a) Prevalence of wasting among children under 5 years of age	6.1	5.0	5.6	12.1
b) Prevalence of overweight among children under 5 years of age	3.5	3.2	3.3	12.1
3. Good health and well-being				
3.1.2 Proportion of births attended by skilled health personnel	na	na	94.8	10.5
3.2.1 Under-five mortality rate ¹	40	26	33	9.2
3.2.2 Neonatal mortality rate ¹	16	10	13	9.2
3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods	na	52.2	na	7.9.2
3.7.2 Adolescent birth rates per 1,000 women				
a) Girls aged 10-14 years ²	na	0	na	na
b) Women aged 15-19 years ³	na	54	na	5.1
3.a.1 Age-standardized prevalence of current tobacco use among persons aged 15 years and older ⁴	na	0.5	na	na
3.b.1 Proportion of the target population covered by all vaccines included in their national program				
a) Coverage of DPT containing vaccine (3rd dose) ⁵	86.5	87.4	87.0	11.4
5. Gender equality				
5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months ^{6,7}	na	24.1	na	14.9
a) Physical violence	na	18.7	na	14.9
b) Sexual violence	na	1.4	na	14.9
c) Psychological violence	na	13.3	na	14.9
5.3.1 Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18				
a) before age 15	na	0.1	na	4.3
b) before age 18	na	8.7	na	4.3
5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care ⁸	na	27.2	na	na
5.b.1 Proportion of individuals who own a mobile telephone ⁹	na	53.7	na	15.6
	Residence		Total	TjDHS table number
	Urban	Rural		
7. Affordable clean energy				
7.1.1 Proportion of population with access to electricity	99.2	99.3	99.3	2.3
7.1.2 Proportion of population with primary reliance on clean fuels and technology ¹⁰	97.0	75.2	80.5	2.3
	Sex		Total	TjDHS table number
	Male	Female		
8. 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 ¹¹	na	1.1	na	15.6
16. Peace, justice, and strong institutions				
16.2.1 Percentage of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month ¹²	70.5	67.4	69.0	2.13
16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority	95.9	95.7	95.8	2.10
17. Partnerships for the goals				
17.8.1 Proportion of individuals using the Internet ¹³	na	12.4	na	3.5

na = Not applicable

¹ Expressed in terms of deaths per 1,000 live births for the 5-year period preceding the survey

² Equivalent to the age-specific fertility rate for girls age 10-14 for the 3-year period preceding the survey, expressed in terms of births per 1,000 girls age 10-14

³ Equivalent to the age-specific fertility rate for women age 15-19 for the 3-year period preceding the survey, expressed in terms of births per 1,000 women age 15-19

⁴ Data are not age-standardized and are available for women age 15-49 only.

⁵ The percentage of children age 12-23 months who received three doses of DPT-HepB-Hib vaccine

⁶ Data are available for women age 15-49 who have ever been in union only.

⁷ In the DHS, psychological violence is termed emotional violence.

⁸ Data are available for currently married women who are not pregnant only.

⁹ Data are available for women age 15-49 only.

¹⁰ Measured as the percentage of the population using clean fuel for cooking.

¹¹ Data are available for women age 15-49 who have and use an account at bank or other financial institution; information on use of a mobile-money-service provider is not available

¹² Data are available for children age 1-14 only.

¹³ Data are available for women age 15-49 who have used the internet in the past 12 months.

TAJIKISTAN



The 2017 Tajikistan Demographic and Health Survey (TjDHS) is the second Demographic and Health Survey conducted in Tajikistan. It was implemented by the Statistical Agency under the President of the Republic of Tajikistan (SA) in collaboration with the Ministry of Health and Social Protection of Population (MOHSP). Data collection took place from August 8 until November 11, 2017. ICF provided technical assistance through The DHS Program, which is funded by the United States Agency for International Development (USAID) and offers financial support and technical assistance for population and health surveys in countries worldwide. The United Nations Population Fund (UNFPA) and the United Nations Children’s Fund (UNICEF) in Tajikistan provided additional funds for the survey.

1.1 SURVEY OBJECTIVES

The primary objective of the 2017 TjDHS is to provide current and reliable information on population and health issues. Specifically, the TjDHS collected information on fertility and contraceptive use, maternal and child health and nutrition, childhood mortality, domestic violence against women, child discipline, awareness and behavior regarding HIV/AIDS and other sexually transmitted infections (STIs), and other health-related issues such as smoking and high blood pressure. The 2017 TjDHS follows the 2012 TjDHS survey and provides updated estimates of key demographic and health indicators.

The information collected through the TjDHS is intended to assist policy makers and program managers in evaluating and designing programs and strategies for improving the health of the country’s population.

1.2 SAMPLE DESIGN

The sampling frame used for the 2017 TjDHS is the 2010 Tajikistan Population and Housing Census conducted by the SA. Administratively, Tajikistan is divided into five regions: Dushanbe, Districts of Republican Subordination (DRS), Sughd, Khatlon, and Gorno-Badakhshan Autonomous Oblast (GBAO). Each region is subdivided into urban and rural areas. The country is divided into districts distributed over the country’s regions. Each district is further divided into census divisions, which are subdivided into instruction areas. Each instruction area is divided into urban enumeration areas (EAs) or rural villages.

The sampling frame of the 2017 TjDHS is a list of EAs and natural villages covering all urban and rural areas of the country, with the primary sampling units (PSUs) being EAs in urban areas and natural villages in rural areas. An EA is a geographical area, usually a city block, consisting of the minimum number of households required for efficient counting; each EA serves as a counting unit for the population census.

The sample was designed to yield representative results for the urban and rural areas separately, and for each of the four administrative regions and Dushanbe. In addition, as in the previous TjDHS survey, the sample was designed to allow certain indicators to be presented for the 12 districts in Khatlon covered under the Feed the Future program (FTF); these 12 districts have been combined as a single FTF domain. The sampling frame excluded institutional populations such as persons in hotels, barracks, and prisons.

The 2017 TjDHS followed a stratified two-stage sample design. The first stage involved selecting sample PSUs (clusters) with a probability proportional to their size within each sampling stratum. A total of 366 clusters were selected, 166 in urban areas and 200 in rural areas.

The second stage involved systematic sampling of households. A household listing operation was undertaken in all of the selected clusters, and a fixed number of 22 households was selected from each

cluster with an equal probability systematic selection process, for a total sample of just over 8,000 households.

All women age 15-49 who were either permanent residents of the selected households or visitors who stayed in the households the night before the survey were eligible to be interviewed. Hemoglobin testing was performed in each household among eligible women age 15-49 who consented to being tested. With the parent's or guardian's consent, children age 6-59 months were also tested for anemia in each household. Height and weight information was collected from eligible women age 15-49 and children age 0-59 months in all households. In addition, one eligible woman in each household was randomly selected to be asked additional questions about domestic violence.

1.3 QUESTIONNAIRES

Three questionnaires were used in the 2017 TjDHS: the Household Questionnaire, the Woman's Questionnaire, and the Biomarker Questionnaire. These questionnaires, based on The DHS Program's model questionnaires, were adapted to reflect the population and health issues relevant to Tajikistan. In addition, information about the fieldworkers for the survey was collected through a self-administered Fieldworker Questionnaire. Suggestions were solicited from various stakeholders representing government ministries and agencies, nongovernmental organizations, and international donors. After all questionnaires were finalized in English, they were translated into Russian and Tajik.

The **Household Questionnaire** listed all members of and visitors to selected households. Basic demographic information was collected on each person listed, including age, sex, marital status, education, and relationship to head of household. For children under age 18, the survival status of parents was determined. The data on age and sex of household members and visitors were used to identify women who were eligible for individual interviews. The Household Questionnaire also collected information on child discipline about one randomly selected child age 1-14 per household, as well as characteristics of the household's dwelling unit, such as source of water; type of toilet facilities; materials used for flooring, external walls, and roofing; and ownership of various durable goods.

The **Woman's Questionnaire** was used to collect information from all eligible women age 15-49. These women were asked questions on the following topics:

- Background characteristics (including age, education, and media exposure)
- Pregnancy history, reasons for abortion, and child mortality
- Contraception
- Antenatal, delivery, and postnatal care
- Vaccinations and childhood illnesses
- Maternal and child health and nutrition
- Marriage and sexual activity
- Fertility preferences
- Women's work and husbands' background characteristics
- Knowledge, awareness, and behaviors regarding HIV/AIDS and other sexually transmitted infections (STIs)
- Knowledge, attitudes, and behaviors related to other health issues (e.g., injections, smoking, childhood illnesses, and pregnancy and childbirth)
- History of high blood pressure and blood pressure measurement
- Domestic violence

In addition, the **Biomarker Questionnaire** was used to record the results of the anthropometry measurements and hemoglobin testing, and was signed and dated by the health investigator.

The purpose of the **Fieldworker Questionnaire** was to collect basic background information on the people who collected data in the field, this included the Team Supervisor, Interviewer, and Biomarker Technician.

This self-administered questionnaire was created to serve as a tool in conducting analyses of data quality. The questionnaire was distributed and collected by the SA after the final selection of fieldworkers and before the fieldworkers entered the field. No personal identifiers were attached to the Tajikistan DHS fieldworkers' data file.

The 2017 TjDHS survey methodology and instruments were approved by the Institutional Review Board of ICF. The protocol for anemia testing was reviewed and approved by MOHSP and the Institutional Review Board of ICF.

1.4 ANTHROPOMETRY, ANEMIA TESTING, AND BLOOD PRESSURE MEASUREMENT

The 2017 TjDHS incorporated three biomarkers: anthropometry, anemia testing, and blood pressure measurement. Data related to the coverage of the anthropometric measures and the result of the anemia testing were recorded in the Biomarker Questionnaire, and blood pressure measurement data were recorded in the Woman's Questionnaire. All households in which anthropometry, anemia testing, or both were conducted received a brochure explaining the causes and prevention of anemia.

Anthropometry: In all households, height and weight measurements were recorded for children age 0-59 months and women age 15-49. Weight measurements were obtained using lightweight, electronic SECA 878 scales with a digital screen and the mother and child function. Height measurements were carried out with measuring boards made by Shorr Productions. Children younger than age 24 months were measured while lying down (recumbent) on the board, while standing height was measured for older children.

Hemoglobin testing: In all households, blood specimens were collected from all eligible children age 6-59 months and women age 15-49 who consented to testing for anemia. A consent statement was read to all eligible respondents or to the parent or adult responsible for children and young women age 15-17. Blood samples were drawn from a drop of blood taken from a finger prick (or a heel prick for young children with small fingers) and collected in a microcuvette. Hemoglobin analysis was carried out on-site using a battery-operated portable HemoCue 201+ analyzer, which produces a result in less than 1 minute. Results were given verbally and in writing. Parents of children with a hemoglobin level below 7 g/dl were instructed to take the child to a health facility for follow-up care. Likewise, nonpregnant women and pregnant women were referred for follow-up care if their hemoglobin level was below 7 g/dl and 9 g/dl, respectively.

Blood pressure: During the woman's interview, three blood pressure measurements were taken from consenting women age 15-49 using the Life Source blood pressure monitor UA-767F or a similar digital oscillometric device with automatic upper-arm inflation and automatic pressure release. Measurements were taken at intervals of 10 minutes or more. Systolic and diastolic blood pressure values are expressed in millimeters of mercury (mmHg). The average of the second and third measurements was used to classify the respondent with respect to hypertension, according to internationally recommended categories (WHO 1999). The information explaining the respondent's averaged blood pressure measurement result and a corresponding referral for advice were read aloud and then provided to the respondent in writing via the Blood Pressure Reporting Form.

1.5 PRETEST

Eleven women participated in a training to pretest the TjDHS survey questionnaires over a 4-week period from May 10 through June 5, 2017.

The classroom training focused on questionnaire content as well as how to take blood pressure measurements, how to test household salt for the presence of iodine, and how to report results back to the respondents. Participants were instructed on using the computer-assisted personal interviewing (CAPI) system, an electronic data capture system programmed on tablet computers that the participants used to

implement the survey. The DHS Program staff led training in Russian, with support from SA personnel in Tajik.

The biomarker classroom training of the health investigators (three women and three men), all physicians, was led by The DHS Program staff. The training included classroom instruction on the anthropometry measurements, anemia testing, appropriate procedures for obtaining informed consent, recording of biomarker information in the Biomarker Questionnaire, and reporting of test results back to the respondents and referrals. The training was divided into three sessions that followed the DHS biomarker curriculum: classroom training on anthropometry and anemia testing, in-class standardization of the tests and outdoor practice sessions, and field practice with interviewers.

As part of the pretest field work, interviewers and health investigators conducted household and women's interviews and collected biomarkers in both rural and urban areas. At the end of each day, both during and after the pretest fieldwork, debriefing sessions were held, and questionnaires were modified based on lessons drawn from the exercise.

1.6 TRAINING OF FIELD STAFF

Seventy-nine people (75 women and 4 men) participated in the 4-week main training course in Dushanbe on interviewing, which consisted of lectures, demonstrations, and practice interviews. Eighteen health investigators (12 women and 6 men) attended a parallel training course on conducting biomarker tests.

The main fieldwork training was conducted from July 10 until August 4, 2017. The training was led by master trainers recruited through SA regional offices who had participated in a 3-day training of trainers session conducted a few days earlier. The DHS Program staff, with assistance from the two senior TjDHS staff hired by SA, supported the training. The interviewer training was conducted in Tajik, and sessions discussed the concepts, procedures, and methodology of conducting the survey. In addition, senior subject specialists from the MOHSP attended the sessions to provide background on topics such as family planning and reproductive health, HIV/AIDS and other STIs, childhood immunization, and child health and nutrition. A guest speaker from the Committee on Women's and Family Affairs under the Government of Tajikistan was also invited to deliver a lecture on gender-based violence in Tajikistan. Participants were guided through the questionnaires. All participants received training on how to test household salt for iodine and how to take adult blood pressure measurements using a digital blood pressure measuring device with automatic upper-arm inflation and automatic pressure release.

Once training on use of paper questionnaires concluded, The DHS Program data processing staff and an ICF consultant conducted a weeklong training on computer-assisted personal interviewing (CAPI). From July 24 through July 29, 2017, participants learned about features of the data collection system, different scenarios and technical issues typically encountered during fieldwork, and ways to resolve issues.

The biomarker classroom portion of the training commenced on July 24 and continued through August 5, 2017. This training was led by The DHS Program staff with assistance from the two health investigators who excelled during the pretest in both the classroom training and the field practice. Biomarker training included classroom instruction that focused on anthropometry measurements, anemia testing, appropriate procedures for obtaining informed consent, recording biomarker information in the Biomarker Questionnaire, and reporting test results back to the respondents with referrals as needed. The training was divided into three sections in accord with the DHS biomarker curriculum: classroom training in anthropometry and anemia testing, in-class standardization of the tests and outdoor practice sessions, and field practice with interviewers. All supervisors received hands-on training on how to measure height/length and weight of eligible children and adults. Although the team health investigator is responsible for measuring height/length and weight, it was necessary to train supervisors to assist the health investigators during the measurement of the children.

Throughout the training, participants were evaluated through in-class exercises, quizzes, and observations made during field practice. At the end of the training, the teams were formed by selecting supervisors, interviewers, and health investigators. The supervisors received additional training in data quality control procedures, fieldwork coordination, and management. On July 21, all supervisors participated in a half-day practice held in a children's polyclinic in Dushanbe. In the polyclinic, after the supervisors received parental consent, they copied immunization records from the MOHSP form 63 and children's health cards directly to the tablet computers.

The trainees were taken for field practice twice in unsampled areas outside Dushanbe, where they had an opportunity to implement the survey in a real world situation. Field practice took place over 2 days and each interviewer visited a minimum of two households per day. During the field practice, a total of 169 women's interviews and 124 household interviews were completed. To practice biomarker collection, approximately 127 women were measured and 123 were tested for anemia. Among children, 136 were measured and 102 were tested for anemia. Consent was obtained from all individuals.

1.7 FIELDWORK

Data collection was carried out by 14 field teams, each consisting of one female team supervisor, four female interviewers, and one health investigator. Fieldwork started in most regions by August 8, 2017, and ended on November 11, 2017.

Fieldwork monitoring was an integral part of the survey. Senior TjDHS technical staff from SA, including the biomarker quality control field supervisor and IT specialists, visited teams regularly to review the work and monitor data quality. The DHS Program representatives also visited teams to monitor data collection and to observe the anemia testing and height and weight measurements of women and children under age 5. During field visits, staff provided teams they visited (supervisor, interviewers, and health investigator) with critical feedback to improve their performance. In addition, they used the TjDHS field-check tables based on data from the completed clusters to illustrate problems specific to each team visited.

1.8 DATA PROCESSING

All electronic data files were transferred via a secure internet file streaming system (IFSS) to the SA central office in Dushanbe, where they were stored on a password-protected computer. The data processing operation included secondary editing, which required resolution of computer-identified inconsistencies and coding of open-ended questions. The data were processed by two IT specialists and one secondary editor who took part in the main fieldwork training; they were supervised remotely by The DHS Program staff. Data editing was accomplished using CSPro software. During the fieldwork, field-check tables were generated to check various data quality parameters, and specific feedback was given to the teams to improve performance. Secondary editing and data processing were initiated in August 2017 and completed in February 2018.

1.9 RESPONSE RATES

Table 1.1 shows response rates for the 2017 TjDHS. All 8,064 households in the selected housing units were eligible for the survey, of which 7,915 were occupied. Of the occupied households, 7,843 were successfully interviewed, yielding a response rate of 99%.

In the interviewed households, 10,799 women age 15-49 were identified for subsequent individual interviews; interviews were completed with 10,718 women, yielding a response rate of 99%, which is the same response rate achieved in the 2012 survey.

Table 1.1 Results of the household and individual interviews

Number of households, number of interviews, and response rates, according to residence (unweighted), Tajikistan DHS 2017

Result	Residence		Total
	Urban	Rural	
Household interviews			
Households selected	3,654	4,410	8,064
Households occupied	3,559	4,356	7,915
Households interviewed	3,517	4,326	7,843
Household response rate ¹	98.8	99.3	99.1
Interviews with women age 15-49			
Number of eligible women	4,243	6,556	10,799
Number of eligible women interviewed	4,212	6,506	10,718
Eligible women response rate ²	99.3	99.2	99.2

¹ Households interviewed/households occupied² Respondents interviewed/eligible respondents

Key Findings

- **Drinking water:** 80% of households have access to an improved drinking water source.
- **Sanitation:** 97% of households have an improved toilet facility that is not shared with other households.
- **Indoor smoke:** 16% of households use solid fuels for cooking, and 8% are exposed to tobacco smoke inside the home on a daily basis.
- **Household population and composition:** 38% of the population is under age 15. The average household size is six persons. Twenty-one percent of households are headed by women.
- **Birth registration:** 96% of the births of children under age 5 are registered, an increase from 88% in 2012.
- **Educational attainment:** A large majority of women (80%) and men (79%) have at least some secondary education. Men are more likely than women to have post-secondary education (25% versus 13%).
- **Child discipline:** 69% of children age 1-14 were subjected to violent disciplinary methods in the month before the survey.

Information obtained in the 2017 Tajikistan DHS on the socioeconomic characteristics of the household population provides context to interpret demographic and health indicators and can furnish an approximate indication of the representativeness of the survey. In addition, this information sheds light on the living conditions of the population.

This chapter presents information on source of drinking water, sanitation, exposure to smoke inside the home, wealth, hand washing, household population composition, family living arrangements, birth registration, educational attainment, school attendance, and child discipline.

2.1 DRINKING WATER SOURCES AND TREATMENT

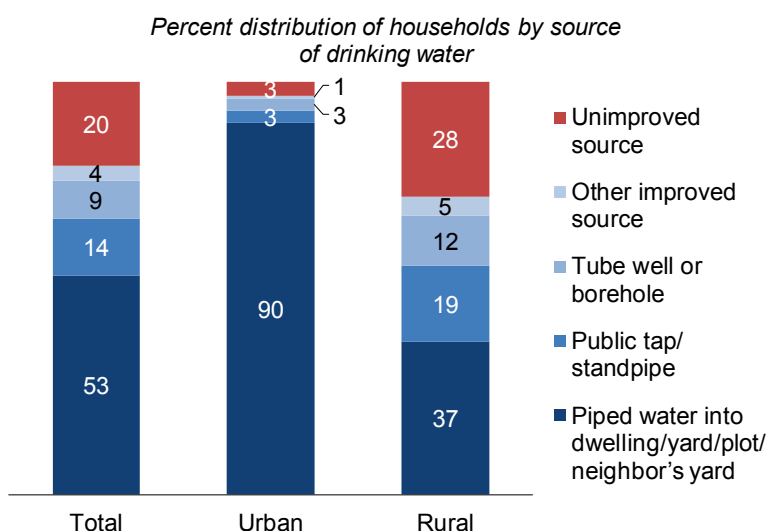
Improved sources of drinking water

Include piped water, public taps, standpipes, tube wells, boreholes, protected dug wells and springs, and rainwater. Households that use bottled water for drinking are classified as using an improved source only if their water source for cooking and handwashing comes from an improved source.

Sample: Households

Improved sources of water protect against outside contamination so that water is more likely to be safe to drink. In Tajikistan, 80% of households have access to an improved source of drinking water (Table 2.1 and Figure 2.1). The most common improved source is water piped into a dwelling, yard, or plot (51%), and the most frequently cited unimproved source is surface water, that is, water from rivers, lakes, ponds, or similar sources (12%). Almost all households boil the water used for drinking (92%).

Figure 2.1 Household drinking water by residence



Rural households obtain water from unimproved sources much more often than urban households (28% versus 3%). Almost all urban households (96%) have access to drinking water on their premises compared with 65% of rural households.

Trends: Access to improved water sources increased from 78% in 2012 to 80% in 2017. The proportion of households with access to water on the premises rose from 53% in 2012 to 75% in 2017. More households treated drinking water appropriately in 2017 (93%) than in 2012 (85%).

2.2 SANITATION

Improved toilet facilities

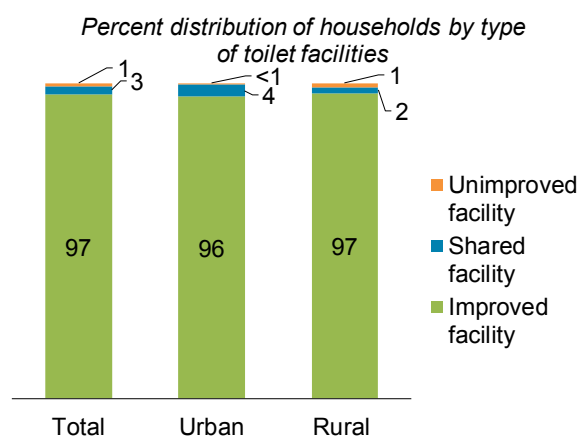
Include any unshared toilet of the following types: flush/pour flush toilets to piped sewer systems, septic tanks, and pit latrines; ventilated improved pit (VIP) latrines; pit latrines with slabs; and composting toilets

Sample: Households

Use of improved toilet facilities, which are unshared facilities that prevent household members from coming into contact with human waste, helps to reduce the spread of communicable diseases. Overall, 97% of households have an improved sanitation facility that is not shared with other households (Table 2.2). Use of unimproved toilet facilities is not common, just 1% in rural areas and less than 1% in urban areas (Figure 2.2). Only a few households share improved toilet facilities (4% in urban areas and 2% in rural areas).

Trends: Households using improved toilet facilities increased from 93% in 2012 to 97% in 2017.

Figure 2.2 Household toilet facilities by residence



2.3 EXPOSURE TO SMOKE INSIDE THE HOME AND OTHER HOUSEHOLD CHARACTERISTICS

2.3.1 Exposure to Smoke inside the Home

Exposure to smoke in the home, either from cooking with solid fuels or use of tobacco products, has potentially harmful health effects. Eighty-four percent of households use clean fuels (electricity or gas) for cooking (**Table 2.3**), an increase from 71% in 2012. Cooking with solid fuels is much more common among rural than urban households (23% versus 2%). In most rural households, cooking takes place in a separate building (86%) or outdoors (5%), which may limit exposure to pollutants in households that burn solid fuels for cooking.

Exposure to tobacco smoke is not common inside homes in Tajikistan. The majority of households (84%) report that no one ever smokes tobacco products in the home, and only 8% say smoking takes place on a daily basis.

2.3.2 Other Housing Characteristics

The 2017 TjDHS collected data on access to electricity; flooring, roof, and wall material; and the number of rooms used for sleeping (**Table 2.3**). Virtually all households (99%) have access to electricity. Most dwellings have some type of solid flooring, with wood being the most common material (50%). Earth or sand floors are more common in rural than in urban areas (29% versus 5%). Rural dwellings are also much more likely to have dirt walls than urban dwellings (48% versus 10%).

2.3.3 Household Possessions

The survey included questions about household ownership of common durable goods, means of transport, agricultural land, farm animals, and possession of a bank account (**Table 2.4**). Rates of possession of household effects vary. For example, almost all households have a television (98%) and mobile phone (96%), 69% own a refrigerator, but only 21% possess a computer. Very few households have a bank account (2%).

Urban households are more likely than rural households to possess common household effects. For example, 90% of urban households own a refrigerator compared with 60% of rural households. On the other hand, as expected, rural households have a higher ownership rate of agricultural land¹ than urban households (63% versus 11%). Rural households are more likely than urban households to own a car or truck (42% versus 35%) and a bicycle (42% versus 25%).

2.4 HOUSEHOLD WEALTH

Wealth index

Households are given scores based on the number and kinds of consumer goods they own, ranging from a television to a bicycle or car, and housing characteristics such as source of drinking water, toilet facilities, and flooring materials. These scores are derived using principal component analysis. National wealth quintiles are compiled by assigning the household score to each usual (de jure) household member, ranking each person in the household population by their score, and then dividing the distribution into five equal categories, each with 20% of the population.

Sample: Households

¹ According to the Land Code of the Republic of Tajikistan, land in the Republic of Tajikistan is exclusively owned by the State (GOT 2008). However, upon appropriate State registration, a land plot can be given for perpetual use to natural persons and legal entities of the Republic of Tajikistan (Land Code, Articles 11-15). Land suitable for agricultural needs can be allocated to natural persons and legal entities for agricultural production (Articles 65-71).

Table 2.5 presents data on wealth quintiles according to residence and region. Wealth is clearly concentrated in urban areas. Ninety percent of the de jure household population is in the two highest wealth quintiles in urban areas, while 52% falls into the two lowest quintiles in rural areas (**Figure 2.3**). The concentration of wealth differs markedly by region. Ninety-five percent of the household population in Dushanbe is in the highest quintile. In contrast, 71% of the household population in GBAO is in the two lowest quintiles.

2.5 HANDWASHING

Handwashing is one of the most effective ways to prevent germs from spreading. Interviewers were able to observe the place most often used for washing hands in the case of 95% of surveyed households (**Table 2.6**). Seventy-six percent of households had water and soap available in the place for handwashing. Only 4% of the households had no water, no soap, and no other cleansing agent available in the place for handwashing.

Patterns by background characteristics

- Urban households had soap and water at the place for handwashing more often than rural households (90% versus 70%).
- Among regions, households in GBAO were least likely to have soap and water available (49%).
- The availability of soap and water at the handwashing place increased with wealth, from 56% in the lowest quintile to 93% in the highest quintile.

2.6 HOUSEHOLD POPULATION AND COMPOSITION

Household

A person or group of related or unrelated persons who live together in the same dwelling unit(s), 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

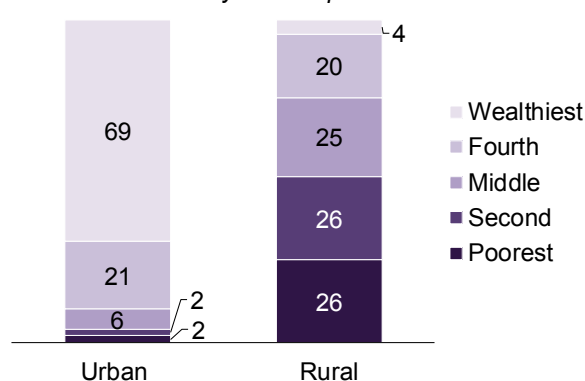
All persons who are usual residents of the selected households, whether or not they stayed in the household the night before the interview.

How data are calculated

All tables are based on the de facto population, unless specified otherwise.

Figure 2.3 Household wealth by residence

Percent distribution of de jure population by wealth quintiles

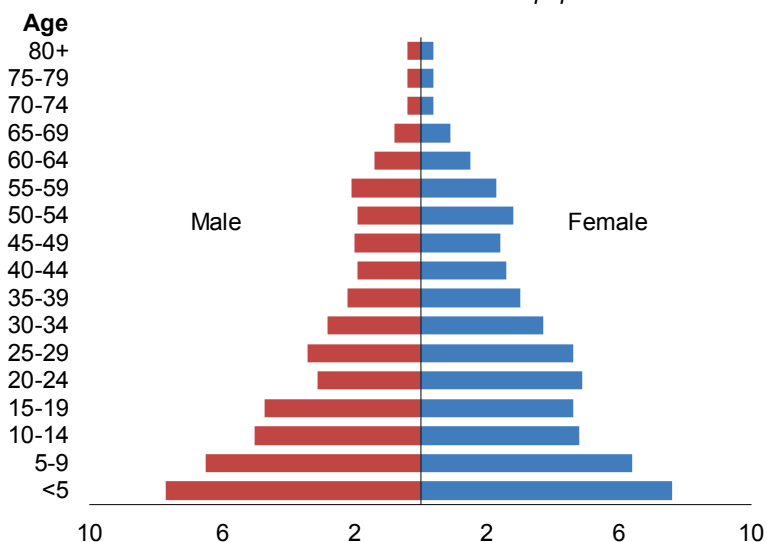


A total of 44,360 persons (20,729 males and 23,631 females) spent the night before the interview in the 7,843 households surveyed in the 2017 TjDHS. The age structure of the de facto household population shows the effects of past demographic trends in Tajikistan, particularly the country's moderately high fertility. More than half (55%) of the population is under age 25, and 38% are younger than 15. Four percent of the population is age 65 and older (Table 2.7 and Figure 2.4).

The average household is 6 persons (Table 2.8). Households are larger on average in rural areas (6.5 persons) than urban areas (4.8 persons). Men head the majority of households, with only 21% headed by women.

Trends: The average household size declined from 6.3 persons in 2012 to 6 persons in 2017.

Figure 2.4 Population pyramid
Percent distribution of the household population



2.7 CHILDREN'S LIVING ARRANGEMENTS AND ORPHANHOOD

Orphan

A child with one or both parents who are dead.

Sample: Children under age 18

In general, most children under age 18 live with their biological parents. Only 2% do not. Three percent of children under age 18 are orphans, with most having lost their father (2%). Orphanhood increases with the child's age, from 1% among children age 0-4 to 7% among children age 15-17 (Table 2.9).

Trends: The percentage of children under age 18 not living with a biological parent and the percentage orphaned did not change between 2012 and 2017.

2.8 BIRTH REGISTRATION

Registered birth

Child has a birth certificate or child does not have a birth certificate, but his/her birth is registered with the civil authorities.

Sample: De jure children under age 5

The registration of a child's birth is critical in ensuring a child will have access to the rights and benefits of citizenship. The vast majority of children under age 5 (96%) are registered with the civil authorities, and most young children (91%) have a birth certificate as proof of the registration (Table 2.10).

Trends: Ninety-six percent of the births of children under age 5 were registered, an increase from the level in 2012 (88%).

2.9 EDUCATION

2.9.1 Educational Attainment

Median educational attainment

Half of the population has completed fewer than the median number of years of schooling, and half of the population has completed more than the median number of years of schooling.

Sample: De facto household population age 6 and older

Eighty percent of the female population and 79% of the male population age 6 and older have at least some secondary education. Males are more likely than females to have post-secondary education (25% versus 13%). Only 7% of women and men never attended school (**Tables 2.11.1 and 2.11.2**).

Trends: Educational levels are increasing. The median number of years of schooling among women was 8.9 in 2017 compared with 8.6 years in 2012. Among men, the median number of years of schooling was 9.5 in 2017 compared with 9.3 years in 2012.

Patterns by background characteristics

- Urban women (52%) and men (61%) are more likely than rural women (45%) and men (53%) to have a secondary or higher education.
- The percentage of women with a secondary or higher education is lowest in DRS (34%). Men are least likely to have a secondary or higher education in Khatlon (51%) and DRS (52%). GBAO has highest percentage of both women (69%) and men (67%) with a secondary education or higher education.
- Only 37% of women and 45% of men in the lowest quintile have at least a secondary education compared with 56% of women and 63% of men in the highest wealth quintile.

2.9.2 School Attendance

Net attendance ratio (NAR)

Percentage of the school-age population that attends primary² or secondary³ school.

Sample: Children age 7-10 for primary school NAR and children age 11-17 for secondary school NAR

Gross attendance ratio (GAR)

The total number of children attending primary school divided by the official primary school age population and the total number of children attending secondary school divided by the official secondary school age population.

Sample: Children age 7-10 for primary school GAR and children age 11-17 for secondary school GAR

Gender Parity Index (GPI)

The ratio of female to male students attending primary school and the ratio of female to male students attending secondary school. The index reflects the magnitude of the gender gap.

Sample: Primary school students and secondary school students

² Grades 1-4

³ Grades 5-11

Net Attendance

The results in **Table 2.12** show that school attendance is high but not universal among the school-age population in Tajikistan. The primary school NAR indicates that 83% of children age 7-10 who should be attending the primary level are doing so. The secondary school NAR shows that 87% of children age 11-17 who should be attending the secondary level are doing so. The NAR for primary school is virtually the same for girls and boys (83%), while the secondary school NAR is slightly higher among boys (89%) than girls (85%).

Patterns by background characteristics

- The NAR for primary school is almost the same in urban and rural areas (84% versus 83%). There also is little difference by residence in the secondary school NAR (86% in urban areas and 87% in rural areas).
- The lowest primary school NAR is in Sughd (78%) while the secondary school NAR is lowest in DRS (85%). GBAO has the highest NARs (88% for primary school and 96% for secondary school).

Other Measures of School Attendance

Table 2.12 presents information on two additional school attendance measures, the gross attendance rate (GAR) and the gender parity index (GPI). A comparison of primary school GAR and NAR indicates that the proportion of primary school students who are underage or overage at the primary level is 12%. A comparison of the secondary school GAR and NAR indicates that the proportion of secondary school students who are outside of the official school age for the level is 8%.

A GPI of 1 is evidence of equality between in school participation ratios for girls and boys. The primary school GPI is 0.99, indicating that boys have only a very slight advantage over girls in primary school attendance. The secondary level GPI is 0.97, showing that boys have a greater but still comparatively small advantage over girls in secondary school attendance.

2.10 CHILD DISCIPLINE

Nonviolent disciplinary approaches

Includes one or more:

- Taking away privileges, forbidding something the child liked, or not allowing the child to leave the house
- Explaining that the child's behavior was wrong
- Giving the child something else to do

Sample: De jure children age 1-14

Psychological aggression

Includes one or both:

- Shouting, yelling, or screaming at the child
- Calling the child dumb, lazy, or a similar term

Sample: De jure children age 1-14

Physical punishment

Includes one or more:

- Shaking the child
- Spanking, hitting, or slapping the child on the bottom with a bare hand
- Hitting the child on the bottom or other part of the body with a belt, hairbrush, stick, or other similar hard object
- Hitting or slapping the child on the face, head, or ears
- Hitting the child on the hand, arm, or leg
- Beating the child up, that is hitting the child over and over as hard as one can

Sample: De jure children age 1-14

Severe physical punishment

Includes one or both:

- Hitting or slapping the child on the face, head, or ears
- Beating the child up, that is hitting the child over and over as hard as one can

Sample: De jure children age 1-14

The manner in which parents and caretakers discipline children can have long-term consequences for their physical and psychological development and well-being. To identify the types of child disciplinary methods used in Tajikistan, questions on child discipline were asked about one randomly-selected child age 1-14 in each household.⁴ In the 2017 TjDHS, the respondent to the Household Questionnaire (the household head or other knowledgeable adult household member) was asked a series of separate questions about practices used to discipline the child during the month before the survey.

Overall, 69% of children age 1-14 experienced some type of violent discipline in the month before the survey (**Table 2.13**). Only 24% of children experienced only nonviolent discipline. Children were most likely to experience psychological aggression (65%). Some type of physical punishment was administered in the case of almost half (48%) of the children, and 12% of children experienced severe physical discipline.

Patterns by background characteristics

- The percentage experiencing violent disciplinary methods increases with the age of the child, peaking at 75% among children age 5-9.
- Boys (51%) are slightly more likely to experience physical punishment than girls (45%).
- Use of a violent disciplinary method was somewhat more common in rural households (70%) than in urban households (66%). GBAO (81%) had the highest reported use of violent discipline methods and Sughd the lowest (60%).

⁴ If several children age 1-14 were listed in the household schedule, only one child per household was randomly selected for administration of the questions on child discipline. If one child age 1-14 was listed in the household schedule, the questions on child discipline were administered about this child. If none of the children listed in the household schedule were age 1-14, the questions on child discipline were not administered.

LIST OF TABLES

For more information on household population and housing characteristics, see the following tables:

- **Table 2.1 Household drinking water**
- **Table 2.2 Household sanitation facilities**
- **Table 2.3 Household characteristics**
- **Table 2.4 Household possessions**
- **Table 2.5 Wealth quintiles**
- **Table 2.6 Handwashing**
- **Table 2.7 Household population by age, sex, and residence**
- **Table 2.8 Household composition**
- **Table 2.9 Children's living arrangements and orphanhood**
- **Table 2.10 Birth registration of children under age 5**
- **Table 2.11.1 Educational attainment of the female household population**
- **Table 2.11.2 Educational attainment of the male household population**
- **Table 2.12 School attendance ratios**
- **Table 2.13 Child discipline**

Table 2.1 Household drinking water

Percent distribution of households and de jure population by source of drinking water, by time to obtain drinking water and by person who usually collects drinking water; percentage of households and de jure population using various methods to treat drinking water, and percentage using an appropriate treatment method, according to residence, Tajikistan DHS 2017

Characteristic	Households			Population		
	Urban	Rural	Total	Urban	Rural	Total
Source of drinking water						
Improved source	96.7	72.3	79.7	96.5	71.9	77.9
Piped into dwelling/yard/plot	88.5	34.4	50.9	87.2	35.4	48.2
Piped to neighbor	1.4	2.7	2.3	1.3	2.5	2.2
Public tap/standpipe	3.1	18.5	13.8	3.2	17.5	14.0
Tube well or borehole	2.7	12.2	9.3	3.7	12.3	10.2
Protected dug well	0.2	3.0	2.1	0.2	2.7	2.1
Protected spring	0.4	1.5	1.2	0.6	1.4	1.2
Rain water	0.1	0.1	0.1	0.1	0.1	0.1
Bottled water, improved source for cooking/handwashing ¹	0.3	0.0	0.1	0.3	0.0	0.1
Unimproved source	3.3	27.7	20.3	3.5	28.1	22.1
Unprotected dug well	0.1	0.5	0.4	0.2	0.4	0.4
Unprotected spring	0.4	2.4	1.8	0.5	2.0	1.6
Tanker truck/cart with small tank	2.3	7.7	6.0	2.1	7.2	5.9
Surface water	0.5	17.2	12.1	0.6	18.4	14.0
Bottled water, unimproved source for cooking/ hand-washing ¹	0.0	0.1	0.1	0.0	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Time to obtain drinking water (round trip)						
Water on premises ²	96.4	65.3	74.8	95.9	67.3	74.3
Less than 30 minutes	2.6	25.2	18.3	3.0	23.2	18.2
30 minutes or longer	0.6	8.5	6.1	0.6	8.5	6.6
Don't know/missing	0.4	1.0	0.8	0.5	1.0	0.9
Total	100.0	100.0	100.0	100.0	100.0	100.0
Person who usually collects drinking water						
Adult male 15+	0.4	5.1	3.7	0.4	4.3	3.3
Adult female 15+	2.3	23.5	17.1	2.7	22.2	17.4
Male child under age 15	0.2	1.7	1.2	0.2	1.7	1.3
Female child under age 15	0.5	2.7	2.1	0.6	3.0	2.4
Other	0.2	1.6	1.2	0.2	1.6	1.2
Water on premises	96.4	65.3	74.8	95.9	67.3	74.3
Total	100.0	100.0	100.0	100.0	100.0	100.0
Water treatment prior to drinking³						
Boiled	92.7	91.7	92.0	92.7	91.8	92.0
Bleach/chlorine added	0.5	0.5	0.5	0.5	0.4	0.4
Strained through cloth	0.4	0.4	0.4	0.4	0.5	0.5
Ceramic, sand or other filter	5.0	1.8	2.7	4.6	2.0	2.7
Solar disinfection	0.3	0.2	0.2	0.3	0.2	0.2
Let it stand and settle	6.4	10.5	9.2	6.5	10.5	9.5
No treatment	5.3	7.8	7.0	5.7	7.5	7.0
Percentage using an appropriate treatment method ⁴	94.2	91.8	92.5	93.9	92.0	92.5
Number of households/population	2,390	5,453	7,843	11,538	35,456	46,994

¹ Households using bottled water for drinking are classified as using an improved or unimproved source according to their water source for cooking and handwashing.

² Includes water piped to a neighbor

³ Respondents may report multiple treatment methods, so the sum of treatments may exceed 100%.

⁴ Appropriate water treatment methods include boiling, bleaching, filtering, and solar disinfecting.

Table 2.2 Household sanitation facilities

Percent distribution of households and de jure population by type of toilet/latrine facilities and percent distribution of households and de jure population with a toilet/latrine facility by location of the facility, according to residence, Tajikistan DHS 2017

Type and location of toilet/latrine facility	Households			Population		
	Urban	Rural	Total	Urban	Rural	Total
Improved sanitation	95.7	96.8	96.5	96.0	97.3	97.0
Flush/pour flush to piped sewer system	57.4	0.5	17.9	49.4	0.5	12.5
Flush/pour flush to septic tank	0.3	0.2	0.2	0.3	0.2	0.2
Flush/pour flush to pit latrine	3.5	2.0	2.5	4.3	2.0	2.5
Ventilated improved pit (VIP) latrine	3.9	9.2	7.6	5.0	10.0	8.8
Pit latrine with slab	30.4	84.7	68.2	36.8	84.5	72.8
Composting toilet	0.1	0.2	0.1	0.2	0.2	0.2
Unimproved sanitation	4.3	3.2	3.5	4.0	2.7	3.0
Shared facility¹	4.0	2.0	2.6	3.7	1.7	2.2
Flush/pour flush to piped sewer system	1.3	0.0	0.4	1.0	0.0	0.2
Flush/pour flush to pit latrine	0.1	0.0	0.0	0.1	0.0	0.0
Ventilated improved pit (VIP) latrine	0.4	0.2	0.3	0.4	0.3	0.3
Pit latrine with slab	2.2	1.8	1.9	2.2	1.4	1.6
Unimproved facility	0.3	1.2	0.9	0.3	1.0	0.8
Flush/pour flush not to sewer/septic tank/pit latrine	0.1	0.1	0.1	0.1	0.1	0.1
Pit latrine without slab/open pit	0.1	0.5	0.4	0.1	0.4	0.3
Bucket	0.1	0.6	0.4	0.0	0.5	0.4
Hanging toilet/hanging latrine	0.0	0.0	0.0	0.0	0.1	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population	2,390	5,453	7,843	11,538	35,456	46,994
Location of toilet facility						
In own dwelling	53.8	4.7	19.7	45.0	5.0	14.8
In own yard/plot	43.2	94.4	78.8	52.1	94.3	83.9
Elsewhere	3.0	0.9	1.6	2.9	0.7	1.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/population with a toilet/latrine facility	2,390	5,453	7,843	11,538	35,456	46,994

¹ Facilities that would be considered improved if they were not shared by two or more households

Table 2.3 Household characteristics

Percent distribution of households and de jure population by housing characteristics, percentage using solid fuel for cooking, percentage using clean fuel for cooking, and percent distribution by frequency of smoking in the home, according to residence, Tajikistan DHS 2017

Housing characteristic	Households			Population		
	Urban	Rural	Total	Urban	Rural	Total
Electricity						
Yes	99.1	99.2	99.2	99.2	99.3	99.3
No	0.9	0.8	0.8	0.8	0.7	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0
Flooring material						
Earth/sand	4.5	29.2	21.7	5.6	29.0	23.3
Wood planks	42.6	23.9	29.6	41.8	22.7	27.4
Parquet or polished wood	24.5	19.2	20.8	23.7	19.2	20.3
Vinyl or linoleum	10.8	4.9	6.7	10.9	5.0	6.5
Ceramic tiles	0.3	0.2	0.3	0.3	0.2	0.2
Cement	9.0	16.8	14.4	9.5	18.3	16.1
Carpet	8.3	5.8	6.6	8.1	5.5	6.2
Total	100.0	100.0	100.0	100.0	100.0	100.0
Roof material						
No roof	0.4	1.5	1.2	0.3	1.1	0.9
Thatch	0.5	2.0	1.5	0.3	1.6	1.3
Sod	0.1	0.1	0.1	0.1	0.1	0.1
Wood planks	0.1	0.3	0.2	0.1	0.2	0.2
Cardboard	0.1	0.0	0.0	0.1	0.0	0.0
Metal	20.0	13.9	15.8	20.1	12.7	14.5
Wood	0.1	0.3	0.3	0.1	0.3	0.3
Schiefer/cement fiber	54.7	81.2	73.1	58.6	83.4	77.3
Ceramic tiles	0.7	0.1	0.3	0.7	0.1	0.2
Cement	10.7	0.4	3.5	9.2	0.4	2.5
Roofing shingles soft	1.7	0.1	0.6	1.3	0.1	0.4
Taule (ruberoid)	10.9	0.1	3.4	9.1	0.1	2.3
Total	100.0	100.0	100.0	100.0	100.0	100.0
Wall material						
No walls	0.0	0.0	0.0	0.0	0.0	0.0
Trunks	0.0	0.3	0.2	0.0	0.3	0.2
Dirt	10.0	48.0	36.4	11.6	49.6	40.3
Stone with mud	1.7	4.9	3.9	2.0	4.5	3.9
Uncovered adobe	0.3	3.3	2.4	0.3	2.8	2.2
Plywood	0.2	0.0	0.1	0.1	0.0	0.0
Cardboard	0.0	0.1	0.1	0.0	0.1	0.1
Reused wood	0.2	0.0	0.1	0.1	0.0	0.1
Cement/monolit	30.8	1.7	10.6	27.0	1.6	7.8
Stone with lime/cement	3.2	2.8	2.9	3.1	2.2	2.4
Bricks	40.3	23.1	28.3	40.7	22.2	26.7
Cement blocks	8.4	1.7	3.7	7.7	1.5	3.1
Covered adobe	4.9	13.9	11.2	7.2	15.1	13.2
Wood planks	0.1	0.1	0.1	0.1	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Rooms used for sleeping						
One	21.2	12.7	15.3	11.6	7.5	8.5
Two	45.1	43.3	43.8	41.9	36.2	37.6
Three or more	33.7	44.0	40.9	46.5	56.3	53.9
Total	100.0	100.0	100.0	100.0	100.0	100.0
Place for cooking						
In the house	54.2	8.7	22.6	45.8	7.4	16.8
In a separate building	44.0	86.1	73.3	52.2	87.9	79.1
Outdoors	1.7	5.1	4.1	2.0	4.7	4.0
Other	0.0	0.1	0.1	0.0	0.1	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Cooking fuel						
Electricity	63.9	39.5	46.9	60.0	39.0	44.2
LPG/natural gas/biogas	34.2	37.7	36.6	37.0	36.1	36.4
Coal/lignite	0.0	0.1	0.0	0.0	0.1	0.1
Charcoal	0.1	0.2	0.1	0.0	0.2	0.2
Wood	1.1	13.7	9.9	1.8	15.0	11.7
Straw/shrubs/grass	0.5	5.8	4.2	0.8	6.3	5.0
Agricultural crop	0.1	0.3	0.2	0.2	0.4	0.3
Animal dung	0.1	2.7	2.0	0.1	2.8	2.2
Total	100.0	100.0	100.0	100.0	100.0	100.0

Continued...

Table 2.3—Continued

Housing characteristic	Households			Population		
	Urban	Rural	Total	Urban	Rural	Total
Percentage using solid fuel for cooking ¹	1.9	22.8	16.4	3.0	24.8	19.5
Percentage using clean fuel for cooking ²	98.1	77.1	83.5	97.0	75.2	80.5
Frequency of smoking in the home						
Daily	8.2	7.5	7.7	8.9	8.3	8.5
Weekly	5.3	5.8	5.6	5.5	5.7	5.7
Monthly	0.8	0.6	0.7	0.8	0.6	0.6
Less than once a month	2.0	2.0	2.0	2.1	2.1	2.1
Never	83.6	84.1	84.0	82.7	83.3	83.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of households/ population	2,390	5,453	7,843	11,538	35,456	46,994

LPG = Liquefied petroleum gas

¹ Includes coal/lignite, charcoal, wood, straw/shrubs/grass, agricultural crops, and animal dung² Includes electricity and LPG/natural gas/biogaz**Table 2.4 Household possessions**

Percentage of households possessing various household effects, means of transportation, agricultural land, livestock/farm animals, watch, and bank account, according to residence, Tajikistan DHS 2017

Possession	Residence		Total
	Urban	Rural	
Household effects			
Radio	21.3	16.7	18.1
Television	98.6	97.8	98.0
Mobile phone	96.0	96.4	96.3
Non-mobile telephone	14.6	2.7	6.3
Computer	35.6	14.8	21.1
Refrigerator	90.4	60.3	69.4
Washing machine	64.4	27.9	39.0
Vacuum cleaner	59.7	24.0	34.9
Camera	25.2	13.9	17.3
Table/hon-tohta	69.5	49.3	55.5
Chair	44.4	17.5	25.7
Couch	62.3	46.1	51.0
Bed	52.2	52.8	52.6
Buffet/curio cabinet/wall unit	67.1	64.0	65.0
Air conditioner	41.8	12.1	21.1
DVD player	71.8	75.6	74.5
Satellite antenna/dish	61.0	55.8	57.4
Freezer	34.7	15.3	21.2
Electric fan	39.2	43.2	42.0
Sewing machine	55.6	69.8	65.4
Stove	38.5	76.6	65.0
Mini-generator	6.3	10.2	9.1
Fuel or wood stock	38.1	89.4	73.8
Carpet	97.1	94.7	95.4
Internet	38.4	21.5	26.7
Means of transport			
Bicycle	24.6	42.0	36.7
Animal drawn cart	12.6	34.2	27.6
Motorcycle/scooter	1.2	2.1	1.9
Car/truck	34.9	41.5	39.5
Boat with a motor	0.3	0.2	0.2
Tractor	0.4	2.7	2.0
Combine-harvester	0.2	0.2	0.2
Any agricultural equipment	2.3	3.4	3.1
Ownership of agricultural land			
	11.1	62.9	47.2
Ownership of farm animals¹			
	11.4	71.2	53.0
Watch			
	56.9	49.4	51.7
Bank account			
	2.8	1.4	1.8
Number of households	2,390	5,453	7,843

¹ Cows, bulls, other cattle, horses, donkeys, goats, sheep, chickens or other poultry, pigs, rabbits, animals for fur, and beehives

Table 2.5 Wealth quintiles

Percent distribution of the de jure population by wealth quintiles, and the Gini Coefficient, according to residence, region and Feed the Future (FTF) districts, Tajikistan DHS 2017

Residence/ region/ FTF districts	Wealth quintile					Total	Number of persons	Gini Coefficient
	Lowest	Second	Middle	Fourth	Highest			
Residence								
Urban	2.3	1.9	6.3	20.9	68.6	100.0	11,538	0.22
Rural	25.7	25.9	24.5	19.7	4.2	100.0	35,456	0.17
Region								
Dushanbe	0.0	0.0	0.1	4.7	95.2	100.0	3,933	0.26
GBAO	53.5	17.8	10.4	6.3	12.0	100.0	987	0.35
Sughd	16.4	15.5	21.4	27.8	18.9	100.0	14,055	0.18
DRS	21.0	22.8	24.8	21.2	10.2	100.0	10,580	0.26
Khatlon	24.9	26.5	21.0	17.2	10.4	100.0	17,438	0.26
FTF districts	21.7	28.1	23.4	18.8	8.0	100.0	9,363	0.23
Total	20.0	20.0	20.0	20.0	20.0	100.0	46,994	0.22

Table 2.6 Handwashing

Percentage of households in which the place most often used for washing hands was observed to be fixed or mobile and total percentage of households in which the place for handwashing was observed; and among households in which the place for handwashing was observed, percent distribution by availability of water, soap, and other cleansing agents, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of households in which place for washing hands was observed:			Number of households	Among households in which place for handwashing was observed, percentage with:							Number of households in which a place for handwashing was observed
	And place for handwashing was a fixed place	And place for handwashing was mobile	Total		Soap and water ¹	Water and cleansing agent other than soap only ²	Water only	Soap but no water ³	Cleansing agent other than soap only ²	No water, no soap, no other cleansing agent	Total	
Residence												
Urban	94.6	3.1	97.7	2,390	90.0	0.2	7.0	1.6	0.0	1.1	100.0	2,336
Rural	82.5	11.3	93.8	5,453	70.1	0.9	16.7	6.2	0.4	5.7	100.0	5,115
Region												
Dushanbe	96.4	0.9	97.3	882	93.7	0.1	4.8	0.7	0.0	0.8	100.0	858
GBAO	59.9	39.9	99.8	204	48.8	0.0	51.0	0.1	0.0	0.1	100.0	203
Sughd	88.6	10.0	98.6	2,648	67.8	0.2	15.8	7.9	0.6	7.7	100.0	2,612
DRS	83.0	9.3	92.3	1,654	70.1	2.2	16.8	6.5	0.2	4.2	100.0	1,527
Khatlon	84.1	7.6	91.7	2,456	86.3	0.5	9.1	2.1	0.1	1.9	100.0	2,252
FTF districts	80.3	8.2	88.6	1,313	91.6	0.5	3.7	2.0	0.2	2.1	100.0	1,163
Wealth quintile												
Lowest	77.3	12.0	89.3	1,579	55.8	1.8	24.4	5.8	1.0	11.2	100.0	1,410
Second	83.5	9.4	92.9	1,394	71.1	0.9	16.3	6.6	0.0	5.1	100.0	1,295
Middle	84.0	12.5	96.5	1,380	73.2	0.6	15.3	7.3	0.3	3.2	100.0	1,331
Fourth	87.6	10.0	97.6	1,451	81.3	0.4	11.5	4.3	0.1	2.4	100.0	1,417
Highest	95.4	2.6	98.0	2,038	92.9	0.1	4.8	1.6	0.0	0.6	100.0	1,998
Total	86.2	8.8	95.0	7,843	76.4	0.7	13.7	4.8	0.3	4.2	100.0	7,451

¹ Soap includes soap or detergent in bar, liquid, powder, or paste form. This column includes households with soap and water only as well as those that had soap and water and another cleansing agent.

² Cleansing agents other than soap include locally available materials such as ash, mud, or sand

³ Includes households with soap only as well as those with soap and another cleansing agent

Table 2.7 Household population by age, sex, and residence

Percent distribution of the de facto household population by various age groups, and percentage of the de facto household population age 10-19, according to sex and residence, Tajikistan DHS 2017

Age	Urban			Rural			Male	Female	Total
	Male	Female	Total	Male	Female	Total			
<5	14.0	11.7	12.8	17.3	15.0	16.1	16.5	14.2	15.3
5-9	12.9	11.6	12.2	14.4	12.2	13.2	14.0	12.0	12.9
10-14	10.4	9.7	10.0	10.7	8.9	9.7	10.6	9.1	9.8
15-19	10.7	8.4	9.5	9.8	8.8	9.3	10.0	8.7	9.3
20-24	7.6	8.4	8.0	6.3	9.4	8.0	6.6	9.2	8.0
25-29	7.8	8.7	8.3	7.1	8.7	7.9	7.3	8.7	8.0
30-34	6.7	7.1	6.9	5.9	7.0	6.5	6.1	7.0	6.6
35-39	5.3	5.5	5.4	4.4	5.6	5.0	4.6	5.6	5.1
40-44	4.4	5.5	5.0	4.0	4.6	4.3	4.1	4.8	4.5
45-49	4.3	5.4	4.8	4.2	4.2	4.2	4.2	4.5	4.4
50-54	4.9	6.0	5.5	3.8	4.9	4.4	4.1	5.2	4.7
55-59	4.2	5.0	4.6	4.5	4.2	4.3	4.5	4.4	4.4
60-64	3.3	3.2	3.2	2.8	2.7	2.7	2.9	2.8	2.8
65-69	1.7	1.9	1.8	1.8	1.6	1.7	1.8	1.7	1.7
70-74	0.7	0.6	0.6	1.0	0.8	0.9	0.9	0.7	0.8
75-79	0.7	0.9	0.8	0.9	0.8	0.8	0.9	0.8	0.8
80+	0.5	0.6	0.5	1.1	0.8	0.9	0.9	0.7	0.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Dependency age groups									
0-14	37.3	33.0	35.0	42.4	36.0	39.0	41.1	35.3	38.0
15-64	59.1	63.1	61.2	52.8	60.0	56.6	54.4	60.8	57.8
65+	3.6	3.9	3.8	4.8	3.9	4.3	4.5	3.9	4.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Child and adult populations									
0-17	43.9	37.9	40.7	49.5	41.2	45.1	48.1	40.4	44.0
18+	56.1	62.1	59.3	50.5	58.8	54.9	51.9	59.6	56.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Adolescents 10-19	21.1	18.1	19.5	20.6	17.6	19.0	20.7	17.7	19.1
Number of persons	5,256	5,880	11,136	15,473	17,751	33,224	20,729	23,631	44,360

Table 2.8 Household composition

Percent distribution of households by sex of head of household and by household size; mean size of households, and percentage of households with orphans and foster children under age 18, according to residence, Tajikistan DHS 2017

Characteristic	Residence		
	Urban	Rural	Total
Household headship			
Male	68.3	83.9	79.1
Female	31.7	16.1	20.9
Total	100.0	100.0	100.0
Number of usual members			
0	0.1	0.0	0.0
1	7.4	0.9	2.9
2	11.7	3.8	6.2
3	12.7	7.2	8.9
4	16.1	10.2	12.0
5	17.9	17.9	17.9
6	13.4	19.5	17.7
7	8.3	13.7	12.0
8	4.4	8.5	7.3
9+	8.1	18.3	15.2
Total	100.0	100.0	100.0
Mean size of households	4.8	6.5	6.0
Percentage of households with orphans and foster children under 18 years of age			
Double orphans	0.2	0.3	0.2
Single orphans ¹	4.0	4.4	4.3
Foster children ²	3.7	4.0	3.9
Orphans and/or foster children	7.3	7.8	7.7
Number of households	2,390	5,453	7,843

Note: Table is based on de jure household members, i.e., usual residents.

¹ Includes children with one dead parent and an unknown survival status of the other parent.

² Foster children are those under age 18 living in households with neither their mother nor their father present, and the mother and/or the father are alive.

Table 2.9 Children's living arrangements and orphanhood

Percent distribution of de jure children under age 18 by living arrangements and survival status of parents, percentage of children not living with a biological parent, and percentage of children with one or both parents dead, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Living with both parents	Living with mother but not with father		Living with father but not with mother		Not living with either parent				Missing information on father/mother	Percentage not living with a biological parent	Percentage with one or both parents dead ¹	Number of children
		Father alive	Father dead	Mother alive	Mother dead	Both alive	Only father alive	Only mother alive	Both dead				
Age													
0-4	87.9	9.7	0.8	0.3	0.1	1.1	0.0	0.0	0.0	0.1	1.2	0.9	6,682
<2	89.4	9.6	0.4	0.1	0.0	0.4	0.0	0.0	0.0	0.0	0.4	0.4	2,694
2-4	86.8	9.8	1.0	0.4	0.1	1.6	0.1	0.1	0.0	0.1	1.7	1.3	3,988
5-9	84.4	9.6	1.7	1.0	0.3	2.6	0.0	0.1	0.1	0.1	2.8	2.3	5,736
10-14	84.6	7.5	2.8	1.4	0.8	2.4	0.1	0.3	0.1	0.1	2.8	4.0	4,381
15-17	81.5	7.9	4.4	1.3	1.4	2.3	0.3	0.3	0.6	0.2	3.5	7.1	2,715
Sex													
Male	85.7	8.6	2.1	0.8	0.4	1.9	0.0	0.2	0.1	0.1	2.2	2.9	9,991
Female	84.7	9.3	1.9	0.9	0.6	2.1	0.1	0.1	0.1	0.1	2.5	2.8	9,523
Residence													
Urban	81.7	11.1	2.6	0.8	0.7	2.5	0.0	0.2	0.1	0.3	2.9	3.6	4,506
Rural	86.3	8.3	1.8	0.9	0.4	1.8	0.1	0.1	0.1	0.0	2.2	2.6	15,008
Region													
Dushanbe	80.2	13.5	3.0	0.4	0.9	1.4	0.1	0.1	0.1	0.3	1.6	4.2	1,518
GBAO	75.5	9.6	2.7	3.0	0.5	7.9	0.3	0.1	0.2	0.2	8.4	3.7	359
Sughd	76.5	17.4	1.2	0.9	0.4	3.1	0.1	0.1	0.1	0.1	3.4	1.9	5,586
DRS	90.9	3.6	1.9	0.9	0.5	1.8	0.0	0.2	0.1	0.0	2.2	2.8	4,497
Khatlon	89.8	4.9	2.4	0.8	0.5	1.1	0.1	0.2	0.2	0.1	1.5	3.3	7,554
FTF districts	90.3	4.8	2.3	0.7	0.3	1.1	0.1	0.2	0.2	0.1	1.6	3.2	4,162
Wealth quintile													
Lowest	87.6	6.1	3.0	1.2	0.6	1.2	0.2	0.0	0.2	0.1	1.5	3.9	4,216
Second	85.5	9.1	2.2	1.0	0.5	1.2	0.1	0.2	0.0	0.1	1.6	3.0	4,030
Middle	87.9	7.9	0.8	0.5	0.2	2.0	0.1	0.2	0.1	0.1	2.5	1.6	3,912
Fourth	83.9	9.7	1.3	0.9	0.3	3.5	0.0	0.2	0.1	0.1	3.8	1.8	3,756
Highest	80.7	12.4	2.7	0.7	0.9	2.1	0.0	0.2	0.1	0.3	2.5	3.9	3,600
Total <15	85.9	9.1	1.6	0.8	0.4	1.9	0.1	0.1	0.0	0.1	2.2	2.2	16,799
Total <18	85.2	8.9	2.0	0.9	0.5	2.0	0.1	0.2	0.1	0.1	2.3	2.9	19,514

Note: Table is based on de jure members, i.e., usual residents.

¹ Includes children with father dead, mother dead, both dead, and one parent dead but missing information on survival status of the other parent.

Table 2.10 Birth registration of children under age 5

Percentage of de jure children under age 5 whose births are registered with the civil authorities, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of children whose births are registered and who:		Total percentage of children whose births are registered	Number of children
	Had a birth certificate	Did not have birth certificate		
Age				
<2	85.6	7.5	93.1	2,694
0	78.2	11.5	89.6	1,238
1	91.9	4.1	96.0	1,456
2-4	95.2	2.4	97.7	3,988
2	95.1	2.5	97.5	1,369
3	94.5	3.0	97.5	1,420
4	96.4	1.7	98.1	1,199
Sex				
Male	91.4	4.5	95.9	3,369
Female	91.3	4.4	95.7	3,313
Residence				
Urban	93.1	3.6	96.7	1,390
Rural	90.9	4.7	95.6	5,292
Region				
Dushanbe	93.5	4.5	97.9	427
GBAO	94.5	2.7	97.3	114
Sughd	97.7	1.6	99.3	1,927
DRS	85.6	5.4	91.0	1,570
Khatlon	89.7	6.0	95.7	2,643
FTF districts	90.5	5.0	95.6	1,489
Wealth quintile				
Lowest	86.4	7.5	93.9	1,234
Second	91.9	2.6	94.5	1,377
Middle	91.3	5.0	96.3	1,488
Fourth	93.6	3.1	96.7	1,456
Highest	93.3	4.3	97.6	1,127
Total	91.4	4.5	95.8	6,682

Table 2.11.1 Educational attainment of the female household population

Percent distribution of the de facto female household population age 6 and over by highest level of schooling attended or completed and median years completed, according to background characteristics, Tajikistan DHS 2017

Background characteristic	No education	Some primary	Completed primary ¹	Some secondary ²	Completed secondary ³	Professional primary	Professional middle	Higher	Total	Number of women	Median years completed
Age⁴											
6-9	41.5	57.6	0.7	0.2	0.0	0.0	0.0	0.0	100.0	2,262	0.2
10-14	1.2	14.6	17.6	66.4	0.1	0.0	0.0	0.0	100.0	2,142	4.8
15-19	1.9	0.7	0.4	55.1	32.2	0.7	4.1	4.7	100.0	2,048	9.3
20-24	1.6	1.4	1.8	31.1	40.7	1.5	9.8	12.0	100.0	2,170	10.3
25-29	4.2	2.2	2.9	37.6	35.9	2.0	5.0	10.0	100.0	2,053	10.1
30-34	3.3	3.5	4.7	40.7	31.4	0.8	5.8	9.8	100.0	1,656	9.0
35-39	0.8	1.9	1.2	43.9	36.6	1.8	5.1	8.7	100.0	1,318	9.4
40-44	0.8	0.6	0.5	23.4	54.6	2.6	6.4	11.1	100.0	1,139	9.8
45-49	1.1	1.4	0.4	9.1	65.1	4.3	9.3	9.2	100.0	1,062	9.6
50-54	0.7	1.5	0.4	15.8	64.6	2.9	5.6	8.4	100.0	1,223	9.5
55-59	2.0	2.5	0.9	16.2	62.0	2.1	5.7	8.7	100.0	1,034	9.5
60-64	2.1	2.0	1.6	28.4	48.1	1.5	7.2	9.1	100.0	658	9.4
65+	9.1	6.2	8.1	42.0	21.5	1.8	3.4	7.5	100.0	931	7.4
Residence											
Urban	5.7	10.0	3.2	29.0	28.7	2.2	6.3	15.0	100.0	5,067	9.3
Rural	7.2	9.7	3.7	34.8	34.8	1.2	4.3	4.3	100.0	14,632	8.8
Region											
Dushanbe	5.1	11.8	2.6	28.7	25.1	1.3	4.3	21.1	100.0	1,748	9.3
GBAO	3.3	8.3	2.3	17.6	39.3	4.8	6.5	18.0	100.0	428	9.9
Sughd	5.8	8.4	2.7	26.8	38.6	2.2	6.9	8.5	100.0	6,141	9.4
DRS	7.1	10.2	4.3	44.2	26.3	1.3	3.2	3.3	100.0	4,362	8.4
Khatlon	8.1	10.3	4.3	34.3	34.5	0.7	3.9	4.0	100.0	7,018	8.6
FTF districts	9.3	11.7	4.8	34.6	32.4	0.7	3.5	3.0	100.0	3,750	8.4
Wealth quintile											
Lowest	8.3	11.2	4.3	39.0	32.4	0.8	2.2	1.8	100.0	3,941	8.3
Second	7.9	9.9	4.2	37.4	33.7	1.0	3.1	2.8	100.0	3,846	8.6
Middle	6.6	8.6	3.4	33.9	37.1	1.5	4.8	4.1	100.0	3,810	9.0
Fourth	5.9	9.5	3.2	30.5	34.4	1.9	6.7	7.7	100.0	3,959	9.2
Highest	5.3	9.8	2.8	26.2	28.9	1.9	7.0	18.1	100.0	4,141	9.5
Total	6.8	9.8	3.6	33.3	33.2	1.4	4.8	7.0	100.0	19,698	8.9

Note: Total includes women with missing or unknown information on educational attainment.

¹ Completed Grade 4 at the primary level

² Attended or completed the general basic level (Grades 5-9) or attended but did not complete the general secondary level (Grades 10-11)

³ Completed Grade 11 at the secondary level or completed Grade 10 at the secondary level and has a general education school diploma ("attestat" as in older Soviet educational system terminology)

⁴ Total includes one woman with missing or unknown information on age.

Table 2.11.2 Educational attainment of the male household population

Percent distribution of the de facto male household population age 6 and over by highest level of schooling attended or completed and median years completed, according to background characteristics, Tajikistan DHS 2017

Background characteristic	No education	Some primary	Completed primary ¹	Some secondary ²	Completed secondary ³	Professional primary	Professional middle	Higher	Total	Number of men	Median years completed
Age⁴											
6-9	42.0	56.9	0.9	0.2	0.0	0.0	0.0	0.0	100.0	2,350	0.2
10-14	0.5	16.6	20.3	62.5	0.1	0.0	0.0	0.0	100.0	2,208	4.7
15-19	0.5	1.1	0.0	56.9	29.4	1.9	2.2	8.0	100.0	2,081	9.3
20-24	0.8	0.9	0.6	14.6	37.5	2.9	4.6	38.0	100.0	1,372	10.9
25-29	1.4	1.4	1.2	20.0	39.1	3.3	4.7	28.9	100.0	1,507	10.7
30-34	1.7	2.5	1.0	21.7	41.9	2.6	2.7	25.9	100.0	1,259	10.5
35-39	0.6	1.2	1.0	17.6	48.5	3.7	4.1	23.3	100.0	962	10.5
40-44	1.3	0.2	0.3	9.0	51.4	10.3	6.3	21.2	100.0	851	10.4
45-49	0.6	0.6	0.3	5.3	48.4	14.7	8.8	21.3	100.0	870	10.0
50-54	0.5	0.6	0.3	6.0	49.8	13.0	7.9	21.8	100.0	850	9.9
55-59	0.1	1.1	0.7	5.8	45.2	12.6	11.0	23.5	100.0	923	10.0
60-64	0.1	2.1	0.5	9.8	42.4	11.4	11.7	22.1	100.0	601	9.9
65+	3.1	2.7	3.5	24.3	31.1	7.2	6.6	21.3	100.0	927	9.6
Residence											
Urban	5.8	10.5	3.1	20.1	24.8	3.3	4.1	28.3	100.0	4,398	9.9
Rural	7.0	11.3	3.5	25.4	31.2	5.1	4.1	12.4	100.0	12,364	9.3
Region											
Dushanbe	5.3	12.1	2.9	16.9	20.9	1.1	2.9	37.8	100.0	1,626	10.3
GBAO	4.7	9.6	2.4	16.1	27.8	10.0	6.6	22.7	100.0	395	10.3
Sughd	6.1	9.8	3.3	23.3	31.5	6.2	4.8	15.1	100.0	5,091	9.5
DRS	6.4	11.7	3.4	26.9	29.4	4.4	4.1	13.8	100.0	3,805	9.3
Khatlon	7.9	11.8	3.7	25.3	30.5	4.0	3.6	13.3	100.0	5,844	9.3
FTF districts	8.8	13.6	4.3	28.8	30.0	2.3	2.8	9.2	100.0	2,976	8.9
Wealth quintile											
Lowest	8.4	12.6	4.0	29.8	30.3	4.7	2.9	7.3	100.0	3,388	8.8
Second	6.8	10.8	3.4	27.5	32.8	5.0	4.3	9.5	100.0	3,248	9.3
Middle	7.0	11.0	3.4	24.3	32.3	5.5	5.1	11.4	100.0	3,275	9.4
Fourth	6.2	10.5	3.0	20.6	29.6	5.7	4.4	19.9	100.0	3,253	9.8
Highest	5.2	10.7	3.0	18.2	23.3	2.5	3.9	33.2	100.0	3,597	10.2
Total	6.7	11.1	3.4	24.0	29.5	4.6	4.1	16.5	100.0	16,762	9.5

Note: Total includes men with missing or unknown information on educational attainment.

¹ Completed Grade 4 at the primary level

² Attended or completed the general basic level (Grades 5-9) or attended but did not complete the general secondary level (Grades 10-11)

³ Completed Grade 11 at the secondary level or completed Grade 10 at the secondary level and has a general education school diploma ("attestat" as in older Soviet educational system terminology)

⁴ Total includes two men with missing or unknown information on age.

Table 2.12 School attendance ratios

Net attendance ratios (NARs) and gross attendance ratios (GARs) for the de facto household population by sex and level of schooling; and the Gender Parity Index (GPI), according to background characteristics, Tajikistan DHS 2017

Background characteristic	Net attendance ratio ¹				Gross attendance ratio ²			
	Male	Female	Total	Gender Parity Index ³	Male	Female	Total	Gender Parity Index ³
PRIMARY SCHOOL								
Residence								
Urban	85.4	83.4	84.4	0.98	98.9	95.3	97.1	0.96
Rural	82.4	83.1	82.8	1.01	93.9	94.0	93.9	1.00
Region								
Dushanbe	88.6	86.4	87.5	0.97	101.2	93.3	97.3	0.92
GBAO	91.0	85.6	88.4	0.94	104.2	100.8	102.6	0.97
Sughd	78.8	78.0	78.4	0.99	94.1	93.4	93.8	0.99
DRS	87.6	85.4	86.5	0.98	98.3	95.0	96.7	0.97
Khatlon	82.1	85.3	83.6	1.04	91.9	94.5	93.1	1.03
FTF districts	85.2	85.4	85.3	1.00	98.0	96.2	97.1	0.98
Wealth quintile								
Lowest	82.3	82.8	82.5	1.01	92.2	94.9	93.5	1.03
Second	80.0	81.4	80.7	1.02	92.9	92.6	92.8	1.00
Middle	83.1	82.5	82.8	0.99	98.2	91.8	95.3	0.93
Fourth	84.6	85.5	85.0	1.01	94.4	96.4	95.4	1.02
Highest	85.9	83.9	84.9	0.98	97.9	95.7	96.8	0.98
Total	83.1	83.2	83.2	1.00	95.0	94.3	94.7	0.99
SECONDARY SCHOOL								
Residence								
Urban	87.6	84.6	86.1	0.97	95.5	92.0	93.8	0.96
Rural	88.9	85.5	87.3	0.96	96.5	93.9	95.3	0.97
Region								
Dushanbe	87.1	84.3	85.7	0.97	94.3	91.6	93.0	0.97
GBAO	96.1	95.2	95.7	0.99	104.1	104.5	104.3	1.00
Sughd	85.7	85.8	85.8	1.00	94.4	94.1	94.2	1.00
DRS	88.1	82.0	85.1	0.93	93.0	88.4	90.8	0.95
Khatlon	90.7	86.6	88.8	0.95	99.3	96.0	97.7	0.97
FTF districts	89.8	84.0	87.1	0.93	97.9	96.1	97.1	0.98
Wealth quintile								
Lowest	87.9	84.5	86.3	0.96	93.8	91.8	92.9	0.98
Second	91.4	84.9	88.4	0.93	99.2	94.4	97.0	0.95
Middle	85.9	85.5	85.8	1.00	96.1	94.0	95.1	0.98
Fourth	88.8	88.8	88.8	1.00	95.7	96.7	96.2	1.01
Highest	88.3	83.4	85.9	0.94	96.5	91.2	93.8	0.95
Total	88.6	85.3	87.0	0.96	96.2	93.4	94.9	0.97

¹ The NAR for primary school is the percentage of the primary school age (7-10 years) population that is attending primary school. The NAR for secondary school is the percentage of the secondary school age (11-17 years) population that is attending secondary school. By definition the NAR cannot exceed 100%.

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%.

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 2.13 Child discipline

Percentage of de jure children age 1-14 by child discipline methods experienced during the month before the survey, Tajikistan DHS 2017

Background characteristic	Percentage of children age 1-14 years who experienced:					Number of children age 1-14
	Non-violent discipline only ¹	Any psychological aggression ²	Physical punishment		Any violent discipline method ⁵	
			Any ³	Severe ⁴		
Age						
1-2	33.1	51.2	39.8	9.6	56.2	1,066
3-4	25.3	63.9	50.8	13.1	67.6	980
5-9	19.4	71.4	54.5	14.0	74.9	2,135
10-14	22.1	67.3	43.1	11.0	70.5	1,594
Child's sex						
Male	22.8	66.6	51.1	13.3	70.3	2,920
Female	24.6	63.9	44.8	11.1	67.6	2,855
Residence						
Urban	28.0	61.5	46.2	10.5	65.5	1,354
Rural	22.3	66.4	48.6	12.7	70.0	4,421
Region						
Dushanbe	23.2	64.8	51.9	15.5	69.8	452
GBAO	16.1	76.0	64.6	12.7	81.2	109
Sughd	32.1	58.6	36.0	5.9	59.8	1,674
DRS	18.5	68.5	46.3	9.4	72.3	1,328
Khatlon	20.9	67.9	56.5	18.0	73.1	2,212
FTF districts	23.5	66.0	45.7	12.2	69.0	1,249
Education of household head⁶						
None/primary	18.4	66.9	52.9	15.2	70.2	298
General basic	25.3	64.1	46.4	10.4	67.8	840
General secondary	23.2	65.7	47.6	12.8	69.8	2,699
Professional primary/middle	23.0	66.5	50.3	10.7	68.9	834
Higher	25.6	63.7	47.2	12.4	67.6	1,103
Wealth quintile						
Lowest	19.5	70.5	55.3	17.4	74.2	1,259
Second	21.8	67.8	48.2	12.2	71.0	1,178
Middle	21.5	64.5	48.3	11.6	68.9	1,155
Fourth	29.6	60.5	42.0	9.2	64.2	1,112
Highest	26.8	61.9	45.3	10.0	65.6	1,071
Total	23.7	65.3	48.0	12.2	69.0	5,775

¹Only non-violent discipline: (1) providing an affirmative response to one or both of the following: took away child's privileges, forbade something the child liked, or did not allow the child to leave the house or explained why some behavior was wrong, or gave the child something else to do; and (2) a negative response to all of the following: shook the child; shouted, yelled, or screamed at the child; spanked, hit, or slapped the child on the bottom with a bare hand; hit the child on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object; called the child dumb, lazy, or similar name; hit or slapped the child on the face, head, or ears; hit or slapped the child on the hand, arm, or leg; or beat the child over and over as hard as possible.

²Psychological aggression: providing an affirmative answer to one or both of the following: shouted, yelled, or screamed at the child or called the child dumb, lazy, or similar name.

³Any physical punishment: providing an affirmative response to any of the following: shook the child; spanked, hit, or slapped the child on the bottom with a bare hand; hit the child on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object; hit or slapped the child on the face, head, or ears; hit or slapped the child on the hand, arm, or leg; or beat the child over and over as hard as possible.

⁴Severe physical punishment: providing an affirmative response to one or both of the following: hit or slapped the child on the face, head, or ears; or beat the child over and over as hard as possible.

⁵Any violent discipline method: providing an affirmative response to any of the following: shook the child; shouted, yelled, or screamed at the child; spanked, hit, or slapped the child on the bottom with a bare hand; hit the child on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object; called the child dumb, lazy, or similar name; hit or slapped the child on the face, head, or ears; hit or slapped the child on the hand, arm, or leg; or beat the child over and over as hard as possible.

⁶Total includes one child with missing information on household head education.

CHARACTERISTICS OF RESPONDENTS

Key Findings

- **Age:** More than half of the women interviewed in the 2017 TjDHS are below age 30.
- **Education and literacy:** 56% of women have completed secondary schooling. Ninety-five percent of women are literate.
- **Exposure to mass media:** 12% of women have used the internet in the past 12 months. Television is the most commonly accessed form of media among women (87%).
- **Employment and occupation:** One in four women are currently employed. One in three employed women work in agriculture.
- **Diabetes and hypertension:** One in 10 women are hypertensive, and 2% have been told by a health care provider that they have high blood sugar or diabetes.

This chapter presents information on the demographic and socioeconomic characteristics of the survey respondents such as age, education, place of residence, marital status, employment, and wealth status. This information is useful for understanding the factors that affect use of reproductive health services, contraceptive use, and other health behaviors.

3.1 BASIC CHARACTERISTICS OF SURVEY RESPONDENTS

The 2017 TjDHS interviewed 10,718 women age 15-49 (**Table 3.1**). More than half of women (55%) are below age 30, with adolescents (those age 15-19) constituting 18% of women in Tajikistan. Nearly three-quarters of women (72%) are currently married or living together with a partner as though married, while 22% of women have never been married. Six percent of women are divorced, separated, or widowed. Three-quarters of respondents live in rural areas. Over two-thirds live in either Khatlon (37%) or Sughd (31%), and 22% live in DRS. Dushanbe is home to 9% of the TjDHS respondents, and 2% live in GBAO.

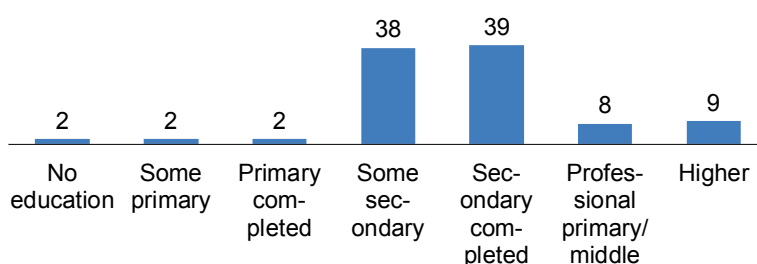
3.2 EDUCATION AND LITERACY

Educational attainment is high in Tajikistan. The majority of women age 15-49 (94%) have some secondary-level education or higher. Relatively few respondents never went to school (2%) or attended school only at the primary level (4%) (**Table 3.2**).

Over half of women in Tajikistan (56%) have completed a secondary or higher education (**Figure 3.1**). Eight percent of women have some professional primary or middle education, and 9% have a higher education. Women have completed a median of 9.8 years of schooling.

Figure 3.1 Education of survey respondents

Percent distribution of women age 15-49 by highest level of schooling attended or completed



Literacy

Respondents who had attended higher than secondary school were assumed to be literate. All other respondents, shown a typed sentence to read aloud, were considered literate if they could read all or part of the sentence.

Sample: Women age 15-49

The literacy rate is high (95%) among women in Tajikistan (Table 3.3). Five percent of women cannot read at all.

Trends: The median number of years of schooling completed by women age 15-49 has increased only slightly since the 2012 TjDHS, from 9.4 years to 9.8 years; however, there has been a larger increase among women age 15-24, from 8.9 years to 10.0 years. The proportion of women age 15-49 with a higher education has increased somewhat over the past 5 years, from 6% to 9%. The proportion of women with no education has not changed (2% in both 2012 and 2017).

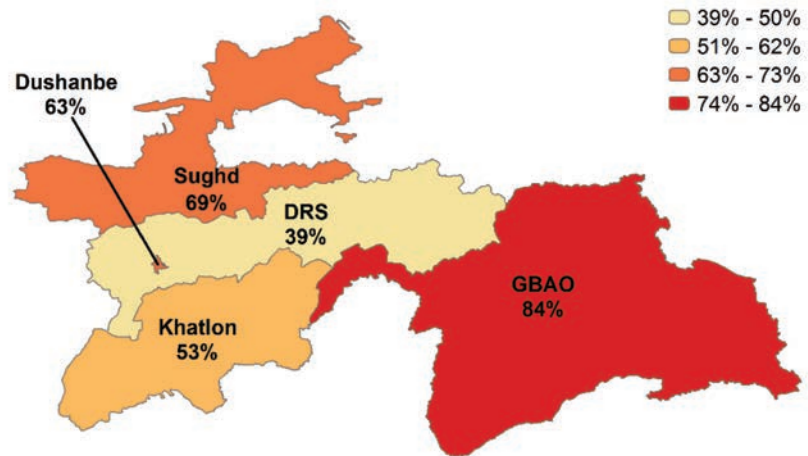
Patterns by background characteristics

- Urban women are notably more likely than rural women to have attended or completed schooling at the higher education level (19% versus 6%) (Table 3.2).

- Women in DRS are least likely to have completed secondary school or higher (39%) compared with GBAO where they are most likely (84%) (Figure 3.2).

- Women in GBAO and Dushanbe have a clear educational advantage over the rest of the country: 28% of women in GBAO and 27% in Dushanbe have some university education, as compared with 4% and 5% of women in DRS and Khatlon, respectively.
- Women in GBAO have completed a median of 1.9 more years of schooling than women from DRS (10.7 years versus 8.8 years).
- The median number of years of schooling exceeds the national average among women age 20-24 (10.3 years) and falls far below the average among women age 30-34 (9.0 years).
- Women from the wealthiest households have completed a median of 1 more year of schooling than women from the poorest households (10.4 years versus 9.2 years).
- Women age 25-29 and age 30-34 and women in Khatlon are relatively less likely to be literate (91% each) than women in other age groups and regions (95%-99%).
- The literacy rate increases with increasing wealth, from 89% among women in the lowest wealth quintile to 98% among women in the highest quintile.

Figure 3.2 Secondary education by region



Note: Secondary education includes completed secondary, professional primary/middle, and higher education

3.3 MASS MEDIA EXPOSURE AND INTERNET USAGE

Exposure to mass media

Respondents were asked how often they read a newspaper, listened to the radio, or watched television. Those who responded *at least once a week* are considered regularly exposed to that form of media.

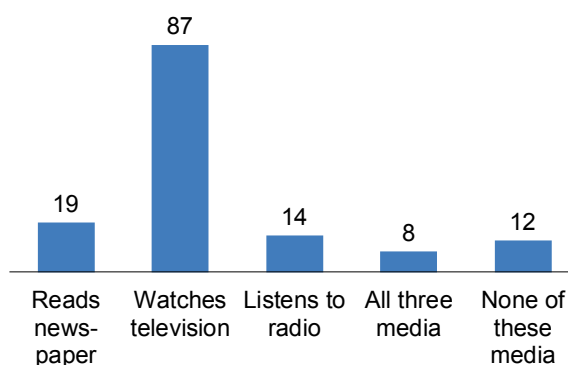
Sample: Women age 15-49

Data on women's exposure to media are useful for understanding which women are likely to be reached by media campaigns disseminating family planning, health, and other information.

Television is the form of media most commonly accessed at least weekly (87%) among women age 15-49 in Tajikistan. Women have considerably less regular exposure to the other two forms of media: 19% read a newspaper at least once a week, while 14% listen to the radio at least once a week (Table 3.4 and Figure 3.3). Twelve percent of women have no access to any of the three forms of media at least once a week.

Figure 3.3 Exposure to mass media

Percentage of women age 15-49 who are exposed to media on a weekly basis



Internet usage

The internet is a global network through which information is shared. Internet use includes accessing web pages, email, and social media.

Sample: Women age 15-49

Twelve percent of women age 15-49 report having used the internet in the past 12 months. Among those who had used the internet in the past 12 months, less than half used it on a daily basis during the past month (46%), while over one-third (36%) used it at least once a week (Table 3.5).

Trends: Weekly television exposure increased slightly from 84% in 2012 to 87% in 2017, while weekly exposure to newspapers and radio declined in the same time period (from 30% to 19% and from 26% to 14%, respectively). Although the proportion of women with no weekly media access declined slightly from 15% to 12%, the proportion with weekly access to all three mass media fell from 17% to 8%. These changes in levels of exposure to various media may relate at least in part to the rapid growth in computer ownership among Tajikistani households over the last 5 years, from 12% in 2012 to 21% in 2017 (see Chapter 2, Table 2.4). In addition, increased access to the internet (from 4% in 2012 to 27% in 2017), which accompanied computer ownership, may have affected usage of traditional mass media (Table 2.4).

Patterns by background characteristics

- Women age 15-19 are more likely to read a newspaper at least once a week (29%) than women in older age groups (13%-22%) and less likely to access none of the three media at least once a week (7% versus 11%-16%).
- Rural women are more likely than their urban counterparts (13% versus 8%) to have no weekly exposure to any of the three media.
- There is more variation in exposure to newspapers and radio than in exposure to television. Across regions, weekly television exposure ranges from 85% to 88%, while weekly newspaper access ranges from 12% to 41% and weekly radio access ranges from 6% to 33%.

- Exposure to newspapers and radio increases sharply with increasing education and wealth; exposure to television also rises with increasing education and wealth but less markedly.
- Urban women are notably more likely than rural women to have used the internet in the past 12 months (26% versus 8%).
- The percentage of women using the internet in the past 12 months is lowest among those in Khatlon (3%) and highest among those in Dushanbe (35%).
- Internet use increases with increasing education and wealth.

3.4 EMPLOYMENT

Currently employed

Respondents who were employed in the 7 days before the survey.

Sample: Women age 15-49

One in four women age 15-49 in Tajikistan are currently employed (**Table 3.6**).

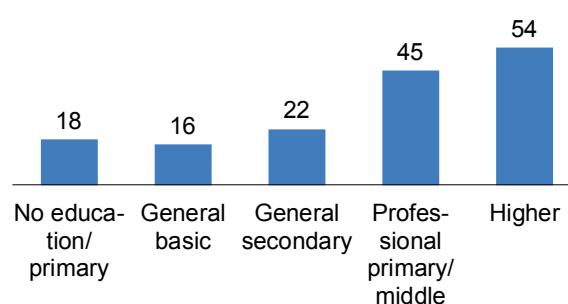
Trends: Current employment among women has decreased very slightly since 2012, from 27% to 25%.

Patterns by background characteristics

- The percentage of women employed at the time of the survey increases steadily with age, from 11% among those age 15-19 to 40% among those age 45-49.
- Women who are currently married or who were previously married are more likely to be employed than those who have never been married. Half of women who are divorced, separated, or widowed (51%) are currently working, as compared with one-quarter of married women (24%) and 19% of never-married women.
- Employment status varies widely by region. The current employment rate is highest in Sughd (31%) and lowest in DRS (14%) and ranges from 24% to 30% in other regions of Tajikistan.
- The current employment rate generally increases with increasing education. Women with a higher education are three times more likely to be currently employed as women with no education or only a primary education (54% versus 18%) (**Figure 3.4**).

Figure 3.4 Employment status by education

Percentage of women age 15-49 who are currently employed



3.5 OCCUPATION

Occupation

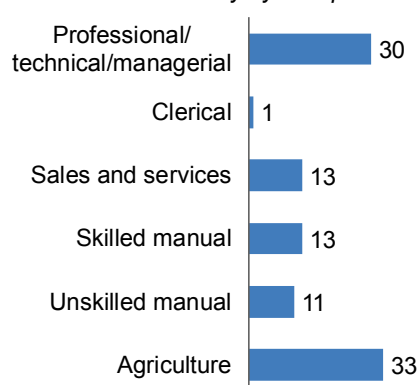
Categorized as professional/technical/managerial, clerical, sales and services, skilled manual, unskilled manual, and agriculture.

Sample: Women age 15-49 who were currently employed or had worked in the 12 months before the survey

Women who were employed in the 12 months preceding the survey were most likely to work in agriculture (33%); 30% were employed in professional, technical, or managerial positions, while 13% worked in sales and services, 13% in skilled manual labor, 11% in unskilled manual labor, and 1% in clerical jobs (**Table 3.7** and **Figure 3.5**).

Figure 3.5 Occupation

Percentage of women age 15-49 employed in the 12 months before the survey by occupation



Trends: Involvement in agricultural work has tripled among women in the past 5 years, from 10% in 2012 to 33% in 2017. In contrast, involvement in unskilled manual labor has decreased, from 45% to 11%. It is important to note that the classification of occupations in the 2017 TjDHS was based on the 2012 version of the International Standard Classification of Occupations (ISCO-08), as recommended by the International Labour Organization, while the 2012 TjDHS classification was based on the ISCO-88. As a result, due to significant changes in the classification structure¹, trends in occupations between the 2012 and 2017 TjDHS surveys should be interpreted with caution.

Patterns by background characteristics

- Among women who were employed in the 12 months preceding the survey, women age 15-19 are more likely to have worked in agriculture (64%) than women in older age groups (25%-38%) and less likely to have worked in professional/technical/managerial occupations (3% versus 28%-37%).
- Urban women, women from GBAO and Dushanbe, women with a professional or higher education, and women in the highest wealth quintile are most likely to be employed in professional, technical, or managerial occupations.
- One-quarter or more of employed women in urban areas, in Dushanbe, and in the highest wealth quintile work in sales and services.
- As expected, women in rural areas are much more likely to work in agricultural occupations than women in urban areas (44% versus 2%). Agricultural employment is also far more common among women in Khatlon (51%) and Sughd (30%) than among women in other regions (13% or less).
- Approximately half of employed women who have a general basic education or less (52%-53%) and are in the lowest two wealth quintiles (49%-54%) are working in agriculture, as compared with 2% of women who have a higher education and are in the highest wealth quintile.

3.6 TYPE OF EMPLOYMENT

Among women who were employed in the 12 months preceding the survey, three-quarters (75%) are paid in cash only and 9% are paid in cash and in-kind. Around 1 in 7 women are not paid (13%), and 3% receive only in-kind payments. Over half of women are employed by a non-relative (56%), one-quarter work for a family member, and 19% are self-employed (**Table 3.8**).

Trends: The percentage of employed women who were paid in cash only increased from 53% in 2012 to 75% in 2017. The percentage of women engaged in agriculture who received cash only has also increased since 2012, from 5% to 47%. Similarly, the percentage of women engaged in nonagricultural work for cash

¹ “The new occupation classification brought significant changes in the division of employment between occupations within individual sectors. The main issue here was reclassification of one occupational group to another” (Cedefop 2014).

only has increased from 59% to 89%. The proportion of women who are not paid or who are paid in-kind has decreased since 2012.

Patterns by background characteristics

- As expected, women who work in nonagricultural jobs are far more likely to be paid in cash for the work they do. Nearly 3 in 10 women employed in agriculture are not paid at all for their work (27%).
- Women who work in agriculture are equally likely to be employed by family members and by non-family members (46% each). Women in nonagricultural jobs are more likely to be employed by a non-family member (60%) than to work for a relative (15%) or to be self-employed (25%).
- Women's employment in agricultural jobs is more often seasonal than year-round (89% versus 8%). Women in nonagricultural jobs are much more likely to be employed throughout the year (80%).

3.7 EMPLOYMENT ABROAD

Tajikistan is a country that experiences a large outflux of citizens for the purpose of labor migration. Migrants contribute to the economies of both their country and their host country. According to data from the Statistical Agency under the President of the Republic of Tajikistan, labor migration decreased substantially between 2013 and 2016, from 793,449 to 435,457 independent labor migrants working abroad (SA 2016b). In 2016, personal received remittances were equivalent to 27% of Tajikistan's gross domestic product (GDP), a decline from 42% in 2012 (World Bank 2018).

The majority of Tajikistani labor migrants are men. Only 3% of women reported that they were working abroad at some point in the 3 years preceding the survey for 3 or more months at a time; conversely, 39% of currently married women reported that their spouse was working abroad during the 3 years preceding the survey for 3 or more months at a time (**Table 3.9**).

Patterns by background characteristics

- The proportion of women whose partners worked abroad generally decreases with age.
- In general, urban women, those with a higher education, and those from the wealthiest households are less likely than rural, less educated, and less wealthy women to report that their husband was employed abroad.
- By region, women in Sughd (42%), DRS (41%), and Khatlon (38%) were most likely to have spouses who worked abroad, while women in GBAO (20%) were least likely.

3.8 HISTORY OF DIABETES

With rapid urbanization, sedentary lifestyles, and increasing rates of obesity, the prevalence of diabetes has increased over the years both worldwide and in Tajikistan. Diabetes mellitus is a group of diseases that are characterized by elevated blood glucose levels due to defects in insulin secretion or insulin action (ADA 2004, ADA 2014). As a result, blood glucose levels remain abnormally high over a prolonged period of time. If left untreated, diabetes can cause many complications, including heart attack, stroke, kidney failure, loss of vision, leg amputation, nerve damage, and premature death. The diagnosis of diabetes is usually made when classic diabetes signs and symptoms are associated with abnormal blood glucose (Pippitt et al. 2016). Blood glucose levels are determined through tests conducted in the laboratory by a health provider or self-tests administered at home.

Seventeen percent of women age 15-49 in Tajikistan report having ever had their blood sugar measured by a health care provider, and 2% report having ever been told that they have high blood sugar or diabetes (**Table 3.10**).

Patterns by background characteristics

- The percentage of women who report having their blood sugar measured increases with age, from 5% among those age 15-19 to 31% among those age 45-49.
- The likelihood of women having their blood sugar measured for diabetes by a health care provider increases with increasing body mass index² (BMI), from 10% among women who are classified as thin to 29% among women who are obese.
- Women who are urban, more educated, and wealthier are more likely to report having their blood sugar measured.
- The proportion of women with their blood sugar measured ranges from 11% among those in Sughd to 39%-40% among those in GBAO and Dushanbe.
- In general, women age 40-44 and age 45-49 (4%-6%), those who are obese (5%), and those living in GBAO (5%) are slightly more likely than other women (1%-3%) to have ever been told by a health provider that they have high blood glucose or diabetes.

3.9 HISTORY OF HIGH BLOOD PRESSURE

Noncommunicable diseases are the main causes of death in Tajikistan, accounting for 64% of all deaths in 2015 (WHO 2017). Cardiovascular diseases, including heart attacks and strokes, accounted for 48% of all deaths registered in the country that same year (SA 2016a). High blood pressure or hypertension is among the major risk factors for cardiovascular disease. The 2017 TjDHS Woman's Questionnaire included questions to determine if respondents' blood pressure had ever been measured by a doctor or other health care provider and if they had been ever diagnosed as hypertensive. **Table 3.11** summarizes the results of the questions relating to hypertension.

Sixty-two percent of women age 15-49 report ever having had their blood pressure measured by a doctor or other health care provider, and 6% report ever having been told by a doctor or other health provider that their blood pressure was high. Among women who have ever been informed that they have high blood pressure or hypertension, 78% had been informed in the 12 months preceding the survey, 73% were prescribed medication to control their blood pressure, and 51% were taking medication to control their blood pressure at the time of the survey.

Trends: The proportion of women age 15-49 who report ever having been told by a doctor or other health provider that their blood pressure was high decreased from 12% in 2012 to 6% in 2017.

Patterns by background characteristics

- The percentage of women who ever had their blood pressure measured by a health care provider generally increases with age, body mass index (BMI), education, and wealth.
- The percentage of women who have had their blood pressure measured is lowest among those who live in Khatlon (49%).
- As expected, the percentage of women who have ever been told they have high blood pressure or hypertension by a health provider increases directly with age, from 1% among those age 15-19 to 19% among those age 45-49.

² The 2017 TjDHS obtained data on the height and weight of women age 15-49. This information was used to calculate each woman's body mass index (BMI), a commonly used measure of nutritional status obtained by dividing weight in kilograms by height in meters squared (kg/m²). More information on BMI levels among TjDHS respondents is presented in Chapter 12.

- Also as expected, obesity is strongly related to high blood pressure. The percentage of women who have been told they have high blood pressure is much higher among those classified as obese (17%) than among those classified as normal weight (4%) or thin (3%).
- The percentage of women who have been told they have high blood pressure is similar among those in urban and rural areas and ranges from 4% in Dushanbe to 8% in DRS.
- Among women who have ever been told they have high blood pressure or hypertension, there are regional variations in the proportions who have been prescribed medication (from 57% in GBAO to 84% in Dushanbe) and the proportions who are currently taking medication (from 32% in GBAO to 59% in Dushanbe).

3.10 HIGH BLOOD PRESSURE

The 2017 TjDHS Woman’s Questionnaire included questions to determine if respondents were taking medication to control blood pressure. Respondents were also asked if their blood pressure could be measured as part of the survey.

Hypertension

Three measurements of systolic and diastolic blood pressure (measured in millimeters of mercury [mmHg]) were taken during the survey interview, with an interval of at least 10 minutes between measurements, using a digital oscillometric blood pressure measuring device with automatic upper-arm inflation and automatic pressure release.

The average* of the second and third measurements was used to classify individuals with respect to hypertension.

Respondents were classified as having hypertension if they had a systolic blood pressure level of 140 mmHg or above or a diastolic blood pressure level of 90 mmHg or above at the time of the survey or had a normal average blood pressure reading but were taking antihypertensive medication.

Elevated blood pressure was classified as mild, moderate, or severe according to the cut-off points recommended by the World Health Organization (WHO 1999).

These measurements in a survey situation do not constitute a medical diagnosis of disease; rather, they are used only as a statistical description of the survey population.

Blood pressure category	Systolic (mmHg)		Diastolic (mmHg)
Optimal	<120	AND	<80
Normal	120-129	OR	80-84
High normal	130-139	OR	85-89
Level of hypertension			
Grade 1, mildly elevated	140-159	OR	90-99
Grade 2, moderately elevated	160-179	OR	100-109
Grade 3, severely elevated	180+	OR	110+

Note: Respondents whose blood pressure fell into two different categories based on their average systolic and average diastolic levels were classified according to the highest blood pressure category in which they fell on either of the two measures.

* If the third blood pressure measurement was missing, the second measurement was considered the average. If the second and third measurements were missing, the first measurement was considered the average.

Sample: Women age 15-49 with valid blood pressure measurements

Ninety-nine percent of women had valid blood pressure measurements taken as part of the survey (data not shown). Ten percent of women age 15-49 were classified as hypertensive: 2% with hypertension controlled by medication, 7% with Grade 1 hypertension, 1% with Grade 2 hypertension, and less than 1% with

Grade 3 hypertension or severely elevated blood pressure (**Table 3.12**). An additional 9% of women had high-normal blood pressure. It should be noted that the blood pressure measurements taken in the survey are not intended to provide a medical diagnosis of the disease; therefore, the term hypertension as used here should be regarded as a statistical description of the survey population as opposed to a clinical diagnosis.

Controlled hypertension

Controlled hypertension is defined as having a systolic blood pressure level below 140 mmHg and a diastolic blood pressure level below 90 mmHg and currently taking antihypertensive medication to control blood pressure.

Sample: Women age 15-49 with hypertension

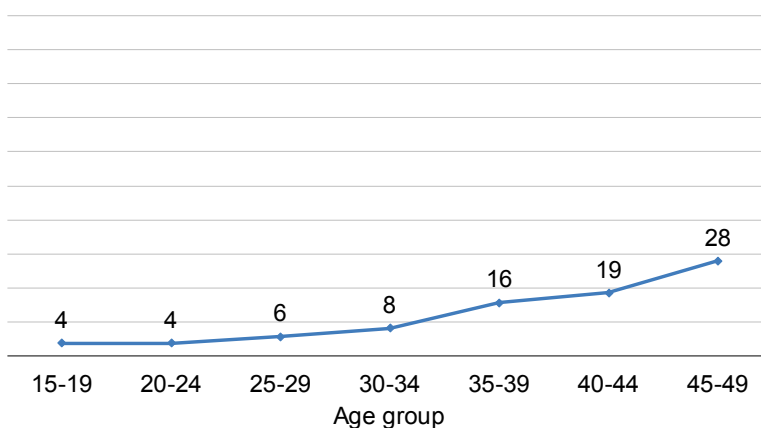
Among the 10% of women with high blood pressure, only 17% have controlled hypertension (**Table 3.13**).

Patterns by background characteristics

- The 2017 TjDHS results corroborate other epidemiological studies showing that hypertension is positively associated with age (**Figure 3.6**). The prevalence of hypertension is seven times higher among women age 45-49 (28%) than among women age 20-24 (4%).
- Significant differences in the prevalence of hypertension are found among women according to their body mass index (BMI). As expected, hypertension levels are higher among overweight/obese women than among those of normal weight (**Figure 3.7**). The rate of hypertension among obese women (BMI of 30 or above) is 28%, as compared with 2% among women who are thin (BMI below 18.5) and 6% among women of normal weight (BMI between 18.5 and 24.9).
- Differentials in hypertension rates by urban-rural residence are negligible. However, by region, the prevalence of hypertension ranges from 7% among women in Dushanbe to 12% among women in DRS.
- As expected, although not universal, controlled hypertension is higher among women diagnosed with high blood pressure by a health provider (42%) than the national average of 17% (**Table 3.13**).

Figure 3.6 Hypertension by age

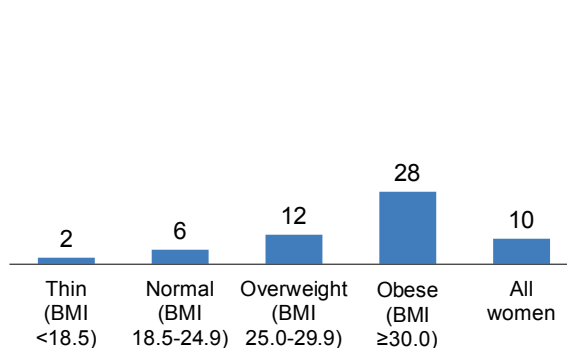
Percentage of women with hypertension*



* A systolic blood pressure level of 140 mmHg or above or a diastolic blood pressure level of 90 mmHg or above or taking antihypertensive medication. The term hypertension as used in this figure is not meant to represent a clinical diagnosis of the disease; rather, it provides a statistical description of the survey population at the time of the survey.

Figure 3.7 Hypertension by Body Mass Index (BMI)

Percentage of women age 15-49 with hypertension*



Note: The Body Mass Index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

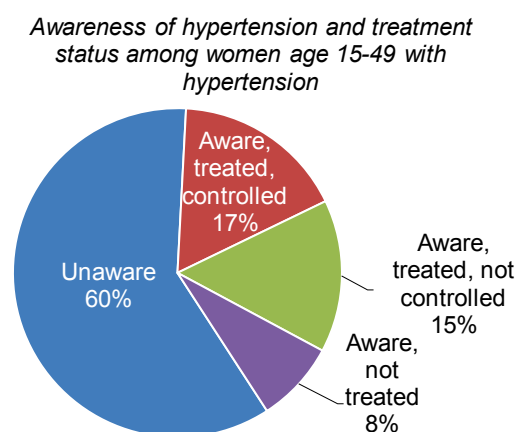
* A systolic blood pressure level of 140 mmHg or above or a diastolic blood pressure level of 90 mmHg or above or taking antihypertensive medication. The term hypertension as used in this figure is not meant to represent a clinical diagnosis of the disease; rather, it provides a statistical description of the survey population at the time of the survey.

- Similarly, only half of women currently on antihypertensive medication have effectively achieved controlled hypertension.

Figure 3.8 shows the level of awareness and treatment status of hypertensive women. Four in 10 women with high blood pressure reported that they are aware of their condition (40%); 17% are being treated and have brought their blood pressure under control, and 15% are being treated but still have elevated blood pressure. Eight percent of hypertensive women are aware that they have elevated blood pressure but are not being treated, and 60% are unaware of their condition.

Although the overall rate of hypertension among adult women in Tajikistan is relatively low, hypertension is a serious health problem among women age 45 and older and those who are obese. A first step toward bringing hypertension under control is awareness by individuals of their condition and its implications in terms of premature disability and death. Many Tajikistani women may suffer from hypertension but do not know it; hypertension is often termed the ‘silent killer’ because of the lack of warning signs or symptoms. Educating the population about the adverse effects of hypertension and promoting blood pressure screening, particularly among older individuals, should be an important focus of health programs.

Figure 3.8 Awareness of hypertension



3.11 TOBACCO USE

The 2017 TjDHS included questions designed to assess the prevalence of tobacco use among women age 15-49. Tobacco use is rare among women in Tajikistan; only 0.5% reported that they regularly use tobacco (data not shown).

LIST OF TABLES

For more information on the characteristics of survey respondents, see the following tables:

- **Table 3.1 Background characteristics of respondents**
- **Table 3.2 Educational attainment**
- **Table 3.3 Literacy**
- **Table 3.4 Exposure to mass media**
- **Table 3.5 Internet usage**
- **Table 3.6 Employment status**
- **Table 3.7 Occupation**
- **Table 3.8 Type of employment**
- **Table 3.9 Respondent’s and partner’s employment abroad**
- **Table 3.10 History of diabetes**
- **Table 3.11 Blood pressure measured and medication prescribed and taken**
- **Table 3.12 Blood pressure status**
- **Table 3.13 Controlled hypertension**

Table 3.1 Background characteristics of respondents

Percent distribution of women age 15-49 by selected background characteristics, Tajikistan DHS 2017

Background characteristic	Weighted percent	Weighted number	Unweighted number
Age			
15-19	17.8	1,911	1,898
20-24	19.0	2,031	1,952
25-29	17.9	1,921	1,893
30-34	14.5	1,551	1,548
35-39	11.6	1,240	1,251
40-44	10.0	1,068	1,130
45-49	9.3	996	1,046
Marital status			
Never married	22.3	2,388	2,514
Married	71.9	7,709	7,499
Living together	0.4	38	46
Divorced/separated	3.9	416	471
Widowed	1.6	167	188
Residence			
Urban	25.1	2,694	4,212
Rural	74.9	8,024	6,506
Region			
Dushanbe	8.9	955	1,814
GBAO	2.0	209	973
Sughd	30.7	3,292	2,235
DRS	21.8	2,342	2,479
Khatlon	36.6	3,920	3,217
FTF districts	19.6	2,096	1,578
Education			
None/primary	5.8	619	601
General basic	33.7	3,615	3,468
General secondary	43.1	4,624	4,364
Professional primary/ middle	8.0	860	911
Higher	9.3	1,000	1,374
Wealth quintile			
Lowest	19.7	2,113	1,978
Second	19.6	2,101	1,693
Middle	19.7	2,109	1,753
Fourth	20.1	2,155	1,934
Highest	20.9	2,240	3,360
Total	100.0	10,718	10,718

Note: Education categories refer to the highest level of education attended, whether or not that level was completed.

Table 3.2 Educational attainment

Percent distribution of women age 15-49 by highest level of schooling attended or completed, and median years completed, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Highest level of schooling								Total	Median years completed	Number of women
	No education	Some primary	Completed primary ¹	Some secondary ²	Completed secondary ³	Professional primary	Professional middle	Higher			
Age											
15-24	1.7	1.3	1.2	44.9	34.5	1.0	6.9	8.5	100.0	10.0	3,942
15-19	1.5	0.9	0.4	58.9	29.0	0.7	4.0	4.7	100.0	9.3	1,911
20-24	1.8	1.7	1.9	31.8	39.7	1.4	9.7	12.1	100.0	10.3	2,031
25-29	3.9	2.3	2.8	38.3	35.6	1.9	5.2	10.1	100.0	10.1	1,921
30-34	3.2	3.6	4.7	42.7	29.3	0.9	5.5	10.0	100.0	9.0	1,551
35-39	0.8	1.9	1.3	46.1	34.3	1.7	4.9	8.9	100.0	9.4	1,240
40-44	0.8	0.6	0.6	24.3	54.0	2.4	6.5	10.8	100.0	9.8	1,068
45-49	1.2	1.7	0.4	10.1	64.2	4.5	8.9	9.1	100.0	9.6	996
Residence											
Urban	1.0	2.6	1.3	32.0	33.5	2.2	7.9	19.4	100.0	10.2	2,694
Rural	2.4	1.6	2.0	40.3	40.3	1.5	5.8	5.9	100.0	9.6	8,024
Region											
Dushanbe	0.9	4.6	0.7	30.4	29.5	1.1	6.2	26.5	100.0	10.3	955
GBAO	0.4	0.5	0.3	15.1	42.0	4.8	8.9	28.1	100.0	10.7	209
Sughd	0.7	0.4	0.3	30.2	45.5	3.0	8.5	11.5	100.0	10.1	3,292
DRS	2.7	1.6	2.5	54.4	28.0	1.6	4.9	4.3	100.0	8.8	2,342
Khatlon	3.2	2.6	3.2	38.5	41.2	0.7	5.3	5.3	100.0	9.7	3,920
FTF districts	4.5	3.7	3.9	40.2	38.6	0.8	4.4	3.9	100.0	9.4	2,096
Wealth quintile											
Lowest	3.4	2.0	3.1	45.3	39.3	1.2	3.1	2.7	100.0	9.2	2,113
Second	2.3	2.0	2.0	45.1	38.7	1.1	4.5	4.3	100.0	9.3	2,101
Middle	2.7	1.1	1.7	39.0	41.9	2.0	6.0	5.5	100.0	9.8	2,109
Fourth	1.2	1.6	1.6	34.3	40.3	2.2	9.0	10.0	100.0	10.0	2,155
Highest	0.9	2.6	1.0	28.3	33.2	2.0	8.8	23.3	100.0	10.4	2,240
Total	2.1	1.9	1.9	38.2	38.6	1.7	6.3	9.3	100.0	9.8	10,718

¹ Completed Grade 4 at the primary level

² Attended or completed the general basic level (Grades 5-9) and attended but did not complete the general secondary level (Grades 10-11)

³ Completed Grade 11 at the secondary level or completed Grade 10 at the secondary level and has a general education school diploma ("attestat" as in older Soviet educational system terminology)

Table 3.3 Literacy

Percent distribution of women age 15-49 by level of schooling attended and level of literacy, and percentage literate, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Higher than secondary schooling	No schooling, primary or secondary school					Total	Percentage literate ¹	Number of women
		Can read a whole sentence	Can read part of a sentence	Cannot read at all	No card with required language	Blind/visually impaired			
Age									
15-24	16.5	68.3	11.6	3.6	0.0	0.0	100.0	96.4	3,942
15-19	9.4	78.1	8.9	3.6	0.0	0.0	100.0	96.4	1,911
20-24	23.2	59.1	14.1	3.6	0.1	0.0	100.0	96.3	2,031
25-29	17.1	57.4	16.6	8.8	0.1	0.0	100.0	91.1	1,921
30-34	16.5	53.5	20.6	9.5	0.0	0.1	100.0	90.5	1,551
35-39	15.5	63.6	15.6	5.3	0.0	0.0	100.0	94.7	1,240
40-44	19.6	64.2	13.5	2.4	0.2	0.0	100.0	97.4	1,068
45-49	22.5	60.8	13.3	3.1	0.0	0.3	100.0	96.6	996
Residence									
Urban	29.4	58.2	10.0	2.3	0.0	0.0	100.0	97.6	2,694
Rural	13.3	64.0	16.2	6.4	0.1	0.1	100.0	93.4	8,024
Region									
Dushanbe	33.9	56.0	8.9	1.1	0.0	0.1	100.0	98.8	955
GBAO	41.7	48.7	7.2	2.4	0.0	0.0	100.0	97.6	209
Sughd	23.0	66.6	7.9	2.4	0.1	0.0	100.0	97.4	3,292
DRS	10.9	69.6	14.3	5.1	0.0	0.2	100.0	94.8	2,342
Khatlon	11.2	57.3	22.2	9.3	0.0	0.0	100.0	90.6	3,920
FTF districts	9.1	50.3	27.8	12.8	0.0	0.0	100.0	87.2	2,096
Wealth quintile									
Lowest	6.9	60.7	21.8	10.4	0.1	0.1	100.0	89.4	2,113
Second	10.0	63.9	19.6	6.4	0.0	0.1	100.0	93.5	2,101
Middle	13.6	66.3	14.6	5.5	0.1	0.0	100.0	94.4	2,109
Fourth	21.1	66.5	9.1	3.3	0.1	0.0	100.0	96.6	2,155
Highest	34.1	55.6	8.4	1.8	0.0	0.1	100.0	98.2	2,240
Total	17.4	62.5	14.6	5.4	0.0	0.1	100.0	94.5	10,718

¹ Refers to women who attended schooling higher than the secondary level and women who can read a whole sentence or part of a sentence

Table 3.4 Exposure to mass media

Percentage of women age 15-49 who are exposed to specific media on a weekly basis, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Reads a newspaper at least once a week	Watches television at least once a week	Listens to the radio at least once a week	Accesses all 3 media at least once a week	Accesses none of the 3 media at least once a week	Number of women
Age						
15-19	29.4	90.8	14.5	9.5	6.7	1,911
20-24	17.9	87.6	14.0	8.5	11.1	2,031
25-29	13.2	85.0	12.1	6.3	13.6	1,921
30-34	15.3	83.1	12.0	6.1	16.2	1,551
35-39	16.5	86.2	13.7	7.5	12.3	1,240
40-44	22.2	86.9	17.6	10.8	11.8	1,068
45-49	21.7	85.9	15.1	9.1	12.7	996
Residence						
Urban	30.0	90.0	21.6	15.2	8.2	2,694
Rural	15.7	85.5	11.3	5.7	13.1	8,024
Region						
Dushanbe	38.7	87.2	33.4	26.7	9.9	955
GBAO	41.2	86.3	6.0	5.0	8.8	209
Sughd	23.1	88.4	17.9	11.2	10.8	3,292
DRS	15.8	87.0	9.2	4.0	12.1	2,342
Khatlon	12.4	84.9	9.0	3.6	13.2	3,920
FTF districts	10.1	79.8	9.9	3.4	17.9	2,096
Education						
None/primary	6.5	72.3	8.1	3.3	27.0	619
General basic	12.4	83.9	9.6	3.9	14.8	3,615
General secondary	15.5	88.3	12.9	6.8	10.5	4,624
Professional primary/ middle	34.5	90.1	18.6	12.7	6.9	860
Higher	57.3	95.3	33.4	28.2	2.3	1,000
Wealth quintile						
Lowest	10.0	79.1	6.1	2.1	19.8	2,113
Second	13.5	87.1	10.2	4.6	11.8	2,101
Middle	17.3	86.6	14.2	7.2	11.6	2,109
Fourth	20.7	89.8	15.1	9.0	9.1	2,155
Highest	34.3	90.4	23.2	17.0	7.4	2,240
Total	19.3	86.7	13.9	8.1	11.9	10,718

Table 3.5 Internet usage

Percentage of women age 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, Tajikistan DHS 2017

Background characteristic	Ever used the internet	Used the internet in the past 12 months	Number	Among respondents who have used the internet in the past 12 months, percentage who, in the past month, used the internet:				Total	Number of women
				Almost every day	At least once a week	Less than once a week	Not at all		
Age									
15-19	11.2	10.8	1,911	43.9	37.6	16.0	2.4	100.0	206
20-24	16.3	15.1	2,031	55.1	34.2	9.9	0.8	100.0	307
25-29	15.4	14.1	1,921	47.2	35.6	14.5	2.8	100.0	271
30-34	14.9	13.0	1,551	44.0	36.5	16.3	3.1	100.0	202
35-39	12.7	11.0	1,240	37.7	33.9	24.3	4.0	100.0	136
40-44	12.8	11.1	1,068	43.8	34.5	19.4	2.3	100.0	119
45-49	11.4	8.9	996	35.2	39.8	25.0	0.0	100.0	89
Residence									
Urban	28.8	26.3	2,694	50.2	35.1	13.9	0.8	100.0	709
Rural	8.8	7.7	8,024	41.0	36.5	18.6	3.8	100.0	620
Region									
Dushanbe	39.6	34.9	955	46.0	35.5	18.3	0.1	100.0	333
GBAO	32.4	30.4	209	33.0	41.7	25.3	0.0	100.0	64
Sughd	22.3	19.9	3,292	45.8	34.7	15.9	3.6	100.0	654
DRS	6.9	6.3	2,342	57.4	31.3	9.4	2.0	100.0	148
Khatlon	3.6	3.3	3,920	39.8	43.6	14.5	2.1	100.0	131
FTF districts	3.9	3.6	2,096	32.0	46.2	19.2	2.6	100.0	75
Education									
None/primary	4.2	3.7	619	(56.4)	(28.3)	(11.5)	(3.8)	100.0	23
General basic	5.5	5.1	3,615	43.4	35.0	19.7	1.9	100.0	184
General secondary	10.5	9.1	4,624	44.5	34.3	18.5	2.6	100.0	422
Professional primary/ middle	29.3	26.3	860	38.4	39.4	20.6	1.6	100.0	226
Higher	52.0	47.5	1,000	51.3	35.9	10.6	2.2	100.0	475
Wealth quintile									
Lowest	2.2	1.8	2,113	24.2	22.1	51.4	2.3	100.0	38
Second	4.9	4.0	2,101	37.0	34.6	26.9	1.5	100.0	85
Middle	8.4	7.5	2,109	31.2	46.6	18.5	3.7	100.0	157
Fourth	16.3	14.5	2,155	46.7	35.3	15.8	2.1	100.0	313
Highest	35.9	32.9	2,240	50.9	34.4	12.7	2.0	100.0	736
Total	13.8	12.4	10,718	45.9	35.7	16.1	2.2	100.0	1,329

Note: Figures in parentheses are based on 25-49 unweighted cases.

Table 3.6 Employment status

Percent distribution of women age 15-49 by employment status, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Employed in the 12 months preceding the survey		Not employed in the 12 months preceding the survey	Total	Number of women
	Currently employed ¹	Not currently employed			
Age					
15-19	11.1	0.3	88.6	100.0	1,911
20-24	15.8	0.6	83.6	100.0	2,031
25-29	22.2	1.3	76.4	100.0	1,921
30-34	29.3	1.1	69.7	100.0	1,551
35-39	34.9	1.2	63.9	100.0	1,240
40-44	35.9	1.4	62.6	100.0	1,068
45-49	40.0	1.4	58.6	100.0	996
Marital status					
Never married	19.3	0.6	80.1	100.0	2,388
Married or living together	24.2	1.0	74.8	100.0	7,747
Divorced/separated/ widowed	51.0	1.6	47.5	100.0	583
Number of living children					
0	19.4	0.7	79.9	100.0	3,215
1-2	24.4	1.3	74.3	100.0	3,216
3-4	29.4	1.0	69.6	100.0	3,428
5+	24.9	0.7	74.4	100.0	859
Residence					
Urban	25.9	1.2	72.9	100.0	2,694
Rural	24.1	0.9	75.0	100.0	8,024
Region					
Dushanbe	24.2	1.2	74.5	100.0	955
GBAO	29.5	2.9	67.5	100.0	209
Sughd	31.0	1.6	67.4	100.0	3,292
DRS	13.9	0.6	85.5	100.0	2,342
Khatlon	25.2	0.5	74.3	100.0	3,920
FTF districts	27.2	0.7	72.1	100.0	2,096
Education					
None/primary	17.8	0.8	81.4	100.0	619
General basic	15.9	0.6	83.5	100.0	3,615
General secondary	22.0	1.1	77.0	100.0	4,624
Professional primary/ middle	45.3	2.1	52.6	100.0	860
Higher	53.7	1.1	45.1	100.0	1,000
Wealth quintile					
Lowest	22.6	0.8	76.6	100.0	2,113
Second	24.4	0.5	75.1	100.0	2,101
Middle	23.3	0.9	75.8	100.0	2,109
Fourth	24.8	1.3	73.9	100.0	2,155
Highest	27.3	1.3	71.4	100.0	2,240
Total	24.5	1.0	74.5	100.0	10,718

¹ "Currently employed" is defined as having done work in the past 7 days. Includes persons who did not work in the past 7 days but who are regularly employed and were absent from work for leave, illness, vacation, or any other such reason.

Table 3.7 Occupation

Percent distribution of women age 15-49 employed in the 12 months preceding the survey by occupation, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Professional/ technical/ managerial	Clerical	Sales and services	Skilled manual	Unskilled manual	Agriculture	Missing	Total	Number of women
Age									
15-19	3.2	1.0	4.5	19.0	7.5	63.8	1.0	100.0	218
20-24	37.1	1.2	7.7	19.6	4.8	29.6	0.0	100.0	333
25-29	34.3	1.8	10.4	13.8	8.4	31.2	0.0	100.0	452
30-34	27.9	0.8	11.3	12.5	9.3	38.2	0.0	100.0	471
35-39	29.2	0.6	18.2	10.1	14.9	27.1	0.0	100.0	448
40-44	35.1	0.8	16.0	8.7	14.1	25.3	0.0	100.0	399
45-49	33.2	0.7	15.3	8.7	16.1	25.8	0.1	100.0	412
Marital status									
Never married	21.4	1.7	6.2	17.7	9.5	43.2	0.5	100.0	474
Married or living together	32.4	0.8	12.4	11.7	10.4	32.2	0.0	100.0	1,953
Divorced/separated/ widowed	29.7	1.2	23.7	10.0	17.8	17.6	0.0	100.0	306
Number of living children									
0	26.0	1.2	7.5	17.1	8.7	39.3	0.3	100.0	645
1-2	39.7	1.8	14.4	11.2	11.3	21.6	0.0	100.0	828
3-4	27.4	0.4	14.8	11.9	11.3	34.1	0.1	100.0	1,041
5+	20.1	0.0	10.7	7.5	16.3	45.4	0.0	100.0	220
Residence									
Urban	42.2	2.5	26.0	15.4	11.7	1.8	0.4	100.0	729
Rural	25.8	0.4	7.7	11.5	10.9	43.6	0.0	100.0	2,004
Region									
Dushanbe	44.6	3.9	26.8	9.2	14.4	0.5	0.7	100.0	243
GBAO	63.8	1.9	8.6	4.6	16.1	4.9	0.0	100.0	68
Sughd	31.7	0.5	13.7	13.5	10.1	30.4	0.0	100.0	1,074
DRS	32.4	1.1	11.6	22.0	19.5	13.4	0.0	100.0	340
Khatlon	22.1	0.6	8.6	9.8	8.1	50.6	0.1	100.0	1,008
FTF districts	18.1	0.2	7.8	5.8	4.9	63.0	0.1	100.0	586
Education									
None/primary	9.4	0.8	10.7	10.8	15.3	52.7	0.5	100.0	115
General basic	1.2	0.2	12.5	16.3	17.4	52.4	0.0	100.0	596
General secondary	3.5	0.3	17.1	18.1	15.3	45.4	0.2	100.0	1,066
Professional primary/ middle	73.9	1.3	9.8	5.9	3.7	5.3	0.1	100.0	408
Higher	85.3	2.8	6.5	3.1	0.7	1.5	0.0	100.0	548
Wealth quintile									
Lowest	16.7	0.0	6.9	8.6	18.6	49.3	0.0	100.0	495
Second	22.8	0.0	4.0	10.0	9.7	53.5	0.0	100.0	523
Middle	26.3	0.4	8.7	14.5	8.7	41.3	0.0	100.0	511
Fourth	33.4	1.1	15.1	17.2	8.8	24.5	0.0	100.0	562
Highest	47.0	2.8	25.0	12.2	10.3	2.3	0.4	100.0	641
Total	30.2	1.0	12.6	12.6	11.1	32.5	0.1	100.0	2,733

Table 3.8 Type of employment

Percent distribution of women age 15-49 employed in the 12 months preceding the survey by type of earnings, type of employer, and continuity of employment, according to type of employment (agricultural or nonagricultural), Tajikistan DHS 2017

Employment characteristic	Agricultural work	Nonagricultural work	Total
Type of earnings			
Cash only	47.3	88.7	75.2
Cash and in-kind	18.7	4.9	9.4
In-kind only	7.5	0.5	2.8
Not paid	26.6	5.9	12.7
Total	100.0	100.0	100.0
Type of employer			
Employed by family member	45.9	15.1	25.1
Employed by non-family member	46.2	60.4	55.7
Self-employed	7.9	24.6	19.2
Total	100.0	100.0	100.0
Continuity of employment			
All year	7.9	80.0	56.6
Seasonal	89.3	11.9	37.1
Occasional	2.7	8.0	6.4
Total	100.0	100.0	100.0
Number of women employed during the last 12 months	887	1,843	2,733

Note: Total includes women with missing information on type of employment who are not shown separately.

Table 3.9 Respondent's and partner's employment abroad

Percentage of women age 15-49 who worked abroad during the 3 years before the survey for 3 or more months at a time, and percentage of currently married women age 15-49 who said that their husband worked abroad during the 3 years before the survey for 3 or more months at a time, by background characteristics, Tajikistan DHS 2017

Background characteristic	All women		Currently married or living together	
	Worked abroad ¹	Number of women	Partner worked abroad ¹	Number of women
Age				
15-19	1.0	1,911	36.9	240
20-24	3.2	2,031	44.6	1,557
25-29	3.8	1,921	41.1	1,688
30-34	4.4	1,551	41.2	1,374
35-39	4.6	1,240	37.4	1,089
40-44	5.0	1,068	30.6	953
45-49	2.7	996	28.6	847
Marital status				
Never married	1.2	2,388	na	na
Married or living together	4.1	7,747	38.5	7,747
Divorced/separated/ widowed	3.5	583	na	na
Residence				
Urban	3.9	2,694	28.7	1,803
Rural	3.2	8,024	41.5	5,944
Region				
Dushanbe	3.3	955	21.8	585
GBAO	7.3	209	20.2	144
Sughd	3.7	3,292	42.2	2,533
DRS	3.2	2,342	41.4	1,709
Khatlon	3.1	3,920	37.9	2,776
FTF districts	3.8	2,096	50.2	1,548
Education				
None/primary	3.9	619	42.9	468
General basic	3.0	3,615	40.4	2,532
General secondary	2.9	4,624	37.2	3,442
Professional primary/ middle	5.5	860	41.3	626
Higher	4.8	1,000	32.9	680
Wealth quintile				
Lowest	2.0	2,113	35.9	1,469
Second	2.3	2,101	42.1	1,508
Middle	3.2	2,109	44.3	1,606
Fourth	4.4	2,155	40.3	1,668
Highest	5.0	2,240	29.3	1,496
Total	3.4	10,718	38.5	7,747

na = Not applicable

¹ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

Table 3.10 History of diabetes

Percentage of women age 15-49 who have ever had their blood sugar measured by a doctor or other health care provider and who have been told by a health care provider that they have high blood sugar or diabetes, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Ever had blood sugar measured by doctor or health care provider	Ever told have high blood sugar or diabetes by doctor or health care provider	Number of women
Age			
15-19	5.2	0.9	1,911
20-24	14.4	1.3	2,031
25-29	17.3	1.7	1,921
30-34	18.0	1.1	1,551
35-39	21.7	2.7	1,240
40-44	26.7	3.9	1,068
45-49	30.5	5.8	996
Currently pregnant			
Pregnant	21.8	1.6	795
Not currently pregnant	17.0	2.2	9,923
Nutritional status: Body Mass Index (BMI)¹			
Thin (BMI <18.5)	10.4	1.1	747
Normal (BMI 18.5-24.9)	14.5	1.4	5,969
Overweight (BMI 25.0-29.9)	19.8	2.3	2,609
Obese (BMI ≥30.0)	28.5	5.3	1,394
Residence			
Urban	24.4	2.6	2,694
Rural	15.0	2.0	8,024
Region			
Dushanbe	39.7	2.7	955
GBAO	38.8	4.6	209
Sughd	11.3	1.2	3,292
DRS	18.8	2.4	2,342
Khatlon	15.0	2.5	3,920
FTF districts	13.2	2.7	2,096
Education			
None/primary	17.4	1.8	619
General basic	14.8	1.4	3,615
General secondary	16.7	2.5	4,624
Professional primary/middle	21.4	2.9	860
Higher	26.0	2.3	1,000
Wealth quintile			
Lowest	13.4	1.8	2,113
Second	14.6	1.5	2,101
Middle	14.9	2.2	2,109
Fourth	16.2	2.5	2,155
Highest	27.0	2.6	2,240
Total	17.3	2.1	10,718

¹ The Body Mass Index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

Table 3.11 Blood pressure measured and medication prescribed and taken

Percentage of women age 15-49 who have ever had their blood pressure measured by a doctor or other health care provider and who have been told by a health care provider that they have high blood pressure or hypertension, and among women who have been told they have high blood pressure or hypertension, percentage told in the past 12 months they have high blood pressure or hypertension, percentage prescribed medication to control blood pressure, and percentage taking medication to control blood pressure, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Ever had blood pressure measured by doctor or health care provider	Ever told have high blood pressure or hypertension by doctor or health care provider	Number of women	Among women who have been told by a doctor or health care provider they have high blood pressure or hypertension, percentage who were:			Number of women
				Told in the past 12 months have high blood pressure or hypertension	Prescribed medication to control blood pressure	Taking medication to control blood pressure	
Age							
15-19	26.7	1.2	1,911	*	*	*	23
20-24	63.3	3.1	2,031	54.4	39.5	29.9	63
25-29	68.5	4.1	1,921	65.7	60.9	40.1	80
30-34	68.8	5.3	1,551	66.0	65.5	39.7	82
35-39	74.0	9.0	1,240	78.9	74.9	48.7	111
40-44	73.4	11.1	1,068	90.8	78.9	53.2	118
45-49	74.1	19.0	996	90.6	87.4	67.3	189
Currently pregnant							
Pregnant	74.9	4.3	795	(60.9)	(61.4)	(34.4)	34
Not currently pregnant	60.7	6.4	9,923	79.3	73.6	51.9	632
Nutritional status: Body Mass Index (BMI)¹							
Thin (BMI <18.5)	47.5	2.5	747	*	*	*	19
Normal (BMI 18.5-24.9)	57.7	3.7	5,969	70.4	63.1	43.8	218
Overweight (BMI 25.0-29.9)	68.8	7.5	2,609	81.1	73.0	45.7	195
Obese (BMI ≥30.0)	73.5	16.8	1,394	85.1	84.5	63.8	234
Residence							
Urban	64.5	5.6	2,694	80.9	79.5	57.2	150
Rural	60.8	6.4	8,024	77.6	71.1	49.2	516
Region							
Dushanbe	59.5	4.4	955	79.5	84.3	58.6	42
GBAO	69.3	6.8	209	64.1	56.6	32.0	14
Sughd	77.3	5.0	3,292	82.1	75.1	51.5	164
DRS	61.3	7.7	2,342	73.3	64.5	42.2	181
Khatlon	49.1	6.7	3,920	79.9	76.6	56.5	264
FTF districts	37.8	5.8	2,096	78.0	76.0	54.2	122
Education							
None/primary	57.1	7.2	619	(74.1)	(66.3)	(43.5)	44
General basic	55.6	4.9	3,615	71.1	66.2	47.1	178
General secondary	62.7	7.5	4,624	81.6	75.9	53.8	345
Professional primary/middle	75.3	6.4	860	79.4	79.1	56.9	55
Higher	70.8	4.4	1,000	84.1	77.3	45.3	44
Wealth quintile							
Lowest	56.3	6.6	2,113	76.4	66.2	45.8	140
Second	58.7	6.3	2,101	75.6	64.6	39.4	133
Middle	61.8	5.3	2,109	79.2	82.0	56.0	112
Fourth	67.0	7.3	2,155	78.9	70.9	57.4	157
Highest	64.6	5.6	2,240	81.8	84.3	56.8	124
Total	61.7	6.2	10,718	78.3	73.0	51.0	666

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.

¹ The Body Mass Index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

Table 3.12 Blood pressure status

Among women age 15-49, percent distribution of blood pressure values, percentage having normal blood pressure and taking antihypertensive medication, and prevalence of hypertension, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Classification of blood pressure ¹						Total	Blood pressure less than 140/90 mmHg and currently taking anti-hypertensive medication	Prevalence of hypertension ²	Number of women ³
	Optimal SBP <120 and DBP <80 mmHg	Normal SBP 120-129 and DBP 80-84 mmHg	High normal SBP 130-139 and DBP 85-89 mmHg	Mildly elevated (Grade 1) SBP 140-159 or DBP 90-99 mmHg	Moderately elevated (Grade 2) SBP 160-179 or DBP 100-109 mmHg	Severely elevated (Grade 3) SBP 180+ or DBP 110+ mmHg				
Age										
15-19	73.7	16.9	6.2	3.0	0.1	0.0	100.0	0.5	3.7	1,895
20-24	71.1	19.6	6.4	2.9	0.1	0.0	100.0	0.9	3.8	2,026
25-29	69.9	20.2	5.7	3.7	0.3	0.1	100.0	1.6	5.7	1,917
30-34	62.8	21.4	9.1	5.5	1.0	0.2	100.0	1.3	8.1	1,543
35-39	49.7	24.2	12.9	11.1	1.5	0.6	100.0	2.5	15.7	1,236
40-44	41.3	25.8	16.4	12.7	2.7	1.1	100.0	2.1	18.6	1,060
45-49	33.7	27.9	15.2	15.3	5.8	2.2	100.0	4.7	27.9	996
Currently pregnant										
Pregnant	73.5	18.2	6.0	2.3	0.0	0.0	100.0	1.5	3.9	795
Not pregnant or not sure	60.2	21.7	9.5	6.9	1.3	0.5	100.0	1.7	10.3	9,878
Previously diagnosed with high blood pressure by a health provider⁴										
Ever diagnosed	26.2	20.4	16.6	23.3	10.0	3.5	100.0	26.9	63.7	663
Diagnosed in the last 12 months	21.6	21.2	16.3	25.0	11.5	4.4	100.0	31.2	72.1	520
Not diagnosed in the last 12 months	43.0	17.5	17.7	17.4	4.3	0.0	100.0	11.4	33.2	144
Never diagnosed	63.5	21.5	8.7	5.4	0.6	0.2	100.0	0.0	6.3	10,010
Currently taking antihypertensive medication										
Yes	18.9	19.2	14.7	28.4	14.0	4.8	100.0	52.8	100.0	338
No	62.6	21.5	9.0	5.8	0.8	0.3	100.0	0.0	6.9	10,335
Nutritional status: Body Mass Index (BMI)⁵										
Thin (BMI <18.5)	79.2	15.1	3.8	1.6	0.2	0.0	100.0	0.6	2.4	744
Normal (BMI 18.5-24.9)	69.8	18.9	6.8	4.0	0.4	0.1	100.0	1.2	5.7	5,941
Overweight (BMI 25.0-29.9)	51.6	26.3	12.3	7.7	1.5	0.6	100.0	1.7	11.5	2,598
Obese (BMI ≥30.0)	32.9	26.1	16.7	17.7	4.8	1.8	100.0	4.1	28.4	1,390
Residence										
Urban	63.9	20.1	8.8	5.9	1.0	0.3	100.0	1.6	8.8	2,675
Rural	60.3	21.8	9.3	6.7	1.3	0.5	100.0	1.7	10.2	7,998
Region										
Dushanbe	72.3	13.9	8.6	4.7	0.5	0.0	100.0	1.6	6.9	939
GBAO	54.3	24.4	11.1	7.4	2.5	0.3	100.0	0.7	10.8	209
Sughd	55.7	25.6	9.9	6.7	1.6	0.5	100.0	0.7	9.5	3,290
DRS	62.8	18.5	9.0	7.7	1.5	0.6	100.0	1.8	11.6	2,317
Khatlon	62.6	21.2	8.9	6.1	0.8	0.4	100.0	2.5	9.8	3,918
FTF districts	60.7	22.9	7.7	6.9	1.1	0.7	100.0	1.9	10.5	2,094
Education										
None/primary	61.8	20.2	9.2	6.9	1.0	0.8	100.0	2.2	10.9	617
General basic	64.6	20.1	8.3	5.9	0.8	0.3	100.0	1.4	8.4	3,596
General secondary	59.4	21.8	9.8	7.0	1.5	0.6	100.0	2.0	11.0	4,610
Professional primary/middle	58.1	22.7	9.6	7.5	1.9	0.2	100.0	1.3	10.9	858
Higher	59.5	23.8	9.8	5.5	1.0	0.4	100.0	0.9	7.9	992
Wealth quintile										
Lowest	58.6	20.6	10.9	7.6	1.8	0.4	100.0	1.3	11.1	2,107
Second	61.1	22.4	8.3	6.8	0.7	0.7	100.0	1.3	9.5	2,088
Middle	62.0	21.8	8.9	5.9	1.0	0.4	100.0	1.7	9.1	2,104
Fourth	60.4	21.7	9.5	6.4	1.5	0.4	100.0	2.4	10.8	2,152
Highest	63.8	20.5	8.6	6.0	0.9	0.3	100.0	1.5	8.7	2,223
Total	61.2	21.4	9.2	6.5	1.2	0.4	100.0	1.7	9.8	10,673

¹ The average of the second and third measurements is used to classify individuals with respect to hypertension. If the third blood pressure measurement was missing, the second measurement was considered the average. If the second and third blood pressure measurements were missing, the first measurement was considered the average. When a respondent's average systolic blood pressure (SBP) and average diastolic blood pressure (DBP) fell into different categories, the higher category was applied.

² A woman was classified as having hypertension if she had a systolic blood pressure level of 140 mmHg or above or a diastolic blood pressure level of 90 mmHg or above at the time of the survey or was currently taking antihypertensive medication to control her blood pressure. The term hypertension as used in this table is not meant to represent a clinical diagnosis of the disease; rather, it provides a statistical description of the survey population at the time of the survey.

³ Includes pregnant women

⁴ Hypertension excludes respondents with blood pressure values less than 140/90 mmHg who were ever told they have high blood pressure or hypertension by a doctor or health care provider and who do not take antihypertensive medications.

⁵ The Body Mass Index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

Table 3.13 Controlled hypertension

Prevalence of controlled hypertension among women age 15-49 with hypertension, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Prevalence of controlled hypertension ¹	Number of women with hypertension ^{2,3}
Age		
15-19	14.6	69
20-24	23.6	77
25-29	27.4	109
30-34	16.0	125
35-39	16.1	194
40-44	11.3	197
45-49	16.7	278
Currently pregnant		
Pregnant	(38.6)	31
Not pregnant or not sure	16.3	1,020
Previously diagnosed with high blood pressure by a health provider⁴		
Ever diagnosed	42.2	422
Diagnosed in the last 12 months	43.2	375
Not diagnosed in the last 12 months	34.4	48
Never diagnosed	0.0	628
Currently taking antihypertensive medication		
Yes	52.8	338
No	0.0	713
Nutritional status: Body Mass Index (BMI)⁵		
Thin (BMI <18.5)	*	18
Normal (BMI 18.5-24.9)	21.4	338
Overweight (BMI 25.0-29.9)	15.1	299
Obese (BMI ≥30.0)	14.3	395
Residence		
Urban	18.1	236
Rural	16.7	814
Region		
Dushanbe	24.0	65
GBAO	6.2	23
Sughd	7.1	313
DRS	15.9	268
Khatlon	25.3	382
FTF districts		
	17.7	220
Education		
None/primary	20.5	67
General basic	16.7	303
General secondary	18.4	508
Professional primary/middle	12.1	94
Higher	11.9	78
Wealth quintile		
Lowest	11.7	235
Second	14.0	198
Middle	19.1	190
Fourth	22.6	233
Highest	17.6	194
Total	17.0	1,050

Note: The average of the second and third measurements is used to classify individuals with respect to hypertension. If the third blood pressure measurement was missing, the second measurement was considered the average. If the second and third blood pressure measurements were missing, the first measurement was considered the average. When a respondent's average systolic and average diastolic blood pressure fell into different categories, the higher category was applied. 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.

¹ Controlled hypertension is defined as having a systolic blood pressure level below 140 mmHg and having a diastolic blood pressure level below 90 mmHg and currently taking antihypertensive medication to control blood pressure among all women age 15-49 with hypertension.

² A woman was classified as having hypertension if she had a systolic blood pressure level of 140 mmHg or above or a diastolic blood pressure level of 90 mmHg or above at the time of the survey or was currently taking antihypertensive medication to control her blood pressure. The term hypertension as used in this table is not meant to represent a clinical diagnosis of the disease; rather, it provides a statistical description of the survey population at the time of the survey.

³ Includes pregnant women.

⁴ Hypertension excludes respondents with blood pressure values less than 140/90 mmHg who were ever told they have high blood pressure or hypertension by a doctor or health care provider and who do not take antihypertensive medications.

⁵ The Body Mass Index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

Key Findings

- **Current marital status:** 72% of women age 15-49 are currently in a union; 6% are divorced, separated, or widowed; and 22% have not yet married.
- **Age at first marriage:** Less than 1% of women age 25-49 had married by age 15, and only 13% had married by age 18. The median age at first marriage was the same in 2017 as in 2012 (20.2 years).
- **Sexual initiation:** The median ages at first sexual intercourse and first marriage are identical among women age 25-49 (20.2 years), reflecting the fact that very few women report engaging in sexual activity before marriage.

Marriage and sexual activity help determine the extent to which women are exposed to the risk of pregnancy. Thus, they are important determinants of fertility levels. However, the timing and circumstances of marriage and sexual activity also have other profound consequences for women's lives.

4.1 MARITAL STATUS

Currently married

Women who report being married or living together with a partner as though married at the time of the survey.

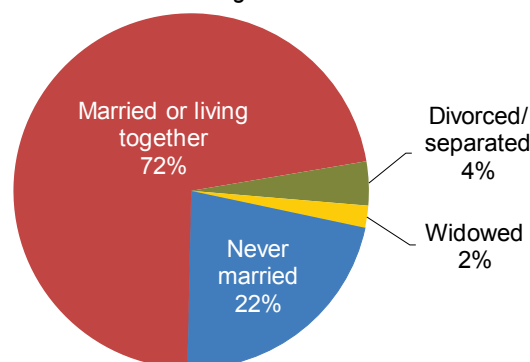
Sample: Women age 15-49

In Tajikistan, 72% of women age 15-49 are currently married. Reflecting the traditional character of Tajik society, virtually all of these women are in formal unions; less than 1% report they are living together with a partner. Around one-fifth of women (22%) have never been married, 4% are divorced or separated, and 2% are widowed (Table 4.1 and Figure 4.1).

Most Tajik women marry at least once during their lifetime. The proportion who have never been married decreases rapidly with age, from 87% among women age 15-19 to 20% among women age 20-24. Only 2% of women age 40-49 have never married. Women age 45-49 are most likely to be divorced or separated (7%) or widowed (6%).

Figure 4.1 Marital status

Percent distribution of women age 15-49



Trends: The percentage of women age 15-49 who were currently married increased from 67% in 2012 to 72% in 2017. Most of that change was due to increases in the proportions of women age 20-24 (68% in 2012 versus 77% in 2017) and age 25-29 (83% in 2012 versus 88% in 2017) who were currently married.

4.2 POLYGYNY

Polygyny

Women who report that their husband or partner has other wives are considered to be in a polygynous marriage.

Sample: Currently married women age 15-49

Polygynous unions are not common in Tajikistan. Overall, 3% of women report that their husband (or partner) has other wives (**Table 4.2**). Almost all women in polygynous unions report their husband has only one other wife.

The proportion of polygynous unions increases with age, from less than 1% among women age 15-24 to 5% among women age 40-44. Women in Khatlon (5%), women with no education or only a primary education (4%), and women in the lowest wealth quintile (4%) are most likely to report that they have co-wives.

4.3 AGE AT FIRST MARRIAGE

Median age at first marriage

Age by which half of respondents have been married.

Sample: Women age 25-49

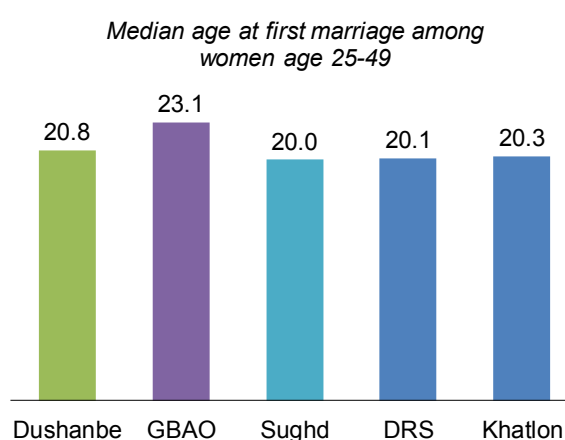
Table 4.3 shows that less than 1% of women age 25-49 had married by age 15, and only 13% had married by age 18. The pace of marriage was quite rapid after age 18, with 47% of women age 25-49 marrying by age 20 and 86% marrying by age 25. The median age at first marriage among women age 25-49 was 20.2 years.

Trends: The median age at which women age 25-49 first married was the same in 2017 as in 2012 (20.2 years).

Patterns by background characteristics

- The median age at first marriage among women age 25-49 was only slightly higher in urban than in rural areas (20.5 years versus 20.1 years) (**Table 4.4**).
- GBAO has the highest median age at marriage (23.1 years), followed by Dushanbe (20.8 years) (**Figure 4.2**).

Figure 4.2 Women's median age at marriage by region



4.4 AGE AT FIRST SEXUAL INTERCOURSE

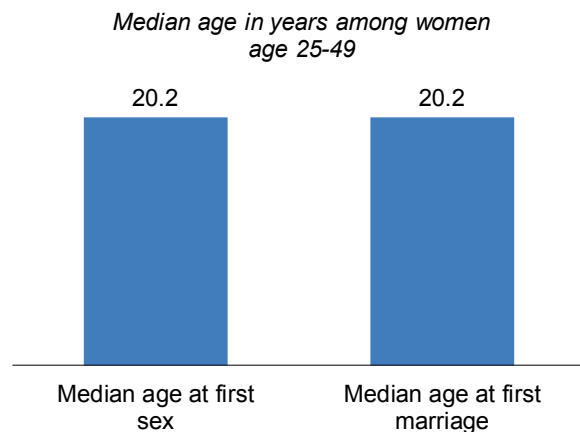
Median age at first sexual intercourse

Age by which half of respondents have had sexual intercourse.

Sample: Women age 25-49

Tajikistan is a traditional society. In such settings, women are unlikely to engage in or admit to engaging in sexual intercourse before marriage. Thus, it is not surprising that the findings with respect to age at first intercourse among women age 25-49 (Tables 4.5 and 4.6) closely parallel the information the women reported with regard to the age at which they first married. The median age at first intercourse among women age 25-49 is in fact identical to the median age at which these women first married (20.2 years) (Figure 4.3).

Figure 4.3 Median age at first sex and first marriage



4.5 RECENT SEXUAL ACTIVITY

Sexual activity exposes women to the risk of pregnancy if no contraceptive method is being used.

Table 4.7 shows that 78% of women age 15-49 have ever had sexual intercourse, and 47% had sex during the 4 weeks before the survey. Marital status is closely related to sexual activity. Most currently married women (92%) had sex within the year before the survey, and 65% had sex within the 4 weeks before the survey. The opposite pattern is observed among women who were divorced, separated, or widowed, 90% of whom had not had sex during the year before the survey. Only 2% of never-married women had ever had sex, and most of those women reported they last had sex 1 or more years before the survey.

LIST OF TABLES

For more information on marriage and sexual activity, see the following tables:

- **Table 4.1** Current marital status
- **Table 4.2** Number of women’s co-wives
- **Table 4.3** Age at first marriage
- **Table 4.4** Median age at first marriage by background characteristics
- **Table 4.5** Age at first sexual intercourse
- **Table 4.6** Median age at first sexual intercourse by background characteristics
- **Table 4.7** Recent sexual activity

Table 4.1 Current marital status

Percent distribution of women age 15-49 by current marital status, according to age, Tajikistan DHS 2017

Age	Marital status						Total	Percentage currently in union	Number of women
	Never married	Married	Living together	Divorced	Separated	Widowed			
15-19	87.0	12.5	0.1	0.4	0.0	0.0	100.0	12.6	1,911
20-24	20.4	76.3	0.3	2.5	0.0	0.4	100.0	76.6	2,031
25-29	6.4	87.4	0.5	4.7	0.0	1.0	100.0	87.9	1,921
30-34	5.2	88.2	0.4	4.8	0.3	1.2	100.0	88.6	1,551
35-39	4.8	87.3	0.5	5.0	0.0	2.5	100.0	87.8	1,240
40-44	2.4	88.7	0.6	5.4	0.2	2.8	100.0	89.3	1,068
45-49	2.2	84.6	0.4	6.6	0.0	6.1	100.0	85.0	996
Total	22.3	71.9	0.4	3.8	0.1	1.6	100.0	72.3	10,718

Table 4.2 Number of women's co-wives

Percent distribution of currently married women age 15-49 by number of co-wives, and percentage of currently married women with one or more co-wives, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Number of co-wives				Total	Percentage with one or more co-wives ¹	Number of women
	0	1	2+	Don't know			
Age							
15-19	99.2	0.6	0.0	0.2	100.0	0.6	240
20-24	97.1	0.8	0.0	2.1	100.0	0.8	1,557
25-29	96.5	1.3	0.0	2.2	100.0	1.3	1,688
30-34	93.9	2.3	0.3	3.5	100.0	2.6	1,374
35-39	92.2	4.0	0.4	3.4	100.0	4.4	1,089
40-44	91.9	4.2	0.5	3.4	100.0	4.8	953
45-49	92.9	3.5	0.0	3.6	100.0	3.5	847
Residence							
Urban	94.0	2.9	0.1	3.1	100.0	2.9	1,803
Rural	94.9	2.2	0.2	2.7	100.0	2.4	5,944
Region							
Dushanbe	95.0	2.0	0.1	2.9	100.0	2.1	585
GBAO	99.2	0.4	0.0	0.4	100.0	0.4	144
Sughd	97.3	0.4	0.0	2.3	100.0	0.4	2,533
DRS	94.8	2.2	0.3	2.7	100.0	2.5	1,709
Khatlon	91.9	4.4	0.2	3.5	100.0	4.6	2,776
FTF districts	91.7	2.7	0.3	5.3	100.0	3.0	1,548
Education							
None/primary	91.4	3.6	0.6	4.4	100.0	4.2	468
General basic	94.2	2.9	0.3	2.6	100.0	3.2	2,532
General secondary	95.2	1.7	0.0	3.0	100.0	1.7	3,442
Professional primary/ middle	95.5	2.4	0.2	1.9	100.0	2.6	626
Higher	95.1	2.6	0.3	2.0	100.0	2.9	680
Wealth quintile							
Lowest	92.7	3.9	0.3	3.1	100.0	4.3	1,469
Second	94.8	2.2	0.3	2.8	100.0	2.4	1,508
Middle	95.5	1.7	0.1	2.7	100.0	1.8	1,606
Fourth	95.8	1.4	0.1	2.7	100.0	1.5	1,668
Highest	94.4	2.8	0.0	2.8	100.0	2.8	1,496
Total	94.7	2.4	0.2	2.8	100.0	2.5	7,747

¹ Excludes women who responded "don't know" when asked if their husband has other wives

Table 4.3 Age at first marriage

Percentage of women age 15-49 who were first married by specific exact ages and median age at first marriage, according to current age, Tajikistan DHS 2017

Current age	Percentage first married by exact age:					Percentage never married	Number of women	Median age at first marriage
	15	18	20	22	25			
15-19	0.0	na	na	na	na	87.0	1,911	a
20-24	0.1	8.7	56.0	na	na	20.4	2,031	19.7
25-29	0.2	10.0	45.1	73.1	89.5	6.4	1,921	20.3
30-34	0.3	10.3	36.0	63.5	83.1	5.2	1,551	20.9
35-39	0.7	19.6	48.5	67.5	80.8	4.8	1,240	20.1
40-44	0.2	22.0	61.4	77.4	88.0	2.4	1,068	19.3
45-49	0.0	7.4	49.8	78.7	90.0	2.2	996	20.0
20-49	0.3	12.3	49.0	na	na	8.2	8,807	a
25-49	0.3	13.3	46.9	71.4	86.3	4.6	6,776	20.2

Note: The age at first marriage is defined as the age at which the respondent began living with her first spouse/partner.

na = Not applicable due to censoring

a = Omitted because less than 50% of the women began living with their spouse or partner for the first time before reaching the beginning of the age group

Table 4.4 Median age at first marriage by background characteristics

Median age at first marriage among women age 25-49, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Women age 25-49
Residence	
Urban	20.5
Rural	20.1
Region	
Dushanbe	20.8
GBAO	23.1
Sughd	20.0
DRS	20.1
Khatlon	20.3
FTF districts	20.2
Education	
None/primary	20.9
General basic	19.9
General secondary	19.9
Professional primary/middle	20.9
Higher	22.0
Wealth quintile	
Lowest	20.5
Second	20.2
Middle	20.1
Fourth	20.0
Highest	20.4
Total	20.2

Note: The age at first marriage is defined as the age at which the respondent began living with her first spouse/partner.

Table 4.5 Age at first sexual intercourse

Percentage of women age 15-49 who had first sexual intercourse by specific exact ages, percentage who never had sexual intercourse, and median age at first sexual intercourse, according to current age, Tajikistan DHS 2017

Current age	Percentage who had first sexual intercourse by exact age:					Percentage who never had intercourse	Number of women	Median age at first intercourse
	15	18	20	22	25			
15-19	0.1	na	na	na	na	87.0	1,911	a
20-24	0.1	7.6	54.9	na	na	20.1	2,031	19.8
25-29	0.3	8.8	45.5	72.8	89.3	6.1	1,921	20.3
30-34	0.2	8.5	38.8	65.0	84.2	4.6	1,551	20.8
35-39	0.7	17.7	49.9	68.1	82.2	4.1	1,240	20.0
40-44	0.2	16.0	61.7	79.4	89.6	1.8	1,068	19.4
45-49	0.0	4.8	48.7	78.7	91.0	1.4	996	20.1
20-49	0.2	10.1	49.4	na	na	7.7	8,807	a
25-49	0.3	10.9	47.8	72.1	87.1	4.0	6,776	20.2
15-24	0.1	na	na	na	na	52.5	3,942	a

na = Not applicable due to censoring

a = Omitted because less than 50% of the respondents had sexual intercourse for the first time before reaching the beginning of the age group

Table 4.6 Median age at first sexual intercourse by background characteristics

Median age at first sexual intercourse among women age 25-49, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Women age 25-49
Residence	
Urban	20.4
Rural	20.1
Region	
Dushanbe	20.5
GBAO	23.1
Sughd	20.0
DRS	20.0
Khatlon	20.2
FTF districts	20.0
Education	
None/primary	20.6
General basic	19.8
General secondary	19.9
Professional primary/middle	21.0
Higher	21.9
Wealth quintile	
Lowest	20.5
Second	20.2
Middle	20.0
Fourth	19.9
Highest	20.3
Total	20.2

Table 4.7 Recent sexual activity

Percent distribution of women age 15-49 by timing of last sexual intercourse, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Timing of last sexual intercourse			Never had sexual intercourse	Total	Number of women
	Within the past 4 weeks	Within 1 year ¹	One or more years			
Age						
15-19	9.5	3.3	0.2	87.0	100.0	1,911
20-24	46.8	25.7	7.5	20.1	100.0	2,031
25-29	55.8	26.2	11.9	6.1	100.0	1,921
30-34	56.8	24.8	13.8	4.6	100.0	1,551
35-39	59.3	20.8	15.8	4.1	100.0	1,240
40-44	64.3	19.0	14.9	1.8	100.0	1,068
45-49	57.9	19.9	20.8	1.4	100.0	996
Marital status						
Never married	0.0	0.1	1.9	98.0	100.0	2,388
Married or living together	65.4	26.8	7.7	0.1	100.0	7,747
Divorced/separated/widowed	2.0	8.2	89.7	0.0	100.0	583
Marital duration²						
0-4 years	62.9	31.1	5.7	0.2	100.0	1,926
5-9 years	61.4	30.2	8.5	0.0	100.0	1,794
10-14 years	66.7	24.7	8.5	0.0	100.0	1,160
15-19 years	67.8	23.3	8.9	0.0	100.0	814
20-24 years	71.6	21.3	7.0	0.0	100.0	853
25+ years	67.5	24.2	8.4	0.0	100.0	828
Married more than once	70.0	21.9	8.0	0.0	100.0	372
Husband's/partner's residence³						
Resident	72.6	21.8	5.5	0.1	100.0	6,886
Nonresident	8.0	66.8	25.1	0.0	100.0	861
Residence						
Urban	50.1	11.7	14.0	24.2	100.0	2,694
Rural	46.5	22.6	9.8	21.1	100.0	8,024
Region						
Dushanbe	47.5	7.4	15.8	29.3	100.0	955
GBAO	49.6	14.5	9.5	26.5	100.0	209
Sughd	48.6	24.3	8.0	19.1	100.0	3,292
DRS	48.6	20.8	9.5	21.1	100.0	2,342
Khatlon	45.5	18.9	12.9	22.6	100.0	3,920
FTF districts	42.6	23.6	13.5	20.4	100.0	2,096
Education						
None/primary	46.9	22.8	13.9	16.5	100.0	619
General basic	45.0	19.9	10.5	24.6	100.0	3,615
General secondary	48.7	20.9	9.9	20.6	100.0	4,624
Professional primary/middle	47.3	19.7	14.7	18.3	100.0	860
Higher	50.6	13.6	11.1	24.6	100.0	1,000
Wealth quintile						
Lowest	43.5	20.6	11.4	24.4	100.0	2,113
Second	45.0	21.1	11.9	22.0	100.0	2,101
Middle	47.1	25.0	8.3	19.6	100.0	2,109
Fourth	51.5	20.7	9.1	18.7	100.0	2,155
Highest	49.7	12.3	13.3	24.6	100.0	2,240
Total	47.4	19.9	10.8	21.9	100.0	10,718

Note: Total includes women with missing information on timing of last sexual intercourse.

¹ Excludes women who had sexual intercourse within the last 4 weeks

² Excludes women who are not currently married

³ Resident husband/partner resides with the respondent; a nonresident husband/partner lives elsewhere.

Key Findings

- **Total fertility rate:** The total fertility rate for the 3 years preceding the 2017 TjDHS was 3.8 births per woman. The rate at the time of the 2012 TjDHS was also 3.8 births, highlighting the stability of fertility behavior in Tajikistan.
- **Birth interval:** The median birth interval is 28.8 months, with 36% of births occurring less than 24 months after the preceding birth.
- **Postpartum insusceptibility:** The median duration of postpartum insusceptibility (that is, the period of time after giving birth that a woman is not at risk of pregnancy) is 6.8 months.
- **Age at first birth:** The median age at first birth among women age 25-49 is 21.9 years.
- **Teenage childbearing:** 7% of women age 15-19 have begun childbearing; 3% have already given birth, and 4% are pregnant with their first child.

The number of children that a woman bears depends on many factors, including the age she begins childbearing, how long she waits between births, and her fecundity. Postponing first births and extending the interval between births have played a role in reducing fertility levels in many countries. These factors also have positive health consequences. In contrast, short birth intervals (of less than 24 months) can lead to harmful outcomes for both newborns and their mothers, such as preterm birth, low birth weight, and death. Childbearing at a very young age is associated with an increased risk of complications during pregnancy and childbirth and higher rates of neonatal mortality.

This chapter describes the current level of fertility in Tajikistan and some of its proximate determinants. It presents information on the total fertility rate, birth intervals, insusceptibility to pregnancy (due to postpartum amenorrhea, postpartum abstinence, or menopause), age at first birth, and teenage childbearing.

5.1 CURRENT FERTILITY

Total fertility rate

The average number of children a woman would have by the end of her childbearing years if she bore children at the current age-specific fertility rates. Age-specific fertility rates are calculated for the 3 years before the survey, based on detailed birth histories provided by women.

Sample: Women age 15-49

The total fertility rate (TFR) in Tajikistan is 3.8 births per woman (**Table 5.1**). The pace of childbearing increases rapidly with age, rising from a rate of 54 births per 1,000 women in the 15-19 age group to a peak of 303 births per 1,000 women in the 20-24 age group. At most ages, age-specific fertility rates are

higher among rural than urban women (Figure 5.1), with the gap especially marked among women age 20-24. Overall, the TFR is 4.0 births per woman in rural areas, as compared with 3.0 births in urban areas.

Trends: The TFR remained stable at 3.8 births per woman between the 2012 and 2017 TjDHS surveys (Table 5.2). The TFR in rural areas increased slightly between the two surveys, from 3.9 births in 2012 to 4.0 births in 2017, while the TFR in urban areas dropped from 3.3 births to 3.0 births (Figure 5.2).

Figure 5.1 Age-specific fertility rates

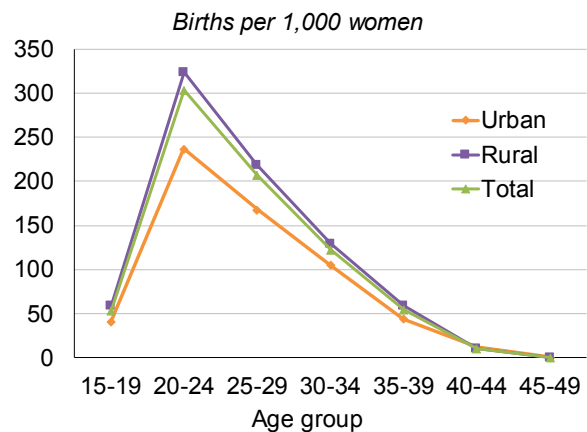
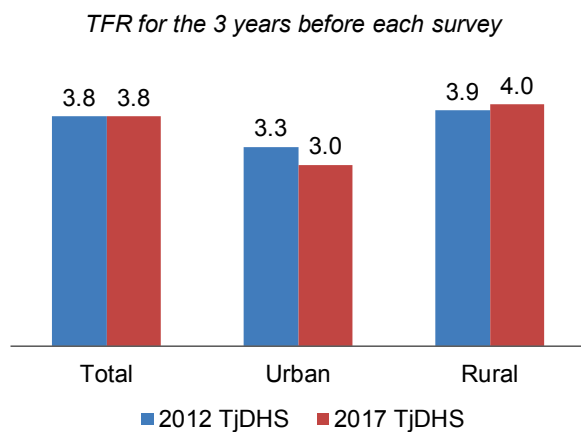


Figure 5.2 Trends in fertility by residence

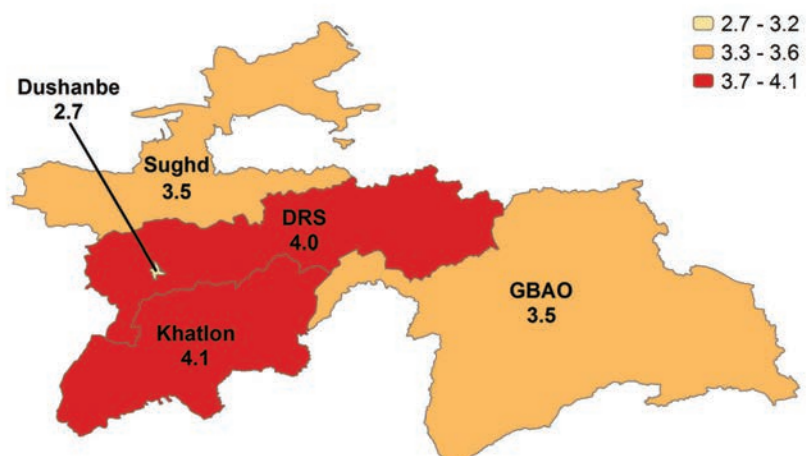


Patterns by background characteristics

- By region, the TFR is highest in Khatlon (4.1 births per woman) and DRS (4.0 births per woman) and lowest in Dushanbe (2.7 births per woman) (Figure 5.3).
- The TFR generally declines with increasing education, from 3.9 to 4.0 births among women with a general secondary education or less to 2.8 births among women with a higher education (Table 5.3).

Figure 5.3 Fertility by region

Total fertility rate for the 3 years before the survey



- The TFR in the highest wealth quintile is 3.0 births per woman, which is considerably lower than the rates in the other quintiles (3.8 to 4.1 births).

5.2 CHILDREN EVER BORN AND LIVING

The 2017 TjDHS collected information on the total number of children ever born to women age 15-49 and the number of their children who were still alive. **Table 5.4** shows that, on average, women age 15-49 have had 2.11 children, of whom 2.0 survived to the time of the survey. The mean number of children ever born increases with age, peaking at 3.9 among women age 45-49.

Only 1% of currently married women age 45-49 have never given birth, suggesting that primary infertility (the inability to bear a child) is low in Tajikistan.

5.3 BIRTH INTERVALS

Median birth interval

Number of months since the preceding birth by which half of children are born.

Sample: Non-first births in the 5 years before the survey

Short birth intervals, particularly intervals less than 24 months, are associated with increased health risks for both mothers and newborns. In Tajikistan, more than one in three (36%) non-first births occur within 24 months of a previous birth, with 17% taking place less than 18 months after a preceding birth (**Figure 5.4**). The median birth interval is 28.8 months (**Table 5.5**).

Trends: The median birth interval in 2017 is 2 months shorter than in 2012 (28.8 months versus 30.8 months).

Patterns by background characteristics

- The median birth interval increases markedly with the age of the mother, from 24.4 months among non-first births to women age 20-29 to 86.4 months among births to women age 40-49.
- The median birth interval is longer if the preceding child is still alive than if the child has died (29.1 months versus 21.6 months).
- The median birth interval is longest in GBAO (33.4 months) and shortest in Khatlon (27.6 months).

5.4 INSUSCEPTIBILITY TO PREGNANCY

Postpartum amenorrhea

The period of time after the birth of a child and before the resumption of menstruation.

Postpartum abstinence

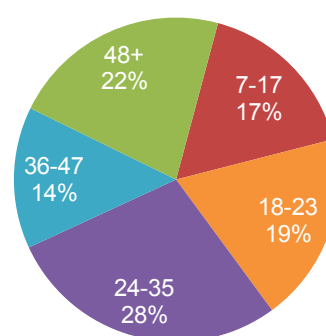
The period of time after the birth of a child and before the resumption of sexual intercourse.

Postpartum insusceptibility

The period of time during which a woman is considered not at risk of pregnancy because she is postpartum amenorrheic and/or abstaining from sexual intercourse postpartum.

Figure 5.4 Birth intervals

Percent distribution of non-first births by number of months since the preceding birth



Median duration of postpartum amenorrhea

Number of months after childbirth by which time half of women have begun menstruating.

Sample: Women who gave birth in the 3 years before the survey

Median duration of postpartum insusceptibility

Number of months after childbirth by which time half of women are no longer protected against pregnancy by either postpartum amenorrhea or abstinence from sexual intercourse.

Sample: Women who gave birth in the 3 years before the survey

Most women (92%) are insusceptible to pregnancy during the first 2 months after giving birth (**Table 5.6**). Postpartum amenorrhea is a more important determinant of postpartum insusceptibility than is abstaining from sexual intercourse. For example, at 4-5 months after a birth, 51% of women are still amenorrheic but only 25% are still abstaining from sexual intercourse. Overall, the median period of insusceptibility is 6.8 months. As expected, the median is longer for women age 30-49 (8.4 months) than younger women (6.6 months) (**Table 5.7**).

Trends: The median duration of postpartum insusceptibility was longer in 2017 than in 2012 (6.8 months versus 4.1 months). This increase reflects the longer durations of postpartum amenorrhea and postpartum abstinence reported in the 2017 TjDHS than in the 2012 survey. The median duration of postpartum amenorrhea increased from 3.2 months in 2012 to 4.6 months in 2017, and the median duration of postpartum abstinence increased from 2.0 months to 2.9 months.

Menopause

Women are considered to have reached menopause if they are neither pregnant nor postpartum amenorrheic and have not had a menstrual period in the 6 months before the survey, if they report being menopausal or having had a hysterectomy, or if they have never menstruated.

Sample: Women age 30-49

The risk of becoming pregnant declines with age as an increasing number of women become infecund. One indicator of infecundity is menopause. Nine percent of women age 30-49 are menopausal (**Table 5.8**). The proportion of women who are menopausal increases with age, from 1% among those age 30-34 to 44% among those age 48-49.

5.5 AGE AT FIRST BIRTH

Median age at first birth

Age by which half of women have had their first child.

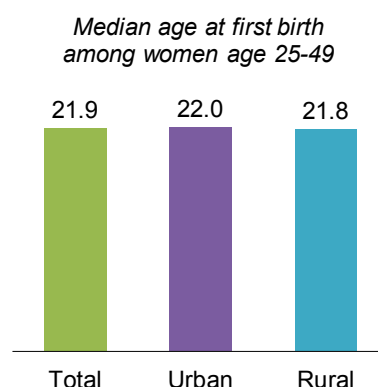
Sample: Women age 20-49 and 25-49

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 the mother and the child. The majority of women in Tajikistan are in their 20s before they have their first birth. Only 3% of women age 25-49 had given birth by age 18, and only 22% had their first child by age 20 (**Table 5.9**). The median age at first birth is 21.9 years.

Patterns by background characteristics

- There is little difference in the median age at first birth between urban and rural women (22.0 years versus 21.8 years) (Table 5.10 and Figure 5.5).
- The median age at first birth is highest in GBAO (24.6 years) and lowest in Sughd (21.6 years).

Figure 5.5 Median age at first birth by residence



5.6 TEENAGE CHILDBEARING

Teenage childbearing

Percentage of women age 15-19 who have given birth or are pregnant with their first child.

Sample: Women age 15-19

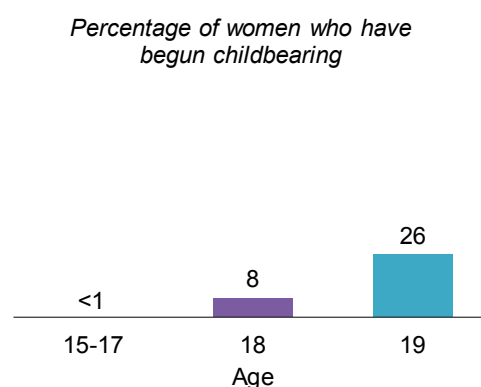
Teenage childbearing is a major health concern because of its association with higher morbidity and mortality for both the mother and the child. Childbearing during the teenage years also frequently has adverse social and economic consequences for young women, reducing their educational and employment opportunities. Table 5.11 shows that 7% of women age 15-19 have begun childbearing: 3% have given birth, and 4% are pregnant with their first child.

Trends: The rate of teenage childbearing was the same in 2012 and 2017 (7%).

Patterns by background characteristics

- Most childbearing occurs among older teens; virtually no girls under age 18 have begun childbearing, and only 8% of those age 18 have initiated childbearing (Figure 5.6).
- Teenage childbearing is lowest in GBAO (2%) and Dushanbe (3%) and highest in DRS (9%).

Figure 5.6 Teenage pregnancy and motherhood by woman's age



LIST OF TABLES

For more information on fertility levels and some of the determinants of fertility, see the following tables:

- Table 5.1 Current fertility
- Table 5.2 Trends in age-specific and total fertility rates
- Table 5.3 Fertility by background characteristics
- Table 5.4 Children ever born and living
- Table 5.5 Birth intervals
- Table 5.6 Postpartum amenorrhea, abstinence, and insusceptibility
- Table 5.7 Median duration of postpartum amenorrhea, abstinence, and insusceptibility
- Table 5.8 Menopause
- Table 5.9 Age at first birth
- Table 5.10 Median age at first birth
- Table 5.11 Teenage pregnancy and motherhood

Table 5.1 Current fertility

Age-specific and total fertility rates, general fertility rate, and crude birth rate for the 3 years preceding the survey, by residence, Tajikistan DHS 2017

Age group	Residence		Total
	Urban	Rural	
15-19	41	59	54
20-24	237	323	303
25-29	168	219	207
30-34	105	129	123
35-39	44	59	55
40-44	12	11	11
45-49	[1]	[0]	[0]
TFR (15-49)	3.0	4.0	3.8
GFR	110	151	141
CBR	25.6	36.1	33.4

Note: Age-specific fertility rates are per 1,000 women. Rates for the 45-49 age group may be slightly biased due to truncation and are therefore displayed in brackets. Rates are for the period 1-36 months prior to the interview.

TFR: Total fertility rate, expressed per woman

GFR: General fertility rate, expressed per 1,000 women age 15-44

CBR: Crude birth rate, expressed per 1,000 population

Table 5.2 Trends in age-specific and total fertility rates

Age-specific and total fertility rates for the 3 years preceding the 2012 and 2017 TjDHS surveys, Tajikistan DHS 2017

Age group	2012	2017
	TjDHS	TjDHS
15-19	54	54
20-24	253	303
25-29	216	207
30-34	139	123
35-39	69	55
40-44	19	11
45-49	[2]	[0]
TFR (15-49)	3.8	3.8

Note: Age-specific fertility rates are per 1,000 women. Rates for the 45-49 age group may be slightly biased due to truncation and are therefore displayed in brackets. Rates are for the period 1-36 months prior to the interview.

TFR: Total fertility rate, expressed per woman

Table 5.3 Fertility by background characteristics

Total fertility rate for the 3 years preceding the survey, percentage of women age 15-49 currently pregnant, and mean number of children ever born to women age 40-49, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Total fertility rate	Percentage of women age 15-49 currently pregnant	Mean number of children ever born to women age 40-49
Residence			
Urban	3.0	5.9	3.3
Rural	4.0	7.9	4.0
Region			
Dushanbe	2.7	5.2	3.1
GBAO	3.5	4.6	3.3
Sughd	3.5	7.2	3.4
DRS	4.0	8.5	4.0
Khatlon	4.1	7.6	4.3
FTF districts	4.1	8.1	4.2
Education			
None/primary	4.0	9.1	3.1
General basic	3.9	7.7	4.0
General secondary	4.0	7.0	4.0
Professional primary/middle	3.6	8.9	3.3
Higher	2.8	6.0	2.9
Wealth quintile			
Lowest	4.0	5.9	4.1
Second	4.1	7.9	4.1
Middle	3.9	8.8	3.9
Fourth	3.8	8.5	3.7
Highest	3.0	5.9	3.2
Total	3.8	7.4	3.8

Note: Total fertility rates are for the period 1-36 months preceding the interview.

Table 5.4 Children ever born and living

Percent distribution of all women and currently married women age 15-49 by number of children ever born, mean number of children ever born, and mean number of living children, according to age group, Tajikistan DHS 2017

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	96.8	3.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,911	0.03	0.03
20-24	37.4	30.7	25.7	5.9	0.3	0.0	0.0	0.0	0.0	0.0	0.0	100.0	2,031	1.01	0.98
25-29	13.1	14.0	32.3	30.4	8.9	1.3	0.1	0.0	0.0	0.0	0.0	100.0	1,921	2.12	2.07
30-34	9.5	7.5	17.4	32.4	24.1	6.6	2.4	0.1	0.0	0.0	0.0	100.0	1,551	2.84	2.75
35-39	7.7	5.3	12.4	23.5	29.9	12.5	6.1	1.8	0.6	0.0	0.0	100.0	1,240	3.38	3.20
40-44	4.2	4.9	12.7	24.8	23.0	17.9	9.1	2.8	0.3	0.0	0.3	100.0	1,068	3.66	3.41
45-49	2.8	5.9	12.7	20.9	21.9	18.0	10.7	4.0	2.1	0.1	0.8	100.0	996	3.90	3.58
Total	29.6	11.6	17.1	18.4	12.9	6.1	3.0	0.9	0.3	0.0	0.1	100.0	10,718	2.11	2.00
CURRENTLY MARRIED WOMEN															
15-19	74.5	25.3	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	240	0.26	0.25
20-24	20.4	38.1	33.5	7.6	0.3	0.0	0.0	0.0	0.0	0.0	0.0	100.0	1,557	1.29	1.25
25-29	5.8	13.3	35.0	34.2	10.1	1.5	0.1	0.0	0.0	0.0	0.0	100.0	1,688	2.34	2.28
30-34	4.2	5.4	17.6	35.8	26.8	7.4	2.7	0.2	0.0	0.0	0.0	100.0	1,374	3.09	2.99
35-39	2.6	3.8	11.9	25.0	33.3	13.7	7.0	2.0	0.7	0.0	0.0	100.0	1,089	3.66	3.47
40-44	1.9	3.4	10.9	25.5	24.9	19.7	10.1	3.0	0.3	0.1	0.3	100.0	953	3.88	3.61
45-49	1.1	4.0	10.1	21.3	24.1	20.0	11.7	4.4	2.3	0.2	0.9	100.0	847	4.14	3.80
Total	9.1	13.7	21.6	24.3	17.4	8.2	4.0	1.1	0.4	0.0	0.1	100.0	7,747	2.77	2.63

Table 5.5 Birth intervals

Percent distribution of non-first births in the 5 years preceding the survey by number of months since preceding birth, and median number of months since preceding birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Months since preceding birth						Total	Number of non-first births	Median number of months since preceding birth
	7-17	18-23	24-35	36-47	48-59	60+			
Mother's age									
15-19	*	*	*	*	*	*	100.0	1	*
20-29	23.3	24.8	32.5	12.4	4.4	2.6	100.0	2,581	24.4
30-39	8.1	12.1	23.4	17.7	12.2	26.5	100.0	1,636	39.8
40-49	4.3	0.4	13.0	7.1	4.5	70.7	100.0	183	86.4
Sex of preceding birth									
Male	16.3	19.6	27.8	13.8	7.1	15.5	100.0	2,134	29.3
Female	17.4	18.6	28.8	14.5	7.5	13.3	100.0	2,267	28.4
Survival of preceding birth									
Living	16.0	19.1	28.6	14.4	7.4	14.6	100.0	4,233	29.1
Dead	37.9	18.5	21.9	7.5	5.9	8.3	100.0	167	21.6
Birth order									
2-3	19.6	21.2	30.7	13.6	5.8	9.2	100.0	3,266	26.6
4-6	8.4	13.3	21.7	15.6	11.9	29.1	100.0	1,098	40.6
7+	(23.4)	(3.6)	(14.1)	(24.7)	(6.3)	(27.8)	100.0	36	(37.5)
Residence									
Urban	17.2	15.5	26.1	13.4	8.6	19.1	100.0	934	30.8
Rural	16.8	20.0	28.9	14.4	6.9	13.1	100.0	3,466	28.4
Region									
Dushanbe	16.3	16.0	24.8	12.0	9.0	21.9	100.0	289	31.7
GBAO	14.9	17.9	20.0	16.0	10.1	21.2	100.0	70	33.4
Sughd	12.0	18.8	31.2	13.7	8.6	15.6	100.0	1,223	30.5
DRS	18.8	19.2	25.8	14.9	7.2	14.2	100.0	1,038	28.6
Khatlon	19.3	19.6	28.7	14.3	6.0	12.1	100.0	1,781	27.6
FTF districts									
	17.0	19.5	31.3	14.3	5.9	11.9	100.0	1,009	28.3
Mother's education									
None/primary	20.6	22.2	27.0	14.1	6.6	9.5	100.0	401	25.7
General basic	17.9	17.3	29.0	14.9	7.1	13.8	100.0	1,670	29.2
General secondary	15.2	19.4	29.1	13.3	7.2	15.8	100.0	1,725	28.8
Professional primary/ middle	16.4	25.4	28.0	10.5	7.8	11.9	100.0	287	26.6
Higher	16.6	16.1	22.2	17.9	9.4	17.7	100.0	317	32.8
Wealth quintile									
Lowest	17.6	17.0	28.0	15.7	5.7	16.0	100.0	904	29.7
Second	17.5	19.7	29.6	13.5	8.1	11.6	100.0	888	27.4
Middle	16.5	21.2	27.8	12.3	7.4	14.8	100.0	973	28.7
Fourth	16.0	20.4	30.9	13.8	8.0	11.0	100.0	897	28.0
Highest	16.8	16.2	24.6	15.9	7.3	19.1	100.0	739	31.6
Total	16.9	19.0	28.3	14.2	7.3	14.3	100.0	4,401	28.8

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

Table 5.6 Postpartum amenorrhea, abstinence, and insusceptibility

Percentage of births in the 3 years preceding the survey for which mothers are postpartum amenorrheic, abstaining, and insusceptible, by number of months since birth, and median and mean durations, Tajikistan DHS 2017

Months since birth	Percentage of births for which the mother is:			Number of births
	Amenorrheic	Abstaining	Insusceptible ¹	
<2	72.7	77.5	91.6	199
2-3	60.6	40.5	72.1	197
4-5	51.0	25.4	60.8	198
6-7	29.8	28.5	48.4	202
8-9	23.9	22.9	38.3	209
10-11	25.1	19.3	36.5	216
12-13	17.4	21.5	32.0	257
14-15	18.2	21.3	28.5	198
16-17	17.8	17.4	30.3	219
18-19	13.3	16.0	23.5	232
20-21	10.8	15.3	20.2	228
22-23	8.4	13.5	18.8	287
24-25	5.0	13.8	15.5	226
26-27	4.6	11.7	13.9	221
28-29	9.6	11.1	15.2	194
30-31	8.7	12.6	16.6	199
32-33	6.1	11.6	14.3	188
34-35	6.5	10.8	13.0	268
Total	20.7	21.1	31.7	3,938
Median	4.6	2.9	6.8	na
Mean	8.8	8.8	12.8	na

Note: Estimates are based on status at the time of the survey.

na = Not applicable

¹ Includes births for which mothers are either still amenorrheic or still abstaining (or both) following birth

Table 5.7 Median duration of postpartum amenorrhea, abstinence, and insusceptibility

Median number of months of postpartum amenorrhea, postpartum abstinence, and postpartum insusceptibility following births in the 3 years preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Postpartum amenorrhea	Postpartum abstinence	Postpartum insusceptibility ¹
Mother's age			
15-29	4.5	2.8	6.6
30-49	5.1	3.4	8.4
Residence			
Urban	4.0	(2.4)	5.3
Rural	4.7	3.0	7.2
Region			
Dushanbe	4.0	*	5.4
GBAO	5.9	5.3	15.1
Sughd	5.2	3.2	6.3
DRS	4.0	(2.5)	6.1
Khatlon	4.5	2.9	8.4
FTF districts	a	3.8	12.2
Education			
None/primary	(5.6)	(3.9)	(8.4)
General basic	4.1	3.0	6.3
General secondary	4.4	2.7	6.6
Professional primary/ middle	6.5	*	(8.6)
Higher	5.7	*	7.0
Wealth quintile			
Lowest	4.7	3.2	9.3
Second	4.3	*	6.2
Middle	4.1	3.6	6.8
Fourth	4.8	(2.6)	6.9
Highest	5.2	(2.5)	6.2
Total	4.6	2.9	6.8

Note: Medians are based on status at the time of the survey (current status). Figures in parentheses are based on 25-49 unweighted births. An asterisk indicates that a figure is based on fewer than 25 unweighted births and has been suppressed.

a = Omitted because less than 50% of the women had postpartum amenorrhea
¹ Includes births for which mothers are either still amenorrheic or still abstaining (or both) following birth

Table 5.8 Menopause

Percentage of women age 30-49 who are menopausal, according to age, Tajikistan DHS 2017

Age	Percentage menopausal ¹	Number of women
30-34	1.1	1,551
35-39	2.6	1,240
40-41	5.6	399
42-43	10.5	475
44-45	17.4	427
46-47	22.1	429
48-49	44.4	334
Total	9.0	4,855

¹ Percentage of women (1) who are not pregnant, (2) who have had a birth in the past 5 years and are not postpartum amenorrheic, and (3) for whom one of the following additional conditions applies: (a) their last menstrual period occurred 6 or more months preceding the survey, (b) they declared that they are in menopause or have had a hysterectomy, or (c) they have never menstruated.

Table 5.9 Age at first birth

Percentage of women age 15-49 who gave birth by exact ages, percentage who have never given birth, and median age at first birth, according to current age, Tajikistan DHS 2017

Current age	Percentage who gave birth by exact age					Percentage who have never given birth	Number of women	Median age at first birth
	15	18	20	22	25			
15-19	0.0	na	na	na	na	96.8	1,911	a
20-24	0.0	1.1	25.9	na	na	37.4	2,031	a
25-29	0.0	1.4	17.9	50.7	79.4	13.1	1,921	22.0
30-34	0.0	2.8	16.1	43.7	73.0	9.5	1,551	22.5
35-39	0.1	5.4	28.2	51.6	72.3	7.7	1,240	21.9
40-44	0.0	3.0	30.6	60.5	81.1	4.2	1,068	21.1
45-49	0.0	0.3	20.3	57.3	82.4	2.8	996	21.6
20-49	0.0	2.2	22.7	na	na	15.1	8,807	a
25-49	0.0	2.5	21.7	51.8	77.3	8.4	6,776	21.9

na = Not applicable due to censoring

a = Omitted because less than 50% of women had a birth before reaching the beginning of the age group

Table 5.10 Median age at first birth

Median age at first birth among women age 25-49, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Women age 25-49
Residence	
Urban	22.0
Rural	21.8
Region	
Dushanbe	22.1
GBAO	24.6
Sughd	21.6
DRS	22.0
Khatlon	22.0
FTF districts	21.9
Education	
None/primary	22.7
General basic	21.6
General secondary	21.6
Professional primary/ middle	22.4
Higher	23.4
Wealth quintile	
Lowest	22.4
Second	22.0
Middle	21.7
Fourth	21.5
Highest	21.9
Total	21.9

Table 5.11 Teenage pregnancy and motherhood

Percentage of women age 15-19 who have had a live birth or who are pregnant with their first child, and percentage who have begun childbearing, according to background characteristics, Tajikistan DHS 2017

Background characteristic	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				
15-17	0.0	0.1	0.1	1,134
15	0.0	0.0	0.0	302
16	0.0	0.0	0.0	416
17	0.0	0.3	0.3	416
18	2.1	5.6	7.7	400
19	14.0	11.7	25.7	377
Residence				
Urban	2.6	2.8	5.4	461
Rural	3.4	3.8	7.2	1,450
Region				
Dushanbe	1.3	1.9	3.2	185
GBAO	1.4	0.8	2.1	29
Sughd	2.8	3.9	6.7	500
DRS	3.7	4.7	8.5	455
Khatlon	3.7	3.1	6.9	743
FTF districts	4.1	3.6	7.7	372
Education				
None/primary	4.3	8.8	13.1	53
General basic	3.3	2.8	6.0	808
General secondary	3.5	4.0	7.5	871
Professional primary/ middle	2.7	4.4	7.1	90
Higher	0.0	1.9	1.9	89
Wealth quintile				
Lowest	2.9	1.7	4.6	392
Second	2.4	3.4	5.9	404
Middle	3.9	4.3	8.1	369
Fourth	3.9	5.3	9.2	348
Highest	3.1	3.4	6.4	398
Total	3.2	3.6	6.8	1,911

FERTILITY PREFERENCES

Key Findings

- **Desire for another child:** Overall, 18% of currently married women age 15-49 want to have another child soon, 5% want to wait at least 2 years, and 44% want no more children or are sterilized.
- **Limiting childbearing:** The desire to limit childbearing generally increases with increasing numbers of living children, from 1% among women with no living children to 78% among women with five children.
- **Ideal family size:** Women currently want 3.4 children on average. In general, ideal family size rises with women's age and increasing numbers of living children.
- **Unwanted births:** Overall, 95% of births were wanted at the time of conception, 3% were mistimed, and 2% were unwanted. The total wanted fertility rate is 3.5 children per woman, while the actual total fertility rate is 3.8 children.

Information on fertility preferences can help family planning program planners assess the desire for children, the extent of mistimed and unwanted pregnancies, and the demand for contraception to space or limit births. This information may suggest the direction that fertility patterns will take in the future.

This chapter presents information on whether and when married women want more children, ideal family size, whether the last birth was wanted, and the theoretical fertility rate if all unwanted births were prevented.

6.1 DESIRE FOR ANOTHER CHILD

Desire for another child

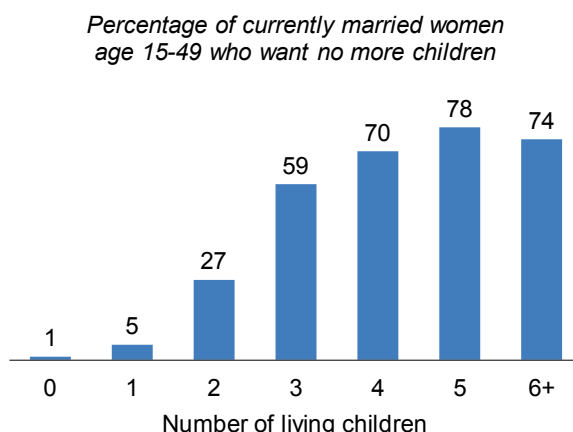
Women were asked whether they wanted more children and, if so, how long they would prefer to wait before the birth of the next child. Women who are sterilized or whose spouse is sterilized are assumed not to want any more children.

Sample: Currently married women age 15-49

Table 6.1 shows that 44% of married women age 15-49 in Tajikistan do not want to have any more children or are sterilized. Fewer than one in three women (29%) say they want to have another child: 18% want a child within 2 years, 5% prefer to wait 2 or more years, and 6% want another child but are undecided about when to have that child. Eighteen percent of women are undecided about whether they want to have more children.

The desire to limit fertility markedly increases by number of living children (Table 6.2 and Figure 6.1). For example, 27% of married women with two children want no more children, while nearly 6 in 10 women with three children say they want no more, as do at least 7 in 10 women with four or more children.

Figure 6.1 Desire to limit childbearing by number of living children



Trends: The proportion of currently married women who want no more children or are sterilized has remained constant at 44% since the 2012 TjDHS. An increase is seen in the percentage of women who say that they cannot conceive, from 6% in 2012 to 9% in 2017, and this increase is especially evident among those with no children (14% in 2012 and 25% in 2017). There has also been a rise in the proportion of women who are undecided about whether they want to have another child (12% in 2012 and 18% in 2017). While the percentage of women who want to have another child soon has remained relatively constant (17% in 2012 and 18% in 2017), there has been a large decrease in the percentage of women who want to wait 2 or more years before having another child (19% in 2012 and 5% in 2017).

Patterns by background characteristics

- The percentage of married women who want no more children is highest in Sughd (54%) and lowest in GBAO (33%).
- Women with no education or only a primary education are least likely to want to limit childbearing (32%).
- The desire to limit childbearing decreases slightly with increasing wealth; 47% of women in the lowest wealth quintile wish to have no more children, as compared with 43% in the highest wealth quintile.

6.2 IDEAL FAMILY SIZE

Ideal family size

Women 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?” Women 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?”

Sample: Women age 15-49

The mean ideal family size for all women age 15-49 in Tajikistan is 3.4 children (**Table 6.3**). The mean ideal family size for currently married women, at 3.7, is slightly higher than for all women (**Figure 6.2**).

In general, ideal family size increases considerably with increasing numbers of living children (**Figure 6.3**). For example, women who have two children consider 3.2 children ideal, whereas women who have six or more children consider 5.6 children ideal. This trend among all women is similar among currently married women.

Trends: Mean ideal family size has decreased slightly since the 2012 TjDHS, from 3.6 to 3.4 among all women and from 3.8 to 3.7 among currently married women.

Patterns by background characteristics

- The mean ideal number of children among all women increases with age, from 2.7 children among those age 15-19 to 4.2 children among those age 45-49 (**Table 6.4**).
- Urban women, on average, have a slightly smaller ideal family size (3.3) than rural women (3.5).
- Mean ideal family size is the same in all regions of Tajikistan (3.3) with the exception of Khatlon (3.7).
- Mean ideal number of children decreases with increasing wealth, from 3.5 children among women in the lowest quintile to 3.3 children among women in the highest quintile. There is also a slight decrease in mean ideal family size with increasing levels of education.

Figure 6.2 Ideal family size

Mean ideal number of children among women age 15-49

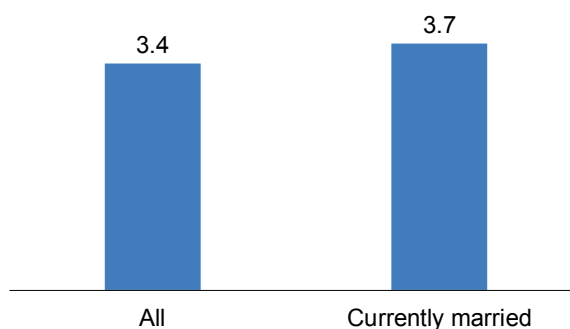
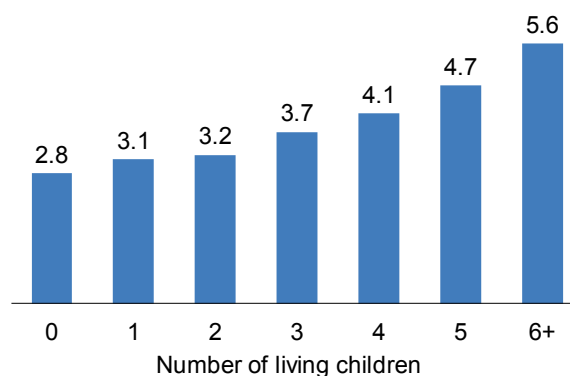


Figure 6.3 Ideal family size by number of living children

Mean ideal number of children



6.3 FERTILITY PLANNING STATUS

Planning status of births/pregnancies

Women reported whether their births/pregnancies were wanted at the time (planned birth), at a later time (mistimed birth), or not at all (unwanted birth).

Sample: Current pregnancies and births in the 5 years before the survey to women age 15-49

Almost all births in the 5 years before the survey were wanted at the time of conception (95%). Only 3% of births were mistimed (that is, wanted at a later date), and 2% were not wanted at all (Table 6.5 and Figure 6.4).

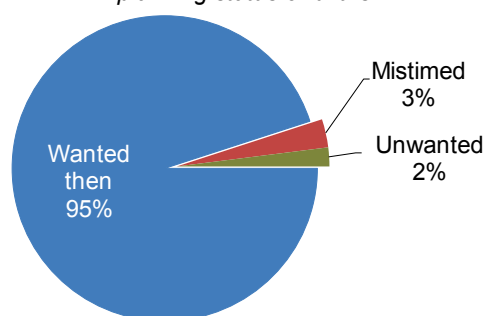
Trends: The percentage of births that were wanted has increased slightly in the past 5 years, from 93% in 2012 to 95% in 2017. The percentage of unwanted births has decreased from 3% to 2%.

Patterns by background characteristics

- The proportion of unwanted births increases with birth order, from less than 1% among first births to 9% among fourth- and higher-order births.
- The percentage of unwanted births also increases with mother's age at birth, from less than 1% of births to women under age 20 to 13% of births to women age 40-44.

Figure 6.4 Fertility planning status

Percent distribution of births to women age 15-49 in the 5 years before the survey (including current pregnancies) by planning status of births



6.4 WANTED FERTILITY RATES

Unwanted birth

Any birth in excess of the number of children a woman reported as her ideal number.

Wanted birth

Any birth fewer than or equal to the number of children a woman reported as her ideal number.

Wanted fertility rate

The average number of children a woman would have by the end of her childbearing years if she bore children at the current age-specific fertility rates, excluding unwanted births.

Sample: Women age 15-49

Table 6.6 and Figure 6.5 show differentials in wanted fertility rates and total fertility rates among women age 15-49. The wanted fertility indicates what fertility would be if women had only the children they desired. The total wanted fertility rate in Tajikistan is 3.5 children, 0.3 children less than the current total fertility rate of 3.8 children.

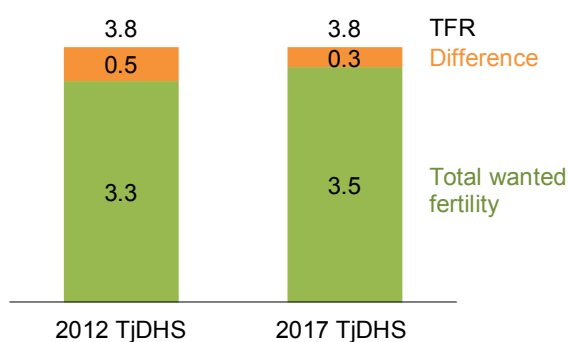
Trends: The difference between the wanted and the actual fertility rate declined from 0.5 in 2012 to 0.3 in 2017. This decrease in the difference between the two rates was due to an increase in the wanted fertility rate from 3.3 in 2012 to 3.5 in 2017.

Patterns by background characteristics

- The gap between wanted and actual fertility is slightly higher among women in rural areas (0.3) than among those in urban areas (0.2).

Figure 6.5 Trends in wanted and actual fertility

Wanted and actual number of children per woman



- The largest gap between wanted and actual fertility is 0.4 children in DRS, where the total wanted fertility rate is 3.6, while the smallest gap (0.1 children) is in GBAO and Dushanbe, where the total wanted fertility rates are 3.4 and 2.6, respectively.
- The difference between wanted and actual fertility decreases with increasing education, from 0.4 children among women with no education or a primary education to 0.1 among women with a higher education.
- The difference between wanted and actual fertility also decreases with increasing wealth, from 0.5 children among women in the lowest wealth quintile to 0.2 among women in the highest quintile.

LIST OF TABLES

For more information on fertility preferences, see the following tables:

- **Table 6.1** Fertility preferences according to number of living children
- **Table 6.2** Desire to limit childbearing
- **Table 6.3** Ideal number of children by number of living children
- **Table 6.4** Mean ideal number of children according to background characteristics
- **Table 6.5** Fertility planning status
- **Table 6.6** Wanted fertility rates

Table 6.1 Fertility preferences according to number of living children

Percent distribution of currently married women age 15-49 by desire for children, according to number of living children, Tajikistan DHS 2017

Desire for children	Number of living children ¹							Total
	0	1	2	3	4	5	6+	
Have another soon ²	65.0	40.8	20.1	8.9	4.2	1.8	1.4	18.0
Have another later ³	0.1	12.0	11.1	3.0	1.0	0.1	0.0	5.3
Have another, undecided when	4.0	14.4	9.3	3.1	1.7	1.3	0.6	5.7
Undecided	4.7	16.7	24.4	21.1	16.7	10.3	11.8	18.3
Want no more	1.1	4.8	26.8	57.5	69.5	75.3	70.5	43.2
Sterilized ⁴	0.0	0.3	0.3	1.0	0.6	2.3	3.2	0.8
Declared infecund	25.2	11.1	8.0	5.4	6.2	8.8	12.4	8.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	504	1,088	1,834	2,039	1,428	584	271	7,747

¹ The number of living children includes the current pregnancy.

² Wants next birth within 2 years

³ Wants to delay next birth for 2 or more years

⁴ Includes both female and male sterilization

Table 6.2 Desire to limit childbearing

Percentage of currently married women age 15-49 who want no more children, by number of living children, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Number of living children ¹							Total
	0	1	2	3	4	5	6+	
Residence								
Urban	2.9	7.2	29.9	54.9	70.1	79.9	68.9	43.5
Rural	0.7	4.3	26.3	59.7	70.2	77.1	74.6	44.1
Region								
Dushanbe	1.5	8.7	23.2	42.0	58.2	71.3	(67.9)	36.2
GBAO	(0.0)	0.8	20.3	47.1	65.6	(65.4)	*	33.3
Sughd	2.9	7.2	34.0	76.2	88.7	93.2	*	53.6
DRS	0.0	3.1	28.4	51.3	70.0	79.6	75.3	42.6
Khatlon	0.5	3.8	19.3	44.8	60.1	71.3	72.6	38.2
FTF districts	0.0	2.5	16.6	43.1	54.3	65.2	60.8	34.4
Education								
None/primary	(0.0)	0.9	19.0	35.6	58.4	(57.2)	*	32.3
General basic	0.8	4.2	28.3	54.7	68.3	74.9	73.5	43.2
General secondary	1.2	6.4	26.5	61.3	74.0	83.4	72.2	47.5
Professional primary/ middle	(1.0)	5.1	31.1	73.8	65.2	(66.6)	*	43.2
Higher	2.1	4.9	28.0	59.3	67.8	(77.0)	*	37.8
Wealth quintile								
Lowest	0.5	4.3	26.3	58.9	69.0	75.8	72.9	47.1
Second	0.0	3.1	23.8	56.3	69.3	82.1	78.7	43.4
Middle	1.6	5.2	24.0	58.1	73.7	76.4	(71.2)	43.6
Fourth	1.2	5.0	30.5	61.2	70.9	75.4	(63.7)	43.3
Highest	2.4	7.3	30.4	57.8	67.2	77.8	(74.0)	42.5
Total	1.1	5.1	27.1	58.5	70.1	77.6	73.7	44.0

Note: Women who have been sterilized or whose husband has been sterilized are considered to want no more children. 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.

¹ The number of living children includes the current pregnancy.

Table 6.3 Ideal number of children by number of living children

Percent distribution of women age 15-49 by ideal number of children, and mean ideal number of children for all women and for currently married women, according to the number of living children, Tajikistan DHS 2017

Ideal number of children	Number of living children ¹							Total
	0	1	2	3	4	5	6+	
0	6.9	0.5	0.1	0.2	0.4	0.1	0.4	2.1
1	1.5	2.3	0.2	0.1	0.1	0.1	0.0	0.8
2	42.3	35.2	29.0	7.4	5.6	2.7	1.6	23.8
3	16.0	20.4	23.6	30.8	4.5	3.5	1.3	18.2
4	26.0	35.2	43.5	53.3	72.7	35.9	27.7	42.7
5	1.9	2.7	1.6	3.9	6.2	35.4	9.2	5.0
6+	3.1	3.5	1.7	3.9	10.2	22.0	59.0	6.5
Non-numeric responses	2.4	0.3	0.2	0.4	0.4	0.4	0.7	0.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	2,980	1,282	1,993	2,117	1,464	599	282	10,718
Mean ideal number of children for:²								
All women	2.8	3.1	3.2	3.7	4.1	4.7	5.6	3.4
Number of women	2,908	1,279	1,989	2,109	1,459	596	280	10,619
Currently married women	3.4	3.2	3.3	3.7	4.1	4.7	5.6	3.7
Number of currently married women	500	1,085	1,830	2,030	1,423	581	268	7,718

¹ The number of living children includes the current pregnancy.

² Means are calculated excluding respondents who gave non-numeric responses.

Table 6.4 Mean ideal number of children according to background characteristics

Mean ideal number of children for all women age 15-49 according to background characteristics, Tajikistan DHS 2017

Background characteristic	Mean	Number of women ¹
Age		
15-19	2.7	1,853
20-24	3.2	2,020
25-29	3.4	1,913
30-34	3.6	1,543
35-39	3.7	1,233
40-44	4.0	1,066
45-49	4.2	992
Residence		
Urban	3.3	2,662
Rural	3.5	7,957
Region		
Dushanbe	3.3	947
GBAO	3.3	209
Sughd	3.3	3,272
DRS	3.3	2,310
Khatlon	3.7	3,881
FTF districts	3.8	2,073
Education		
None/primary	3.5	611
General basic	3.4	3,564
General secondary	3.5	4,594
Professional primary/middle	3.3	855
Higher	3.2	995
Wealth quintile		
Lowest	3.5	2,091
Second	3.6	2,088
Middle	3.5	2,086
Fourth	3.4	2,137
Highest	3.3	2,217
Total	3.4	10,619

¹ Number of women who gave a numeric response

Table 6.5 Fertility planning status

Percent distribution of births to women age 15-49 in the 5 years preceding the survey (including current pregnancies), by planning status of the birth, according to birth order and mother's age at birth, Tajikistan DHS 2017

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	99.7	0.1	0.2	100.0	2,315
2	96.0	3.5	0.5	100.0	2,127
3	93.7	4.0	2.3	100.0	1,568
4+	87.8	3.4	8.8	100.0	1,271
Mother's age at birth					
<20	99.3	0.7	0.0	100.0	617
20-24	97.0	2.5	0.6	100.0	3,242
25-29	94.8	3.2	2.0	100.0	2,097
30-34	90.9	2.9	6.3	100.0	909
35-39	88.1	1.1	10.8	100.0	347
40-44	86.5	0.3	13.2	100.0	65
45-49	*	*	*	100.0	2
Total	95.2	2.5	2.2	100.0	7,281

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

Table 6.6 Wanted fertility rates

Total wanted fertility rates and total fertility rates for the 3 years preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Total wanted fertility rate	Total fertility rate
Residence		
Urban	2.8	3.0
Rural	3.7	4.0
Region		
Dushanbe	2.6	2.7
GBAO	3.4	3.5
Sughd	3.3	3.5
DRS	3.6	4.0
Khatlon	3.8	4.1
FTF districts	3.9	4.1
Education		
None/primary	3.6	4.0
General basic	3.5	3.9
General secondary	3.7	4.0
Professional primary/ middle	3.4	3.6
Higher	2.7	2.8
Wealth quintile		
Lowest	3.5	4.0
Second	3.8	4.1
Middle	3.7	3.9
Fourth	3.5	3.8
Highest	2.8	3.0
Total	3.5	3.8

Note: Rates are calculated based on births to women age 15-49 in the period 1-36 months preceding the survey. The total fertility rates are the same as those presented in Table 5.3.

Key Findings

- **Contraceptive use:** Overall, 29% of currently married women use a method of family planning, with 27% using a modern method and 2% using a traditional method. The IUD is the most commonly used method (18%), followed by the male condom (4%).
- **Sources of contraceptive methods:** The government sector provides services for the large majority of modern method users (89%).
- **Contraceptive discontinuation:** Slightly more than 1 in 4 women (28%) who began using a contraceptive method in the 5 years before the survey discontinued the method within 12 months. The most common reason for discontinuing a method was the desire to become pregnant (33%), followed by method-related side effects or health concerns (26%).
- **Unmet need for family planning:** 23% of currently married women have an unmet need for family planning.
- **Demand for family planning:** Just over half of the total demand for family planning is satisfied through the use of modern methods (52%).

Couples can use contraceptive methods to limit or space the number of children they have. This chapter presents information on the use and sources of contraceptive methods, informed choice of methods, and rates and reasons for discontinuing contraceptives. It also examines the potential demand for family planning and how much contact nonusers have with family planning providers.

Family planning use helps women space the births of their children, which benefits the health of both the mother and the child. By allowing women to control the timing of childbearing, family planning also enhances women's opportunities for education and employment and contributes to improved socioeconomic conditions for the family.

7.1 CONTRACEPTIVE KNOWLEDGE AND USE

Knowledge of contraceptive methods is widespread among women in Tajikistan. Almost all currently married women age 15-49 know at least one method of family planning (98%) (**Table 7.1**). On average, married women have heard of more than seven contraceptive methods. The intrauterine device (IUD) (96%) is the most widely known method, followed by the pill (89%) and the male condom (85%).

Contraceptive prevalence rate

Percentage of women who use any contraceptive method.

Sample: All women age 15-49 and currently married women age 15-49

Modern methods

Include male and female sterilization, injectables, intrauterine devices (IUDs), contraceptive pills, implants, female and male condoms, the lactational amenorrhea method (LAM), and emergency contraception.

The contraceptive prevalence rate among all women is 21%, with 20% using modern methods. The contraceptive prevalence rate is higher among currently married women (29%), with 27% using modern methods. The IUD (18%) is by far the most widely used method among married women. Four percent report use of the male condom, 2% are using the pill, and 2% use withdrawal (**Table 7.2** and **Figure 7.1**).

Contraceptive use increases rapidly with age, from 3% among currently married women age 15-19 to a high of 46% among women age 35-39. The IUD is the most widely used method in all but the 15-19 age group, where the most commonly used methods are the lactational amenorrhea method and the male condom.

Trends: The contraceptive prevalence rate changed only minimally in the 5 years between the 2012 and 2017 TJDHS surveys; 29% of currently married women were using a method in 2017, as compared with 28% in 2012. The level of use of modern methods also remained virtually unchanged; 27% of married women were using modern methods in 2017, compared with 26% in 2012 (**Figure 7.2**). With regard to trends in the use of specific methods, the largest increase was observed in the percentage of women reporting use of male condoms; this percentage rose from 2% in 2012 to 4% in 2017.

Figure 7.1 Contraceptive use

Percentage of currently married women age 15-49 currently using a contraceptive method

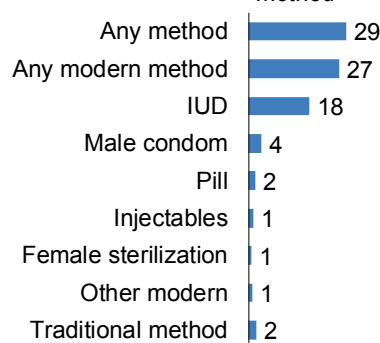
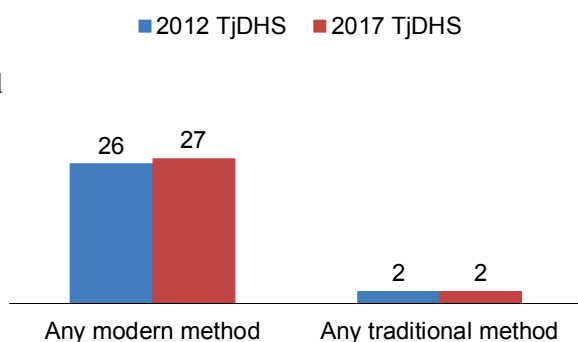


Figure 7.2 Trends in contraceptive use

Percentage of currently married women age 15-49 currently using a contraceptive method



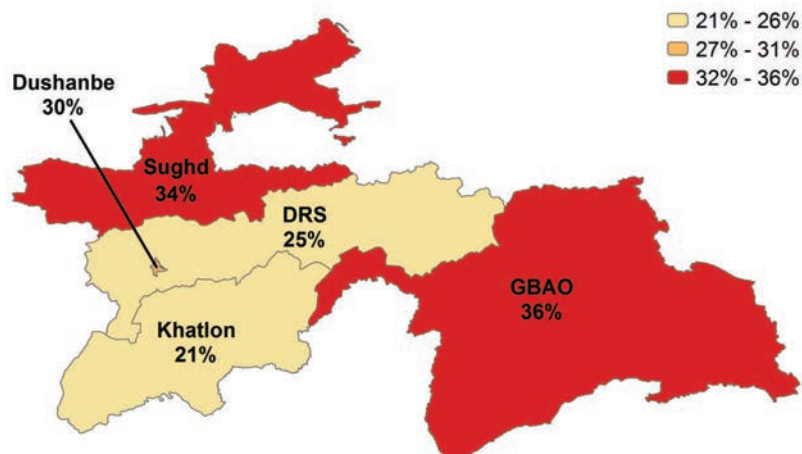
Patterns by background characteristics

- Modern contraceptive use is highest among married women with three to four children (38%). Virtually all women wait to begin using contraception until they have one child; less than 1% of married women with no children are using modern contraception (**Table 7.3**).
- Married women with a nonresident husband (18%) are less likely than married women with a resident husband (28%) to use modern contraceptives.
- Use of modern contraception is higher in urban areas than in rural areas (32% versus 26%).
- Modern contraceptive methods are most likely to be used in GBAO (36%) and Sughd (34%) and least likely to be used in Khatlon (21%) and DRS (25%) (**Figure 7.3**).

- The percentage of women who use modern contraception increases with increasing education, from 20% among those with no education or a primary education to 32% among those with a higher education (Figure 7.4). Use of modern contraception also generally increases with increasing wealth, peaking at 31% among women in the highest quintile.

Figure 7.3 Modern contraceptive use by region

Percentage of currently married women age 15-49

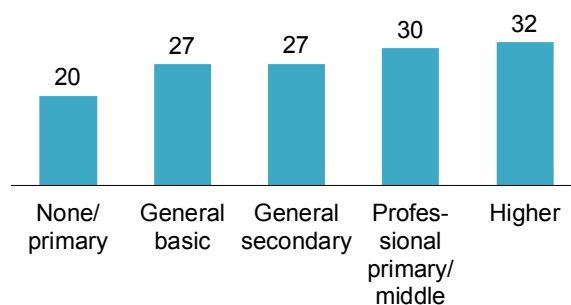


7.2 KNOWLEDGE OF THE FERTILE PERIOD

The 2017 TjDHS results show that many Tajik women have a poor understanding of the ovulatory cycle (Table 7.4). Around 1 in 4 women age 15-49 (26%) do not know when in the ovulatory cycle a woman is most at risk of becoming pregnant, and 15% report there is no specific time when a woman is at greatest risk of getting pregnant. Only 20% of women correctly report that the most fertile time in a woman's ovulatory cycle is halfway between two menstrual periods.

Figure 7.4 Use of modern methods by education

Percentage of currently married women age 15-49 using a modern contraceptive method



7.3 SOURCE OF MODERN CONTRACEPTIVE METHODS

Source of modern contraceptives

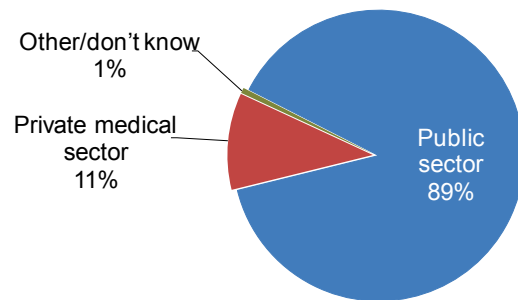
The place where the modern method currently being used was obtained the last time it was acquired.

Sample: Women age 15-49 currently using a modern contraceptive method

In Tajikistan, the government sector is by far the most common source for contraceptive methods, serving 89% of modern method users (Table 7.5 and Figure 7.5). Health centers provide services for almost half of all modern method users (47%), while maternity homes serve 20% and government hospitals serve 12% of modern method users. Ten percent of women, mainly those using the male condom or pills, acquire their method from pharmacies. Ten percent of women, mainly those using the male condom or pills, acquire their method from pharmacies.

Figure 7.5 Source of modern contraceptive methods

Percent distribution of current users of modern methods age 15-49 by most recent source of method



Note: Total is more than 100% due to rounding.

7.4 INFORMED CHOICE

Informed choice

Informed choice indicates that women were informed at the time they started the current episode of method use about the method's side effects, about what to do if they experience side effects, and about other methods they could use.

Sample: Women age 15-49 who are currently using selected modern contraceptive methods and who started the last episode of use within the 5 years before the survey

Ensuring that women have the support necessary for informed choice is a critical component of high-quality family planning service delivery. Table 7.6 shows that 84% of users of modern contraception were informed about possible side effects or problems with their method, 79% were advised on what to do if they experienced side effects, and 82% were informed about other methods that they could use. Seventy-two percent of users received all three types of information. Table 7.6 also shows that there were generally small differences in the likelihood of a user receiving the information needed for making an informed choice according to the method used or the source of the method.

7.5 DISCONTINUATION OF CONTRACEPTIVES

Contraceptive discontinuation rate

Percentage of contraceptive use episodes discontinued within 12 months.

Sample: Episodes of contraceptive use in the 5 years before the survey experienced by women who are currently age 15-49 (one woman may contribute more than one episode)

More than 1 in 4 women (28%) who began using a contraceptive method in the 5 years before the survey discontinued the method within 12 months of use (Table 7.7). Women switched to another method in only 3% of all episodes of use during the period. The discontinuation rate was lowest for the IUD (17%) (Figure 7.6).

Figure 7.6 Contraceptive discontinuation rates

Percentage of contraceptive episodes discontinued within 12 months among women age 15-49

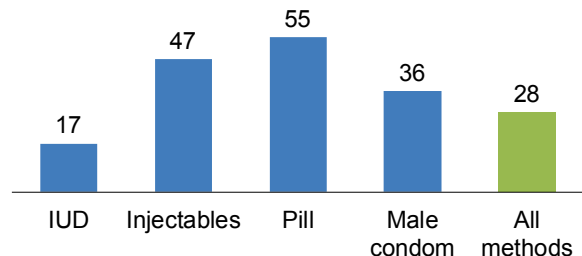


Table 7.8 shows that the most common reason for discontinuing a method was the desire to become pregnant (33%), followed by method-related side effects or health concerns (26%). Notably, IUD users were more likely to cite side effects or health concerns as their reason for discontinuation (42%) than other reasons, including the desire to become pregnant (31%).

7.6 DEMAND FOR FAMILY PLANNING

Unmet need for family planning

Unmet need for spacing: Proportion of women who (1) are at risk of becoming pregnant, not using contraception, and either do not want to become pregnant within the next 2 years or are unsure if or when they want to become pregnant; (2) are pregnant with a mistimed pregnancy; or (3) are postpartum amenorrheic for up to 2 years following a mistimed birth and not using contraception.

Unmet need for limiting: Proportion of women who (1) are at risk of becoming pregnant, not using contraception, and want no (more) children; (2) are pregnant with an unwanted pregnancy; or (3) are postpartum amenorrheic for up to 2 years following an unwanted birth and not using contraception.

Women who are classified as infecund have no unmet need because they are not at risk of becoming pregnant.

Women using contraception are considered to have a met need. Women using contraception who say they want no (more) children are considered to have a met need for limiting, and women who are using contraception and say they want to delay having a child or are unsure if or when they want a (another) child are considered to have a met need for spacing.

Sample: All women age 15-49, currently married women age 15-49

Demand for family planning: Unmet need for family planning + current contraceptive use (any method)

Proportion of demand satisfied:
$$\frac{\text{Current contraceptive use (any method)}}{\text{Unmet need + current contraceptive use (any method)}}$$

Proportion of demand satisfied by modern methods:
$$\frac{\text{Current contraceptive use (any modern method)}}{\text{Unmet need + current contraceptive use (any method)}}$$

Overall, 23% of currently married women age 15-49 have an unmet need for family planning and are not using contraception (Table 7.9.1 and Figure 7.7). Women who are in need of family planning are divided equally between those with a desire to space a wanted birth and those who want to limit their family size to the number of children they have (11% each).

Twenty-nine percent of married women have a met need for family planning, that is, they are already using family planning to space their next birth (9%) or stop childbearing (20%). Thus, the total demand for family planning among married women is 52%. Just over half of the total demand is satisfied through the use of modern methods (52%).

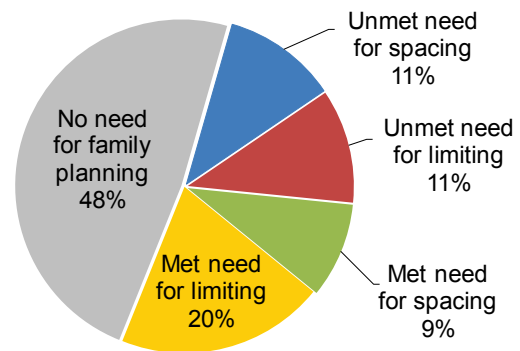
Trends: The level of unmet need for family planning did not change between the 2012 and 2017 TjDHS surveys, with 23% of married women found to be in need according to both surveys. Because there was only a slight increase in met need for family planning (from 28% in 2012 to 29% in 2017), the total demand for family planning remained virtually unchanged as well (51% in 2012 and 52% in 2017) (Figure 7.8).

Patterns by background characteristics

- Unmet need for spacing is highest among married women age 20-24 (20%), while unmet need for limiting is highest among women age 30-34 (18%).
- The level of unmet need is almost the same among urban and rural women (22% versus 23%).
- Unmet need is highest in DRS (29%) and lowest in GBAO (16%) (Figure 7.9).
- Unmet need generally declines with increasing education and wealth.
- The total demand for family planning among currently married women exceeds the total demand among all women (52% versus 38%). However, the percentage of demand satisfied (56%) and the percentage of demand satisfied by modern methods (52%) among currently married women are similar to percentages among all women. For more information on need and demand for family planning

Figure 7.7 Demand for family planning

Percent distribution of currently married women age 15-49 by need for family planning



Note: Total is less than 100% due to rounding.

Figure 7.8 Trends in demand for family planning

Percentage of currently married women age 15-49

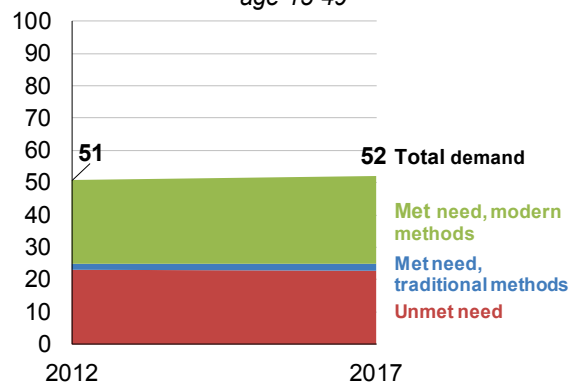
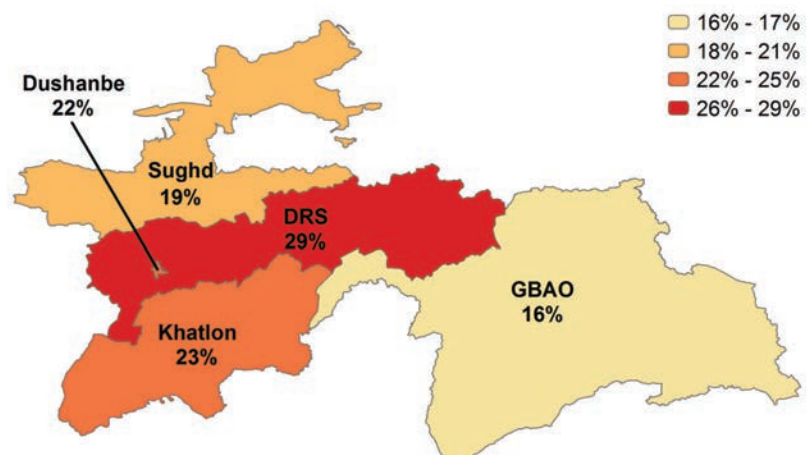


Figure 7.9 Unmet need by region

Percentage of currently married women age 15-49 with unmet need for family planning



among all women, see **Table 7.9.2**. Data for sexually active unmarried women are not shown because there are few cases (14 women).

7.7 DECISION MAKING ABOUT FAMILY PLANNING

The survey collected information from both users and nonusers regarding how the decision about family planning was made. Fifty-seven percent of married women using contraception at the time of the survey made the decision to use jointly with their husband, 26% decided mainly themselves, and 17% attributed the decision mainly to their husband (**Table 7.10**). Nonusers were less likely than users to say the decision about family planning use was made jointly with their husband (42%) and more likely to say either they had mainly made the decision (36%) or their husband had mainly made the decision (22%).

7.8 FUTURE USE OF CONTRACEPTION

The majority of currently married women age 15-49 who are not using family planning either do not intend to use contraception in the future (45%) or are unsure about whether they will do so (26%) (**Table 7.11**). Twenty-nine percent of nonusers say they plan to use contraception in the future, a figure slightly higher than that reported in 2012 (26%). The proportion of nonusers intending to use contraception peaks among women with two to three children (34%).

7.9 EXPOSURE TO FAMILY PLANNING MESSAGES IN THE MEDIA

Table 7.12 presents information on women's exposure to family planning messages in various media in the few months before the survey. Women were most likely to have seen a family planning message on television (45%). Eighteen percent had read a family planning message in a newspaper or magazine, and 12% heard a message on the radio. Nine percent of women were exposed to a family planning message through the Caravan of Health or the Program on Methods of Contraception. Very few women were exposed to family planning messages through mobile phones (2%). Almost half of women (49%) had no exposure to family planning messages through any of the five sources.

7.10 CONTACT OF NONUSERS WITH FAMILY PLANNING PROVIDERS

Contact of nonusers with family planning providers

Respondent discussed family planning in the 12 months before the survey with a fieldworker or during a visit to a health facility.

Sample: Women age 15-49 who are not currently using any contraceptive methods

Nonusers were asked whether they discussed family planning in the 12 months prior to the survey with fieldworkers or providers at health facilities. **Table 7.13** shows that more than half of nonusers (56%) had visited a health facility in the 12 months before the survey, but only 29% said they had talked about family planning during such a visit. A fieldworker had discussed family planning with 23% of nonusers. Yet overall, the majority of nonusers (65%) did not discuss family planning with a fieldworker or at a health facility in the 12 months prior to the survey.

LIST OF TABLES

For more information on family planning, see the following tables:

- **Table 7.1** Knowledge of contraceptive methods
- **Table 7.2** Current use of contraception by age
- **Table 7.3** Current use of contraception according to background characteristics
- **Table 7.4** Knowledge of fertile period
- **Table 7.5** Source of modern contraceptive methods
- **Table 7.6** Informed choice

- **Table 7.7** Twelve-month contraceptive discontinuation rates
- **Table 7.8** Reasons for discontinuation
- **Table 7.9.1** Need and demand for family planning among currently married women
- **Table 7.9.2** Need and demand for family planning among all women
- **Table 7.10** Decision making about family planning
- **Table 7.11** Future use of contraception
- **Table 7.12** Exposure to family planning messages
- **Table 7.13** Contact of nonusers with family planning providers

Table 7.1 Knowledge of contraceptive methods

Percentage of all women and currently married women age 15-49 who know any contraceptive method, by specific method, Tajikistan DHS 2017

Method	All women	Currently married women
Any method	88.2	97.6
Any modern method	88.1	97.6
Female sterilization	47.4	56.3
Male sterilization	15.8	18.3
Pill	77.0	88.7
IUD	85.6	95.7
Injectables	63.5	74.2
Implants	48.0	57.2
Male condom	73.0	85.0
Female condom	16.4	18.8
Emergency contraception	28.4	34.3
Lactational amenorrhea (LAM)	56.5	68.8
Other modern method	0.9	1.1
Any traditional method	55.5	68.3
Rhythm	39.2	47.2
Withdrawal	48.0	60.2
Other traditional method	0.1	0.1
Mean number of methods known by women 15-49	6.0	7.1
Number of women	10,718	7,747

Table 7.2 Current use of contraception by age

Percent distribution of all women and currently married women age 15-49 by contraceptive method currently used, according to age, Tajikistan DHS 2017

Age	Modern method										Traditional method			Total	Number of women	
	Any method	Any modern method	Female sterilization	Pill	IUD	Injectables	Implants	Male condom	Female condom	LAM	Any traditional method	Rhythm	Withdrawal			Not currently using
ALL WOMEN																
15-19	0.4	0.3	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.2	0.1	0.0	0.1	99.6	100.0	1,911
20-24	12.0	11.3	0.0	0.6	7.6	0.2	0.0	1.9	0.0	1.0	0.7	0.0	0.7	88.0	100.0	2,031
25-29	25.5	24.2	0.2	1.5	16.2	0.6	0.1	3.8	0.0	1.7	1.3	0.0	1.3	74.5	100.0	1,921
30-34	31.1	28.7	0.6	2.4	19.4	1.2	0.2	4.6	0.0	0.3	2.3	0.0	2.3	68.9	100.0	1,551
35-39	40.3	37.1	1.7	3.1	24.6	2.1	0.0	4.7	0.0	0.7	3.2	0.0	3.2	59.7	100.0	1,240
40-44	34.0	31.2	1.3	2.6	20.8	2.5	0.0	3.8	0.0	0.2	2.8	0.0	2.8	66.0	100.0	1,068
45-49	19.8	17.7	1.5	0.4	12.8	1.1	0.2	1.7	0.0	0.0	2.0	0.1	2.0	80.2	100.0	996
Total	21.3	19.7	0.6	1.4	13.3	0.9	0.1	2.8	0.0	0.7	1.6	0.0	1.5	78.7	100.0	10,718
CURRENTLY MARRIED WOMEN																
15-19	2.9	2.5	0.0	0.0	0.0	0.0	0.0	1.1	0.0	1.3	0.4	0.0	0.4	97.1	100.0	240
20-24	15.6	14.7	0.0	0.8	9.9	0.2	0.1	2.4	0.0	1.3	0.9	0.0	0.9	84.4	100.0	1,557
25-29	28.7	27.1	0.2	1.7	18.3	0.7	0.1	4.1	0.0	1.9	1.5	0.1	1.5	71.3	100.0	1,688
30-34	35.0	32.4	0.7	2.7	21.9	1.3	0.3	5.1	0.0	0.4	2.6	0.0	2.6	65.0	100.0	1,374
35-39	45.6	42.0	1.8	3.5	28.0	2.4	0.0	5.3	0.0	0.8	3.6	0.0	3.6	54.4	100.0	1,089
40-44	38.1	34.9	1.5	2.9	23.3	2.8	0.0	4.3	0.0	0.2	3.2	0.0	3.2	61.9	100.0	953
45-49	22.9	20.5	1.7	0.5	14.8	1.2	0.3	1.9	0.0	0.0	2.4	0.1	2.3	77.1	100.0	847
Total	29.3	27.1	0.8	1.9	18.3	1.3	0.1	3.8	0.0	0.9	2.2	0.0	2.1	70.7	100.0	7,747

Note: If more than one method is used, only the most effective method is considered in this tabulation.
LAM = Lactational amenorrhea method

Table 7.3 Current use of contraception according to background characteristics

Percent distribution of currently married women age 15-49 by contraceptive method currently used, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Any method	Any modern method	Modern method								Traditional method			Not currently using	Total	Number of women
			Female sterilization	Pill	IUD	Injectables	Implants	Male condom	Female condom	LAM	Any traditional method	Rhythm	Withdrawal			
Number of living children																
0	0.3	0.3	0.0	0.1	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	99.7	100.0	737
1-2	22.1	20.0	0.3	1.0	13.0	0.6	0.1	3.8	0.0	1.3	2.1	0.0	2.0	77.9	100.0	2,865
3-4	40.9	38.0	0.9	3.2	26.5	1.5	0.2	4.8	0.0	0.9	3.0	0.0	2.9	59.1	100.0	3,313
5+	33.3	32.1	2.6	1.8	20.0	3.7	0.0	3.3	0.0	0.6	1.2	0.0	1.2	66.7	100.0	833
Husband's/partner's residence¹																
Resident	30.5	28.3	0.8	2.0	19.0	1.3	0.1	4.1	0.0	0.8	2.2	0.0	2.2	69.5	100.0	6,886
Nonresident	19.6	17.9	0.6	1.0	12.5	0.7	0.0	1.6	0.0	1.6	1.7	0.1	1.6	80.4	100.0	861
Residence																
Urban	33.9	31.5	0.6	2.4	21.1	0.4	0.1	5.7	0.0	1.0	2.4	0.0	2.3	66.1	100.0	1,803
Rural	27.9	25.8	0.8	1.8	17.4	1.5	0.1	3.2	0.0	0.9	2.1	0.0	2.1	72.1	100.0	5,944
Region																
Dushanbe	29.9	29.5	0.6	2.3	18.9	0.1	0.1	7.4	0.0	0.2	0.3	0.1	0.3	70.1	100.0	585
GBAO	36.5	35.6	0.4	2.0	26.1	4.7	0.1	2.3	0.0	0.0	0.9	0.2	0.7	63.5	100.0	144
Sughd	40.0	34.3	1.2	2.3	21.5	1.1	0.1	6.2	0.0	2.0	5.7	0.0	5.7	60.0	100.0	2,533
DRS	25.3	24.8	0.7	1.7	18.4	0.7	0.1	3.1	0.0	0.0	0.6	0.1	0.5	74.7	100.0	1,709
Khatlon	21.4	21.1	0.6	1.7	14.7	1.9	0.2	1.4	0.0	0.6	0.4	0.0	0.4	78.6	100.0	2,776
FTF districts	18.6	18.3	0.7	1.1	13.0	1.5	0.3	1.2	0.0	0.5	0.4	0.0	0.4	81.4	100.0	1,548
Education																
None/primary	19.8	19.8	0.5	0.7	15.7	2.0	0.3	0.8	0.0	0.0	0.0	0.0	0.0	80.2	100.0	468
General basic	28.9	26.8	0.7	1.5	19.0	1.3	0.1	3.2	0.0	0.9	2.1	0.0	2.1	71.1	100.0	2,532
General secondary	29.2	26.9	0.9	2.1	18.1	1.4	0.1	3.5	0.0	0.8	2.3	0.0	2.3	70.8	100.0	3,442
Professional primary/middle	32.2	30.3	1.1	2.9	18.0	1.1	0.0	5.0	0.0	2.4	1.9	0.1	1.7	67.8	100.0	626
Higher	35.1	31.7	0.7	2.7	18.6	0.2	0.0	8.6	0.1	0.8	3.3	0.1	3.2	64.9	100.0	680
Wealth quintile																
Lowest	26.4	25.5	1.1	1.5	17.8	2.6	0.2	1.3	0.0	0.9	0.9	0.0	0.9	73.6	100.0	1,469
Second	25.4	23.7	0.8	1.5	15.5	1.9	0.0	2.8	0.0	1.2	1.7	0.1	1.7	74.6	100.0	1,508
Middle	28.1	26.4	0.5	2.2	18.0	1.0	0.1	3.8	0.0	0.8	1.7	0.0	1.7	71.9	100.0	1,606
Fourth	33.3	29.1	0.9	2.4	19.9	0.7	0.2	4.2	0.0	0.9	4.2	0.0	4.1	66.7	100.0	1,668
Highest	32.9	30.8	0.8	2.0	20.1	0.2	0.1	6.8	0.0	0.8	2.1	0.0	2.0	67.1	100.0	1,496
Total	29.3	27.1	0.8	1.9	18.3	1.3	0.1	3.8	0.0	0.9	2.2	0.0	2.1	70.7	100.0	7,747

Note: If more than one method is used, only the most effective method is considered in this tabulation.

LAM = Lactational amenorrhea method

¹ Resident husband/partner resides with the respondent. A nonresident husband/partner lives elsewhere.**Table 7.4 Knowledge of fertile period**

Percent distribution of all women age 15-49 by knowledge of the fertile period during the ovulatory cycle, Tajikistan DHS 2017

Perceived fertile period	All women
Just before her menstrual period begins	3.5
During her menstrual period	3.6
Right after her menstrual period has ended	31.9
Halfway between two menstrual periods	19.9
No specific time	15.3
Don't know	25.7
Total	100.0
Number of women	10,718

Table 7.5 Source of modern contraceptive methods

Percent distribution of users of modern contraceptive methods age 15-49 by most recent source of method, according to method, Tajikistan DHS 2017

Source	Female sterilization	IUD	Injectables	Pill	Male condom	Total
Public sector	100.0	98.7	99.8	76.9	41.1	88.6
Government hospital	23.6	13.7	21.3	4.7	1.8	11.9
Maternity home	69.3	23.7	13.4	4.4	1.5	20.0
Health center ¹	0.2	51.1	55.8	59.3	26.2	46.6
Reproductive health center	1.9	5.8	6.2	6.0	7.4	5.9
Health house	0.0	3.6	2.0	2.5	2.4	3.1
Integrated childhood illness center	0.0	0.3	1.2	0.0	0.0	0.3
Immunoprophylaxis center	0.0	0.1	0.0	0.0	0.0	0.1
AIDS center	0.0	0.0	0.0	0.0	0.0	0.0
Healthy lifestyle center	3.2	0.3	0.0	0.0	0.4	0.4
Family medicine center	1.7	0.1	0.0	0.0	1.5	0.3
Other public sector	0.0	0.0	0.0	0.0	0.0	0.0
Private sector	0.0	1.2	0.2	23.1	56.0	10.8
Private hospital/clinic	0.0	0.5	0.2	0.0	0.0	0.4
Private doctor	0.0	0.1	0.0	0.0	0.0	0.1
Pharmacy	0.0	0.6	0.0	23.1	56.0	10.4
Other source	0.0	0.0	0.0	0.0	0.4	0.1
Friend/relative	0.0	0.0	0.0	0.0	0.4	0.1
Other	0.0	0.1	0.0	0.0	0.7	0.2
Don't know	0.0	0.0	0.0	0.0	1.7	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	64	1,421	98	149	302	2,045

Note: Total includes users of implants, female condoms, and other modern methods but excludes users of the lactational amenorrhea method (LAM).

¹ Includes urban and rural health centers and former polyclinics

Table 7.6 Informed choice

Among current users of modern methods age 15-49 who started the last episode of use within the 5 years preceding the survey, percentage who were informed about possible side effects or problems of that method, percentage who were informed about what to do if they experienced side effects, percentage who were informed about other methods they could use, and percentage who received all three types of information, according to method and initial source, Tajikistan DHS 2017

Method/source	Among women who started last episode of modern contraceptive method within 5 years preceding the survey:				Number of women
	Percentage who were informed about side effects or problems of method used	Percentage who were informed about what to do if they experienced side effects	Percentage who were informed by a health or family planning worker of other methods that could be used	Percentage who received all three types of information (Method Information Index)	
Method					
Female sterilization	(71.8)	(59.6)	(77.4)	(59.2)	33
IUD	85.9	81.3	81.3	73.2	897
Injectables	76.0	72.2	87.4	68.0	85
Implants	*	*	*	*	9
Pill	80.0	71.6	81.1	69.8	127
Initial source of method¹					
Public sector	84.5	79.6	81.8	72.6	1,104
Government hospital	79.0	74.6	84.7	67.9	158
Maternity home	87.6	84.5	82.5	76.7	220
Health center ²	86.6	81.0	82.1	74.0	603
Reproductive health center	77.5	71.6	79.9	66.2	71
Health house	(71.0)	(68.3)	(67.0)	(60.1)	43
Other public sector	*	*	*	*	9
Private medical sector	73.1	58.8	78.6	56.3	43
Private hospital/clinic	*	*	*	*	7
Pharmacy	(70.3)	(55.3)	(74.3)	(52.3)	36
Other	*	*	*	*	4
Total	84.1	78.9	81.7	72.1	1,151

Note: Table includes users of only the methods listed individually. 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.

¹ Source at start of current episode of use

² Includes urban and rural health centers and former polyclinics

Table 7.7 Twelve-month contraceptive discontinuation rates

Among episodes of contraceptive use experienced within the 5 years preceding the survey, percentage of episodes discontinued within 12 months, according to reason for discontinuation and specific method, Tajikistan DHS 2017

Method	Reason for discontinuation								Switched to another method ⁴	Number of episodes of use ⁵
	Method failure	Desire to become pregnant	Other fertility-related reasons ¹	Side effects/health concerns	Wanted more effective method	Other method-related reasons ²	Other reasons	Any reason ³		
IUD	0.7	2.6	3.4	8.7	0.2	0.4	1.0	17.0	1.0	1,288
Injectables	(1.1)	(5.4)	(7.4)	(21.3)	(5.4)	(4.9)	(1.3)	(47.0)	(2.4)	142
Pill	(0.9)	(12.9)	(21.3)	(13.5)	(1.9)	(3.6)	(0.6)	(54.7)	(3.8)	264
Male condom	1.7	7.2	9.9	1.6	6.6	3.8	4.7	35.6	2.5	403
Withdrawal	(3.9)	(4.5)	(6.0)	(0.0)	(6.3)	(1.5)	(6.0)	(28.1)	(8.5)	151
Other ⁶	(1.7)	(18.4)	(3.1)	(9.1)	(6.1)	(1.0)	(0.9)	(40.2)	(6.5)	240
All methods	1.2	6.2	6.7	8.2	2.6	1.6	1.9	28.3	2.6	2,488

Note: Figures are based on life table calculations using information on episodes of use that occurred 3-62 months preceding the survey. Figures in parentheses are based on 125-249 unweighted cases.

¹ Includes infrequent sex/husband away, difficult to get pregnant/menopausal, and marital dissolution/separation

² Includes lack of access/too far, costs too much, and inconvenient to use

³ Reasons for discontinuation are mutually exclusive and add to the total given in this column.

⁴ The episodes of use included in this column are a subset of the discontinued episodes included in the discontinuation rate. A woman is considered to have switched to another method if she used a different method in the month following discontinuation or if she gave "wanted a more effective method" as the reason for discontinuation and started another method within 2 months of discontinuation.

⁵ Number of episodes of use includes both episodes of use that were discontinued during the period of observation and episodes of use that were not discontinued during the period of observation.

⁶ Includes LAM, implants, and other methods

Table 7.8 Reasons for discontinuation

Percent distribution of discontinuations of contraceptive methods in the 5 years preceding the survey by main reason stated for discontinuation, according to specific method, Tajikistan DHS 2017

Reason	IUD	Injectables	Pill	Male condom	Withdrawal	Other ¹	All methods
Became pregnant while using	2.8	2.1	5.8	6.0	21.0	10.3	5.7
Wanted to become pregnant	31.4	16.0	26.5	37.3	32.6	50.8	32.6
Husband/partner disapproved	3.4	1.9	1.7	9.3	13.6	0.0	4.4
Wanted a more effective method	1.8	12.0	2.7	14.2	12.4	17.2	7.2
Side effects/health concerns	42.1	41.6	22.1	2.7	0.0	14.2	26.3
Lack of access/too far	0.0	1.9	2.0	0.0	0.0	1.4	0.5
Cost too much	0.5	4.5	2.8	1.1	0.0	0.0	1.1
Inconvenient to use	1.7	0.3	1.6	5.6	2.7	0.0	2.2
Up to God/fatalistic	0.0	0.0	0.0	0.2	0.9	0.0	0.1
Difficult to get pregnant/ menopausal	0.6	0.4	0.0	0.2	0.0	0.0	0.3
Infrequent sex/husband away	13.1	19.5	34.4	21.5	16.8	2.6	17.7
Marital dissolution/separation	0.4	0.0	0.4	0.6	0.0	0.0	0.3
Other	1.9	0.0	0.0	1.3	0.0	2.4	1.3
Don't know	0.3	0.0	0.0	0.0	0.0	1.1	0.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of discontinuations	493	76	162	221	72	119	1,158

Note: Total includes discontinuations of male sterilization, implants, and rhythm that are not shown separately.

¹ Includes LAM, implants, and other methods

Table 7.9.1 Need and demand for family planning among currently married women

Percentage of currently married women age 15-49 with unmet need for family planning, percentage with met need for family planning, total demand for family planning, and percentage of the demand for family planning that is satisfied, by background characteristics, Tajikistan DHS 2017

Background characteristic	Unmet need for family planning			Met need for family planning (currently using)			Total demand for family planning ¹			Number of women	Percentage of demand satisfied ²	Percentage of demand satisfied by modern methods ³
	For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total			
Age												
15-19	11.2	0.0	11.2	2.9	0.0	2.9	14.1	0.0	14.1	240	20.5	17.6
20-24	19.5	3.6	23.0	11.2	4.4	15.6	30.6	8.0	38.6	1,557	40.3	37.9
25-29	17.7	9.0	26.6	16.8	11.9	28.7	34.4	20.9	55.3	1,688	51.8	49.1
30-34	10.9	18.0	28.9	11.2	23.8	35.0	22.1	41.8	63.9	1,374	54.8	50.7
35-39	5.3	16.2	21.5	5.9	39.7	45.6	11.2	55.9	67.1	1,089	68.0	62.6
40-44	4.2	15.1	19.3	2.8	35.3	38.1	7.0	50.4	57.4	953	66.4	60.9
45-49	0.6	12.6	13.2	0.4	22.4	22.9	1.0	35.0	36.1	847	63.5	56.8
Residence												
Urban	11.2	10.3	21.5	12.1	21.8	33.9	23.3	32.1	55.4	1,803	61.2	57.0
Rural	11.4	11.7	23.1	8.3	19.6	27.9	19.7	31.3	51.0	5,944	54.7	50.6
Region												
Dushanbe	13.3	8.2	21.5	11.8	18.1	29.9	25.0	26.3	51.3	585	58.2	57.5
GBAO	10.7	5.4	16.2	17.3	19.2	36.5	28.1	24.6	52.7	144	69.3	67.6
Sughd	7.8	11.3	19.1	11.0	29.0	40.0	18.8	40.3	59.1	2,533	67.6	58.0
DRS	15.1	13.5	28.6	8.5	16.8	25.3	23.6	30.3	54.0	1,709	46.9	45.9
Khatlon	11.9	11.1	23.0	7.0	14.4	21.4	18.9	25.5	44.4	2,776	48.2	47.4
FTF districts	12.0	12.0	24.0	7.1	11.6	18.6	19.1	23.6	42.7	1,548	43.7	42.8
Education												
None/primary	14.4	12.8	27.2	7.6	12.2	19.8	22.0	25.0	47.0	468	42.1	42.1
General basic	12.7	12.6	25.3	9.4	19.4	28.9	22.2	32.0	54.2	2,532	53.3	49.4
General secondary	10.1	11.2	21.3	7.8	21.4	29.2	17.9	32.6	50.5	3,442	57.8	53.2
Professional primary/ middle	10.0	9.4	19.4	10.1	22.1	32.2	20.1	31.5	51.6	626	62.4	58.8
Higher	11.8	8.5	20.4	15.5	19.5	35.1	27.4	28.1	55.5	680	63.2	57.2
Wealth quintile												
Lowest	11.7	13.5	25.2	6.3	20.0	26.4	18.0	33.5	51.5	1,469	51.2	49.4
Second	10.7	12.2	22.9	7.9	17.5	25.4	18.7	29.6	48.3	1,508	52.6	49.0
Middle	12.5	12.4	24.9	9.0	19.1	28.1	21.5	31.5	53.0	1,606	53.0	49.8
Fourth	11.1	8.7	19.9	10.9	22.3	33.3	22.1	31.1	53.2	1,668	62.6	54.8
Highest	10.7	10.4	21.0	11.5	21.3	32.9	22.2	31.7	53.9	1,496	61.0	57.1
Total	11.4	11.4	22.7	9.2	20.1	29.3	20.5	31.5	52.0	7,747	56.3	52.1

Note: Numbers in this table correspond to the revised definition of unmet need described in Bradley et al. 2012.

¹ Total demand is the sum of unmet need and met need.

² Percentage of demand satisfied is met need divided by total demand.

³ Modern methods include female sterilization, male sterilization, pill, IUD, injectables, implants, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods.

Table 7.9.2 Need and demand for family planning for all women

Percentage of all women age 15-49 with unmet need for family planning, percentage with met need for family planning, total demand for family planning, and percentage of the demand for family planning that is satisfied, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Unmet need for family planning			Met need for family planning (currently using)			Total demand for family planning ¹			Number of women	Percentage of demand satisfied ²	Percentage of demand satisfied by modern methods ³
	For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total			
Age												
15-19	1.4	0.0	1.4	0.4	0.0	0.4	1.8	0.0	1.8	1,911	20.5	17.6
20-24	14.9	2.7	17.7	8.6	3.4	12.0	23.5	6.1	29.7	2,031	40.4	38.0
25-29	15.6	7.9	23.5	14.9	10.7	25.5	30.4	18.5	49.0	1,921	52.1	49.3
30-34	9.7	16.0	25.7	10.0	21.1	31.1	19.6	37.1	56.7	1,551	54.8	50.7
35-39	4.6	14.4	19.0	5.2	35.1	40.3	9.9	49.4	59.3	1,240	67.9	62.6
40-44	3.9	13.5	17.3	2.5	31.5	34.0	6.3	45.0	51.3	1,068	66.3	60.7
45-49	0.5	10.7	11.2	0.4	19.4	19.8	0.9	30.1	31.0	996	63.8	57.3
Residence												
Urban	7.5	6.9	14.4	8.2	14.7	22.9	15.7	21.6	37.3	2,694	61.4	57.1
Rural	8.5	8.7	17.2	6.2	14.6	20.8	14.7	23.3	38.0	8,024	54.7	50.6
Region												
Dushanbe	8.1	5.0	13.1	7.3	11.3	18.6	15.4	16.3	31.7	955	58.5	57.9
GBAO	7.4	3.8	11.2	12.0	13.4	25.4	19.4	17.2	36.6	209	69.5	67.8
Sughd	6.0	8.7	14.8	8.5	22.4	30.9	14.5	31.2	45.7	3,292	67.7	58.1
DRS	11.1	9.9	21.0	6.2	12.4	18.6	17.3	22.3	39.6	2,342	47.1	46.0
Khatlon	8.5	7.9	16.4	5.0	10.2	15.2	13.5	18.1	31.6	3,920	48.2	47.4
FTF districts	8.9	8.9	17.8	5.3	8.6	13.9	14.2	17.5	31.7	2,096	43.8	42.9
Education												
None/primary	10.9	9.7	20.6	5.8	9.2	15.0	16.7	18.9	35.6	619	42.2	42.2
General basic	9.0	8.8	17.8	6.6	13.7	20.3	15.6	22.5	38.1	3,615	53.3	49.5
General secondary	7.5	8.4	15.9	5.9	16.0	21.8	13.4	24.4	37.8	4,624	57.8	53.2
Professional primary/ middle	7.3	6.8	14.1	7.4	16.1	23.5	14.6	23.0	37.6	860	62.5	58.9
Higher	8.1	5.8	13.9	10.8	13.4	24.2	18.8	19.2	38.0	1,000	63.6	57.6
Wealth quintile												
Lowest	8.2	9.4	17.6	4.4	14.0	18.4	12.6	23.4	36.0	2,113	51.2	49.4
Second	7.8	8.8	16.6	5.7	12.6	18.3	13.5	21.4	34.9	2,101	52.4	48.9
Middle	9.5	9.5	19.0	6.9	14.6	21.5	16.4	24.1	40.5	2,109	53.1	49.9
Fourth	8.6	6.8	15.4	8.5	17.5	26.0	17.2	24.2	41.4	2,155	62.8	55.0
Highest	7.1	6.9	14.1	7.8	14.3	22.1	15.0	21.2	36.2	2,240	61.2	57.3
Total	8.2	8.2	16.5	6.7	14.6	21.3	14.9	22.9	37.8	10,718	56.4	52.2

Note: Numbers in this table correspond to the revised definition of unmet need described in Bradley et al. 2012.

¹ Total demand is the sum of unmet need and met need.

² Percentage of demand satisfied is met need divided by total demand.

³ Modern methods include female sterilization, male sterilization, pill, IUD, injectables, implants, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods.

Table 7.10 Decision making about family planning

Among currently married women age 15-49 who are current users of family planning, percent distribution by who made the decision to use family planning, and among currently married women who are not currently using family planning, percent distribution by who made the decision not to use family planning, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among currently married women who are current users of family planning					Number of women	Among currently married women who are not currently using family planning				
	Mainly wife	Wife and husband jointly	Mainly husband	Other/ don't know/ missing	Total		Mainly wife	Wife and husband jointly	Mainly husband	Total	Number of women
Age											
15-19	*	*	*	*	100.0	7	24.2	54.3	21.5	100.0	160
20-24	20.1	58.1	21.0	0.9	100.0	242	30.0	47.7	22.3	100.0	967
25-29	23.4	57.4	19.0	0.3	100.0	484	29.9	44.3	25.8	100.0	963
30-34	25.9	58.6	15.5	0.0	100.0	481	36.5	37.7	25.8	100.0	795
35-39	28.7	57.8	13.3	0.2	100.0	497	40.5	36.8	22.6	100.0	563
40-44	24.6	56.2	19.2	0.0	100.0	363	41.4	39.1	19.4	100.0	587
45-49	29.2	57.1	12.0	1.7	100.0	194	43.7	40.4	15.9	100.0	651
Number of living children											
0	*	*	*	*	100.0	2	31.3	52.6	16.1	100.0	502
1-2	23.9	59.0	16.9	0.3	100.0	633	32.4	44.1	23.5	100.0	1,800
3-4	26.7	57.2	15.9	0.2	100.0	1,356	38.0	38.9	23.0	100.0	1,836
5+	23.4	55.7	20.4	0.5	100.0	277	41.0	36.5	22.5	100.0	549
Residence											
Urban	22.5	64.7	12.3	0.4	100.0	611	35.6	45.7	18.7	100.0	1,035
Rural	26.6	54.8	18.3	0.3	100.0	1,657	35.5	41.1	23.4	100.0	3,652
Region											
Dushanbe	16.3	72.6	11.2	0.0	100.0	175	24.6	52.6	22.8	100.0	362
GBAO	44.3	50.5	5.2	0.0	100.0	53	38.7	52.2	9.1	100.0	82
Sughd	21.0	69.1	9.4	0.5	100.0	1,013	42.7	44.4	12.9	100.0	1,283
DRS	17.9	50.8	31.2	0.2	100.0	433	27.6	35.6	36.8	100.0	1,079
Khatlon	39.6	38.7	21.4	0.3	100.0	595	37.0	41.8	21.1	100.0	1,881
FTF districts	47.5	29.4	22.4	0.7	100.0	289	43.3	32.7	24.0	100.0	1,090
Education											
None/primary	34.2	38.7	27.0	0.0	100.0	93	33.7	36.4	30.0	100.0	320
General basic	25.8	51.6	22.3	0.3	100.0	731	34.2	39.5	26.3	100.0	1,523
General secondary	24.8	60.5	14.3	0.3	100.0	1,005	35.9	43.2	20.9	100.0	2,115
Professional primary/ middle	30.0	59.3	9.8	0.9	100.0	202	38.7	49.1	12.2	100.0	348
Higher	20.0	68.1	11.5	0.3	100.0	238	37.2	44.9	17.9	100.0	381
Wealth quintile											
Lowest	32.6	51.5	15.9	0.0	100.0	387	38.3	40.6	21.1	100.0	957
Second	26.4	53.5	19.9	0.2	100.0	383	35.9	39.5	24.6	100.0	959
Middle	25.1	55.8	19.0	0.0	100.0	451	35.7	40.0	24.3	100.0	969
Fourth	23.1	59.1	16.8	1.0	100.0	555	32.4	46.0	21.6	100.0	929
Highest	22.2	64.8	12.7	0.3	100.0	491	35.1	44.8	20.1	100.0	873
Total	25.5	57.4	16.7	0.3	100.0	2,268	35.5	42.1	22.4	100.0	4,687

Note: Table excludes women who are currently pregnant. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 7.11 Future use of contraception

Percent distribution of currently married women age 15-49 who are not using a contraceptive method by intention to use in the future, according to number of living children, Tajikistan DHS 2017

Intention to use in the future	Number of living children ¹					Total
	0	1	2	3	4+	
Intends to use	11.1	27.8	33.7	33.9	29.1	29.4
Unsure	38.6	35.3	26.3	22.2	16.8	25.6
Does not intend to use	50.4	36.8	40.1	43.9	54.1	45.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	502	1,004	1,285	1,233	1,454	5,479

¹ Includes current pregnancy

Table 7.12 Exposure to family planning messages

Percentage of women age 15-49 who heard or saw a family planning message on radio, on television, in a newspaper or magazine, on a mobile phone, or from the Caravan of Health or the Program on methods of contraception in the past few months and percentage of women with no exposure to any of the five sources, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Radio	Television	Newspaper/ magazine	Mobile phone	Caravan of Health/ Program on Methods of Contraception	None of these five media sources	Number of women
Age							
15-19	6.9	33.5	16.3	1.6	2.5	63.9	1,911
20-24	11.7	44.7	18.7	2.4	12.0	47.0	2,031
25-29	11.9	43.4	14.0	1.9	11.2	48.8	1,921
30-34	11.2	42.6	13.3	2.6	11.1	49.9	1,551
35-39	12.5	47.7	19.0	2.7	9.0	45.2	1,240
40-44	16.8	56.0	25.5	3.3	9.8	37.4	1,068
45-49	16.5	55.7	26.5	2.7	11.4	37.2	996
Residence							
Urban	15.2	51.8	26.2	5.1	8.1	42.3	2,694
Rural	10.7	42.3	15.3	1.4	9.9	50.8	8,024
Region							
Dushanbe	24.1	48.4	28.0	10.2	3.5	48.1	955
GBAO	12.5	53.2	30.9	2.9	4.9	42.7	209
Sughd	10.9	50.3	21.8	1.0	0.7	47.3	3,292
DRS	9.4	31.5	10.8	1.3	2.3	65.3	2,342
Khatlon	11.0	46.5	16.2	2.1	22.6	40.4	3,920
FTF districts	11.2	35.3	9.6	2.2	19.6	53.0	2,096
Education							
None/primary	8.1	35.4	5.1	1.3	13.6	59.6	619
General basic	8.2	35.7	11.0	1.2	7.6	58.1	3,615
General secondary	11.3	47.7	16.4	1.8	9.7	45.3	4,624
Professional primary/ middle	19.1	58.5	39.6	4.8	11.9	33.8	860
Higher	23.4	56.9	41.0	7.5	10.1	36.1	1,000
Wealth quintile							
Lowest	7.0	35.4	10.2	0.7	10.5	56.7	2,113
Second	10.2	41.5	15.0	1.3	11.4	50.7	2,101
Middle	10.7	44.2	16.3	1.7	10.5	48.7	2,109
Fourth	13.4	49.8	19.6	1.8	8.2	44.9	2,155
Highest	17.5	51.9	28.5	6.0	6.8	42.9	2,240
Total	11.9	44.7	18.1	2.3	9.4	48.7	10,718

Table 7.13 Contact of nonusers with family planning providers

Among women age 15-49 who are not using contraception, percentage who during the past 12 months were visited by a fieldworker who discussed family planning, percentage who visited a health facility and discussed family planning, percentage who visited a health facility but did not discuss family planning, and percentage who did not discuss family planning either with a fieldworker or at a health facility, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of women who were visited by fieldworker who discussed family planning	Percentage of women who visited a health facility in the past 12 months and who:		Percentage of women who did not discuss family planning either with a fieldworker or at a health facility	Number of women
		Discussed family planning	Did not discuss family planning		
Age					
15-19	5.7	7.6	19.2	90.0	1,904
20-24	29.6	38.9	27.8	55.6	1,788
25-29	33.4	43.6	32.1	50.9	1,430
30-34	26.8	37.2	30.0	56.9	1,069
35-39	24.1	30.4	29.7	62.8	740
40-44	21.4	26.5	25.8	66.3	705
45-49	20.2	24.6	27.1	68.1	799
Residence					
Urban	25.1	32.7	30.2	62.0	2,078
Rural	21.6	28.2	25.7	66.6	6,358
Region					
Dushanbe	32.1	35.4	35.1	58.1	778
GBAO	29.4	30.0	25.0	58.1	156
Sughd	20.2	29.9	25.4	66.6	2,274
DRS	12.2	19.3	26.9	77.6	1,905
Khatlon	27.3	33.1	25.9	59.8	3,323
FTF districts	27.4	33.4	18.7	61.2	1,806
Education					
None/primary	27.6	30.4	28.9	63.2	526
General basic	20.2	27.1	26.1	68.2	2,880
General secondary	22.3	28.9	25.7	65.5	3,614
Professional primary/ middle	26.9	37.7	29.3	56.9	658
Higher	24.7	31.3	31.1	63.6	758
Wealth quintile					
Lowest	17.8	23.0	25.0	71.5	1,724
Second	21.7	27.6	27.8	66.5	1,716
Middle	24.5	31.9	23.5	63.7	1,657
Fourth	23.9	31.2	28.3	63.3	1,595
Highest	24.5	32.9	29.4	62.0	1,744
Total	22.5	29.3	26.8	65.4	8,436

Key Findings

- **Abortion rate:** The total abortion rate (TAR) is 0.5 abortions per woman.
- **Trends:** The TAR at the time of the 2012 TjDHS was also 0.5 abortions per woman, indicating the stability of abortion rates in Tajikistan.
- **Differences in abortion rates:** The TAR is similar in urban and rural areas (0.4 and 0.5 abortions per woman, respectively) and varies from 0.2 abortions per woman in GBAO to 0.5 abortions per woman in DRS and Khatlon.
- **Use of contraception before abortion:** Contraceptive failures account for only 5% of induced abortions.
- **Reason for abortion:** The reasons women cited most often as motivating their decision to have an induced abortion were concerns about their health (37%) and the fact that the pregnancy was unwanted (36%).

Abortion is legally available as a means of fertility regulation in Tajikistan. In addition to providing information on live births, the pregnancy history in the 2017 TjDHS obtained information on any other pregnancies respondents may have had that ended in a miscarriage, induced abortion, or stillbirth. The information on induced abortion collected in the pregnancy histories is employed in this chapter to look at women’s lifetime experience with abortion and to investigate the current levels and trends in abortion in Tajikistan. In addition, the chapter explores the relationship between contraceptive use and abortion and the main reason women had for seeking an abortion.

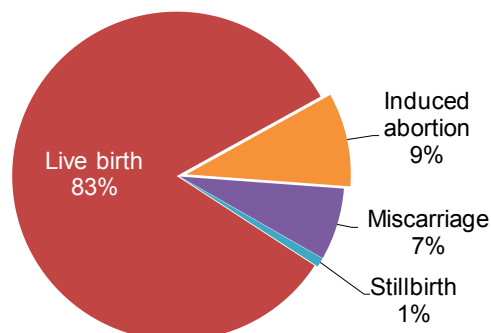
8.1 PREGNANCIES ENDING IN INDUCED ABORTION

More than 8 in 10 pregnancies (83%) occurring during the 3 years before the survey resulted in a live birth, 9% ended in an abortion, 7% ended in a miscarriage, and less than 1% ended in a stillbirth (Table 8.1 and Figure 8.1). The proportion of pregnancies ending in an induced abortion increases with a woman’s age at the time her pregnancy ended, from 1% among women under age 20 to 27% among women age 35-44.

Trends: The percentage of pregnancies ending in an induced abortion was 9% in both the 2012 and 2017 TjDHS surveys.

Figure 8.1 Pregnancy outcome

Percent distribution of pregnancies in the 3 years before the survey according to outcome

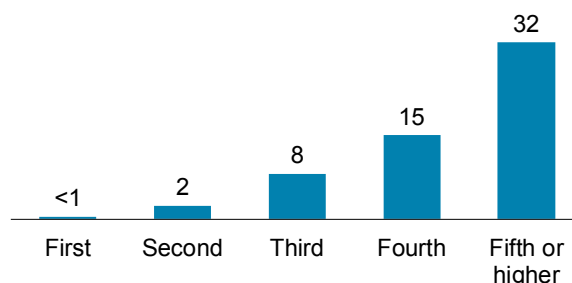


Patterns by background characteristics

- Pregnancy order is strongly related to pregnancy outcomes; the percentage of pregnancies ending in an abortion increased from less than 1% among first pregnancies to 32% among fifth- or higher-order pregnancies (**Figure 8.2**).
- Pregnancies among urban women were only slightly more likely to end in an induced abortion than pregnancies among rural women (10% versus 9%).
- The proportion of pregnancies ending in an induced abortion was highest in Dushanbe (11%) and lowest in GBAO (6%).

Figure 8.2 Induced abortion by pregnancy order

Percentage of pregnancies in the 3 years before the survey ending in induced abortions by pregnancy order



8.2 LIFETIME EXPERIENCE WITH INDUCED ABORTION

Table 8.2 presents several indicators related to women's lifetime experience with abortion. Overall, 11% of Tajik women age 15-49 have ever had an induced abortion. The majority of women who have had an induced abortion report having only one abortion (69%); 28% had two to three induced abortions, and 3% had four or more abortions. Among women who ever had an abortion, the mean number of abortions per woman is 1.4.

Patterns by background characteristics

- The proportion of women who have ever had an induced abortion increases with number of living children; 25% of women with three or more living children have had an abortion, as compared with less than 1% of women who do not have a child.
- GBAO has the lowest proportion of women ever having had an abortion (7%). The highest proportions are found in Sughd (13%) and Khatlon (12%).

8.3 RATES OF INDUCED ABORTION

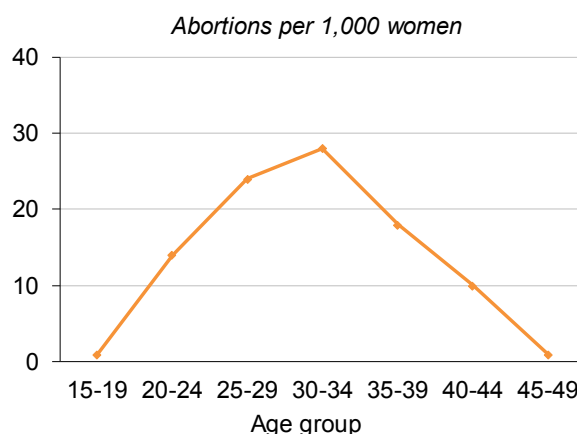
Total abortion rate

The number of abortions a woman would have by the end of her childbearing years if she had abortions at the current age-specific abortion rates. Age-specific abortion rates are calculated for the 3 years before the survey, based on detailed pregnancy histories provided by women.

Sample: Women age 15-49

The total abortion rate (TAR) in Tajikistan is 0.5 abortions per woman (Table 8.3). This means that the average number of abortions a Tajik woman will have at the current age-specific abortion rate is equivalent to 13% of the average number of births (3.8 births). The rate at which women have abortions increases with age, from 1 abortion per 1,000 women in the 15-19 age group to a peak of 28 abortions per 1,000 women in the 30-34 age group (Figure 8.3).

Figure 8.3 Age-specific abortion rates



Trends: The TAR in 2017 is identical to the rate reported in 2012 (0.5 abortions per woman) (Table 8.4).

Patterns by background characteristics

- The abortion rate is similar in urban and rural areas (0.4 and 0.5 abortions per woman, respectively) (Table 8.5).
- The TAR varies from 0.2 abortions per woman in GBAO to 0.5 abortions per woman in DRS and Khatlon.

8.4 USE OF CONTRACEPTION BEFORE ABORTION

Table 8.6 uses information from the reproductive event calendar in the 2017 TjDHS to look at use of contraception at the time of conception for all pregnancies in the 3 years prior to the survey. The results show that, in the vast majority of induced abortions (95%), women were not using contraception at the time they became pregnant. Improving access to contraception for women who are at risk of an unwanted pregnancy is clearly important in reducing the number of induced abortions in Tajikistan.

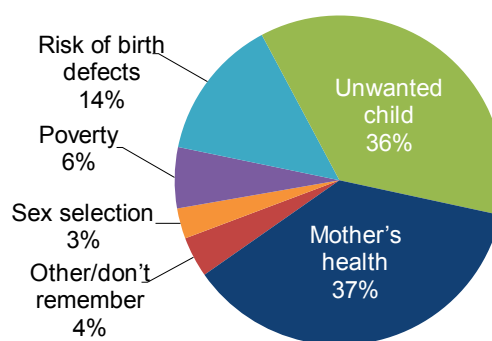
The information in Table 8.6 also contributes to an understanding of the extent to which contraceptive failures are contributing to induced abortion. Overall, 1 in 21 induced abortions were the outcome of a pregnancy that occurred at the time a woman was using contraception, with most of these abortions occurring among women using modern methods. Improved counseling for contraceptive users is needed to reduce the number of abortions related to contraceptive failures.

8.5 REASONS FOR ABORTION

An understanding of the reasons women have for deciding to undergo an abortion is helpful in planning programs to reduce induced abortions. Table 8.7 presents the percent distribution of induced abortions in the 3 years prior to the 2017 TjDHS according to the reason women reported as most important in deciding to have the abortion. The reasons women cited most often were concerns about their health (37%) and the fact that the pregnancy was unwanted (36%) (Figure 8.4). Women reported risk of birth defects as the most important reason for 14% of pregnancy terminations. Notably, sex selection was the most important reason in only 3% of pregnancy terminations.

Figure 8.4 Reason for abortion

Percent distribution of abortions in the 3 years prior to the survey according to main reason for abortion



LIST OF TABLES

For more information on abortion, see the following tables:

- **Table 8.1** **Pregnancy outcome by background characteristics**
- **Table 8.2** **Lifetime experience with induced abortion**
- **Table 8.3** **Induced abortion rates**
- **Table 8.4** **Trends in age-specific and total abortion rates**
- **Table 8.5** **Induced abortion by background characteristics**
- **Table 8.6** **Use of contraception before pregnancy**
- **Table 8.7** **Reason for abortion**

Table 8.1 Pregnancy outcome by background characteristics

Percent distribution of pregnancies ending in the 3 years preceding the survey by type of outcome, according background characteristics, Tajikistan DHS 2017

Background characteristic	Pregnancy outcome				Total	Number of pregnancies
	Live birth	Induced abortion	Miscarriage	Stillbirth		
Age at pregnancy outcome						
<20	89.9	1.0	7.6	1.5	100.0	359
20-24	88.7	4.2	6.0	1.1	100.0	1,961
25-34	79.7	12.1	7.7	0.5	100.0	2,032
35-44	62.4	27.0	9.6	0.9	100.0	368
45-49	*	*	*	*	100.0	5
Pregnancy order						
First	92.4	0.4	5.3	1.9	100.0	1,191
Second	90.0	2.4	7.1	0.5	100.0	1,221
Third	84.4	8.1	7.0	0.5	100.0	939
Fourth	75.9	15.0	8.7	0.5	100.0	663
Fifth or higher	58.7	31.6	9.0	0.6	100.0	712
Residence						
Urban	81.1	10.4	7.6	0.9	100.0	943
Rural	83.2	8.9	7.0	0.9	100.0	3,783
Region						
Dushanbe	81.1	11.2	6.4	1.2	100.0	283
GBAO	81.4	5.5	11.4	1.7	100.0	78
Sughd	82.7	8.2	7.9	1.2	100.0	1,356
DRS	84.3	9.6	5.2	0.8	100.0	1,122
Khatlon	82.2	9.5	7.7	0.5	100.0	1,886
FTF districts	82.1	10.4	6.8	0.7	100.0	1,034
Education						
None/primary	86.5	8.0	5.5	0.0	100.0	349
General basic	81.9	10.7	6.6	0.7	100.0	1,737
General secondary	83.5	8.6	7.2	0.7	100.0	1,899
Professional primary/middle	84.0	6.6	6.6	2.9	100.0	357
Higher	78.6	8.7	11.5	1.2	100.0	382
Wealth quintile						
Lowest	85.1	7.7	6.3	1.0	100.0	859
Second	82.4	8.6	8.3	0.7	100.0	979
Middle	84.3	9.6	5.7	0.4	100.0	1,052
Fourth	80.8	10.7	7.9	0.6	100.0	1,055
Highest	81.4	9.1	7.7	1.8	100.0	781
Total	82.8	9.2	7.1	0.9	100.0	4,725

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

Table 8.2 Lifetime experience with induced abortion

Percentage of women age 15-49 who have had at least one induced abortion, and among these women, percent distribution by number of abortions and the mean number of abortions, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of women with an induced abortion	Number of women	Among women who had an abortion, percent distribution by number of abortions				Total	Mean number of abortions	Number of women with abortions
			1	2-3	4-5	6+			
Age									
15-19	0.0	1,911	*	*	*	*	100.0	*	0
20-24	3.1	2,031	97.7	2.3	0.0	0.0	100.0	1.0	62
25-34	13.0	3,472	77.0	20.8	2.2	0.0	100.0	1.3	450
35-49	21.3	3,304	61.5	34.9	3.1	0.5	100.0	1.5	703
Number of living children									
0	0.3	3,215	*	*	*	*	100.0	*	10
1	4.4	1,305	74.7	17.2	7.2	0.9	100.0	1.5	57
2	15.0	3,952	74.6	22.9	2.3	0.2	100.0	1.4	592
3 or more	24.8	2,246	62.3	34.9	2.5	0.4	100.0	1.5	557
Marital status									
Never married	0.1	2,388	*	*	*	*	100.0	*	2
Currently married	15.0	7,747	69.2	27.7	2.7	0.3	100.0	1.4	1,159
Formerly married	9.4	583	68.0	32.0	0.0	0.0	100.0	1.4	55
Residence									
Urban	12.3	2,694	62.8	34.0	2.8	0.3	100.0	1.5	330
Rural	11.0	8,024	71.4	25.7	2.5	0.3	100.0	1.4	885
Region									
Dushanbe	10.4	955	63.1	35.2	0.6	1.2	100.0	1.5	99
GBAO	6.6	209	79.6	18.9	1.6	0.0	100.0	1.3	14
Sughd	12.5	3,292	69.9	27.2	2.9	0.0	100.0	1.4	411
DRS	10.2	2,342	75.9	22.7	1.3	0.0	100.0	1.3	238
Khatlon	11.6	3,920	65.7	30.2	3.5	0.6	100.0	1.5	454
FTF districts									
	12.0	2,096	69.5	25.8	4.2	0.5	100.0	1.4	251
Education									
None/primary	7.8	619	(83.4)	(16.6)	(0.0)	(0.0)	100.0	(1.2)	48
General basic	11.2	3,615	66.5	29.2	3.6	0.7	100.0	1.5	406
General secondary	11.8	4,624	69.4	28.8	1.8	0.1	100.0	1.4	548
Professional primary/middle	12.8	860	69.2	24.1	6.6	0.0	100.0	1.5	110
Higher	10.4	1,000	71.0	28.4	0.0	0.6	100.0	1.4	104
Wealth quintile									
Lowest	10.1	2,113	73.5	24.5	2.0	0.0	100.0	1.4	212
Second	10.4	2,101	73.9	23.7	1.7	0.6	100.0	1.4	219
Middle	11.0	2,109	69.7	26.5	3.2	0.6	100.0	1.5	233
Fourth	13.3	2,155	65.4	31.0	3.6	0.0	100.0	1.5	287
Highest	11.8	2,240	65.1	32.3	2.2	0.4	100.0	1.5	264
Total	11.3	10,718	69.1	28.0	2.6	0.3	100.0	1.4	1,215

Note: Currently married includes respondents in a consensual union (living together). Formerly married includes divorced, separated, and widowed respondents. 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 8.3 Induced abortion rates

Age-specific and total induced abortion rates, and general abortion rates, for the 3 years preceding the survey, by residence, Tajikistan DHS 2017

Age group	Residence		Total
	Urban	Rural	
15-19	0	1	1
20-24	9	15	14
25-29	22	24	24
30-34	28	28	28
35-39	15	19	18
40-44	10	11	10
45-49	[3]	[1]	[1]
TAR (15-49)	0.4	0.5	0.5
GAR	14	16	15

Note: Age-specific induced abortion rates are per 1,000 women. Rates for the 45-49 age group may be slightly biased due to truncation and are therefore displayed in brackets. Rates are for the period 1-36 months before the survey.

TAR: Total abortion rate, expressed per woman

GAR: General abortion rate, expressed per 1,000 women age 15-44

Table 8.4 Trends in age-specific and total abortion rates

Age-specific and total abortion rates for the 3 years preceding the 2012 and 2017 TjDHS surveys, Tajikistan DHS 2017

Age group	2012	2017
	TjDHS	TjDHS
15-19	1	1
20-24	11	14
25-29	21	24
30-34	23	28
35-39	26	18
40-44	9	10
45-49	[3]	[1]
TAR	0.5	0.5

Note: Age-specific abortion rates are per 1,000 women. Rates for the 45-49 age group may be slightly biased due to truncation and are therefore displayed in brackets. Rates are for the period 1-36 months prior to the survey.

TAR: Total abortion rate, expressed per woman

Table 8.5 Induced abortion by background characteristics

Total induced abortion rates for the 3 years preceding the survey and mean number of abortions among women age 40-49, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Total abortion rate	Mean number of abortions among women age 40-49
Residence		
Urban	0.4	0.4
Rural	0.5	0.3
Region		
Dushanbe	0.4	0.3
GBAO	0.2	0.2
Sughd	0.4	0.4
DRS	0.5	0.2
Khatlon	0.5	0.4
FTF districts	0.5	0.3
Education		
None/primary	0.4	0.0
General basic	0.6	0.4
General secondary	0.5	0.3
Professional primary/middle	0.4	0.4
Higher	0.4	0.3
Wealth quintile		
Lowest	0.4	0.2
Second	0.5	0.3
Middle	0.5	0.4
Fourth	0.6	0.5
Highest	0.4	0.4
Total	0.5	0.3

Table 8.6 Use of contraception before pregnancy

Percent distribution of pregnancy outcomes in the 3 years preceding the survey by contraceptive method used at the time of conception, Tajikistan DHS 2017

Method	Result of the pregnancy			Total
	Live birth	Induced abortion	Miscarriage	
No method used	97.4	95.3	98.1	97.3
Any method	2.6	4.7	1.9	2.7
Any modern method	2.1	4.0	0.9	2.2
Pill	0.2	0.9	0.5	0.3
IUD	0.8	1.4	0.5	0.8
Male condom	0.6	1.2	0.0	0.6
Lactational amenorrhea (LAM)	0.5	0.5	0.0	0.4
Any traditional method	0.5	0.7	1.0	0.6
Rhythm	0.0	0.0	0.0	0.0
Withdrawal	0.5	0.7	1.0	0.6
Other	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0
All pregnancies	3,912	435	338	4,725

Note: Total includes pregnancies ending in stillbirths.

Table 8.7 Reason for abortion

Percent distribution of induced abortions in the 3 years prior to the survey by the most important reason for the abortion, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Reason for abortion								Total	Number of cases
	Health of mother	Risk of birth defects	Sex selection	Poverty	Unwanted child	Unmarried	Other	Don't remember		
Age at pregnancy outcome										
20-29	32.2	19.5	2.3	5.0	34.4	0.8	5.2	0.6	100.0	169
30-39	40.4	10.4	3.9	5.5	37.5	0.4	1.2	0.6	100.0	211
40-49	41.8	9.3	0.0	6.5	37.3	0.0	5.0	0.0	100.0	54
Residence										
Urban	35.2	12.5	4.6	6.9	37.6	0.9	2.4	0.0	100.0	98
Rural	38.0	14.2	2.2	5.0	35.9	0.4	3.5	0.7	100.0	336
Region										
Dushanbe	35.9	11.6	9.3	14.3	29.0	0.0	0.0	0.0	100.0	32
GBAO	*	*	*	*	*	*	*	*	100.0	4
Sughd	27.1	7.7	2.6	4.3	55.4	0.8	2.1	0.0	100.0	111
DRS	26.6	24.5	1.8	2.4	39.6	0.0	4.2	0.9	100.0	108
Khatlon	50.9	11.6	2.3	6.1	23.5	0.8	4.0	0.7	100.0	180
FTF districts	56.5	15.4	2.0	4.8	17.6	1.3	1.2	1.2	100.0	108
Education										
None/primary	(39.1)	(4.9)	(6.9)	(4.8)	(39.7)	(0.0)	(0.0)	(4.7)	100.0	28
General basic	34.4	15.4	1.8	8.4	32.9	1.2	5.9	0.0	100.0	187
General secondary	41.3	10.9	3.1	3.5	39.2	0.0	1.5	0.6	100.0	163
Professional primary/										
middle	(45.9)	(8.4)	(2.8)	(4.3)	(38.6)	(0.0)	(0.0)	(0.0)	100.0	23
Higher	(28.0)	(30.2)	(3.2)	(0.0)	(36.1)	(0.0)	(2.5)	(0.0)	100.0	33
Wealth quintile										
Lowest	52.5	6.6	0.0	10.7	19.3	0.0	10.9	0.0	100.0	66
Second	33.7	15.3	5.5	4.9	38.5	0.0	2.1	0.0	100.0	84
Middle	27.3	17.2	2.4	6.9	41.3	0.8	2.8	1.3	100.0	101
Fourth	39.1	12.4	1.7	0.4	42.1	1.2	2.1	0.9	100.0	113
Highest	39.3	16.2	4.3	7.1	33.0	0.0	0.0	0.0	100.0	71
Total	37.4	13.8	2.8	5.5	36.3	0.5	3.3	0.5	100.0	435

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

INFANT AND CHILD MORTALITY

Key Findings

- **Current levels:** Under-5 mortality is 33 deaths per 1,000 live births, and the infant mortality rate is 27 deaths per 1,000 live births. This means that 1 in 30 children in Tajikistan die before reaching age 5, and more than 8 in 10 of the deaths occur during infancy.
- **Trends:** Under-5 mortality declined from 43 deaths per 1,000 live births at the time of the 2012 TjDHS to 33 deaths per 1,000 live births in 2017.
- **Regional differences:** The under-5 mortality rate varies from 11 deaths per 1,000 live births in Dushanbe to 40 deaths per 1,000 live births in Khatlon.
- **Perinatal mortality:** The perinatal mortality rate is 18 deaths per 1,000.
- **High-risk fertility:** 40% of children born in the 5 years preceding the survey were at higher risk of mortality because they were born to mothers who were too young, too old, or of too high parity or were born too soon after a preceding birth. The risk of dying among these children was almost twice that among children not in any of the high-risk categories.

Information on infant and child mortality is relevant to a demographic assessment of a country's population and is an important indicator of the country's socioeconomic development and quality of life. It can also help identify children who may be at higher risk of death and lead to strategies to reduce this risk, such as promoting birth spacing.

This chapter presents information on levels, trends, and differentials in perinatal, neonatal, infant, child and under-5 mortality rates. It also examines biodemographic factors and fertility behaviors that increase mortality risks for infants and children. The information was collected as part of a retrospective pregnancy history in which female respondents listed all of the children to whom they have given birth, along with each child's date of birth, survivorship status, and current age or age at death.

The quality of mortality estimates calculated from pregnancy histories depends on the mother's ability to recall all of the children she has given birth to, as well as their birth dates and ages at death. Potential data quality problems include:

- The selective omission from pregnancy histories of those births that did not survive, which can result in underestimation of childhood mortality.
- The displacement of birth dates, which may distort mortality trends. This can occur if an interviewer knowingly records a birth as occurring in a different year than the one in which it occurred. This may happen if an interviewer is trying to cut down on his or her overall workload, because live births

occurring during the 5 years before the interview are the subject of a lengthy set of additional questions.

- The quality of reporting of age at death. Misreporting the child’s age at death may distort the age pattern of mortality, especially if the net effect of the age misreporting is to transfer deaths from one age bracket to another.
- Any method of measuring childhood mortality that relies on mothers’ reports (e.g., pregnancy histories) assumes that female adult mortality is not high or, if it is high, that there is little or no correlation between the mortality risks of mothers and those of their children.

Selected indicators of the quality of the mortality data on which the estimates of mortality in this chapter are based are presented in Appendix C, Tables C.3-C.6.

9.1 INFANT AND CHILD MORTALITY

Neonatal mortality: The probability of dying within the first month of life, expressed as deaths per 1,000 live births.

Postneonatal mortality: The probability of dying between the first month of life and the first birthday (computed as the difference between infant and neonatal mortality), expressed as deaths per 1,000 live births.

Infant mortality: The probability of dying between birth and the first birthday, expressed as deaths per 1,000 live births.

Child mortality: The probability of dying between the first and the fifth birthday, expressed as deaths per 1,000 children surviving to age 1.

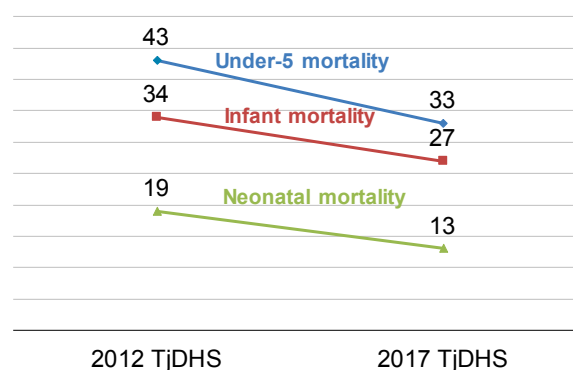
Under-5 mortality: The probability of dying between birth and the fifth birthday, expressed as deaths per 1,000 live births.

In the 5 years prior to the 2017 TjDHS, the under-5 mortality rate was 33 deaths per 1,000 live births, indicating that, in Tajikistan, 1 in 30 children die before reaching their fifth birthday. The infant mortality rate was 27 deaths per 1,000 live births, and the neonatal mortality rate was 13 deaths per 1,000 live births. Thus, a large majority (82%) of all early childhood deaths take place in infancy, and around two-fifths of deaths (39%) occur in the first month of life (**Table 9.1**).

Trends: Overall, under-5 mortality declined between the 2012 and 2017 TjDHS surveys, from 43 deaths per 1,000 live births to 33 deaths per 1,000 live births. Infant mortality decreased from 34 to 27 deaths per 1,000 live births over the same period, while neonatal mortality fell from 19 to 13 deaths per 1,000 live births (**Figure 9.1**).

Figure 9.1 Trends in early childhood mortality rates

Deaths per 1,000 live births in the 5-year period before the survey



9.2 SOCIODEMOGRAPHIC AND BIODEMOGRAPHIC RISK FACTORS

The 2017 TjDHS results are useful for looking at sociodemographic and biodemographic risk factors for early childhood mortality.

Patterns by sex and residence

Mortality estimates by child's sex and urban-rural residence are shown in **Table 9.2** for the 5-year period before the survey.

- Boys are more likely to die in early childhood than girls. The under-5 mortality rate is 40 deaths per 1,000 live births among boys and 26 deaths per 1,000 live births among girls.
- The risk of dying in early childhood is much greater for children in rural areas (37 deaths per 1,000 live births) than for those in urban areas (20 deaths per 1,000 live births).

Patterns by additional background characteristics

Mortality estimates are shown in **Table 9.3** by additional background characteristics. The rates were calculated for the 10-year period before the survey to ensure that there were sufficient cases to produce statistically reliable estimates.

- Khatlon generally has the highest mortality rates and Dushanbe the lowest. For example, the under-5 mortality rate is 40 deaths per 1,000 live births in Khatlon, nearly four times the rate in Dushanbe (11 deaths per 1,000 live births) (**Figure 9.2**).
- Childhood mortality rates generally decrease as mother's education and household wealth increase. For instance, under-5 mortality declines from 47 deaths per 1,000 live births among children born to women in the lowest wealth quintile to 20 deaths per 1,000 live births among children born to women in the highest quintile (**Figure 9.3**).
- Mother's age at birth is related to the risk of dying. Mortality rates are lower for children whose mothers were age 20-29 when they were born than for children born to women below age 20 or age 30-39.

Figure 9.2 Under-5 mortality by region

Deaths per 1,000 live births for the 10-year period before the survey

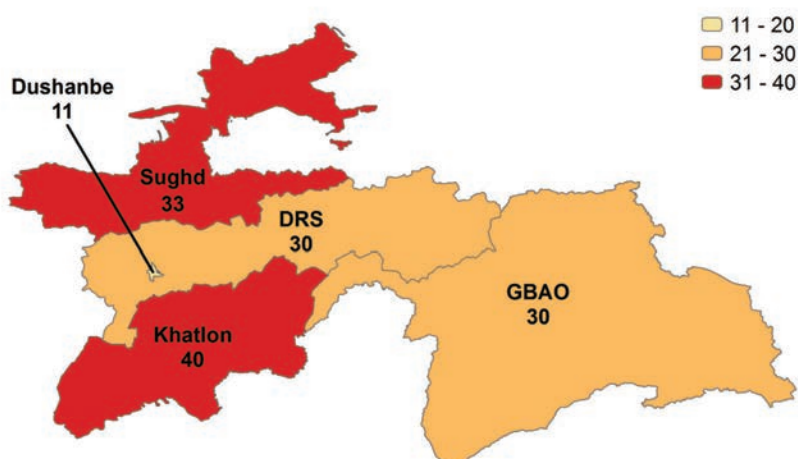


Figure 9.3 Under-5 mortality by household wealth

Deaths per 1,000 live births for the 10-year period before the survey

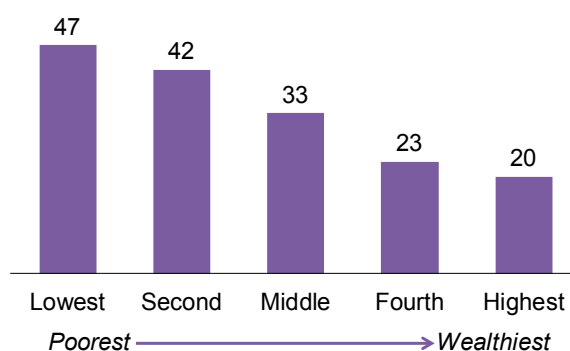
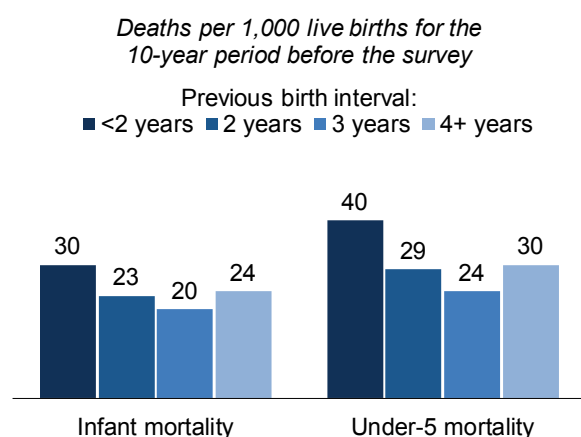


Figure 9.4 Childhood mortality by previous birth interval



- Mortality rates are generally higher among children born less than 2 years after a previous birth than among children born 2 or more years after a prior birth (**Figure 9.4**).

- Children who were small or very small at birth according to their mothers have a much higher risk of dying in infancy than children reported to be average or larger at birth. For example, the neonatal mortality rate is 36 deaths per 1,000 live births among children who were reported as small or very small at birth, as compared with 7 deaths per 1,000 live births among children who were average or larger at birth.

9.3 PERINATAL MORTALITY

The causes of stillbirths and early neonatal deaths are closely linked, and examining only early neonatal deaths can understate the true level of mortality around delivery. The perinatal mortality rate encompasses both stillbirths and early neonatal deaths and, thus, provides a better measure of mortality at the time of delivery.

In the TjDHS survey, as in other DHS surveys, perinatal deaths are defined to include any deaths of live births within the first seven days of life (early neonatal deaths) and any pregnancies reported by mothers as having ended in stillbirths after 7 or more months of gestation. DHS asks and records pregnancy duration in months; the definition of 7 months used for the purpose of calculating perinatal mortality in DHS is the equivalent of 28 weeks of pregnancy¹ as recommended by the World Health Organization in statistics for international comparison (Rutstein, S. O. and G. Rojas 2006, WHO 2006, WHO 2011).

The information on the durations of pregnancies ending in stillbirths is obtained in the detailed reproductive events calendars completed in the survey for the period since January 2012. The perinatal mortality rate is calculated by dividing the total number of perinatal deaths by the total number of pregnancies reported in the calendar as having lasted 7 or more months (i.e., number of pregnancies of 7 or more months that terminated in a fetal death plus pregnancies that ended with a live birth)¹.

Perinatal mortality rate

Perinatal deaths comprise stillbirths (pregnancy losses occurring after 7 months of gestation) and early neonatal deaths (deaths of live births within the first 7 days of life). The perinatal mortality rate is calculated as the number of perinatal deaths per 1,000 pregnancies of 7 or more months' duration¹.

Sample: Number of pregnancies of 7 or more months' duration among women age 15-49 in the 5 years before the survey

Table 9.4 presents the number of stillbirths, the number of early neonatal deaths, and the perinatal mortality for the 5-year period preceding the survey by selected demographic and socioeconomic

¹ The perinatal mortality rate according to the ICD10 definition is the number of deaths of fetuses weighing at least 500 g or after 22 weeks of gestation, plus the number of early neonatal deaths per 1,000 *total births* (WHO 2011). While the World Health Organization recognizes the 22-week gestation for the perinatal mortality rate, for international comparison, 1,000 g and/or 28 weeks gestation is recommended (WHO 2006, WHO 2011). DHS presents the rate based on all pregnancies of 7 or more months (or 28 weeks gestation or more) that terminated in a fetal death plus pregnancies that ended with a live birth, which is the equivalent of total births.

characteristics. In considering the results, it should be remembered that both stillbirths and early neonatal deaths are subject to underreporting. The total number of events is also small (46 stillbirths and 71 early neonatal deaths); as a result, perinatal mortality rates for a number of the subgroups are based on very few events.

During the 5 years before the survey, the perinatal mortality rate was 18 deaths per 1,000² (Table 9.4).

Patterns by background characteristics

- Perinatal mortality is highest for women in their 40s (72 deaths per 1,000), followed by women under age 20 (30 deaths per 1,000).
- Perinatal mortality is much higher among first pregnancies (30 deaths per 1,000) than subsequent pregnancies (12-15 deaths per 1,000).

9.4 HIGH-RISK FERTILITY BEHAVIOR

Research has shown that the risk of dying in early childhood tends to be higher among children born to mothers who are too young (under age 18) or too old (over age 34), children born after a short birth interval (less than 24 months after a preceding birth), and children born to mothers of high parity (more than three births).

Table 9.5 shows the percent distribution of children born in the 5 years preceding the survey according to the fertility behavior categories that place a child at elevated risk of dying. In addition, the table presents risk ratios for each of the risk categories; these ratios represent the increased risk of dying among children in the given categories relative to children with no risk factors. It also shows the percent distribution of currently married women age 15-49 by the category of elevated risk in which a child conceived at the time of the survey would fall. For purposes of the table, a first birth between age 18 and age 34 is considered an unavoidable risk.

Overall, 40% of births in the 5 years prior to the survey were in any avoidable high-risk category. Eight percent of births were in more than one high-risk category. The most common individual high-risk factors were a birth interval of less than 24 months (24%) and a birth order greater than three (18%).

The risk ratio for births in any high-risk category was 1.97, indicating that the risk of dying among these births was almost twice the risk among births not in any high-risk category. The risk ratio for births in any multiple high-risk category was 3.49, substantially higher than the risk ratio for births in a single high-risk category (1.61). With respect to individual avoidable high-risk categories, risk ratios are highest for the small number of births to mothers less than age 18 (9.13) and births to mothers older than age 34 (3.44).

Table 9.5 also shows that 73% of currently married women in Tajikistan would have been in an avoidable high-risk category if they had conceived at the time of the survey; 33% would have been in a single avoidable high-risk category and 40% in a multiple high-risk category. The most common individual high-risk category was a birth order greater than 3 (55%).

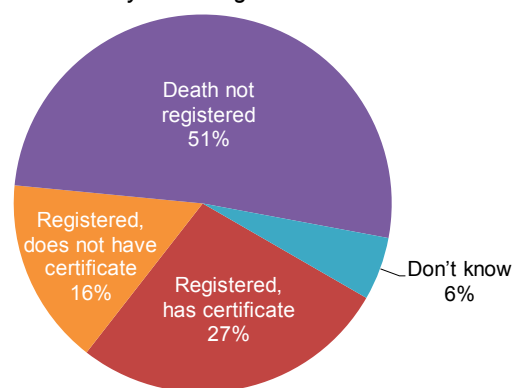
² The TjDHS classification of perinatal deaths differs somewhat from that used by the Tajik Republic Ministry of Health. In calculating perinatal mortality, the current Tajik MOH approach includes early neonatal deaths and stillbirths occurring after 22 weeks of pregnancy in the numerator of the rate and total births (stillbirths and live births) in the denominator. DHS asks for and records pregnancy duration only in months; thus, it is not possible to exactly match the MOH definition. However, it is possible to closely approximate the MOH approach by using a cut-off of 6 months or the equivalent of 24 weeks of pregnancy for the purpose of re-calculating perinatal mortality. When the 2017 TjDHS perinatal mortality rate is re-calculated using this cut-off, the estimate of the perinatal mortality rate is 21 per 1,000 (data not shown).

9.5 REGISTRATION OF CHILD DEATHS

Vital registration systems are a key instrument for tracking mortality trends. The 2017 TjDHS included several questions relating to registration of deaths with the State Office for Registration of Civil Status (ZAGS) in Tajikistan. **Figure 9.5** shows that 43% of deaths among children born to mothers in the 5 years before the survey were reported as registered with the civil authorities. Twenty-seven percent of children who had died had a death certificate. Although the majority of child deaths are still not registered, the situation has improved somewhat since 2012, when only 38% of all child deaths in the 5-year period before the survey were registered and only 18% of the children who had died had death certificates.

Figure 9.5 Death registration

Percent distribution of deaths of children born in the 5 years preceding the survey, by death registration status



LIST OF TABLES

For more information on infant and child mortality, see the following tables:

- **Table 9.1** Early childhood mortality rates
- **Table 9.2** Five-year early childhood mortality rates according to background characteristics
- **Table 9.3** Ten-year early childhood mortality rates according to additional characteristics
- **Table 9.4** Perinatal mortality
- **Table 9.5** High-risk fertility behavior

Table 9.1 Early childhood mortality rates

Neonatal, postneonatal, infant, child, and under-5 mortality rates for 5-year periods preceding the survey, Tajikistan DHS 2017

Years preceding the survey	Neonatal mortality (NN)	Post-neonatal mortality (PNN) ¹	Infant mortality (1q0)	Child mortality (4q1)	Under-5 mortality (5q0)
0-4	13	14	27	7	33
5-9	17	10	28	6	33
10-14	21	22	43	9	51

¹ Computed as the difference between the infant and neonatal mortality rates

Table 9.2 Five-year early childhood mortality rates according to background characteristics

Neonatal, postneonatal, infant, child, and under-5 mortality rates for the 5-year period preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Neonatal mortality (NN)	Post-neonatal mortality (PNN) ¹	Infant mortality (1q0)	Child mortality (4q1)	Under-5 mortality (5q0)
Child's sex					
Male	16	17	33	7	40
Female	10	11	21	6	26
Residence					
Urban	11	6	17	3	20
Rural	13	16	30	8	37
Total	13	14	27	7	33

¹ Computed as the difference between the infant and neonatal mortality rates

Table 9.3 Ten-year early childhood mortality rates according to additional characteristics

Neonatal, postneonatal, infant, child, and under-5 mortality rates for the 10-year period preceding the survey, according to additional characteristics, Tajikistan DHS 2017

Characteristic	Neonatal mortality (NN)	Post-neonatal mortality (PNN) ¹	Infant mortality (¹ iq ₀)	Child mortality (⁴ q ₁)	Under-5 mortality (⁵ q ₀)
Mother's age at birth					
<20	23	15	38	2	40
20-29	12	11	24	6	30
30-39	20	13	33	8	41
Birth order					
1	20	11	31	4	35
2-3	12	13	24	6	30
4-6	14	13	27	11	38
Previous birth interval²					
<2 years	14	16	30	11	40
2 years	14	9	23	6	29
3 years	8	13	20	4	24
4+ years	10	14	24	7	30
Birth size³					
Small/very small	36	17	53	na	na
Average or larger	7	14	21	na	na
Don't know/missing	(49)	*	*	na	na
Region					
Dushanbe	7	2	9	2	11
GBAO	12	14	26	4	30
Sughd	13	12	26	8	33
DRS	15	10	25	5	30
Khatlon	18	16	33	7	40
FTF districts	19	17	36	8	44
Mother's education					
None/primary	11	17	28	13	40
General basic	18	11	29	5	34
General secondary	14	14	28	5	33
Professional primary/middle	12	12	24	18	41
Higher	11	5	16	3	19
Wealth quintile					
Lowest	20	20	40	7	47
Second	19	13	32	10	42
Middle	11	14	25	8	33
Fourth	13	8	20	3	23
Highest	12	6	18	2	20

Note: Figures in parentheses are based on 250-499 unweighted person-years of exposure to the risk of death. An asterisk indicates that a rate is based on fewer than 250 person-years of exposure to the risk of death and has been suppressed.

na = Not available

¹ Computed as the difference between the infant and neonatal mortality rates

² Excludes first-order births

³ Rates for the 5-year period before the survey

Table 9.4 Perinatal mortality

Number of stillbirths and early neonatal deaths, and the perinatal mortality rate for the 5-year period preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Number of stillbirths ¹	Number of early neonatal deaths ²	Perinatal mortality rate ³	Number of pregnancies of 7+ months' duration
Mother's age at birth				
<20	7	10	30	560
20-29	27	44	15	4,736
30-39	12	13	22	1,120
40-49	0	4	72	63
Previous pregnancy interval in months⁴				
First pregnancy	24	35	30	1,942
<15	6	13	12	1,590
15-26	9	7	13	1,164
27-38	3	5	12	679
39+	5	11	15	1,103
Residence				
Urban	12	15	20	1,353
Rural	34	56	18	5,127
Region				
Dushanbe	5	5	23	410
GBAO	2	1	28	107
Sughd	18	13	17	1,851
DRS	12	16	18	1,538
Khatlon	10	36	18	2,572
FTF districts	5	19	16	1,437
Mother's education				
None/primary	2	2	8	540
General basic	16	31	20	2,394
General secondary	14	29	17	2,554
Professional primary/middle	9	1	21	474
Higher	6	8	27	518
Wealth quintile				
Lowest	10	11	17	1,223
Second	8	21	22	1,323
Middle	5	12	12	1,430
Fourth	7	12	13	1,404
Highest	16	16	29	1,100
Total	46	71	18	6,480

¹ Stillbirths are fetal deaths in pregnancies lasting 7 or more months (the equivalent of 28 or more weeks of pregnancy duration).

² Early neonatal deaths are deaths at age 0-6 days among live-born children.

³ The sum of the number of stillbirths and early neonatal deaths divided by the number of pregnancies of 7 or more months' duration (the equivalent of total births), expressed per 1,000

⁴ Categories correspond to birth intervals of <24 months, 24-35 months, 36-47 months, and 48+ months assuming a pregnancy duration of 9 months.

Table 9.5 High-risk fertility behavior

Percent distribution of children born in the 5 years preceding the survey by category of elevated risk of mortality and the risk ratio, and percent distribution of currently married women by category of risk if they were to conceive a child at the time of the survey, Tajikistan DHS 2017

Risk category	Births in the 5 years preceding the survey		Percentage of currently married women ¹
	Percentage of births	Risk ratio	
Not in any high-risk category	28.3	1.00	19.0 ^a
Unavoidable risk category			
First-order births between age 18 and age 34	31.7	1.87	8.3
In any avoidable high-risk category	40.0	1.97	72.7
Single high-risk category			
Mother's age <18 only	0.1	*	0.0
Mother's age >34 only	1.8	2.65	6.2
Birth interval <24 months only	20.3	1.51	11.4
Birth order >3 only	10.1	1.52	15.5
Subtotal	32.4	1.61	33.1
Multiple high-risk category			
Age >34 and birth interval <24 months	0.2	*	0.2
Age >34 and birth order >3	3.6	3.15	31.0
Age >34 and birth interval <24 months and birth order >3	0.3	*	1.3
Birth interval <24 months and birth order >3	3.5	3.15	7.1
Subtotal	7.6	3.49	39.6
Total	100.0	na	100.0
Subtotals by individual avoidable high-risk category			
Mother's age <18	0.1	9.13	0.0
Mother's age >34	5.9	3.44	38.7
Birth interval <24 months	24.4	1.89	43.8
Birth order >3	17.5	2.33	54.9
Number of births/women	6,486	na	7,747

Note: Risk ratio is the ratio of the proportion dead among births in a specific high-risk category to the proportion dead among births not in any high-risk category. An asterisk indicates that a rate is based on fewer than 25 unweighted cases and has been suppressed.

na = Not applicable

¹ Women are assigned to risk categories according to the status they would have at the birth of a child if they were to conceive at the time of the survey: current age less than 17 years and 3 months or older than 34 years and 2 months, latest birth less than 15 months ago, or latest birth being of order 3 or higher.

^a Includes sterilized women

Key Findings

- **Antenatal care:** 92% of women age 15–49 who had a live birth in the 5 years preceding the survey received antenatal care from a skilled provider for their most recent birth. Approximately two-thirds of women had four or more antenatal care visits (64%) and received care in the first trimester of pregnancy (67%).
- **Components of antenatal care:** Almost all pregnant women who received antenatal care for their most recent birth had their blood pressure measured (99%) and had urine and blood samples taken (98% each). Forty-four percent of pregnant women took iron supplements, while only 2% took intestinal parasite drugs.
- **Delivery:** Nine in 10 births (88%) take place in a health facility, and 95% are delivered by skilled providers.
- **Postnatal checks:** 92% of mothers and 90% of newborns receive the recommended postnatal check within the first 2 days after birth.
- **Knowledge of danger signs:** 72% of women who had a birth in the last 5 years know two or more danger signs and complications of pregnancy and childbirth.
- **Problems in accessing care:** 42% of women reported at least one of four specified problems in accessing health care for themselves.

Health care services during pregnancy and childbirth and after delivery are important for the survival and well-being of both the mother and the infant. Antenatal care (ANC) can reduce health risks for mothers and their babies through monitoring of pregnancies and screening for complications. Delivery at a health facility, with skilled medical attention and hygienic conditions, reduces complications and infections during labor and delivery. Timely postnatal care provides an opportunity to identify and treat complications arising from delivery and to provide information to mothers on caring for themselves and their infants.

In 2010, the government of Tajikistan adopted the National Health Strategy of the Republic of Tajikistan 2010–2020, which identifies several priorities for improving maternal health: improving access to ANC and safe delivery services and decreasing mortality and morbidity during pregnancy (GOT 2010). Among the targets set in the plan were an increase in ANC coverage from 35% in 2009 to 50% in 2015 and 75% in 2020 and an increase in skilled attendance at deliveries from 75% in 2009 to at least 90% in 2020.

This chapter presents information on ANC and its main components: number and timing of ANC visits, blood pressure measurement, blood and urine sampling, iron supplementation, and use of deworming medication. The chapter also includes information on childbirth and postnatal care such as place of delivery, assistance during delivery, cesarean delivery, postnatal health checks for mothers and newborns,

and knowledge of danger signs and complications of pregnancy and childbirth. Finally, information is presented on problems women face in accessing health care when they are sick.

10.1 ANTENATAL CARE COVERAGE AND CONTENT

10.1.1 Skilled Providers

Antenatal care (ANC) from a medically trained provider is important to monitor the status of a pregnancy, identify complications associated with the pregnancy, and prevent adverse pregnancy outcomes. To be most effective, there should be regular ANC throughout a pregnancy. Information on ANC was assessed for women who gave birth in the 5 years preceding the survey. Among women with two or more live births during the 5-year period, data refer to the most recent live birth only. In Tajikistan, providers trained to assist during pregnancy and delivery include doctors, nurses, and midwives.

Antenatal care (ANC) from a skilled provider

Pregnancy care received from skilled providers, such as doctors, nurses, and midwives.

Sample: Women age 15-49 who had a live birth in the 5 years before the survey

The 2017 TjDHS reveals that 92% of women age 15-49 who had a live birth in the 5 years before the survey received ANC from a skilled provider at least once for their last birth (**Table 10.1**). Obstetrician-gynecologists (56%) were the major service providers, followed by family doctors (17%) and midwives (10%). One in 12 women (8%) did not receive any ANC.

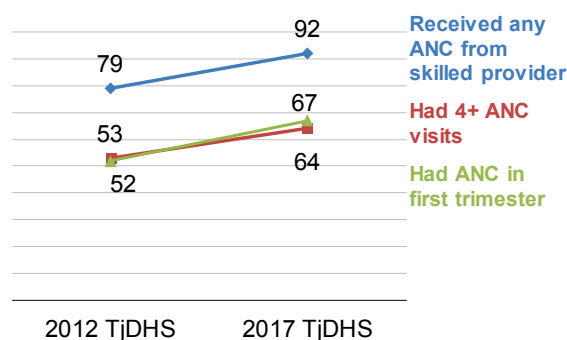
Trends: The proportion of women age 15-49 who received any ANC from a skilled provider increased from 79% in 2012 to 92% in 2017 (**Figure 10.1**). The proportion who received ANC from a family doctor remained stable during this period (16% in 2012, 17% in 2017).

Patterns by background characteristics

- Use of a skilled provider for ANC services is higher among women age 15-34 (92%-93%) than among older women age 35-49 (85%).
- Lower-order births are more likely to receive ANC than higher-order births. Ninety-four percent of women giving birth to their first child received ANC from a skilled provider, as compared with 80% of women giving birth to their sixth or higher order child.
- While the proportion of women receiving ANC from a skilled provider is only slightly higher in urban (95%) than rural (91%) areas, women in urban areas are almost three times more likely to receive ANC from a family doctor (34%) than women in rural areas (12%).
- Among regions, ANC coverage from a skilled provider is highest in Sughd (98%) and lowest in Khatlon (87%). There are substantial regional variations in the type of provider seen. Women in Dushanbe are most likely to receive ANC services from a family doctor (70%), while in all other regions women are most likely to receive care from obstetrician-gynecologists (51%-74%). ANC from a nurse or midwife is common in DRS (26%) and Khatlon (19%).

Figure 10.1 Trends in antenatal care coverage

Percentage of women age 15-49 who had a live birth in the 5 years before the survey (for the most recent birth)



- Use of a skilled provider for ANC services increases with increasing mother's education. Eighty-one percent of women with no education or only a primary education received ANC from a skilled provider, as compared with 98% of women with a higher education.
- Women in the highest wealth quintile (95%) are more likely than those in the lowest quintile (84%) to receive ANC from a skilled provider.

10.1.2 Timing and Number of ANC Visits

Sixty-four percent of women in Tajikistan had at least four ANC visits for their most recent birth in the 5 years before the survey. Included in this percentage are 23% of women in Tajikistan who had four or five visits, 27% who had six or seven visits, and 14% who had eight or more visits. Eight percent of women had no ANC visits (**Table 10.2**). A higher proportion of urban (79%) than rural (60%) women had at least four ANC visits.

Two-thirds of women received ANC during the first trimester of pregnancy, 20% during their fourth to fifth month of pregnancy, and 4% during their sixth to seventh month of pregnancy. Three in four women in urban areas (75%) received ANC within their first trimester, as compared with 65% of women in rural areas. The median number of months women are pregnant at the first visit is 3.4.

Trends: The proportion of women who had the recommended four¹ or more ANC visits has increased since 2012, from 53% to 64%. The proportion of women who received ANC in their first trimester of pregnancy has also increased, from 52% to 67% (**Figure 10.1**).

10.2 COMPONENTS OF ANC VISITS

The content of ANC is important in assessing the quality of services. Standard guidelines for ANC in Tajikistan emphasize that every pregnant mother should receive ANC from a skilled provider that includes a thorough physical examination and administration of appropriate tests. In Tajikistan, standard ANC includes testing of urine and blood samples and blood pressure measurement. Women are also advised to take iron supplements during pregnancy, which can reduce the likelihood of anemia. **Table 10.3** presents information on the percentages of women who received iron supplements and who took deworming tablets during the pregnancy that resulted in their most recent birth in the 5 years preceding the survey. Forty-four percent of women age 15–49 said they took iron supplements (tablets or syrup) during the pregnancy for their most recent live birth, and 2% took drugs for intestinal parasites (**Table 10.3**). The low proportion of women receiving deworming medication is not surprising since, in Tajikistan, the medication is not routinely recommended during pregnancy.

Among women who received ANC, almost all had their blood pressure measured (99%) and had a urine and blood sample (98% each) taken as part of their visit.

Trends: Between 2012 and 2017, the proportion of women who took iron supplements increased from 33% to 44%. During the same time period, there were also increases in the proportion of women who had their blood pressure checked (from 94% to 99%), had a urine sample taken (from 90% to 98%), and had a blood sample taken (from 92% to 98%).

10.3 DELIVERY SERVICES

Proper medical attention and hygienic conditions during delivery can reduce the risk of complications and infections that can cause death or serious illness for the mother or the newborn. Hence, it is important to

¹ The 2016 WHO recommendations on antenatal care (ANC) for a positive pregnancy experience recommends a minimum of eight ANC contacts (WHO 2016). The 2017 TjDHS is using the previously recommended minimum of four or more ANC visits because data are based on women age 15–49 who had a live birth after 2012. Because the new recommendation has only been in place since 2016, not all women who gave birth in the last 5 years will be covered by the new recommendation.

increase the proportion of births delivered in a safe, clean environment and under the supervision of health professionals.

10.3.1 Institutional Deliveries

Institutional deliveries

Deliveries that occur in a health facility.

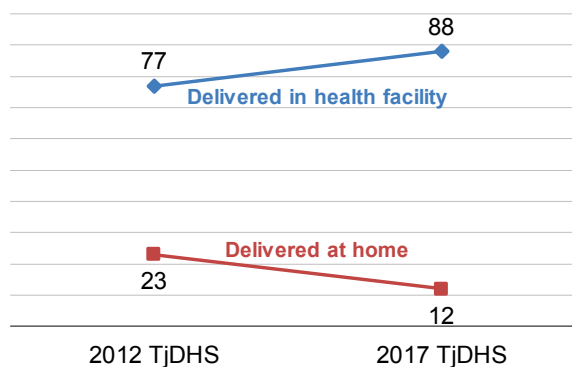
Sample: All live births in the 5 years before the survey

Nearly 9 in 10 (88%) live births in the 5 years preceding the 2017 TjDHS were delivered in health facilities, almost all of which were government facilities (Table 10.4). Just over 1 in 10 live births (12%) took place at home.

Trends: The percentage of institutional deliveries increased from 77% in 2012 to 88% in 2017; correspondingly, the percentage of home deliveries halved during the same period (from 23% in 2012 to 12% in 2017) (Figure 10.2). While home deliveries decreased in all regions of Tajikistan between 2012 and 2017, the most substantive reductions were observed in Khatlon (from 31% to 15%), GBAO (from 34% to 24%), and DRS (from 29% to 21%). Notable decreases in home deliveries also occurred among women at lower levels of education and wealth.

Figure 10.2 Trends in place of birth

Percentage of live births in the 5 years before the survey

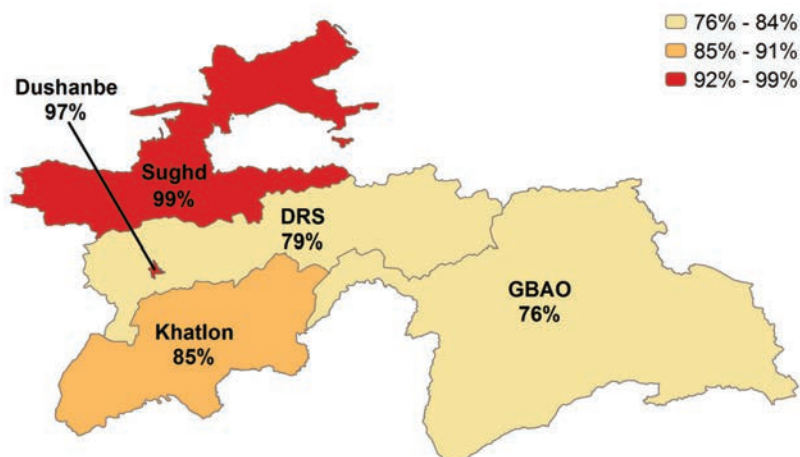


Patterns by background characteristics

- Younger women are more likely to deliver in a health facility than older women; 92% of women under age 20 delivered in a health facility, as compared with 83% of women age 35-49.
- Delivery in a health facility decreases with birth order; 74% of sixth- or higher-order births were delivered in a health facility, compared with 93% of first-order births.
- Births for which the mother did not attend ANC are less likely to be delivered in a health facility (68%) than births for which the mother attended one to three (82%) or four or more (93%) ANC visits.
- Births to women in rural areas are less likely to be delivered in a health facility (87%) than those in urban areas (94%).

Figure 10.3 Health facility births by region

Percentage of live births in the 5 years before the survey that were delivered in a health facility



- Delivery in a health facility is lowest in GBAO (76%) and DRS (79%) and highest in Sughd (99%) and Dushanbe (97%) (**Figure 10.3**).
- The proportion of births delivered in health facilities increases with increasing mother's education and wealth.

10.3.2 Skilled Assistance during Delivery

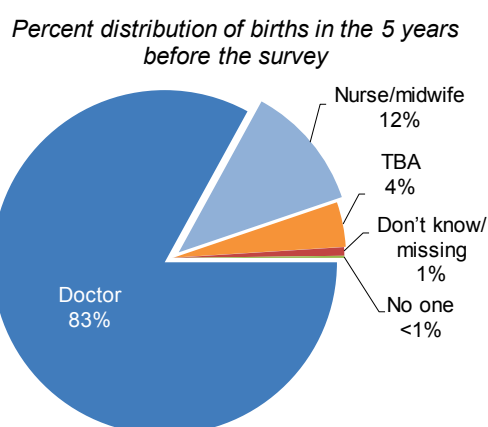
Skilled assistance during delivery

Births delivered with the assistance of doctors, nurses, or midwives.

Sample: All live births in the 5 years before the survey

In Tajikistan, skilled assistance at delivery is nearly universal; 95% of live births in the 5 years preceding the survey were assisted by a doctor, nurse, or midwife (**Table 10.5**). The majority (83%) of births are attended by doctors; 79% are attended by obstetrician-gynecologists, 3% by family doctors, and 2% by other doctors (**Figure 10.4**). Other skilled professionals assisting deliveries include midwives (7%) and nurses (5%), while traditional birth attendants (TBAs) assist with 4% of deliveries. Skin-to-skin contact immediately after birth is provided for the majority (88%) of births.

Figure 10.4 Assistance during delivery



Trends: The proportion of births assisted by a skilled provider has increased since 2012, from 87% to 95%. There has been a substantial increase in the percentage of births assisted by doctors, from 64% to 83%.

Patterns by background characteristics

- First-order births are most likely to be assisted by a skilled professional (98%), while sixth- or higher-order births are least likely to be assisted (86%).
- Births to mothers who did not receive any ANC during pregnancy are much less likely to be delivered by a skilled attendant than births to mothers who received ANC (80% versus 92%-98%).
- Skilled assistance at delivery is universal in Sughd (100%) and lowest in Khatlon (92%).
- The proportion of births attended by a skilled provider increases with increasing mother's education and wealth.
- The proportion of births in which the infant receives skin-to-skin contact immediately after birth ranges from a high of 93% in Sughd to a low of 81% in DRS. This proportion falls below 80% among births delivered in places other than a health facility (72%) and in births to women with no antenatal care (78%).

10.3.3 Delivery by Cesarean

The 2017 TjDHS results showed that 5% of the live births in the 5 years preceding the survey were delivered by cesarean section (C-section) (**Table 10.6**). For 3% of total births, the decision to deliver via C-section was made after the onset of labor pains, while for 2% the decision was made before the onset of labor pains.

Seven in 10 (71%) women who had a vaginal delivery spent 3 or more days at the health facility after delivery, while 1 in 4 (23%) spent 1-2 days at the facility (**Table 10.7**). Among those who gave birth by C-section, 93% spent at least 3 days at the health facility.

Trends: While the overall C-section rate in Tajikistan has remained stable over the past 5 years (4% in 2012, 5% in 2017), the rate in Dushanbe has decreased from 10% to 6%.

Patterns by background characteristics

- C-section deliveries are more common among births to women age 35-49 (12%) than births to younger women age 15-34 (5%-6%).
- The C-section rate increases slightly with increases in mother's education and wealth.

10.4 POSTNATAL CARE

10.4.1 Postnatal Health Check for Mothers

Postnatal care is a crucial component of safe motherhood. Postnatal checkups provide an opportunity to assess and treat delivery complications and to counsel mothers on how to care for themselves and their babies. A large proportion of maternal and neonatal deaths occur during the 24 hours following delivery. In addition, the first 2 days following delivery are critical for monitoring complications arising from the delivery.

Table 10.8 shows that 92% of women who gave birth in the 2 years preceding the 2017 TjDHS received a postnatal check in the first 2 days after their most recent live birth, with most women (81%) receiving a check within 4 hours of delivery. Six percent of women did not receive a postnatal check.

Trends: Between 2012 and 2017, the proportion of women who had a postnatal check within 4 hours of delivery increased from 67% to 81%, and the proportion who had a check within 2 days of delivery increased from 80% to 92%.

Patterns by background characteristics

- Only 53% of women who delivered someplace other than a health facility received a postnatal check within 2 days after delivery, as compared with 96% of women who delivered in a health facility.
- The percentage of women receiving a postnatal check within 2 days is lowest in DRS (84%) and highest in Sughd (97%).
- The proportion of women who received a postnatal check during the first 2 days after delivery increases from 87% among those in the lowest wealth quintile to 94% among those in the fourth and highest quintiles.

Type of Provider

The skills of the provider determine the provider's ability to diagnose problems and recommend appropriate treatment or referral. Most women who gave birth in the 2 years before the survey (91%) received a postnatal check in the first 2 days after their most recent live birth from doctors, nurses, or midwives (**Table 10.9**). The check was most often received from a doctor (58% from an obstetrician-gynecologist, 4% from a family doctor, and 9% from another doctor). Only 1% of women received such a check from a traditional birth attendant.

10.4.2 Postnatal Health Check for Newborns

The first 48 hours of life is a critical phase for newborn babies and a period in which many neonatal deaths occur. Lack of postnatal health checks during this period can delay the identification of newborn complications and the initiation of appropriate care and treatment. Nine out of 10 newborns in Tajikistan (90%) received a postnatal check within the first 2 days after birth, while 7% received no postnatal check (**Table 10.10**).

Patterns by background characteristics

- The percentage of newborns receiving a postnatal check within the first 2 days decreases as birth order increases; 91% of first-order births received a postnatal check, as compared with 80% of sixth- or higher-order births.
- Newborns delivered in a health facility are more than twice as likely as those delivered elsewhere to have received a postnatal check within the first 2 days after birth (95% versus 44%).
- Newborns born to women who reside in rural areas are less likely than those born to women in urban areas to have a postnatal check within the first 2 days after birth (89% versus 93%).
- Postnatal checkups within 2 days of delivery are least common in DRS (82%) and most common in Sughd (95%). Postnatal checks within the first hour of life are almost four times more common in Dushanbe (27%) than in Khatlon (7%).
- In general, the percentage of newborns receiving postnatal checks increases with higher education and wealth among mothers.
- Births delivered in places other than a health facility, births to mothers in DRS, and births to mothers with no education and in the lowest wealth quintile were more likely to have received no postnatal check than births delivered in health facilities, births to mothers in other regions, and births to mothers in higher wealth quintiles.

Type of Provider

Nine out of 10 newborns (89%) received a postnatal check within the first 2 days from a doctor, nurse, or midwife (**Table 10.11**). The check was most often received from a doctor (7% from an obstetrician-gynecologist, 6% from a family doctor, and 60% from another doctor). Sixteen percent of newborns received a check from a nurse or midwife, and only 1% received a check from a traditional birth attendant.

Content of Postnatal Care

The survey also collected data on other components of postnatal care such as whether selected functions were performed within 2 days after birth. Ninety-three percent of newborns delivered in the 2 years before the survey had at least two signal functions performed within 2 days after birth (**Table 10.12**). The proportion of newborns for whom each signal function was performed ranges from 83% (observation of breastfeeding) to 92% (weighed at birth). Births delivered in places other than a health facility, births to mothers in DRS, and births to mothers in the lowest wealth quintile were less likely to have each signal function performed than births delivered in health facilities, births to mothers in other regions, and births to mothers in higher wealth quintiles.

10.5 KNOWLEDGE OF DANGER SIGNS

Pregnancy complications are an important cause of maternal and child morbidity and mortality, and thus teaching pregnant women about the danger signs associated with pregnancy is one of the essential components of ANC. Women age 15-49 who had a live birth in the last 5 years were asked to list danger

signs and complications of pregnancy and childbirth that would indicate a need for immediate medical attention. Among the danger signs mentioned were severe abdominal pain, vaginal bleeding, fever, edema, severe headache, blurred vision, nausea or vomiting, poor fetal movement, fast or difficult breathing, convulsions or fits, loss of consciousness, weakness, and strong labor pain. Seventy-two percent of women mentioned two or more specific danger signs (**Table 10.13**). The most commonly mentioned danger signs were severe abdominal pain (59%) and vaginal bleeding (42%). The least commonly mentioned signs were loss of consciousness and weakness (both 2%). There are variations by background characteristics in which danger signs women listed.

10.6 PROBLEMS IN ACCESSING HEALTH CARE

Problems in accessing health care

Women were asked whether each of the following factors is a big problem in seeking medical advice or treatment for themselves when they are sick:

- Getting permission to go to the doctor
- Getting money for advice or treatment
- Distance to a health facility
- Not wanting to go alone

Sample: Women age 15-49

Many factors can prevent women from obtaining medical advice or treatment for themselves when they are sick. Information on such factors is particularly important in understanding and addressing the barriers that women face in seeking care during pregnancy and delivery.

More than 4 in 10 women (42%) reported at least one of the specified problems in accessing health care for themselves (**Table 10.14**). Getting money for advice or treatment was the most frequently mentioned problem (35%), followed by distance to a health facility (21%), not wanting to go alone (20%), and getting permission to go for treatment (18%).

LIST OF TABLES

For more information on maternal health care, see the following tables:

- **Table 10.1 Antenatal care**
- **Table 10.2 Number of antenatal care visits and timing of first visit**
- **Table 10.3 Components of antenatal care**
- **Table 10.4 Place of delivery**
- **Table 10.5 Assistance during delivery**
- **Table 10.6 Cesarean section**
- **Table 10.7 Duration of stay in health facility after birth**
- **Table 10.8 Timing of first postnatal check for the mother**
- **Table 10.9 Type of provider of first postnatal check for the mother**
- **Table 10.10 Timing of first postnatal check for the newborn**
- **Table 10.11 Type of provider of first postnatal check for the newborn**
- **Table 10.12 Content of postnatal care for newborns**
- **Table 10.13 Knowledge of danger signs and complications during pregnancy and delivery**
- **Table 10.14 Problems in accessing health care**

Table 10.1 Antenatal care

Percent distribution of women age 15-49 who had a live birth in the 5 years preceding the survey by antenatal care (ANC) provider during the pregnancy for the most recent birth and percentage receiving antenatal care from a skilled provider for the most recent birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Antenatal care provider							Total	Percentage receiving antenatal care from a skilled provider ¹	Number of women
	Family doctor	Obstetrician-gynecologist	Other doctor	Nurse	Midwife	Traditional birth attendant	No ANC			
Age at birth										
<20	15.9	53.4	1.7	8.6	13.8	1.1	5.5	100.0	93.4	241
20-34	16.7	56.0	2.3	7.0	10.3	0.5	7.2	100.0	92.3	3,812
35-49	14.9	52.2	3.7	6.8	7.6	0.9	13.8	100.0	85.3	342
Birth order										
1	15.6	55.3	2.4	8.8	12.2	0.5	5.2	100.0	94.3	993
2-3	17.9	57.5	2.2	6.2	9.5	0.5	6.2	100.0	93.3	2,405
4-5	14.8	52.2	2.1	6.6	11.1	0.8	12.4	100.0	86.8	847
6+	11.6	45.5	5.4	12.4	5.2	1.0	18.9	100.0	80.1	150
Residence										
Urban	33.8	51.2	2.3	3.3	4.6	0.2	4.5	100.0	95.2	964
Rural	11.7	56.8	2.4	8.1	11.9	0.6	8.5	100.0	90.9	3,431
Region										
Dushanbe	70.0	19.9	2.1	0.5	1.8	0.0	5.7	100.0	94.3	299
GBAO	6.1	74.3	2.7	2.0	9.1	0.0	5.7	100.0	94.3	76
Sughd	22.0	61.4	3.1	3.0	8.3	0.2	2.0	100.0	97.8	1,301
DRS	12.1	51.4	1.9	6.1	20.2	0.0	8.3	100.0	91.7	1,041
Khatlon	6.1	59.2	2.1	12.3	7.1	1.3	12.0	100.0	86.7	1,677
FTF districts	4.0	58.1	2.7	7.0	10.0	1.5	16.7	100.0	81.7	951
Education										
None/primary	10.0	49.1	2.0	5.4	14.7	2.4	16.5	100.0	81.1	344
General basic	16.8	51.4	2.3	7.9	11.1	0.6	9.9	100.0	89.5	1,617
General secondary	15.5	58.1	2.5	7.9	9.9	0.3	5.9	100.0	93.8	1,730
Professional primary/ middle	20.3	60.6	2.3	5.7	8.4	0.0	2.7	100.0	97.3	321
Higher	23.3	63.4	2.1	2.7	6.2	0.3	2.1	100.0	97.6	382
Wealth quintile										
Lowest	11.6	49.0	2.6	11.1	9.3	0.8	15.5	100.0	83.7	808
Second	12.3	54.6	2.5	11.0	11.1	0.5	7.9	100.0	91.6	892
Middle	10.4	62.3	2.2	6.9	11.7	0.5	5.9	100.0	93.6	978
Fourth	15.8	60.2	2.4	3.8	12.2	0.7	4.9	100.0	94.4	931
Highest	35.0	49.6	1.9	2.6	6.2	0.2	4.5	100.0	95.3	786
Total	16.6	55.6	2.3	7.1	10.3	0.6	7.6	100.0	91.8	4,395

Note: If more than one source of ANC was mentioned, only the provider with the highest qualifications is considered in this tabulation.

¹ Skilled provider includes doctor, nurse, or midwife.

Table 10.2 Number of antenatal care visits and timing of first visit

Percent distribution of women age 15-49 who had a live birth in the 5 years preceding the survey by number of antenatal care (ANC) visits 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, according to residence, Tajikistan DHS 2017

Number of ANC visits and timing of first visit	Residence		Total
	Urban	Rural	
Number of ANC visits			
None	4.5	8.5	7.6
1	1.4	6.4	5.3
2-3	14.2	24.6	22.4
4-5	23.6	23.2	23.3
6-7	35.7	24.0	26.5
8+	19.9	12.8	14.4
Don't know/missing	0.7	0.5	0.6
Total	100.0	100.0	100.0
Number of months pregnant at time of first ANC visit			
No antenatal care	4.5	8.5	7.6
<4	74.8	65.0	67.2
4-5	16.4	21.0	20.0
6-7	3.1	4.3	4.0
8+	0.7	0.9	0.9
Don't know/missing	0.5	0.4	0.4
Total	100.0	100.0	100.0
Number of women	964	3,431	4,395
Median months pregnant at first visit (for those with ANC)			
Number of women with ANC	3.3	3.4	3.4
	920	3,140	4,060

Table 10.3 Components of antenatal care

Among women age 15-49 with a live birth in the 5 years preceding the survey, percentage who took iron tablets or syrup and drugs for intestinal parasites during the pregnancy of the most recent live birth, and among women receiving antenatal care (ANC) for the most recent live birth in the 5 years preceding the survey, percentage receiving specific antenatal services, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among women with a live birth in the past 5 years, percentage who during the pregnancy of their most recent live birth:		Number of women with a live birth in the past 5 years	Among women who received antenatal care for their most recent birth in the past 5 years, percentage with selected services			Number of women with ANC for their most recent birth
	Took iron tablets or syrup	Took intestinal parasite drugs		Blood pressure measured	Urine sample taken	Blood sample taken	
Age at birth							
<20	49.4	2.1	241	98.6	98.3	99.2	227
20-34	44.1	1.8	3,812	98.9	97.7	98.0	3,538
35-49	39.8	0.6	342	97.6	96.2	96.8	295
Birth order							
1	46.1	2.7	993	99.2	99.0	99.2	941
2-3	44.7	1.5	2,405	98.7	97.5	97.9	2,256
4-5	41.5	1.2	847	98.7	96.9	97.2	742
6+	34.5	0.0	150	96.6	93.3	93.3	122
Residence							
Urban	50.7	2.2	964	99.5	98.7	99.2	920
Rural	42.2	1.5	3,431	98.5	97.3	97.6	3,140
Region							
Dushanbe	54.1	4.2	299	99.4	99.4	100.0	282
GBAO	59.2	2.3	76	100.0	98.1	98.4	72
Sughd	50.3	1.0	1,301	100.0	99.6	99.6	1,275
DRS	33.2	2.4	1,041	97.9	95.4	96.0	955
Khatlon	43.5	1.3	1,677	98.0	97.0	97.3	1,477
FTF districts	49.6	1.2	951	98.4	98.1	97.8	792
Education							
None/primary	36.7	1.8	344	98.1	95.1	96.2	287
General basic	40.2	1.5	1,617	98.0	96.8	97.5	1,458
General secondary	45.7	1.6	1,730	99.2	98.2	98.2	1,628
Professional primary/middle	48.2	2.2	321	99.4	99.0	99.1	313
Higher	56.0	2.3	382	99.8	99.2	99.2	374
Wealth quintile							
Lowest	33.2	0.9	808	97.4	94.3	95.2	683
Second	40.2	1.0	892	98.1	97.7	97.6	821
Middle	44.0	2.2	978	99.2	97.6	98.0	921
Fourth	48.5	1.4	931	99.2	98.8	98.9	885
Highest	54.5	3.0	786	99.6	99.2	99.7	751
Total	44.1	1.7	4,395	98.7	97.6	97.9	4,060

Table 10.4 Place of delivery

Percent distribution of live births in the 5 years preceding the survey by place of delivery and percentage delivered in a health facility, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Health facility		Home	Other	Total	Percentage delivered in a health facility	Number of births
	Public sector	Private sector					
Mother's age at birth							
<20	92.2	0.0	7.1	0.7	100.0	92.2	557
20-34	88.1	0.0	11.7	0.2	100.0	88.1	5,549
35-49	83.0	0.0	16.8	0.3	100.0	83.0	380
Birth order							
1	93.2	0.1	6.5	0.2	100.0	93.3	2,085
2-3	87.6	0.0	12.1	0.3	100.0	87.7	3,266
4-5	81.3	0.0	18.6	0.2	100.0	81.3	967
6+	74.2	0.0	25.8	0.0	100.0	74.2	167
Antenatal care visits¹							
None	67.7	0.0	31.0	1.3	100.0	67.7	335
1-3	81.8	0.0	18.2	0.0	100.0	81.8	1,215
4+	93.1	0.1	6.6	0.2	100.0	93.2	2,821
Residence							
Urban	93.7	0.1	5.8	0.4	100.0	93.8	1,354
Rural	86.6	0.0	13.1	0.2	100.0	86.7	5,132
Region							
Dushanbe	96.5	0.0	2.9	0.6	100.0	96.5	413
GBAO	76.1	0.0	23.8	0.1	100.0	76.1	106
Sughd	99.0	0.1	0.8	0.1	100.0	99.1	1,853
DRS	79.4	0.0	20.5	0.1	100.0	79.4	1,534
Khatlon	84.7	0.0	14.9	0.4	100.0	84.7	2,580
FTF districts	90.4	0.0	9.1	0.5	100.0	90.4	1,444
Mother's education							
None/primary	81.6	0.0	18.0	0.4	100.0	81.6	541
General basic	84.6	0.0	15.0	0.4	100.0	84.6	2,400
General secondary	89.8	0.0	10.1	0.1	100.0	89.8	2,557
Professional primary/middle	94.4	0.3	5.2	0.1	100.0	94.7	471
Higher	97.3	0.1	2.4	0.1	100.0	97.4	517
Wealth quintile							
Lowest	78.6	0.0	21.2	0.3	100.0	78.6	1,218
Second	87.2	0.0	12.8	0.0	100.0	87.2	1,331
Middle	87.9	0.1	11.7	0.3	100.0	88.0	1,435
Fourth	92.1	0.0	7.7	0.2	100.0	92.1	1,406
Highest	95.1	0.0	4.5	0.3	100.0	95.1	1,096
Total	88.1	0.0	11.6	0.2	100.0	88.2	6,486

¹ Includes only the most recent birth in the 5 years preceding the survey. Total includes women with missing information on number of ANC visits who are not shown separately.

Table 10.5 Assistance during delivery

Percent distribution of live births in the 5 years preceding the survey by person providing assistance during delivery and percentage of births assisted by a skilled provider, and percentage with skin-to-skin contact immediately after birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Person providing assistance during delivery								Total	Percentage delivered by a skilled provider ¹	Percentage with skin-to-skin contact immediately after birth	Number of births
	Family doctor	Obstetrician-gynecologist	Other doctor	Nurse	Midwife	Traditional birth attendant	No one	Don't know/missing				
Mother's age at birth												
<20	3.2	81.2	1.0	5.1	6.1	2.8	0.4	0.3	100.0	96.5	87.3	557
20-34	2.6	78.8	1.6	4.4	7.4	4.2	0.2	0.9	100.0	94.7	88.5	5,549
35-49	3.2	74.3	1.6	5.3	8.4	5.5	0.4	1.4	100.0	92.8	79.7	380
Birth order												
1	2.7	83.6	1.3	4.0	6.0	2.1	0.1	0.2	100.0	97.6	87.0	2,085
2-3	2.4	78.0	1.7	4.7	7.6	4.6	0.3	0.8	100.0	94.4	89.0	3,266
4-5	3.1	73.0	1.4	4.5	9.5	6.2	0.3	1.9	100.0	91.6	87.1	967
6+	2.9	66.7	3.0	6.4	6.6	9.9	0.9	3.5	100.0	85.6	81.8	167
Antenatal care visits²												
None	3.2	50.9	2.8	7.9	15.0	16.1	1.4	2.8	100.0	79.8	78.4	335
1-3	1.8	71.7	1.8	5.7	10.9	6.4	0.1	1.6	100.0	91.9	87.7	1,215
4+	2.5	85.4	1.3	3.7	4.7	2.0	0.1	0.3	100.0	97.6	89.2	2,821
Don't know/missing	*	*	*	*	*	*	*	*	100.0	*	*	24
Place of delivery												
Public facility	2.3	87.3	1.7	4.1	4.6	0.0	0.0	0.0	100.0	100.0	90.0	5,716
Private facility	*	*	*	*	*	*	*	*	100.0	*	*	2
Elsewhere	5.2	15.2	0.6	7.8	27.2	34.9	1.9	7.1	100.0	56.1	72.4	768
Residence												
Urban	2.8	84.8	1.1	5.0	4.0	1.9	0.2	0.4	100.0	97.6	89.6	1,354
Rural	2.6	77.2	1.7	4.4	8.2	4.8	0.2	1.0	100.0	94.0	87.4	5,132
Region												
Dushanbe	4.6	77.2	0.8	10.9	4.7	1.7	0.0	0.0	100.0	98.3	89.1	413
GBAO	0.2	84.2	1.0	2.8	9.7	2.0	0.0	0.0	100.0	98.0	84.7	106
Sughd	1.0	97.0	0.0	0.8	0.7	0.3	0.1	0.1	100.0	99.5	93.0	1,853
DRS	4.8	62.7	0.9	8.1	16.2	5.1	0.3	1.9	100.0	92.7	81.1	1,534
Khatlon	2.3	75.2	3.2	4.1	7.1	6.8	0.3	1.0	100.0	91.9	88.2	2,580
FTF districts	2.9	75.9	4.4	4.0	6.2	4.5	0.5	1.7	100.0	93.4	86.8	1,444
Mother's education												
None/primary	2.0	68.4	4.0	5.6	6.9	11.1	0.2	1.9	100.0	86.8	86.1	541
General basic	4.0	72.3	1.2	5.2	10.6	4.8	0.2	1.7	100.0	93.3	86.1	2,400
General secondary	1.7	82.9	1.4	4.1	6.0	3.4	0.3	0.2	100.0	96.1	89.1	2,557
Professional primary/middle	1.9	87.4	1.1	4.6	3.6	1.3	0.0	0.0	100.0	98.7	92.1	471
Higher	2.3	90.9	1.8	2.4	2.4	0.2	0.0	0.0	100.0	99.8	88.2	517
Wealth quintile												
Lowest	3.2	71.8	1.7	4.3	9.3	7.6	0.3	1.9	100.0	90.2	85.5	1,218
Second	3.0	77.6	1.5	4.1	6.9	5.9	0.1	1.0	100.0	93.0	86.1	1,331
Middle	1.9	79.4	2.0	3.4	8.7	3.9	0.2	0.6	100.0	95.3	87.9	1,435
Fourth	2.5	81.7	1.6	4.8	7.0	1.6	0.2	0.7	100.0	97.5	91.0	1,406
Highest	2.9	83.4	1.0	6.4	4.1	1.9	0.2	0.1	100.0	97.8	88.6	1,096
Total	2.6	78.7	1.6	4.5	7.3	4.2	0.2	0.8	100.0	94.8	87.9	6,486

Note: If the respondent mentioned more than one person attending during delivery, only the most qualified person is considered in this tabulation. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Skilled provider includes doctor, nurse, or midwife.

² Includes only the most recent birth in the 5 years preceding the survey. Total includes women with missing information on number of ANC visits who are not shown separately.

Table 10.6 Cesarean section

Percentage of live births in the 5 years preceding the survey delivered by cesarean section (C-section), percentage delivered by C-section planned before the onset of labor pains, and percentage delivered by C-section decided on after the onset of labor pains, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage delivered by C-section	Timing of decision to conduct C-section		Number of births
		Before onset of labor pains	After onset of labor pains	
Mother's age at birth				
<20	5.5	2.1	3.4	557
20-34	4.8	2.2	2.6	5,549
35-49	11.9	6.0	5.9	380
Birth order				
1	7.1	2.7	4.4	2,085
2-3	4.5	2.4	2.1	3,266
4-5	3.8	2.1	1.7	967
6+	5.4	1.2	4.2	167
Antenatal care visits¹				
None	3.7	1.1	2.6	335
1-3	5.2	2.6	2.5	1,215
4+	6.3	3.0	3.3	2,821
Don't know/missing	*	*	*	24
Place of delivery				
Public facility	6.0	2.7	3.2	5,716
Private facility	*	*	*	2
Residence				
Urban	7.0	2.5	4.5	1,354
Rural	4.8	2.4	2.4	5,132
Region				
Dushanbe	5.7	2.8	2.9	413
GBAO	5.0	3.7	1.4	106
Sughd	5.2	1.7	3.4	1,853
DRS	5.4	2.8	2.6	1,534
Khatlon	5.2	2.5	2.6	2,580
FTF districts				
	4.0	1.8	2.1	1,444
Mother's education				
None/primary	5.4	2.6	2.8	541
General basic	5.2	2.3	2.9	2,400
General secondary	4.6	2.3	2.3	2,557
Professional primary/middle	4.3	2.1	2.2	471
Higher	9.4	3.7	5.6	517
Wealth quintile				
Lowest	3.1	1.4	1.7	1,218
Second	5.8	3.0	2.9	1,331
Middle	5.7	2.7	3.1	1,435
Fourth	4.8	2.2	2.7	1,406
Highest	6.9	2.8	4.0	1,096
Total	5.3	2.4	2.8	6,486

Note: The question on C-section was asked only of women who delivered in a health facility. In this table, it is assumed that women who did not give birth in a health facility did not receive a C-section. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Includes only the most recent birth in the 5 years preceding the survey. Total includes women with missing information on number of ANC visits who are not shown separately.

Table 10.7 Duration of stay in health facility after birth

Among women with a birth in the 5 years preceding the survey who delivered their most recent live birth in a health facility, percent distribution by duration of stay in the health facility following their most recent live birth, according to type of delivery, Tajikistan DHS 2017

Type of delivery	<6 hours	6-11 hours	12-23 hours	1-2 days	3+ days	Don't know	Total	Number of women
Vaginal birth	5.7	0.5	0.1	22.7	70.8	0.2	100.0	3,617
Cesarean section	2.4	0.9	0.0	3.7	92.7	0.3	100.0	253

Table 10.8 Timing of first postnatal check for the mother

Among women age 15-49 giving birth in the 2 years preceding the survey, percent distribution of the mother's first postnatal check for the most recent live birth by time after delivery, and percentage of women with a live birth during the 2 years preceding the survey who received a postnatal check in the first 2 days after giving birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Time after delivery of mother's first postnatal check ¹						No postnatal check ²	Total	Percentage of women with a postnatal check during the first 2 days after birth ¹	Number of women
	Less than 4 hours	4-23 hours	1-2 days	3-6 days	7-41 days	Don't know/missing				
Age at birth										
<20	77.5	5.1	8.4	0.0	0.0	4.1	4.8	100.0	91.1	173
20-34	81.0	4.7	6.3	1.0	0.9	0.7	5.6	100.0	91.9	2,173
35-49	82.4	2.7	5.8	1.8	0.0	1.5	5.9	100.0	90.9	135
Birth order										
1	82.8	4.2	6.8	1.1	0.6	1.6	3.0	100.0	93.7	686
2-3	80.5	4.8	6.1	1.0	0.9	0.8	6.0	100.0	91.4	1,328
4-5	78.7	4.9	6.1	0.9	0.6	0.5	8.3	100.0	89.7	411
6+	78.6	2.5	10.6	0.0	1.8	0.0	6.5	100.0	91.7	55
Place of delivery										
Health facility	85.9	4.9	5.5	0.4	0.5	1.1	1.6	100.0	96.3	2,217
Elsewhere	38.2	1.7	13.4	5.3	2.7	0.0	38.6	100.0	53.3	264
Residence										
Urban	83.7	4.2	5.7	0.5	1.7	1.4	2.8	100.0	93.7	476
Rural	80.1	4.7	6.5	1.1	0.6	0.8	6.2	100.0	91.3	2,005
Region										
Dushanbe	82.6	3.5	4.8	0.3	4.4	3.3	1.1	100.0	90.9	142
GBAO	71.4	6.1	11.2	0.8	1.6	0.0	8.9	100.0	88.7	37
Sughd	82.6	6.8	8.0	0.6	0.0	1.7	0.4	100.0	97.3	721
DRS	75.9	2.8	5.6	0.7	0.8	0.5	13.6	100.0	84.3	594
Khatlon	82.6	4.1	5.7	1.5	0.8	0.4	5.0	100.0	92.4	987
FTF districts	82.1	5.9	3.8	1.7	0.3	0.6	5.5	100.0	91.7	542
Education										
None/primary	83.4	4.8	3.2	1.8	0.4	0.3	6.1	100.0	91.4	193
General basic	79.0	4.6	6.4	0.4	0.9	0.9	7.9	100.0	90.0	892
General secondary	80.7	4.8	6.8	1.3	0.6	1.0	4.9	100.0	92.2	1,014
Professional primary/ middle	85.7	4.4	6.0	1.2	1.2	0.0	1.5	100.0	96.1	188
Higher	82.6	3.3	7.9	0.3	1.4	2.6	1.8	100.0	93.8	195
Wealth quintile										
Lowest	74.6	3.8	9.0	2.7	0.3	1.0	8.6	100.0	87.4	445
Second	80.2	4.6	6.5	0.8	1.0	0.9	6.1	100.0	91.3	503
Middle	81.8	5.3	4.7	1.2	0.4	0.5	6.1	100.0	91.8	579
Fourth	83.1	4.4	6.3	0.0	0.7	1.4	4.1	100.0	93.8	552
Highest	83.9	4.6	5.9	0.3	1.7	1.0	2.6	100.0	94.4	402
Total	80.8	4.6	6.4	1.0	0.8	1.0	5.5	100.0	91.8	2,481

¹ Includes women who received a check from a doctor, midwife, nurse, or traditional birth attendant

² Includes women who received a check after 41 days

Table 10.9 Type of provider of first postnatal check for the mother

Among women age 15-49 giving birth in the 2 years preceding the survey, percent distribution by type of provider of the mother's first postnatal health check during the 2 days after the most recent live birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Type of health provider of mother's first postnatal check						No postnatal check during the first 2 days after birth	Total	Number of women
	Family doctor	Obstetrician/gynecologist	Other doctor	Nurse	Midwife	Traditional birth attendant			
Age at birth									
<20	2.4	64.4	9.1	8.1	6.4	0.8	8.9	100.0	173
20-34	3.7	57.2	9.4	9.3	11.0	1.2	8.1	100.0	2,173
35-49	3.7	55.8	8.4	9.7	12.1	1.1	9.1	100.0	135
Birth order									
1	2.1	62.5	9.4	10.1	9.3	0.4	6.3	100.0	686
2-3	4.5	56.6	9.2	8.5	11.4	1.1	8.6	100.0	1,328
4-5	3.9	53.0	10.5	10.1	10.2	2.1	10.3	100.0	411
6+	1.9	56.1	2.4	9.7	15.6	6.0	8.3	100.0	55
Place of delivery									
Health facility	3.6	63.4	10.2	9.0	10.1	0.0	3.7	100.0	2,217
Elsewhere	4.4	8.9	1.8	11.4	15.6	11.2	46.7	100.0	264
Residence									
Urban	3.7	60.9	11.8	5.6	11.4	0.3	6.3	100.0	476
Rural	3.6	56.9	8.7	10.1	10.6	1.4	8.7	100.0	2,005
Region									
Dushanbe	6.8	42.6	22.3	5.1	14.2	0.0	9.1	100.0	142
GBAO	0.0	74.9	4.1	4.6	5.1	0.0	11.3	100.0	37
Sughd	0.4	69.0	4.3	6.5	17.0	0.0	2.7	100.0	721
DRS	9.7	56.1	9.0	2.0	7.3	0.2	15.7	100.0	594
Khatlon	2.0	51.8	11.5	16.4	7.9	2.9	7.6	100.0	987
FTF districts	0.8	60.1	12.2	11.7	5.2	1.7	8.3	100.0	542
Education									
None/primary	2.7	50.4	13.5	10.6	10.3	4.0	8.6	100.0	193
General basic	5.9	55.2	9.2	6.5	11.5	1.7	10.0	100.0	892
General secondary	2.4	56.9	9.6	11.4	11.1	0.7	7.8	100.0	1,014
Professional primary/middle	0.7	65.1	7.3	13.6	9.3	0.0	3.9	100.0	188
Higher	3.4	72.2	6.5	4.9	6.9	0.0	6.2	100.0	195
Wealth quintile									
Lowest	4.2	51.4	6.3	10.9	12.3	2.3	12.6	100.0	445
Second	3.4	55.6	8.6	13.2	9.6	0.9	8.7	100.0	503
Middle	3.2	57.6	8.8	8.9	11.5	1.8	8.2	100.0	579
Fourth	3.5	62.7	10.0	7.6	9.5	0.6	6.2	100.0	552
Highest	4.2	60.1	13.5	5.4	11.0	0.3	5.6	100.0	402
Total	3.6	57.6	9.3	9.3	10.7	1.2	8.2	100.0	2,481

Table 10.10 Timing of first postnatal check for the newborn

Percent distribution of most recent live births in the 2 years preceding the survey by time after birth of first postnatal check, and percentage of births with a postnatal check during the first 2 days after birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Time after delivery of newborn's first postnatal check ¹						No postnatal check ²	Total	Percentage of births with a postnatal check during the first 2 days after birth ¹	Number of births
	Less than 1 hour	1-3 hours	4-23 hours	1-2 days	3-6 days	Don't know				
Mother's age at birth										
<20	15.7	56.8	6.5	6.7	0.4	4.6	9.2	100.0	85.8	173
20-34	14.6	65.5	4.5	5.7	1.3	1.4	7.1	100.0	90.3	2,173
35-49	13.5	60.6	1.2	7.8	2.5	2.9	11.4	100.0	83.1	135
Birth order										
1	15.3	65.2	5.0	5.9	0.9	2.1	5.5	100.0	91.4	686
2-3	13.8	65.7	4.3	6.0	1.4	1.7	7.1	100.0	89.8	1,328
4-5	16.4	62.1	3.3	5.1	1.7	0.8	10.7	100.0	86.8	411
6+	12.4	50.8	9.3	7.8	0.0	4.9	14.7	100.0	80.3	55
Place of delivery										
Health facility	15.9	69.5	4.9	4.7	0.5	1.9	2.6	100.0	95.0	2,217
Elsewhere	4.4	23.4	0.6	15.4	8.0	0.3	47.9	100.0	43.8	264
Residence										
Urban	18.7	65.0	4.5	4.9	1.3	2.0	3.4	100.0	93.2	476
Rural	13.7	64.6	4.4	6.1	1.3	1.7	8.4	100.0	88.7	2,005
Region										
Dushanbe	26.7	53.4	5.2	5.6	1.1	3.1	4.9	100.0	90.9	142
GBAO	23.8	49.1	6.1	6.5	0.4	1.8	12.3	100.0	85.5	37
Sughd	19.7	62.3	6.0	7.1	0.4	3.3	1.0	100.0	95.2	721
DRS	17.2	56.5	3.0	5.2	1.6	1.4	15.1	100.0	81.9	594
Khatlon	7.3	73.4	3.9	5.3	1.8	0.5	7.7	100.0	90.0	987
FTF districts	6.8	73.4	6.3	3.1	1.9	1.0	7.6	100.0	89.6	542
Mother's education										
None/primary	7.5	65.3	6.1	5.7	0.5	0.9	14.1	100.0	84.5	193
General basic	14.4	61.6	5.6	5.4	1.6	1.4	10.0	100.0	87.0	892
General secondary	15.1	66.0	3.4	6.5	1.5	2.2	5.4	100.0	90.9	1,014
Professional primary/middle	16.1	70.0	4.6	4.6	0.7	0.7	3.3	100.0	95.3	188
Higher	19.0	65.8	2.4	6.1	0.1	2.8	3.8	100.0	93.3	195
Wealth quintile										
Lowest	14.5	59.3	4.7	7.4	2.1	1.2	10.7	100.0	86.0	445
Second	15.0	63.7	5.0	5.6	1.4	1.4	7.9	100.0	89.3	503
Middle	12.2	65.8	4.8	6.2	1.6	0.9	8.5	100.0	89.0	579
Fourth	13.6	68.6	3.4	5.0	0.3	3.5	5.5	100.0	90.7	552
Highest	19.3	64.6	4.1	5.2	1.1	1.4	4.3	100.0	93.2	402
Total	14.6	64.6	4.4	5.9	1.3	1.7	7.4	100.0	89.6	2,481

¹ Includes newborns who received a check from a doctor, midwife, nurse, or traditional birth attendant

² Includes newborns who received a check after the first week of life

Table 10.11 Type of provider of first postnatal check for the newborn

Percent distribution of most recent live births in the 2 years preceding the survey by type of provider of the newborn's first postnatal health check during the 2 days after birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Type of health provider of newborn's first postnatal check						No postnatal check during the first 2 days after birth	Total	Number of births
	Family doctor	Obstetrician/gynecologist	Other doctor	Nurse	Midwife	Traditional birth attendant			
Mother's age at birth									
<20	4.7	7.7	62.0	6.6	4.7	0.0	14.2	100.0	173
20-34	6.4	7.1	59.9	10.4	5.6	0.8	9.7	100.0	2,173
35-49	4.6	5.1	55.2	10.5	6.6	1.1	16.9	100.0	135
Birth order									
1	5.1	8.9	64.1	8.4	4.7	0.2	8.6	100.0	686
2-3	6.4	6.2	60.0	10.2	6.1	0.9	10.2	100.0	1,328
4-5	7.6	6.8	53.9	12.0	5.6	1.0	13.2	100.0	411
6+	5.3	7.1	43.6	16.4	4.4	3.6	19.7	100.0	55
Place of delivery									
Health facility	6.1	7.3	66.5	10.4	4.7	0.1	5.0	100.0	2,217
Elsewhere	6.9	5.3	3.6	8.0	13.3	6.8	56.2	100.0	264
Residence									
Urban	7.7	7.0	64.4	11.0	2.6	0.5	6.8	100.0	476
Rural	5.9	7.1	58.7	9.9	6.3	0.9	11.3	100.0	2,005
Region									
Dushanbe	14.0	6.1	53.0	17.7	0.0	0.0	9.1	100.0	142
GBAO	1.0	16.1	59.2	5.1	4.1	0.0	14.5	100.0	37
Sughd	0.6	3.9	74.2	10.9	5.7	0.0	4.8	100.0	721
DRS	13.6	6.3	56.8	1.5	3.3	0.4	18.1	100.0	594
Khatlon	5.0	9.6	52.0	13.8	7.8	1.7	10.0	100.0	987
FTF districts	4.8	6.6	58.1	11.4	8.0	0.7	10.4	100.0	542
Mother's education									
None/primary	5.9	7.9	51.0	10.0	8.1	1.6	15.5	100.0	193
General basic	9.6	6.0	56.5	8.4	5.5	1.1	13.0	100.0	892
General secondary	3.9	8.1	60.9	11.1	6.2	0.6	9.1	100.0	1,014
Professional primary/middle	4.3	5.4	70.1	11.0	4.6	0.0	4.7	100.0	188
Higher	4.6	7.2	67.6	12.2	1.7	0.0	6.7	100.0	195
Wealth quintile									
Lowest	7.7	8.3	53.4	8.1	7.5	1.0	14.0	100.0	445
Second	4.7	6.0	59.0	11.9	6.7	0.9	10.7	100.0	503
Middle	6.5	7.1	59.7	9.0	5.6	1.2	11.0	100.0	579
Fourth	5.4	7.1	62.3	9.8	5.6	0.4	9.3	100.0	552
Highest	7.2	6.8	64.5	12.1	2.1	0.4	6.8	100.0	402
Total	6.2	7.1	59.8	10.1	5.6	0.8	10.4	100.0	2,481

Table 10.12 Content of postnatal care for newborns

Among most recent live births in the 2 years preceding the survey, percentage for whom selected functions were performed during the first 2 days after birth and percentage with at least two signal functions performed during the first 2 days after birth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among most recent live births in the 2 years preceding the survey, percentage for whom the selected function was performed during the first 2 days after birth:						Percentage with at least two signal functions performed during the first 2 days after birth	Number of births
	Cord examined	Temperature measured	Counseling on danger signs	Counseling on breastfeeding	Observation of breastfeeding	Weighed ¹		
Mother's age at birth								
<20	92.5	92.0	87.8	87.3	88.8	94.8	94.3	173
20-34	90.1	90.3	85.7	86.5	83.4	92.3	93.6	2,173
35-49	84.6	86.1	79.0	78.1	74.1	89.4	89.4	135
Birth order								
1	90.5	91.5	86.0	88.0	89.3	95.6	94.9	686
2-3	90.9	90.9	86.9	87.3	82.9	92.4	93.5	1,328
4-5	86.2	85.8	80.2	80.1	75.0	87.9	90.8	411
6+	90.6	89.1	83.0	78.2	76.7	82.5	90.6	55
Place of delivery								
Health facility	91.0	92.3	87.1	87.1	84.2	97.6	94.8	2,217
Elsewhere	81.2	72.2	71.5	77.1	75.1	47.7	81.9	264
Residence								
Urban	95.1	94.9	90.6	91.9	85.9	96.5	96.7	476
Rural	88.8	89.1	84.2	84.7	82.6	91.3	92.6	2,005
Region								
Dushanbe	94.4	94.6	92.7	93.3	85.6	97.4	95.5	142
GBAO	86.4	82.7	85.7	82.0	78.7	93.8	89.9	37
Sughd	96.5	96.2	95.9	92.2	82.0	97.9	97.4	721
DRS	83.8	78.4	73.3	75.1	74.8	84.7	87.0	594
Khatlon	88.4	92.6	84.2	87.3	89.1	92.1	94.1	987
FTF districts	83.0	90.6	79.7	82.4	88.1	94.1	92.5	542
Mother's education								
None/primary	89.0	86.6	82.8	85.6	83.5	91.0	91.4	193
General basic	89.6	89.3	84.3	84.1	81.6	88.8	92.6	892
General secondary	89.6	90.8	85.9	86.7	83.4	93.5	93.5	1,014
Professional primary/middle	90.0	92.7	86.5	89.1	86.5	99.0	96.4	188
Higher	94.4	92.3	90.2	89.0	86.1	97.7	95.4	195
Wealth quintile								
Lowest	83.6	84.2	77.4	76.9	74.0	83.4	88.5	445
Second	88.5	90.4	84.5	85.6	84.9	92.2	92.5	503
Middle	88.7	88.2	83.8	86.0	84.0	93.5	92.6	579
Fourth	93.0	93.0	89.2	88.9	86.5	95.2	96.1	552
Highest	96.6	95.6	93.0	93.1	85.7	96.7	97.2	402
Total	90.0	90.2	85.5	86.1	83.2	92.3	93.4	2,481

¹ Captures newborns who were weighed "at birth." May exclude some newborns who were weighed during the 2 days after birth.

Table 10.13 Knowledge of danger signs and complications during pregnancy and delivery

Percentage of women age 15-49 with a live birth in the 5 years preceding the survey who listed specific danger signs and complications of pregnancy and childbirth, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Danger signs and complications													Aware of two or more danger signs	Number of women	
	Severe abdominal pain	Vaginal bleeding	Fever	Edema	Severe headache	Blurred vision	Nausea or vomiting	Poor fetal movement	Fast or difficult breathing	Convulsions/fits	Loss of consciousness	Weakness/ too weak to get out of bed	Strong labor pain			Other
Age at birth																
<20	56.3	41.3	28.3	12.4	19.0	8.2	24.1	22.2	4.2	5.3	0.6	2.7	5.5	0.6	69.5	530
20-34	58.8	42.0	30.3	17.4	18.3	10.0	25.7	21.0	3.8	5.1	1.9	1.8	6.0	0.2	72.3	3,553
35-49	58.9	45.5	30.1	15.0	22.1	8.9	25.7	19.1	4.5	4.0	1.8	2.8	5.1	0.0	73.3	312
Birth order																
1	57.0	41.3	29.5	15.4	17.4	9.4	26.6	21.3	3.7	4.9	1.4	2.3	6.4	0.3	71.0	2,062
2-3	60.5	43.2	31.2	19.4	19.5	8.9	24.8	21.3	3.6	4.8	2.1	1.6	5.3	0.2	73.4	1,593
4-5	58.9	43.4	30.3	14.9	20.2	12.1	23.5	21.1	5.3	6.2	2.1	1.9	5.4	0.2	72.7	628
6+	55.7	36.1	23.0	9.3	20.7	13.3	27.2	13.2	3.3	3.7	0.5	2.2	6.0	1.0	66.1	112
Place of delivery																
Health facility	59.9	42.9	29.9	17.3	18.2	9.3	25.9	21.7	4.1	5.0	1.8	2.0	6.3	0.2	72.6	3,906
Elsewhere	47.2	35.9	31.4	11.1	21.9	13.0	22.1	16.2	2.3	5.3	1.0	1.7	2.6	0.5	67.0	490
Residence																
Urban	64.1	44.2	29.6	20.3	22.2	9.6	27.0	27.0	5.4	6.4	3.9	4.7	8.4	0.0	77.1	964
Rural	56.9	41.6	30.2	15.6	17.6	9.7	25.1	19.4	3.5	4.6	1.1	1.2	5.2	0.3	70.6	3,431
Region																
Dushanbe	74.7	44.6	36.5	31.5	28.8	11.4	23.3	36.9	9.4	11.2	10.9	12.2	17.8	0.0	79.6	299
GBAO	52.9	42.5	47.2	8.8	23.2	4.4	32.0	21.1	2.6	8.9	1.2	0.9	1.5	0.0	72.9	76
Sughd	73.0	56.9	28.5	27.3	14.0	6.5	24.9	31.8	4.4	3.4	0.4	0.3	0.7	0.0	82.1	1,301
DRS	51.9	56.4	34.6	10.1	18.3	7.5	16.3	14.3	5.7	11.1	2.6	2.5	4.4	0.8	69.3	1,041
Khatlon	48.7	21.4	26.5	10.1	20.4	13.5	31.8	14.1	1.5	1.3	0.7	1.2	8.8	0.2	64.4	1,677
FTF districts	48.7	26.6	22.4	11.2	14.3	11.2	17.2	11.2	0.4	1.1	1.2	1.0	14.4	0.3	59.2	951
Education																
None/primary	49.8	28.4	29.6	13.0	18.7	10.9	21.9	12.3	1.3	5.6	1.6	1.4	5.5	0.6	63.7	344
General basic	54.3	41.3	30.0	15.6	16.6	9.8	22.6	17.7	4.3	6.0	1.8	2.0	6.8	0.3	68.4	1,617
General secondary	59.8	41.3	28.5	16.3	19.0	9.6	27.3	22.5	3.7	3.0	1.1	1.5	4.7	0.1	72.8	1,730
Professional primary/ middle	66.8	52.8	35.3	23.0	20.1	8.1	31.9	26.2	3.2	6.9	1.8	1.5	5.1	0.3	83.1	321
Higher	71.4	52.7	33.2	20.2	24.1	10.1	27.4	31.9	6.2	8.2	4.1	4.6	8.3	0.3	81.5	382
Wealth quintile																
Lowest	51.3	35.6	31.5	13.9	16.9	8.8	26.4	16.9	3.4	3.2	0.6	1.2	4.0	0.1	67.7	808
Second	54.4	37.8	30.2	13.4	17.1	11.5	26.8	18.4	4.3	4.5	0.7	1.1	5.1	0.4	68.1	892
Middle	58.3	41.7	31.4	17.8	16.7	9.0	25.3	17.6	2.8	4.8	1.4	0.7	5.8	0.4	71.7	978
Fourth	60.9	48.3	28.3	16.0	21.1	9.3	24.6	25.6	3.9	6.0	1.7	2.0	5.3	0.1	75.0	931
Highest	67.9	47.2	28.7	22.4	21.6	10.0	24.4	27.2	5.5	6.8	4.6	5.2	9.4	0.2	77.7	786
Total	58.5	42.2	30.1	16.6	18.6	9.7	25.5	21.0	3.9	5.0	1.7	2.0	5.9	0.2	72.0	4,395

Table 10.14 Problems in accessing health care

Percentage of women age 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, Tajikistan DHS 2017

Background characteristic	Problems in accessing health care					Number of women
	Getting permission to go for treatment	Getting money for treatment	Distance to health facility	Not wanting to go alone	At least one problem accessing health care	
Age						
15-19	19.7	33.9	23.7	26.4	42.2	1,911
20-34	19.7	35.9	21.7	20.8	43.0	5,503
35-49	14.4	35.2	19.3	13.6	40.6	3,304
Number of living children						
0	19.4	35.5	22.9	24.5	43.5	3,215
1-2	18.0	34.7	19.9	18.5	41.4	3,216
3-4	16.8	33.9	19.8	16.4	39.6	3,428
5+	18.5	42.9	26.5	18.0	50.0	859
Marital status						
Never married	19.1	35.3	22.7	24.6	42.7	2,388
Married or living together	17.8	34.7	20.8	18.2	41.4	7,747
Divorced/separated/widowed	17.9	44.6	22.5	16.7	50.0	583
Employed last 12 months						
Not employed	19.1	36.2	22.6	21.3	43.4	7,985
Employed for cash	12.7	30.3	15.3	12.9	35.7	2,310
Employed not for cash	27.6	46.5	29.4	22.4	53.6	423
Residence						
Urban	11.0	27.5	9.6	11.7	32.7	2,694
Rural	20.5	38.0	25.2	22.2	45.3	8,024
Region						
Dushanbe	10.9	26.7	10.3	9.9	31.1	955
GBAO	19.3	46.5	33.4	13.9	54.7	209
Sughd	9.3	24.3	13.2	8.7	31.2	3,292
DRS	20.0	33.9	23.4	23.4	41.9	2,342
Khatlon	26.0	47.0	28.9	29.1	53.5	3,920
FTF districts	27.7	38.3	30.0	28.4	44.5	2,096
Education						
None/primary	31.3	48.1	33.2	31.4	52.5	619
General basic	21.9	39.6	25.3	23.9	47.6	3,615
General secondary	17.7	36.6	21.4	18.9	43.2	4,624
Professional primary/middle	6.5	21.9	9.4	9.3	27.5	860
Higher	8.0	17.9	9.2	8.5	23.5	1,000
Wealth quintile						
Lowest	29.7	58.4	38.5	31.1	66.1	2,113
Second	22.4	42.1	28.0	24.5	50.2	2,101
Middle	18.7	33.9	22.1	21.3	42.1	2,109
Fourth	11.2	22.2	11.5	12.6	28.3	2,155
Highest	9.1	21.3	7.5	9.2	25.3	2,240
Total	18.1	35.4	21.3	19.6	42.1	10,718

Key Findings

- **Vaccinations:** 82% of children age 24-35 months had received all basic vaccinations, and 70% had been given all of the vaccinations appropriate for their age.
- **Fever:** Advice or treatment was sought for 44% of children under age 5 who had a fever in the 2 weeks before the survey.
- **Diarrhea:** Advice or treatment was sought for 49% of children who had diarrhea in the 2 weeks before the survey. The majority of children ill with diarrhea (73%) received some form of oral rehydration therapy (ORT).
- **Feeding practices during diarrhea:** Increased fluids and continued feeding are important in counteracting the effects of diarrhea. Only 27% of children with diarrhea were given more liquids than usual as recommended, and only 40% were given the same amount of food or more than usual.

Information on child health and survival can help policymakers and program managers assess the efficacy of current strategies, formulate appropriate interventions to prevent deaths from childhood illnesses, and improve the health of children in Tajikistan.

This chapter presents information from the 2017 TjDHS on birth weight and vaccination status for young children. It also looks at the prevalence of, and treatment practices for, three common childhood illnesses: symptoms of acute respiratory infection (ARI), fever, and diarrhea. Because appropriate sanitary practices can help prevent and reduce the severity of diarrheal disease, information is also provided on the disposal of children's fecal matter.

11.1 BIRTH WEIGHT

Low birth weight

Percentage of births with a reported birth weight <2.5 kilograms regardless of gestational age.

Sample: Live births in the 5 years before the survey that have a reported birth weight, from either a written record or a mother's report

Birth weight is an indicator of a child's risk of malnutrition and neonatal death. It also is an indirect indicator of maternal nutritional status in the months prior to the child's birth. Data on birth weight were obtained for 92% of births in the 5 years preceding the survey from either a written record or the mother's recall. Among children with a reported birth weight, 8% weighed less than 2.5 kilograms at birth (**Table 11.1**).

The survey also collected information on the mother's estimate of the child's size at birth. Although birth size estimates provided by the mother are subjective, they have been shown to serve as a reasonable proxy

for a child's birth weight. Two percent of births in the 5 years preceding the survey were considered by mothers to be very small, 13% were reported as smaller than average, and 81% were regarded as average or larger than average (Table 11.1).

11.2 VACCINATION OF CHILDREN

Immunization of children against vaccine-preventable diseases is one of most cost-effective ways of reducing child morbidity and mortality. During the 2017 TjDHS interviews, vaccination data were obtained for children under age 3, from either a written vaccination record or the mother's recall if a written record was not available in the home. In Tajikistan, written vaccination records are usually maintained in local health facilities and are only rarely found in the home. Thus, in an effort to increase the information obtained from written records, the TjDHS team supervisor also went to the local health clinic after all interviews were completed in the cluster to record vaccination data from the health cards of children whose mothers agreed to allow their child's card to be reviewed.

11.2.1 Vaccination Card Ownership and Availability

Table 11.2 shows that almost all young children in Tajikistan have a vaccination card (97% of children age 12-23 months and 96% of children age 24-35 months). The 2017 TjDHS field staff saw the records for most children (90% of children age 12-23 months and 88% of children age 24-35 months) either in the home or at a health facility.

11.2.2 Vaccination Coverage

Table 11.3 presents information on the proportion of young children who have received specific vaccines as well as several summary measures of vaccination coverage. The first summary indicator assesses the coverage of "basic" vaccinations.

All basic vaccinations

Percentage of children age 24-35 months¹ who received specific vaccines at any time before the survey (according to a vaccination card or the mother's report). To have received all basic vaccinations, a child must receive at least:

- One dose of BCG vaccine, which protects against tuberculosis
- Three doses of DPT-HepB-Hib vaccine, which protects against diphtheria, pertussis (whooping cough), tetanus, hepatitis B, and *Haemophilus influenzae* type b
- Three doses of polio vaccine, excluding polio 0 given at birth
- One dose of measles and rubella (MR) vaccine

Sample: Living children age 24-35 months

In addition, the table shows the percentages of children age 12-23 months and children age 24-35 months who received all of the vaccinations recommended for their age group at any time before the survey.

¹ Data on coverage of all basic vaccinations are not presented for children age 12-23 months because some of the children in that age group have only recently reached the age when the measles vaccine is recommended (12 months) and, thus, may not yet have received the MR vaccine.

All age-appropriate vaccinations

Children age 12-23 months

Percentage of children age 12-23 months who received the following vaccinations appropriate for their age *at any time before the survey*:

- One dose of BCG vaccine
- Hepatitis B (birth dose)
- Three doses of DPT-HepB-Hib vaccine
- Four doses of polio vaccine, including polio 0 given at birth
- Two doses of rotavirus vaccine

Children age 24-35 months

Percentage of children age 24-35 months who, *in addition to all of the age-appropriate vaccinations for the 12-23 month age group*, received the following vaccinations *at any the time before the survey*:

- Fourth dose of DPT vaccine
- Fifth dose of oral polio vaccine
- One dose of measles and rubella vaccine

Finally, the table shows the percentages of children who received all of the recommended vaccinations by the appropriate age.

Vaccinated by appropriate age

Children age 12-23 months

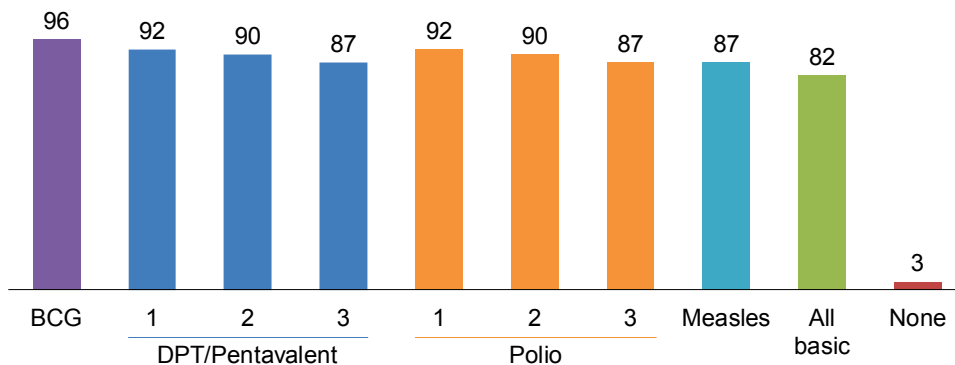
Percentage of children age 12-23 months who received all of the vaccinations appropriate for their age *by age 12 months*.

Children age 24-35 months

Percentage of children age 24-35 months who, in addition to all of the age-appropriate vaccinations for the 12-23 month age group, received the fourth dose of DPT, the fifth dose of polio vaccine, and the one dose of measles and rubella vaccine *by age 24 months*.

Figure 11.1 Childhood vaccinations

Percentage of children age 24-35 months vaccinated at any time before the survey



Vaccination coverage is high in Tajikistan. Among children age 24-35 months, **Figure 11.1** shows that 82% had received all basic vaccinations at the time of the survey. Only 3% had received no vaccinations. Among the basic vaccinations, coverage is highest for the BCG vaccine (96%), followed closely by DPT-HepB-Hib 1 and polio 1 (92% each). Coverage remains high for subsequent doses of the DPT-HepB-Hib and polio vaccines, with 87% of children having received the third doses of each of these vaccines. Eighty-seven percent of children age 24-35 months have been vaccinated against measles and rubella.

Table 11.3 shows that 79% of children age 12-23 months and 70% of children age 24-35 months have received all of the vaccinations appropriate for their age group. The majority of children received all of the vaccinations by the appropriate age (74% of children age 12-23 months and 64% of children age 24-35 months).

Patterns by background characteristics

- Vaccination coverage is generally lower among urban children than rural children. For example, 84% of children age 24-35 months in rural areas have received all basic vaccinations, as compared with 76% of children in urban areas (**Table 11.4** and **Figure 11.2**).
- Sughd has the highest proportion of children age 24-35 months who have received all basic vaccinations (92%), followed by Khatlon (86%) (**Figure 11.3**).

Figure 11.2 Vaccination coverage by residence

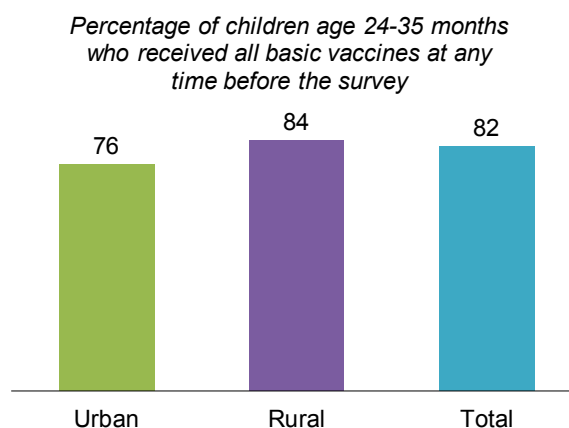
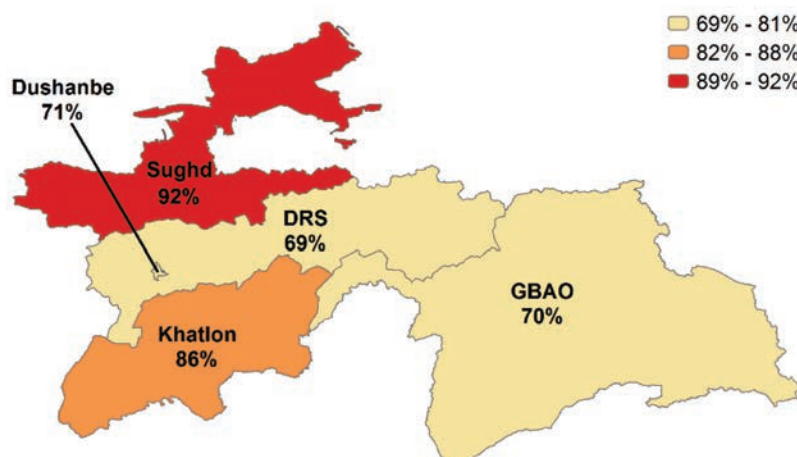


Figure 11.3 Basic vaccinations by region

Percentage of children age 24-35 months who received all basic vaccinations



11.3 SYMPTOMS OF ACUTE RESPIRATORY INFECTION

Treatment of symptoms of acute respiratory infection (ARI)

Children with symptoms of ARI for whom advice or treatment was sought. ARI symptoms consist of short, rapid breathing that is chest-related and/or difficult breathing that is chest-related.

Sample: Children under age 5 with symptoms of ARI in the 2 weeks before the survey

One percent of children under age 5 were reported as having symptoms of an acute respiratory infection during the 2 weeks before the survey. Overall, 69% of children ill with symptoms of ARI were taken to a health provider for advice or treatment. Treatment was sought for 30% of the children on the first day ARI symptoms were observed or the next day.

Because of the small number of children with ARI symptoms, no data are shown on differentials in ARI prevalence and treatment patterns.

11.4 FEVER

Treatment of fever

Children with fever for whom advice or treatment was sought.

Sample: Children under age 5 with a fever in the 2 weeks before the survey

Table 11.5 shows that 9% of children under age 5 had a fever in the 2 weeks preceding the survey. Among children with fever, 44% were taken for advice or treatment, and for 29% this care was sought on the same day or the day after the child developed the fever. Sixty-two percent of children with fever were given antibiotics.

Patterns by background characteristics

- Fever is most often reported among children age 6-11 months (16%) and children living in GBAO (17%) (**Table 11.5**).
- Advice or treatment was sought more often for children with fever in urban areas (54%) than in rural areas (41%). There is little difference between urban and rural areas in the proportion of children with fever given antibiotics (63% versus 62%).
- Advice or treatment for children with fever was most often sought in Sughd (49%) and least often in GBAO (30%). Children with fever received antibiotics most often in Khatlon (70%) and least often in GBAO (31%).

11.5 DIARRHEAL DISEASE

11.5.1 Prevalence of Diarrhea and Treatment or Advice Seeking

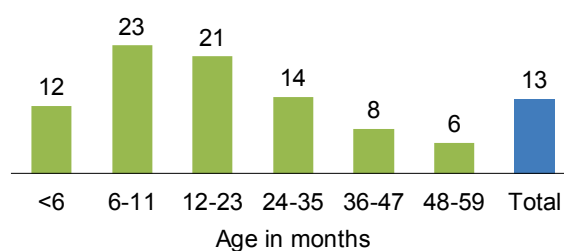
Thirteen percent of children under age 5 had diarrhea in the 2 weeks preceding the survey. Treatment or advice was sought for almost half (49%) of the children with diarrhea (**Table 11.6**).

Patterns by background characteristics

- The prevalence of diarrhea increases rapidly with the child's age, from 12% among children less than age 6 months to 23% among those age 6-11 months, when children are typically introduced to complementary foods. After age 1, the prevalence of diarrhea gradually decreases (**Figure 11.4**).
- The prevalence of diarrhea is lowest in Sughd (7%) and highest in Khatlon (19%).
- The proportion of children with diarrhea for whom advice or treatment was sought generally declines with age, from 65% among children less than age 6 months to 33% among those age 36-47 months.
- Treatment or advice was sought more often for urban children than rural children (54% versus 48%).

Figure 11.4 Diarrhea prevalence by age

Percentage of children who had diarrhea in the 2 weeks before the survey



11.5.2 Feeding Practices

Appropriate feeding practices

Children with diarrhea are given more liquids than usual and as much food or more than usual.

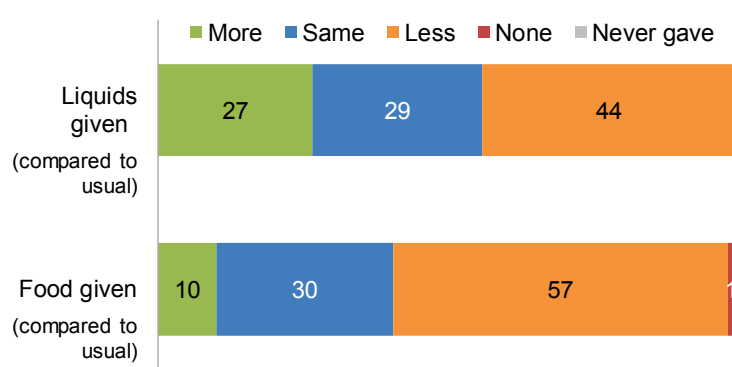
Sample: Children under age 5 with diarrhea in the 2 weeks before the survey

Dehydration from diarrhea is a major cause of malnutrition and mortality among young children. To reduce dehydration and minimize the effects of diarrhea on nutritional status, mothers are encouraged to increase the amount of fluids given to children during diarrheal episodes and to either increase feeding or at least continue normal feeding.

In Tajikistan, feeding practices during diarrheal episodes often deviate from these recommendations (Table 11.7 and Figure 11.5). Only 27% of children with diarrhea in the 2 weeks before the survey were given more liquids than usual as recommended. For most children with diarrhea, the amount of food given was also not optimal. Only 40% of children with diarrhea in the 2 weeks before the survey were given the same amount or more than the usual amount to eat as recommended.

Figure 11.5 Feeding practices during diarrhea

Percentage of children under age 5 with diarrhea in the 2 weeks before the survey



NOTE: Totals may not add to 100% due to rounding.

11.5.3 Treatment of Diarrhea

Oral rehydration therapy

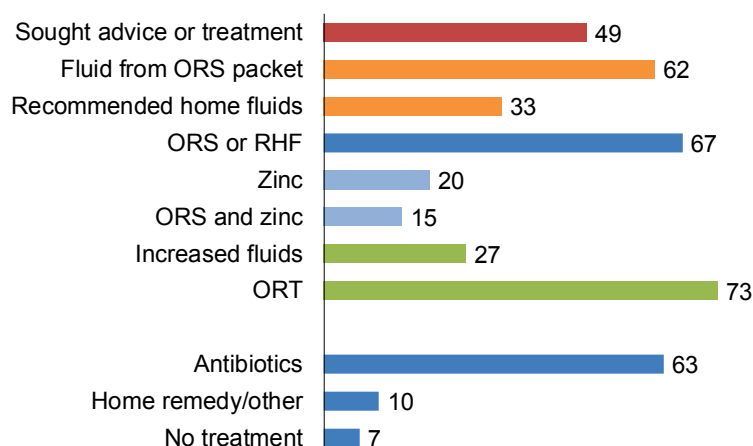
Children with diarrhea are given increased fluids, a fluid made from a special packet of oral rehydration salts (ORS), or recommended homemade fluids (RHF).

Sample: Children under age 5 with diarrhea in the 2 weeks before the survey

Oral rehydration therapy (ORT) is a simple and effective way to reduce dehydration caused by diarrhea. Sixty-two percent of children ill with diarrhea in the 2 weeks preceding the survey were given fluids prepared from an ORS packet, and one-third were given recommended homemade fluids (Figure 11.6). The majority of children (73%) received some form of ORT (fluid from an ORS packet, a recommended home fluid, and/or increased liquids). Sixty-three percent of children were given antibiotics and 20% were given

Figure 11.6 Treatment of diarrhea

Percentage of children under age 5 with diarrhea in the 2 weeks before the survey



zinc, which can reduce the duration and severity of diarrhea. Only 7% of children were not given anything to treat diarrhea.

Patterns by background characteristics

- Urban children are somewhat more likely than rural children to have been treated with some form of ORT (80% versus 72%) (Table 11.8).
- The proportion of children treated with ORT is highest in Dushanbe and GBAO (91% each) and lowest in Khatlon (67%).
- Fifteen percent of children in the lowest wealth quintile were not given any treatment, as compared with 7% or less of children in the other wealth quintiles.

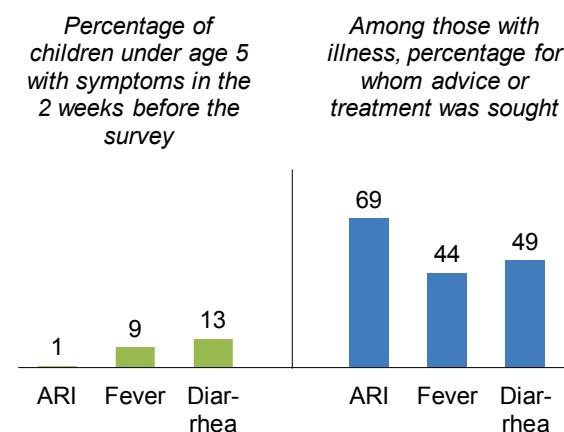
11.5.4 Knowledge of ORS Packets (Rehydron)

In Tajikistan, 94% of women with a birth in the 5 years before the survey know about ORS packets for the treatment of diarrhea (Table 11.9). Women age 15-19 are least likely to know about ORS (85%).

11.6 TREATMENT OF CHILDHOOD ILLNESS

Diarrhea was the most common illness among children under age 5 during the 2 weeks before the survey (Figure 11.7). Advice or treatment was sought for just under half (49%) of children with diarrhea, as compared with 44% of children with fever and 69% of children with ARI symptoms. Advice or treatment for children ill with diarrhea was largely sought from public sector health providers (96%), primarily at government health centers (69%) (Table 11.10). Among children with diarrhea who were treated with ORS packets, 55% had been taken to a public sector health provider for treatment.

Figure 11.7 Prevalence and treatment of childhood illness



11.7 DISPOSAL OF CHILDREN'S STOOLS

Appropriate disposal of children's stools

The child's last stools were put or rinsed into a toilet or latrine or buried, or the child used a toilet or latrine.

Sample: Youngest children under age 2 living with their mother

Proper disposal of children's feces is important in preventing the spread of disease. Stools were disposed of appropriately in the case of 55% of the youngest children under age 2 living with their mother (Table 11.11). The most common unsafe practice was to throw the child's feces into the garbage; fecal matter from 36% of children was disposed of in this manner.

Patterns by background characteristics

- Children's feces are disposed of appropriately least often in Dushanbe (44%).
- The proportion of children whose fecal matter is disposed of appropriately generally decreases with increasing wealth, from 60% among children in the lowest wealth quintile to 50% among children in the fourth quintile.

11.8 KNOWLEDGE OF DANGER SIGNS AND SYMPTOMS OF CHILDHOOD ILLNESS

Prompt treatment of sick children can have major repercussions for their recovery. In the 2017 TjDHS, women who had a child under age 5 living with them were asked to list any symptoms of severe childhood illnesses that would prompt a mother to take her child to a medical professional immediately. Results are shown in **Table 11.12**.

The most commonly reported symptom of serious childhood illness was fever, mentioned by 70% of mothers of young children, followed by diarrhea (57%) and weakness (33%). Seizures (29%), crying too much and vomiting everything (24% each), and the child appearing unwell or not playing normally (20%) were also commonly reported signs that a child needs immediate medical attention. Overall, 84% of mothers knew two or more symptoms of serious childhood illnesses that would prompt a mother to take her child to a medical professional immediately.

LIST OF TABLES

For more information on low birth weight, vaccinations, childhood illness, and disposal of children's stools, see the following tables:

- **Table 11.1 Child's size and weight at birth**
- **Table 11.2 Possession and observation of vaccination cards, according to background characteristics**
- **Table 11.3 Vaccinations by source of information**
- **Table 11.4 Vaccinations by background characteristics**
- **Table 11.5 Prevalence and treatment of fever**
- **Table 11.6 Prevalence and treatment of diarrhea**
- **Table 11.7 Feeding practices during diarrhea**
- **Table 11.8 Oral rehydration therapy, zinc, and other treatments for diarrhea**
- **Table 11.9 Knowledge of ORS packets**
- **Table 11.10 Source of advice or treatment for children with diarrhea**
- **Table 11.11 Disposal of children's stools**
- **Table 11.12 Knowledge of danger signs and symptoms of childhood illnesses**

Table 11.1 Child's size and weight at birth

Percent distribution of live births in the 5 years preceding the survey by mother's estimate of baby's size at birth, percentage of live births in the 5 years preceding the survey that have a reported birth weight, and among live births in the 5 years preceding the survey with a reported birth weight, percentage less than 2.5 kg, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percent distribution of births by size of baby at birth				Total	Percentage of births that have a reported birth weight ¹	Number of births	Among births with a reported birth weight ¹	
	Very small	Smaller than average	Average or larger	Don't know/missing				Percentage less than 2.5 kg	Number of births
Mother's age at birth									
<20	3.1	15.3	77.1	4.5	100.0	94.2	557	10.8	525
20-34	1.8	12.7	81.4	4.1	100.0	91.4	5,549	7.6	5,071
35-49	1.9	14.5	80.0	3.6	100.0	89.3	380	4.9	339
Birth order									
1	2.9	14.6	78.5	3.9	100.0	94.5	2,085	10.5	1,971
2-3	1.3	12.5	82.3	3.9	100.0	91.5	3,266	6.6	2,988
4-5	1.3	10.8	82.8	5.1	100.0	86.8	967	5.3	839
6+	3.2	15.9	74.8	6.1	100.0	82.3	167	8.7	138
Mother's smoking status									
Smokes cigarettes/tobacco	(0.0)	(7.0)	(90.2)	(2.8)	100.0	(89.0)	26	(0.0)	23
Does not smoke	1.9	13.0	80.9	4.1	100.0	91.5	6,460	7.8	5,912
Residence									
Urban	2.0	10.9	85.1	2.0	100.0	95.7	1,354	7.2	1,296
Rural	1.9	13.6	79.9	4.7	100.0	90.4	5,132	7.9	4,639
Region									
Dushanbe	1.1	7.1	90.6	1.1	100.0	95.9	413	6.6	396
GBAO	1.2	8.9	84.1	5.8	100.0	90.9	106	14.3	96
Sughd	2.4	11.8	83.8	2.0	100.0	97.8	1,853	7.7	1,812
DRS	2.2	12.6	76.3	8.9	100.0	82.2	1,534	8.4	1,262
Khatlon	1.5	15.3	80.0	3.2	100.0	91.8	2,580	7.4	2,370
FTF districts	0.7	11.5	84.1	3.7	100.0	94.2	1,444	7.6	1,360
Mother's education									
None/primary	0.9	14.3	79.3	5.5	100.0	86.8	541	6.6	469
General basic	2.2	13.0	78.9	5.9	100.0	88.0	2,400	8.5	2,113
General secondary	1.8	12.4	82.8	3.0	100.0	93.6	2,557	7.3	2,395
Professional primary/middle	1.3	18.0	79.0	1.7	100.0	96.9	471	7.9	456
Higher	2.6	10.0	84.9	2.4	100.0	97.0	517	7.8	502
Wealth quintile									
Lowest	2.0	15.8	75.3	7.0	100.0	83.9	1,218	9.0	1,023
Second	1.9	12.8	80.8	4.5	100.0	90.7	1,331	8.2	1,207
Middle	1.5	13.4	81.5	3.7	100.0	92.5	1,435	6.8	1,328
Fourth	2.3	12.7	81.5	3.5	100.0	94.0	1,406	7.1	1,323
Highest	1.8	10.2	86.2	1.9	100.0	96.2	1,096	8.1	1,054
Total	1.9	13.0	81.0	4.1	100.0	91.5	6,486	7.8	5,935

Note: Figures in parentheses are based on 25-49 unweighted cases.

¹ Based on either a written record or the mother's recall

Table 11.2 Possession and observation of vaccination cards, according to background characteristics

Percentage of children age 12-23 months and children age 24-35 months who ever had a vaccination card, and percentage with a vaccination card seen, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Children age 12-23 months			Children age 24-35 months		
	Percentage who ever had a vaccination card ¹	Percentage with a vaccination card seen ¹	Number of children	Percentage who ever had a vaccination card ¹	Percentage with a vaccination card seen ¹	Number of children
Sex						
Male	96.9	90.6	724	96.0	86.6	615
Female	96.5	89.2	670	96.4	89.7	654
Birth order						
1	96.4	89.2	426	96.6	87.9	404
2-3	96.9	89.0	709	96.0	86.6	643
4-5	97.6	94.2	233	95.4	92.2	187
6+	(91.2)	(87.7)	26	(100.0)	(100.0)	35
Residence						
Urban	96.9	86.3	269	96.1	82.4	265
Rural	96.7	90.8	1,125	96.2	89.7	1,004
Region						
Dushanbe	97.4	77.3	80	99.4	77.8	80
GBAO	95.6	79.3	19	91.5	77.4	24
Sughd	100.0	93.8	383	99.5	93.6	361
DRS	90.8	84.5	326	90.0	79.5	324
Khatlon	97.9	92.5	585	97.7	92.3	479
FTF districts	97.2	91.9	326	96.0	89.4	278
Mother's education						
None/primary	97.9	91.1	123	94.1	81.8	103
General basic	94.9	87.3	507	94.8	86.4	470
General secondary	98.0	92.2	563	97.7	90.8	510
Professional primary/middle	98.3	93.2	102	97.6	92.1	96
Higher	95.8	85.1	99	95.8	85.8	90
Wealth quintile						
Lowest	95.0	90.8	254	92.8	85.7	250
Second	98.2	92.9	307	97.4	93.0	269
Middle	95.7	88.9	342	97.0	91.4	264
Fourth	97.9	92.2	283	97.5	89.4	270
Highest	96.9	83.0	209	96.0	79.6	216
Total	96.8	89.9	1,394	96.2	88.2	1,269

Note: Figures in parentheses are based on 25-49 unweighted cases.

¹ Vaccination card, child health card, or home-based record

Table 11.3 Vaccinations by source of information

Percentage of children age 12-23 months and children age 24-35 months who received specific vaccines at any time before the survey, by source of information (vaccination card or mother's report), and percentage who received specific vaccines by the appropriate age, Tajikistan DHS 2017

Vaccine	Children age 12-23 months				Children age 24-35 months			
	Vaccinated at any time before the survey according to:			Vaccinated by appropriate age ^{2,3}	Vaccinated at any time before the survey according to:			Vaccinated by appropriate age ^{3,4}
	Vaccination card ¹	Mother's report	Either source		Vaccination card ¹	Mother's report	Either source	
BCG	88.0	7.2	95.3	94.9	87.1	8.5	95.6	94.5
HepB (birth dose)⁵								
At any time	86.7	7.0	93.7	92.1	85.1	8.1	93.2	91.1
Within 1 day of birth	71.3	na	na	na	70.0	na	na	na
After 1 day of birth	11.1	na	na	na	12.2	na	na	na
DPT-HepB-Hib⁶								
1	86.2	6.2	92.4	92.2	85.4	6.4	91.8	90.3
2	84.6	5.0	89.7	89.1	84.3	5.3	89.6	87.4
3	82.7	4.3	87.0	85.0	82.9	4.3	87.2	83.6
DPT 4	na	na	na	na	72.9	1.8	74.7	72.7
Polio								
0 (birth dose)	88.4	5.5	93.9	92.2	86.9	6.8	93.7	92.6
1	86.8	5.7	92.4	92.3	85.8	6.5	92.3	90.9
2	85.8	5.1	90.9	90.6	84.5	5.7	90.2	88.6
3	83.5	3.5	87.1	85.3	83.4	3.8	87.1	84.1
4	na	na	na	na	80.3	3.4	83.8	82.3
Rotavirus								
1	83.7	5.7	89.4	89.1	na	na	na	na
2	81.2	4.4	85.6	84.8	na	na	na	na
Measles and rubella (MR)	na	na	na	na	81.6	5.7	87.3	85.3
All basic vaccinations⁷	na	na	na	na	79.3	2.9	82.1	76.3
All age-appropriate vaccinations⁸	76.5	2.1	78.7	73.5	68.8	1.4	70.2	63.6
No vaccinations	0.1	2.8	3.0	na	0.1	3.1	3.2	na
Number of children	1,253	141	1,394	1,394	1,119	150	1,269	1,269

na = Not applicable

BCG = Bacillus Calmette-Guérin

DPT = Diphtheria-pertussis-tetanus

HepB = Hepatitis B

Hib = *Haemophilus influenzae* type b

¹ Vaccination card, child health card, or home-based record

² Received by age 12 months

³ For children whose vaccination information is based on the mother's report, date of vaccination is not collected. The proportions of vaccinations given during the first and second years of life are assumed to be the same as for children with a written record of vaccination.

⁴ Received by age 12 months for all vaccines except DPT4, oral polio 4, and measles and rubella (MR), which should be received by age 24 months

⁵ For children whose vaccination information is based on the mother's report, children reported to have received hepatitis B (birth dose) received the vaccine within 24 hours after birth. For children whose vaccination information is based on the written record of vaccination, children are considered to have received hepatitis B (birth dose) if this vaccine is recorded on their card, regardless of when the dose was administered.

⁶ DPT-HepB-Hib is sometimes referred to as pentavalent.

⁷ Basic vaccinations are defined as BCG, 3 doses of DPT-HepB-Hib, 3 doses of oral polio vaccine (excluding polio vaccine given at birth), and 1 dose of measles and rubella (MR) vaccine.

⁸ Age-appropriate vaccinations for children age 12-23 months are BCG, hepatitis B (birth dose), 3 doses of DPT-HepB-Hib, 4 doses of oral polio vaccine (including polio vaccine given at birth), and 2 doses of rotavirus vaccine. Age-appropriate vaccinations for children age 24-35 months are BCG, hepatitis B (birth dose), 3 doses of DPT-HepB-Hib, a fourth dose of DPT vaccine (DPT4), 5 doses of oral polio vaccine (including polio 0 vaccine given at birth and the polio 4 dose), and 1 dose of measles and rubella (MR) vaccine; the rotavirus vaccination is excluded because it was introduced in the routine immunizations for children in Tajikistan in January 2015.

Table 11.4 Vaccinations by background characteristics

Percentage of children age 12-23 months and children age 24-35 months who received specific vaccines at any time before the survey (according to a vaccination card or the mother's report), percentage with all age-appropriate vaccinations, and percentage with all basic vaccinations, by background characteristics, Tajikistan DHS 2017

Background characteristic	Children age 12-23 months										Children age 24-35 months											
	HepB (birth dose) ¹			DPT-HepB-Hib ²			Polio ³				Rotavirus		Measles and rubella (MR)	DPT 4	Polio 4	All basic vaccinations ⁵	All age-appropriate vaccinations ⁶	Number of children	Number of children			
	BCG	1	2	3	1	2	3	0	1	2	3	1								2		
Sex																						
Male	95.2	93.8	92.0	89.4	86.5	87.4	93.9	92.4	92.5	90.8	86.7	89.4	85.2	79.2	3.4	724	87.1	74.1	83.3	81.5	69.9	615
Female	95.3	93.6	92.9	90.0	87.4	93.9	92.4	92.4	92.5	91.1	87.5	89.4	86.0	78.1	2.5	670	87.5	75.3	84.3	82.8	70.5	654
Birth order																						
1	95.6	93.6	92.0	90.3	87.3	93.3	93.3	93.0	93.0	91.6	88.6	90.1	87.0	78.8	3.0	426	88.6	72.7	84.3	82.7	69.0	404
2-3	94.6	93.1	91.5	88.4	85.6	93.3	91.4	89.4	89.4	89.4	85.7	87.8	84.2	77.7	3.3	709	86.4	74.4	83.2	81.2	70.0	643
4-5	97.0	96.1	95.9	92.3	89.7	96.8	94.6	94.6	94.2	94.2	88.5	92.8	87.0	80.9	1.5	233	85.2	78.6	82.7	81.7	73.1	187
6+	(92.0)	(92.0)	(92.0)	(92.0)	(92.0)	(92.0)	(91.2)	(92.0)	(92.0)	(92.0)	(88.5)	(90.2)	(85.0)	(81.5)	(7.1)	26	(89.4)	(83.9)	(94.0)	(95.2)	(72.9)	35
Residence																						
Urban	93.3	91.2	88.1	83.3	78.7	91.6	88.2	88.2	86.2	86.2	80.8	84.0	77.1	68.2	3.4	269	86.1	69.5	81.0	76.3	62.6	265
Rural	95.7	94.3	93.4	91.2	88.9	94.4	93.4	93.4	92.1	92.1	88.6	90.7	87.6	81.2	2.9	1,125	87.6	76.1	84.5	83.7	72.2	1,004
Region																						
Dushanbe	95.3	92.2	88.9	79.4	71.5	88.3	87.0	87.0	83.8	74.3	78.6	78.6	65.9	56.3	4.7	80	86.8	66.9	75.3	70.5	61.9	80
GBAO	92.4	82.9	89.0	81.3	76.1	92.2	89.2	89.2	83.7	73.3	89.5	89.5	77.2	58.8	3.0	19	80.8	60.6	74.0	69.7	53.0	24
Sughd	99.7	98.5	97.1	95.8	99.4	99.4	98.2	98.2	98.2	94.4	97.4	97.4	95.0	91.3	0.0	383	95.3	82.9	91.8	91.8	79.4	361
DRS	88.0	85.0	83.6	78.6	73.8	87.3	84.6	84.6	81.3	75.1	79.8	79.8	74.4	61.5	7.7	326	78.1	63.0	72.8	68.8	55.1	324
Khatlon	96.5	95.8	93.9	92.7	91.0	94.7	93.9	93.9	92.8	91.2	91.2	91.0	88.5	83.7	2.0	585	87.9	78.5	86.8	86.4	75.7	479
FTF districts																						
None/primary	96.1	96.1	94.6	94.6	94.2	93.2	94.6	94.6	94.6	94.6	94.6	93.7	93.4	89.3	3.1	326	91.7	83.0	89.1	90.3	80.7	278
General basic	94.4	95.8	92.5	90.5	89.2	91.0	93.3	93.3	91.8	90.3	90.3	90.1	86.7	80.8	2.7	123	85.8	69.8	82.6	80.1	65.1	103
General secondary	94.2	91.1	90.5	87.3	82.8	92.5	90.5	90.5	88.9	83.9	87.3	87.3	83.1	74.0	4.3	507	84.5	69.6	79.2	78.0	63.4	470
Professional	96.1	94.9	93.1	90.3	89.1	95.1	92.8	92.8	91.1	88.3	90.1	90.1	86.7	81.3	2.1	563	88.9	80.9	87.5	86.0	77.7	510
primary/middle	99.0	97.7	97.9	96.6	93.6	99.0	96.6	96.6	96.6	93.7	95.3	95.3	89.1	85.9	1.0	102	89.7	77.1	90.0	84.0	72.4	96
Highest	93.2	93.8	92.3	90.2	86.4	92.2	94.4	94.4	93.4	85.8	89.1	89.1	86.5	77.6	3.7	99	92.1	69.8	81.5	82.1	66.6	90
Wealth quintile																						
Lowest	93.9	93.0	91.9	90.9	88.9	92.7	92.6	92.6	91.5	87.2	88.4	88.4	85.4	80.7	4.1	254	85.2	74.0	81.4	78.4	69.3	250
Second	96.9	94.9	93.5	92.2	89.9	95.7	94.4	94.4	93.5	91.0	91.2	91.2	88.5	80.7	1.9	307	90.2	75.0	87.3	88.8	72.5	269
Middle	94.7	92.7	93.6	92.0	89.6	93.2	92.7	92.7	91.2	89.1	90.5	90.5	88.3	81.0	3.3	342	84.5	78.4	83.9	80.8	73.4	264
Fourth	95.3	94.5	92.3	88.0	85.9	94.9	92.3	92.3	90.7	85.6	89.7	89.7	85.2	78.8	2.2	283	89.8	74.8	84.7	85.2	69.0	270
Highest	95.5	93.5	89.5	82.9	77.4	92.3	89.2	89.2	86.3	80.0	85.9	85.9	77.4	69.3	3.5	209	86.3	70.6	80.9	75.9	66.0	216
Total	95.3	93.7	92.4	89.7	87.0	93.9	92.4	92.4	90.9	87.1	89.4	89.4	85.6	78.7	3.0	1,394	87.3	74.7	83.8	82.1	70.2	1,269

Note: Children are considered to have received the vaccine if it was either written on the child's vaccination card or reported by the mother. For children whose vaccination information is based on the mother's report, date of vaccination is not collected. The proportions of vaccinations given during the first and second years of life are assumed to be the same as for children with a written record of vaccination. Figures in parentheses are based on 25-49 unweighted cases.

BCG = Bacillus Calmette-Guérin

DPT = Diphtheria-pertussis-tetanus

HepB = Hepatitis B

Hib = *Haemophilus influenzae* type b

¹ For children whose vaccination information is based on the mother's report, children reported to have received hepatitis B (birth dose) if this vaccine is recorded on their card, regardless of when the dose was administered.

² DPT-HepB-Hib is sometimes referred to as pentavalent.

³ Polio 0 is the polio vaccination given at birth.

⁴ Age-appropriate vaccinations for children age 12-23 months are BCG, hepatitis B (birth dose), 3 doses of DPT-HepB-Hib, 4 doses of oral polio vaccine (including polio vaccine given at birth), and 2 doses of rotavirus vaccine.

⁵ Basic vaccinations are defined as BCG, 3 doses of DPT-HepB-Hib, 3 doses of oral polio vaccine (excluding polio vaccine given at birth), and 1 dose of measles and rubella (MR) vaccine.

⁶ Age-appropriate vaccinations for children age 24-35 months are BCG, hepatitis B (birth dose), 3 doses of DPT-HepB-Hib, a fourth dose of DPT vaccine, 5 doses of oral polio vaccine (including polio 0 vaccine given at birth and the polio 4 dose), and 1 dose of measles and rubella (MR) vaccine. The rotavirus vaccination is excluded because it was introduced in the routine immunizations for children in Tajikistan in January 2015.

Table 11.5 Prevalence and treatment of fever

Among children under age 5, percentage who had a fever in the 2 weeks preceding the survey, and among children with a fever in the 2 weeks before the survey, percentage for whom advice or treatment was sought and percentage who received antibiotics as treatment, by background characteristics, Tajikistan DHS 2017

Background characteristic	Among children under age 5:		Among children under age 5 with fever:			
	Percentage with fever	Number of children	Percentage for whom advice or treatment was sought ¹	Percentage for whom treatment was sought same or next day	Percentage who took antibiotic drugs	Number of children with fever
Age in months						
<6	8.7	590	51.9	36.8	57.5	51
6-11	16.2	614	44.7	28.1	66.7	99
12-23	12.7	1,394	53.1	37.9	72.9	178
24-35	8.0	1,269	43.4	30.0	54.2	102
36-47	7.2	1,294	30.5	16.3	63.0	93
48-59	5.7	1,135	29.6	19.9	41.2	65
Sex						
Male	9.6	3,178	44.1	30.5	63.8	305
Female	9.1	3,118	43.4	28.2	60.5	283
Residence						
Urban	9.0	1,328	54.3	37.5	62.9	119
Rural	9.4	4,968	41.1	27.3	62.0	469
Region						
Dushanbe	6.7	407	44.2	29.2	44.1	27
GBAO	16.5	102	29.9	6.4	31.2	17
Sughd	4.0	1,803	49.0	33.6	50.7	72
DRS	9.6	1,496	44.1	29.6	56.5	143
Khatlon	13.2	2,488	43.1	29.6	70.3	328
FTF districts	6.3	1,386	57.1	37.6	64.6	88
Mother's education						
None/primary	10.5	524	(40.9)	(24.0)	(54.9)	55
General basic	10.1	2,321	44.8	29.9	64.0	233
General secondary	9.1	2,482	43.0	30.7	63.7	225
Professional primary/middle	6.5	462	(52.8)	(27.1)	(69.7)	30
Higher	8.7	507	39.4	28.5	48.8	44
Wealth quintile						
Lowest	12.5	1,165	38.6	24.0	62.9	146
Second	10.5	1,281	44.3	29.8	57.9	135
Middle	8.4	1,395	32.1	23.3	62.7	117
Fourth	7.8	1,383	57.8	38.2	69.4	107
Highest	7.8	1,072	50.1	35.2	57.9	83
Total	9.3	6,296	43.7	29.4	62.2	588

Note: Figures in parentheses are based on 25-49 unweighted cases.

¹ Includes advice or treatment from the public and private health sectors, pharmacies, shops, and markets. Excludes advice or treatment from a traditional practitioner.

Table 11.6 Prevalence and treatment of diarrhea

Percentage of children under age 5 who had diarrhea in the 2 weeks before the survey, and among children with diarrhea in the 2 weeks before the survey, percentage for whom advice or treatment was sought, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage with diarrhea	Number of children	Among children under age 5 with diarrhea:	
			Percentage for whom advice or treatment was sought ¹	Number of children with diarrhea
Age in months				
<6	11.9	590	64.5	70
6-11	22.5	614	55.9	138
12-23	20.6	1,394	54.5	288
24-35	13.5	1,269	41.7	171
36-47	7.9	1,294	33.1	102
48-59	5.5	1,135	41.3	63
Sex				
Male	14.3	3,178	49.9	455
Female	12.1	3,118	48.7	378
Source of drinking water²				
Improved	13.6	4,799	47.9	652
Unimproved	12.1	1,498	54.4	181
Type of toilet facility³				
Improved	13.2	6,123	49.5	810
Unimproved sanitation	13.3	174	(41.7)	23
Shared facility ⁴	17.2	121	(37.4)	21
Unimproved facility	(4.5)	53	*	2
Residence				
Urban	12.7	1,328	53.8	169
Rural	13.4	4,968	48.2	664
Region				
Dushanbe	9.6	407	48.8	39
GBAO	11.4	102	45.9	12
Sughd	6.8	1,803	48.2	122
DRS	13.2	1,496	48.6	197
Khatlon	18.6	2,488	50.1	463
FTF districts	11.0	1,386	52.9	152
Mother's education				
None/primary	15.2	524	44.5	80
General basic	13.2	2,321	50.0	307
General secondary	13.6	2,482	49.2	337
Professional primary/middle	12.2	462	50.5	56
Higher	10.3	507	52.4	52
Wealth quintile				
Lowest	15.6	1,165	45.8	182
Second	15.9	1,281	46.7	204
Middle	12.4	1,395	52.3	174
Fourth	11.3	1,383	54.7	156
Highest	10.9	1,072	47.9	117
Total	13.2	6,296	49.3	833

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

¹ Includes advice or treatment from the public and private health sectors, pharmacies, shops, and markets. Excludes advice or treatment from a traditional practitioner.

² See Table 2.1 for definition of categories.

³ See Table 2.2 for definition of categories.

⁴ Facilities that would be considered improved if they were not shared by two or more households

Table 11.7 Feeding practices during diarrhea

Percent distribution of children under age 5 who had diarrhea in the 2 weeks preceding the survey by amount of liquids and food offered compared with normal practice, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Amount of liquids given						Total	Amount of food given						Total	Number of children with diarrhea	
	More	Same as usual	Some-what less	Much less	None	Don't know/missing		More	Same as usual	Some-what less	Much less	None	Never gave food			Don't know/missing
Age in months																
<6	17.3	38.6	38.2	5.9	0.0	0.0	100.0	5.1	36.4	45.8	6.1	2.7	3.9	0.0	100.0	70
6-11	21.6	37.3	32.1	9.0	0.0	0.0	100.0	11.0	38.1	36.9	10.4	0.0	3.6	0.0	100.0	138
12-23	28.7	26.3	38.5	5.2	1.3	0.0	100.0	9.6	32.5	48.5	7.9	0.8	0.6	0.0	100.0	288
24-35	31.7	26.0	34.2	7.8	0.0	0.4	100.0	12.0	23.1	53.3	9.9	1.1	0.0	0.5	100.0	171
36-47	26.6	33.2	33.1	7.1	0.0	0.0	100.0	6.4	30.9	47.4	12.6	2.2	0.0	0.5	100.0	102
48-59	22.7	13.3	37.7	18.8	6.4	1.2	100.0	15.4	12.2	55.6	11.9	3.9	0.0	1.2	100.0	63
Sex																
Male	26.6	28.4	36.3	7.3	1.1	0.3	100.0	9.3	31.5	47.7	9.4	0.8	1.1	0.3	100.0	455
Female	26.3	29.6	35.2	8.1	0.7	0.0	100.0	10.8	28.5	47.8	9.6	1.9	1.2	0.2	100.0	378
Breastfeeding status																
Breastfeeding	23.2	31.2	37.8	7.2	0.7	0.0	100.0	9.5	32.0	46.2	8.9	1.1	2.3	0.0	100.0	352
Not breastfeeding	28.8	27.4	34.3	8.1	1.1	0.3	100.0	10.4	28.7	48.8	9.9	1.5	0.3	0.4	100.0	481
Residence																
Urban	29.3	24.6	33.7	11.2	0.3	0.8	100.0	8.5	28.4	48.9	11.7	1.5	0.3	0.7	100.0	169
Rural	25.7	30.1	36.3	6.8	1.1	0.0	100.0	10.4	30.5	47.4	8.9	1.3	1.4	0.1	100.0	664
Region																
Dushanbe	44.4	10.4	32.1	13.2	0.0	0.0	100.0	10.8	20.0	40.3	26.3	1.4	1.3	0.0	100.0	39
GBAO	44.4	18.3	25.8	11.5	0.0	0.0	100.0	19.7	26.4	40.1	13.8	0.0	0.0	0.0	100.0	12
Sughd	35.4	25.1	34.3	4.2	1.1	0.0	100.0	1.3	26.2	62.7	8.7	1.1	0.0	0.0	100.0	122
DRS	38.4	22.7	32.6	5.1	0.5	0.7	100.0	12.2	28.6	50.3	7.4	0.0	0.6	0.8	100.0	197
Khatlon	17.0	34.5	38.1	9.2	1.2	0.0	100.0	11.0	32.8	43.5	9.0	1.9	1.7	0.1	100.0	463
FTF districts	24.8	29.5	25.7	16.8	3.2	0.0	100.0	16.2	26.6	41.0	10.7	2.5	2.7	0.3	100.0	152
Mother's education																
None/primary	34.4	26.4	23.5	15.6	0.0	0.0	100.0	17.8	21.8	43.8	14.8	1.7	0.0	0.0	100.0	80
General basic	29.6	27.5	33.0	7.7	2.1	0.2	100.0	9.4	32.3	47.9	8.8	1.2	0.5	0.0	100.0	307
General secondary	23.3	32.7	37.7	6.0	0.0	0.2	100.0	10.4	31.7	46.7	7.1	1.7	2.0	0.5	100.0	337
Professional primary/middle	22.4	29.0	40.1	8.4	0.0	0.0	100.0	6.1	25.2	53.4	14.4	0.0	0.0	0.9	100.0	56
Higher	20.7	17.4	53.6	5.7	2.6	0.0	100.0	3.2	25.4	53.1	15.7	0.0	2.6	0.0	100.0	52
Wealth quintile																
Lowest	25.6	30.7	34.1	8.5	1.1	0.0	100.0	9.4	24.0	53.8	9.9	1.3	1.7	0.0	100.0	182
Second	21.3	31.7	40.5	4.8	1.7	0.0	100.0	9.7	32.9	48.3	7.4	0.9	0.7	0.0	100.0	204
Middle	26.8	30.7	34.1	7.1	1.3	0.0	100.0	9.8	31.9	44.7	8.5	1.6	2.6	0.8	100.0	174
Fourth	30.6	23.8	36.6	9.0	0.0	0.0	100.0	12.9	29.3	47.5	8.6	1.7	0.0	0.0	100.0	156
Highest	30.8	25.8	31.7	10.6	0.0	1.2	100.0	7.7	33.3	42.0	15.0	0.9	0.4	0.6	100.0	117
Total	26.5	29.0	35.8	7.7	0.9	0.2	100.0	10.0	30.1	47.7	9.5	1.3	1.1	0.3	100.0	833

Note: It is recommended that children be given more liquids to drink during diarrhea and that food not be reduced.

Table 11.8 Oral rehydration therapy, zinc, and other treatments for diarrhea

Among children under age 5 who had diarrhea in the 2 weeks preceding the survey, percentage given fluid from an ORS packet, recommended homemade fluids (RHF), ORS or RHF, zinc, ORS and zinc, ORS or increased fluids, oral rehydration therapy (ORT), continued feeding and ORT, and other treatments, and percentage given no treatment, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of children with diarrhea who were given:												Number of children with diarrhea ²	
	Fluid from ORS packet	Recommended home fluids (RHF)	Either ORS or RHF	Zinc	ORS and zinc	ORS or increased fluids	ORT (ORS, RHF, or increased fluids)	Continued feeding and ORT ¹	Other treatments					No treatment
									Anti-biotic drugs	Anti-motility drugs	Intra-venous solution	Home remedy/ other		
Age in months														
<6	41.8	15.9	44.2	8.2	5.5	50.8	51.8	42.1	43.9	7.0	2.0	11.0	19.2	70
6-11	68.6	34.2	74.1	21.9	17.6	73.7	77.6	66.1	72.2	4.4	5.7	6.0	2.3	138
12-23	68.3	39.0	73.3	17.7	13.1	75.8	79.0	70.3	67.0	3.1	4.5	11.7	3.9	288
24-35	56.9	31.1	61.5	22.1	16.8	68.6	71.0	60.2	67.0	1.7	6.7	15.3	6.4	171
36-47	62.5	30.4	68.6	25.4	18.8	73.5	75.1	60.8	52.4	6.5	3.6	3.8	6.4	102
48-59	50.5	32.8	57.9	20.6	12.3	62.6	66.8	51.4	56.0	0.0	6.7	9.1	16.9	63
Sex														
Male	60.3	31.9	66.3	18.6	13.5	71.0	74.3	64.6	64.7	3.8	4.8	11.5	7.2	455
Female	63.4	34.6	67.4	20.9	15.9	70.1	72.3	60.1	61.6	3.3	5.2	8.9	6.2	378
Residence														
Urban	65.9	40.6	72.5	25.6	19.9	76.1	79.9	67.3	63.4	3.2	3.3	12.0	4.9	169
Rural	60.6	31.2	65.3	18.2	13.3	69.2	71.8	61.3	63.3	3.6	5.4	9.9	7.2	664
Region														
Dushanbe	71.0	54.8	87.0	36.5	25.8	84.2	91.1	66.0	62.2	0.0	5.1	18.2	3.8	39
GBAO	64.0	59.8	89.3	32.3	29.4	73.6	90.6	80.4	52.7	2.6	0.0	11.5	1.9	12
Sughd	66.9	32.2	71.6	18.4	16.3	78.7	81.0	71.2	57.5	9.6	1.1	4.0	2.4	122
DRS	64.2	36.0	70.3	18.0	11.8	76.0	79.3	71.2	57.0	5.8	4.4	9.7	2.8	197
Khatlon	58.4	29.6	61.8	19.0	14.0	64.9	67.0	55.8	67.9	1.3	6.4	11.5	10.0	463
FTF districts	43.9	22.8	47.1	29.3	22.7	57.4	59.1	45.0	80.4	0.7	2.7	15.5	1.5	152
Mother's education														
None/primary	52.0	36.4	57.9	30.1	19.7	68.1	71.8	60.3	74.2	0.0	3.1	12.1	9.2	80
General basic	63.8	34.1	69.3	17.4	12.6	73.1	76.1	66.1	61.5	3.3	5.4	9.5	8.2	307
General secondary	60.7	32.6	66.1	19.6	14.7	69.1	72.0	61.9	63.3	2.3	4.3	11.0	6.1	337
Professional primary/middle	76.8	32.9	77.6	19.1	17.7	79.2	80.0	66.3	66.8	10.4	3.7	3.6	2.8	56
Higher	54.1	25.8	58.7	18.2	14.7	59.7	62.3	44.9	53.4	11.2	11.5	14.2	2.6	52
Wealth quintile														
Lowest	55.9	33.6	62.2	18.2	12.9	63.5	67.2	56.5	61.8	1.1	3.7	12.4	14.8	182
Second	58.7	25.4	61.8	12.8	7.1	65.5	68.2	59.8	66.4	7.3	8.1	9.8	6.5	204
Middle	60.3	29.1	66.0	20.7	15.0	72.5	74.9	62.2	65.8	2.5	3.2	11.3	2.8	174
Fourth	73.8	43.1	77.0	21.3	18.7	81.0	82.1	72.8	59.5	0.8	5.8	7.4	3.8	156
Highest	62.0	38.4	70.4	30.3	24.3	73.8	78.5	63.5	61.5	6.0	2.9	10.2	4.3	117
Total	61.7	33.1	66.8	19.7	14.6	70.6	73.4	62.5	63.3	3.5	5.0	10.3	6.7	833

ORS = Oral rehydration salts (also known as Rehydron)

¹ Continued feeding includes children who were given more, the same as usual, or somewhat less food during the diarrhea episode.

² Total includes children with missing information on treatment for diarrhea who are not shown separately.

Table 11.9 Knowledge of ORS packets

Percentage of women age 15-49 with a live birth in the 5 years preceding the survey who know about ORS packets for treatment of diarrhea, by background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of women who know about ORS packets	Number of women
Age		
15-19	85.1	61
20-24	92.4	1,266
25-34	94.7	2,478
35-49	96.2	589
Residence		
Urban	94.9	964
Rural	93.8	3,431
Region		
Dushanbe	94.1	299
GBAO	98.0	76
Sughd	95.0	1,301
DRS	95.1	1,041
Khatlon	92.6	1,677
FTF districts	89.6	951
Education		
None/primary	92.9	344
General basic	93.8	1,617
General secondary	94.2	1,730
Professional primary/middle	94.9	321
Higher	94.9	382
Wealth quintile		
Lowest	91.6	808
Second	93.5	892
Middle	94.7	978
Fourth	95.3	931
Highest	95.0	786
Total	94.1	4,395

ORS = Oral rehydration salts (also known as Rehydron)

Table 11.10 Source of advice or treatment for children with diarrhea

Percentage of children under age 5 with diarrhea in the 2 weeks preceding the survey for whom advice or treatment was sought from specific sources; among children under age 5 with diarrhea in the 2 weeks preceding the survey for whom advice or treatment was sought, percentage for whom advice or treatment was sought from specific sources; and among children with diarrhea who received ORS, percentage for whom advice or treatment was sought from specific sources, Tajikistan DHS 2017

Source	Percentage for whom advice or treatment was sought from each source:		
	Among children with diarrhea	Among children with diarrhea for whom advice or treatment was sought	Among children with diarrhea who received ORS ¹
Public sector	47.6	96.4	55.2
Government hospital	8.1	16.5	9.0
Maternity home	0.3	0.6	0.3
Health center (urban/rural)	34.0	68.9	39.2
Reproductive health center	1.0	1.9	1.1
Health house	3.4	6.9	4.0
Integrated management of childhood illness center	1.3	2.7	2.0
Immunoprophylaxis center	0.1	0.2	0.2
Healthy lifestyle center	0.1	0.2	0.0
Private sector	1.9	3.8	1.9
Private hospital/clinic	1.7	3.4	1.9
Pharmacy	0.1	0.2	0.0
Private doctor	0.2	0.3	0.0
Other private sector	0.1	0.1	0.1
Traditional practitioner	0.1	0.1	0.1
Number of children	833	411	514

ORS = Oral rehydration salts (also known as Rehydron)

¹ Fluids from ORS packet

Table 11.11 Disposal of children's stools

Percent distribution of youngest children under age 2 living with their mother by the manner of disposal of the child's last fecal matter, and percentage of children whose stools are disposed of appropriately, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Manner of disposal of children's stools							Total	Percentage of children whose stools are disposed of appropriately ¹	Number of children
	Child used toilet or latrine	Put/rinsed into toilet or latrine	Buried	Put/rinsed into drain or ditch	Thrown into garbage	Left in the open	Other			
Age of child in months										
0-1	5.8	42.5	4.8	6.9	39.0	0.7	0.4	100.0	53.0	196
2-3	4.2	35.1	1.4	10.0	49.3	0.0	0.0	100.0	40.7	195
4-5	6.8	39.7	0.9	7.2	45.3	0.0	0.1	100.0	47.4	197
6-8	3.8	41.4	2.6	12.5	38.8	0.7	0.2	100.0	47.8	307
9-11	5.8	40.1	0.4	7.8	45.3	0.7	0.0	100.0	46.2	301
12-17	10.1	44.3	3.4	7.5	34.1	0.6	0.0	100.0	57.8	642
18-23	17.0	46.3	3.9	6.8	25.0	1.0	0.0	100.0	67.2	594
6-23	10.6	43.8	2.9	8.2	33.8	0.8	0.0	100.0	57.3	1,845
Residence										
Urban	9.8	40.1	1.2	4.7	43.4	0.6	0.2	100.0	51.1	470
Rural	9.3	43.2	3.2	8.9	34.7	0.7	0.0	100.0	55.7	1,963
Type of toilet facility²										
Improved	9.2	43.0	2.7	8.1	36.3	0.6	0.1	100.0	55.0	2,376
Unimproved sanitation	17.1	26.2	5.0	10.6	38.4	2.6	0.0	100.0	48.4	57
Shared facility ³	24.3	19.5	6.0	9.8	38.2	2.1	0.0	100.0	49.8	40
Unimproved facility	*	*	*	*	*	*	*	100.0	*	17
Region										
Dushanbe	10.0	33.8	0.0	10.0	46.1	0.0	0.0	100.0	43.9	139
GBAO	1.4	49.5	0.0	7.8	40.4	0.0	0.8	100.0	51.0	36
Sughd	2.5	48.3	3.2	7.7	37.1	1.1	0.0	100.0	54.1	715
DRS	21.7	37.7	3.2	11.2	25.3	0.8	0.1	100.0	62.5	582
Khatlon	7.2	42.5	2.7	6.3	41.0	0.3	0.1	100.0	52.4	961
FTF districts	7.5	44.0	4.2	8.0	35.8	0.5	0.0	100.0	55.7	527
Mother's education										
None/primary	11.3	35.4	8.3	11.3	33.7	0.0	0.0	100.0	55.0	190
General basic	12.1	39.7	1.6	10.1	35.7	0.6	0.1	100.0	53.5	870
General secondary	7.3	46.1	3.1	6.5	36.2	0.7	0.1	100.0	56.5	994
Professional										
primary/middle	5.5	48.8	3.0	7.2	34.2	1.1	0.1	100.0	57.3	185
Higher	9.6	39.3	0.6	5.0	44.7	0.7	0.1	100.0	49.4	194
Wealth quintile										
Lowest	7.4	46.4	6.0	8.4	31.1	0.6	0.0	100.0	59.8	436
Second	9.0	46.8	3.1	11.4	29.3	0.3	0.0	100.0	58.9	488
Middle	12.2	40.5	2.3	9.3	35.2	0.5	0.0	100.0	55.0	568
Fourth	7.8	40.1	1.7	5.8	43.2	1.3	0.2	100.0	49.6	544
Highest	10.2	40.0	0.9	5.3	43.1	0.4	0.2	100.0	51.1	396
Total	9.4	42.6	2.8	8.1	36.4	0.6	0.1	100.0	54.8	2,433

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

¹ Children's stools are considered to be disposed of appropriately if the child used a toilet or latrine, if the fecal matter was put/rinsed into a toilet or latrine, or if it was buried.

² See Table 2.2 for definition of categories.

³ Facilities would be considered improved if they were not shared by two or more households.

Table 11.12 Knowledge of danger signs and symptoms of childhood illnesses

Percentage of women age 15-49 with a live birth in the last 5 years who listed specific danger signs and symptoms of childhood illnesses that would prompt the mother to take the child to a medical professional immediately, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Danger signs and symptoms of childhood illness													Aware of two or more symptoms	Number of women
	Looks unwell or not playing normally	Not eating or drinking/ refusing breast-feeding	Lethargic or difficult to wake	High fever	Fast or rapid breathing	Vomits everything	Seizures	Diarrhea	Weakness	Crying too much	Child becomes sicker	Blood in stool	Other		
Mother's age at birth															
<20	21.8	14.1	5.1	67.2	9.7	25.7	31.5	53.4	27.9	25.7	2.6	1.1	0.4	81.0	241
20-34	19.6	12.6	7.4	70.4	8.6	23.6	28.5	56.6	32.6	23.7	3.5	2.3	0.2	84.8	3,812
35-49	24.6	13.3	7.5	67.4	7.7	22.8	28.1	59.7	34.6	26.1	4.5	2.0	0.2	82.3	342
Birth order															
1	20.7	12.0	4.1	68.6	7.8	21.6	26.9	54.2	31.2	27.9	3.6	1.7	0.2	83.1	993
2-3	19.9	13.4	8.6	70.6	8.8	24.1	28.1	57.0	33.4	23.2	3.4	2.5	0.2	84.9	2,405
4-5	19.6	11.8	7.3	68.9	9.0	25.3	33.3	58.8	32.3	20.4	4.3	2.2	0.0	85.2	847
6+	21.6	12.8	7.9	74.9	6.9	20.2	21.3	55.8	29.5	29.5	1.6	1.2	1.8	81.5	150
Place of delivery															
Health facility	20.3	13.3	7.3	71.0	8.7	24.1	27.9	56.2	32.6	24.3	3.7	2.3	0.2	84.6	3,870
Elsewhere	18.3	8.8	7.4	62.4	7.5	19.8	34.0	59.8	32.0	21.6	2.1	1.4	0.2	83.3	525
Residence															
Urban	24.8	15.6	12.6	77.7	12.3	28.2	28.5	53.4	35.7	25.6	7.6	4.7	0.1	85.7	964
Rural	18.8	12.0	5.8	67.8	7.5	22.3	28.7	57.6	31.6	23.5	2.4	1.5	0.2	84.1	3,431
Region															
Dushanbe	41.7	21.1	23.2	79.6	22.3	35.6	35.3	54.6	41.4	27.5	14.0	13.5	0.0	83.0	299
GBAO	19.6	18.1	6.7	77.0	12.0	19.3	31.0	38.4	24.7	16.7	2.9	0.4	0.3	78.5	76
Sughd	20.6	16.0	4.7	70.0	8.0	24.1	21.1	55.6	33.3	29.1	5.6	2.2	0.0	82.7	1,301
DRS	22.5	7.4	7.5	58.0	10.7	20.9	45.5	55.5	27.7	16.0	2.3	1.4	0.8	81.9	1,041
Khatlon	14.4	11.9	6.4	75.4	5.0	23.0	22.7	59.4	33.7	24.6	0.8	0.8	0.0	87.8	1,677
FTF districts	14.0	12.5	2.1	76.0	2.1	27.9	25.8	54.8	24.3	13.3	0.4	1.0	0.0	85.3	951
Mother's education															
None/primary	15.4	9.6	5.3	66.3	6.8	25.5	27.6	58.2	27.2	19.2	0.9	1.1	0.0	85.0	344
General basic	19.5	11.1	7.0	68.1	8.5	21.9	28.4	55.5	32.0	22.4	3.3	1.5	0.4	82.1	1,617
General secondary	19.0	13.3	7.1	69.3	7.3	23.1	29.0	56.9	32.4	24.2	3.3	2.3	0.1	84.7	1,730
Professional primary/middle	24.5	16.3	8.0	81.1	8.0	30.3	26.7	63.3	34.8	24.3	1.7	1.9	0.1	91.6	321
Higher	28.4	17.2	10.6	74.9	16.3	25.7	30.6	53.2	38.2	33.4	9.6	6.2	0.0	86.6	382
Wealth quintile															
Lowest	18.8	11.9	5.3	68.6	7.1	17.1	24.4	52.2	27.5	24.8	2.1	0.7	0.2	77.9	808
Second	16.6	11.0	5.1	64.2	7.7	22.1	29.0	55.5	32.9	24.6	2.6	0.6	0.0	82.9	892
Middle	18.0	11.9	5.1	70.4	6.2	25.3	30.6	57.5	29.9	20.5	2.2	1.3	0.3	86.3	978
Fourth	20.8	14.2	8.7	70.1	8.5	24.6	27.3	61.1	37.0	23.4	3.0	3.0	0.2	87.6	931
Highest	27.1	14.9	12.9	77.4	14.1	28.8	31.7	56.2	35.3	27.3	8.3	5.8	0.2	86.7	786
Total	20.1	12.8	7.3	70.0	8.6	23.6	28.6	56.7	32.5	24.0	3.5	2.2	0.2	84.4	4,395

Key Findings

- **Nutritional status of children:** 18% of children under age 5 are stunted (short for their age), 6% are wasted (thin for their height), 8% are underweight (thin for their age), and 3% are overweight (heavy for their height).
- **Breastfeeding:** Almost all children (98%) are breastfed at some point. However, only 36% of children under age 6 months are exclusively breastfed.
- **Minimum acceptable diet:** The feeding practices of only 1 in 11 children age 6-23 months (9%) meet the minimum acceptable dietary standards.
- **Anemia:** 42% of children age 6-59 months and 41% of women age 15-49 suffer from anemia.
- **Obesity:** 37% of women age 15-49 are overweight or obese.
- **Salt iodization:** 9 out of 10 children and women live in households that have iodized salt.

This chapter focuses on the nutritional status of children and women. It describes the nutritional status of children under age 5 and infant and young child feeding practices, including breastfeeding and feeding with solid/semisolid foods. Also covered are the diversity of foods fed and the frequency of feeding as well as micronutrient status, supplementation, and fortification. Relevant aspects of nutritional status and dietary diversity among women age 15-49 are addressed.

12.1 NUTRITIONAL STATUS OF CHILDREN

The anthropometric data on height (or length) and weight collected in the 2017 TjDHS permit the measurement and evaluation of the nutritional status of young children in Tajikistan. This evaluation allows identification of subgroups of the child population that are at increased risk of faltered growth.

12.1.1 Measurement of Nutritional Status among Young Children

The 2017 TjDHS measured the height (or length) and weight of children under age 5 in all sampled households, regardless of whether their mothers were interviewed in the survey. Weight was measured using an electronic SECA 878 flat scale with a mother-and-baby function enabling measurement of infants' and children's weight in their mother's arms. Height was measured with a Shorr measuring board. Children younger than age 24 months were measured lying down on the board (recumbent length), while standing height was measured for older children.

Children's height/length, weight, and age data were used to calculate three indices: height-for-age, weight-for-height, and weight-for-age. Each of these indices provides different information about growth and body composition for assessing nutritional status. As indicated in the box below, *stunting*, or low height-for-age, is a sign of chronic undernutrition that may result from failure to receive adequate nutrition over a long

period of time, sustained improper feeding practices, or the effects of repeated episodes of illness. *Wasting*, or low weight-for-height, is a measure of acute undernutrition and represents the failure to receive adequate nutrition in the period immediately before the survey. Wasting may result from inadequate food intake or from a recent episode of illness causing weight loss. Weight-for-age is a composite index of weight-for-height and height-for-age. Thus, it includes both acute (wasting) and chronic (stunting) undernutrition and is an indicator of overall undernutrition. Overweight and obesity resulting from an imbalance between energy consumed (too much) and energy expended (too little) are becoming problems for children in many countries. Children whose weight-for-height Z-score is more than two standard deviations (+2 SD) above the median of the reference population are considered overweight.

Stunting (assessed via height-for-age)

Height-for-age is a measure of linear growth retardation and cumulative growth deficits. Children whose height-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered short for their age (stunted), or chronically undernourished. Children whose Z-score is below minus three standard deviations (-3 SD) from the median are considered severely stunted.

Sample: Children under age 5

Wasting (assessed via weight-for-height)

The weight-for-height index measures body mass in relation to body height or length and describes current nutritional status. Children whose weight-for-height Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are considered thin (wasted), or acutely undernourished. Children whose Z-score is below minus three standard deviations (-3 SD) from the median are considered severely wasted.

Sample: Children under age 5

Underweight (assessed via weight-for-age)

Weight-for-age is a composite index of height-for-age and weight-for-height. It takes into account both acute and chronic undernutrition. Children whose weight-for-age Z-score is below minus two standard deviations (-2 SD) from the median of the reference population are classified as underweight. Children whose Z-score is below minus three standard deviations (-3 SD) from the median are considered severely underweight.

Sample: Children under age 5

Overweight (assessed via weight-for-height)

Children whose weight-for-height Z-score is more than two standard deviations (+2 SD) above the median of the reference population are considered overweight.

Sample: Children under age 5

The means of the Z-scores for height-for-age, weight-for-height, and weight-for-age are also calculated as summary statistics representing the nutritional status of children in a population. These mean scores describe the nutritional status of the entire population of children without the use of a cutoff point. A mean Z-score of less than 0 (i.e., a negative mean value for stunting, wasting, or underweight) suggests a downward shift in the entire sample population's nutritional status relative to the reference population. The farther away mean Z-scores are from 0, the higher the prevalence of undernutrition.

12.1.2 Data Collection

A total of 6,167 children (unweighted) under age 5 in the TjDHS sample households were eligible for height and weight measurements. Complete and credible data¹ on height, weight, and age were obtained for 98% of these children. Measurements were missing for 2% of eligible children because the child was not present, the parents refused or the child was ill, or for some other reason.

12.1.3 Levels of Child Malnutrition

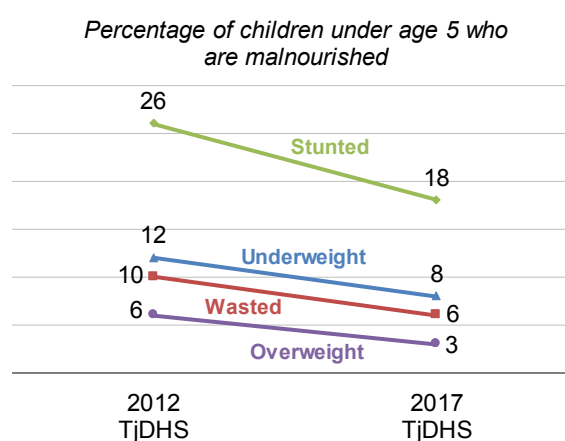
Table 12.1 shows that 18% of children age 6-59 months are stunted (too short for their age), or chronically malnourished, and 5% of children are severely stunted. Six percent are wasted (too thin for their height), and 2% are severely wasted. Eight percent are underweight, or too thin for their age. Only 3% of children are overweight (heavy for their height).

Trends: Figure 12.1 shows that child nutrition improved between the 2012 TjDHS and the 2017 TjDHS. The prevalence of stunting decreased considerably, from 26% to 18% (a 31% decline over the last 5 years and an average decline of over 6% per year). The prevalence of wasting decreased from 10% to 6%, while the rate of overweight decreased from 6% to 3%. Finally, the percentage of children who are underweight decreased from 12% to 8%.

Patterns by background characteristics

- Stunting increases from 7% among children under age 6 months to a peak of 22% among children age 24-35 months; wasting and underweight are more prevalent among children younger than age 2.
- The data show a strong correlation between underweight children and their perceived birth size. Babies perceived by their mothers as very small at birth are more likely to be underweight (23%) than those perceived as either small (13%) or average or larger (7%) at birth.
- Children born to thin or normal-weight mothers have higher levels of stunting (19% each), wasting (9% and 6%), and underweight (13% and 8%) than those born to overweight or obese mothers (15% stunted, 4% wasted, 5% underweight).
- Children residing in urban areas are just as likely to be stunted as children living in rural areas. The prevalence of wasting and underweight is higher among children in urban areas than those in rural areas.
- Children in GBAO and Dushanbe are most affected by undernutrition. The prevalence of stunting is highest in GBAO, where almost one-third (32%) of children are too short for their age. The prevalence of wasting is highest in Dushanbe, where 17% of children are too thin for their height. Underweight is highest in GBAO (16%) and Dushanbe (13%) and lowest in Sughd (5%).
- The prevalence of stunting generally decreases with increasing mother's education and wealth. There are no uniform relationships between wasting or underweight and mother's education or wealth.

Figure 12.1 Trends in nutritional status of children



¹ See Table C.7 in Appendix C for more details on the completeness and quality of children's height and weight data.

12.2 INFANT AND YOUNG CHILD FEEDING PRACTICES

Appropriate infant and young child feeding (IYCF) practices include exclusive breastfeeding in the first 6 months of life, continued breastfeeding through age 2, introduction of solid and semisolid foods at age 6 months, and gradual increases in the amount of food given and frequency of feeding as the child gets older. It is also important for young children to receive a diverse diet (i.e., foods from different food groups to address growing micronutrient needs) (WHO 2008).

12.2.1 Breastfeeding

The importance and necessity of breastfeeding have been well recognized in Tajikistan since the 1999 adoption of the State Program on Breastfeeding by the Ministry of Health. In conjunction with the state program, reforms have occurred in maternity hospitals as part of the Baby Friendly Hospital Initiative (BFHI). Examples of these reforms include establishing immediate contact between mother and newborn after delivery, initiating early breastfeeding (in the first 30 to 60 minutes after birth), allowing the mother and newborn to stay in the same hospital room, breastfeeding the baby on demand, and other Baby Friendly practices. The BFHI program has expanded, and 58 maternity hospitals have earned Baby Friendly status since 2000. In 2006, the Government of Tajikistan adopted a law on breastfeeding protection that includes most of the provisions of the International Code of Marketing of Breastmilk Substitutes.

Initiation of Breastfeeding

Early initiation of breastfeeding is important for both the mother and the child. The first breast milk contains colostrum, which is highly nutritious and has antibodies that protect the newborn from diseases. Early initiation of breastfeeding also encourages bonding between the mother and her newborn, facilitating the production of breast milk. Thus, it is recommended that children be put to the breast immediately or within 1 hour after birth and that prelacteal feeding (i.e., feeding newborns anything other than breast milk before breast milk is regularly given) be discouraged.

Early breastfeeding

Initiation of breastfeeding within 1 hour of birth.

Sample: Last-born children who were born in the 2 years before the survey

Table 12.2 shows that almost all (98%) last-born children born in the 2 years before the survey were breastfed at some point. Sixty-two percent were breastfed within 1 hour of birth, and almost all (94%) were breastfed within 1 day of birth. Eleven percent of children received prelacteal feeding.

Trends: The proportion of children breastfed within 1 hour of birth increased from 50% in 2012 to 62% in 2017, while the proportion of children ever breastfed and breastfed within 1 day of birth remained relatively stable over the same period. Prelacteal feeding decreased slightly, from 14% to 11%.

Patterns by background characteristics

- There are no marked differences in the percentage of children breastfed within 1 hour of birth by sex of the child, place of delivery, or urban-rural residence. Notable variations, however, can be seen by region. Seventy-one percent of children in Dushanbe start breastfeeding within 1 hour of birth, as compared with 54% of children in DRS.
- Regional differences in early breastfeeding narrow considerably by 1 day after birth. The percentage of children breastfed within 1 day of birth is highest in Dushanbe and Sughd (96% each) and lowest in GBAO (87%).

- Male children are slightly more likely than female children to receive a prelacteal feed (13% versus 9%). Prelacteal feeding is also more common among children delivered by health personnel (12%), at a health facility (11%), and in Dushanbe (14%).

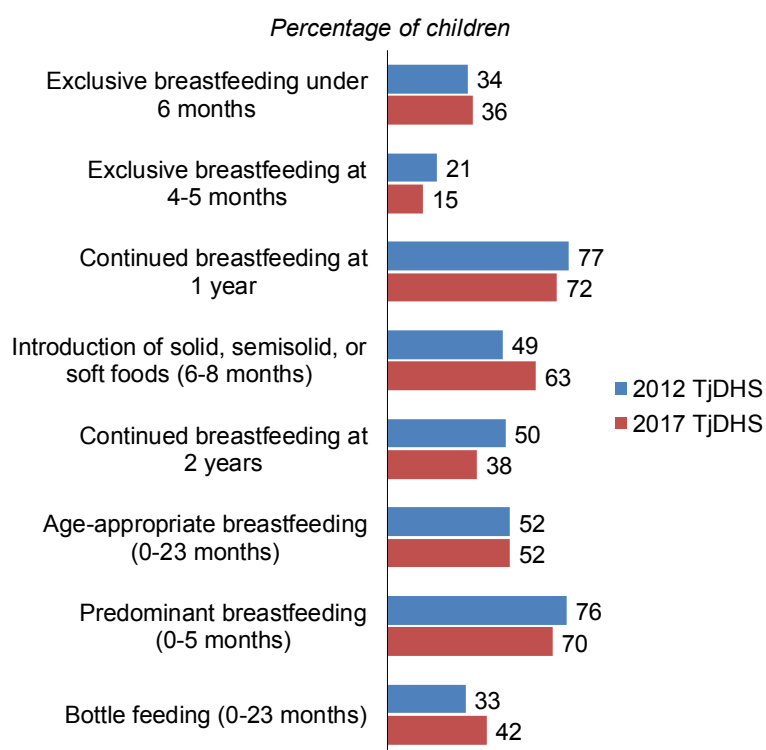
Exclusive Breastfeeding

Breast milk contains all of the nutrients needed by children in the first 6 months of life and is an uncontaminated nutritional source. It is recommended that children be exclusively breastfed in the first 6 months of their life; that is, they should be given nothing but breast milk. Complementing breast milk before age 6 months is unnecessary and is discouraged because the likelihood of contamination and the resulting risk of diarrheal disease are high. Early initiation of complementary feeding also reduces breast milk output because the production and release of breast milk is modulated by the frequency and intensity of suckling.

Table 12.3 and **Figure 12.2** show breastfeeding practices according to children's age. Overall, 36% of children under age 6 months are exclusively breastfed. Exclusive breastfeeding declines with age; only 15% of infants age 4-5 months are exclusively breastfed, as compared with 55% of infants age 0-1 months and 38% of infants age 2-3 months. Contrary to recommendations, many infants are also fed with other liquids such as water (32%), other milks (12%), and non-milk liquids (3%) before reaching age 6 months. Moreover, 12% of infants begin consuming complementary foods before age 6 months, with more than one-fifth of children (22%) consuming such foods by age 4-5 months.

Among children under age 24 months, just over half (52%) are receiving age-appropriate breastfeeding (**Figure 12.3**). This includes exclusive breastfeeding for children under age 6 months and continued breastfeeding along with complementary foods for children age 6-23 months. Seventy percent of children under age 6 months are predominantly breastfed. This percentage includes children who are exclusively breastfed and those who receive breast milk and only plain water or non-milk liquids such as juice. Sixty-three percent of children are introduced to solid, semisolid, or soft foods at 6-8 months. More than 7 in 10 children (72% percent) are still breastfeeding at age 1, and nearly 4 in 10 are still breastfeeding at age 2 (38%). Use of bottles with nipples for infant feeding is widespread in Tajikistan, with 42% of children under age 2 being fed with a bottle. One-third (33%) of children age 2-3 months are bottle fed. The proportion of bottle-fed children initially increases with age, peaks at 57% among children age 6-8 months, and declines thereafter.

Figure 12.3 Infant and young child feeding indicators on breastfeeding status



Trends: Since 2012, the proportion of children under age 6 months who are exclusively breastfed has increased from 34% to 36%; however, the proportion of children who are exclusively breastfed at age 4-5

months has decreased from 21% to 15% (**Figure 12.3**). The proportion of children age 6-8 months who receive complementary foods in addition to breast milk has increased from 49% to 63%, while the proportion of children under age 2 who are bottle fed has risen from 33% to 42%.

Median Duration of Breastfeeding

The median duration of any breastfeeding in Tajikistan is 18.7 months (**Table 12.4**). However, the median durations of exclusive and predominant breastfeeding (breastfeeding along with plain water, water-based liquids, or juice) are shorter (1.4 months and 5.2 months, respectively). The mean durations of exclusive breastfeeding and predominant breastfeeding are longer (3.5 months and 6.5 months, respectively). These figures indicate that the Ministry of Health's official recommendation of exclusive breastfeeding for 6 months has not been reached.

Trends: The median duration of any breastfeeding has not changed in the last 5 years (18.9 months in 2012 and 18.7 months in 2017). Similarly, there have been no changes in the median duration of exclusive breastfeeding (1.5 months in 2012 and 1.4 months in 2017).

Patterns by background characteristics

- The median duration of any breastfeeding is 4 months shorter in Dushanbe (16.4 months) than in Sughd (20.0 months).
- The median duration of predominant breastfeeding tends to decrease with increasing wealth, from 6.7 months among children in the lowest wealth quintile to 5.4 months among children in the highest quintile.

12.2.2 Complementary Feeding

After the first 6 months, breast milk is no longer sufficient to meet the nutritional needs of the infant; therefore, complementary foods should be added to the child's diet. The transition from exclusive breastfeeding to family foods is referred as complementary feeding. This is the most critical period for children, as during this transition they are most vulnerable to becoming undernourished. Complementary feeding should be *timely*; that is, all infants should start receiving foods in addition to breast milk from 6 months onwards.

Appropriate complementary feeding should include feeding children a variety of foods to ensure that requirements for nutrients are met. Fruits and vegetables rich in vitamin A should be consumed daily. Eating a range of fruits and vegetables, in addition to those rich in vitamin A, is also important. Studies have shown that plant-based complementary foods by themselves are insufficient to meet the needs for certain micronutrients. Therefore, it has been recommended that meat, poultry, fish, or eggs be part of the child's daily diet as well or eaten as often as possible (WHO 1998).

In the 2017 TjDHS, women who had at least one child living with them who was born in 2015 or later were asked questions about the types of liquids and foods the child had consumed during the day or night before the interview. Mothers who had more than one child born in 2015 or later were asked questions about the youngest child living with them.

Table 12.5 indicates the types of foods and liquids children under age 2 consumed during the day and night before the interview by age and breastfeeding status. As expected, foods made from grains are the staple of young children's diets. Other food items commonly given to children are foods made from roots and tubers; cheese, yogurt, or other milk products; and fruits and vegetables. Consumption of complementary foods is generally higher among nonbreastfeeding children than breastfeeding children in the same age groups. Almost all (94%) nonbreastfeeding children age 6-23 months receive solid or semisolid foods, as compared with 84% of breastfed children age 6-23 months.

Patterns by background characteristics

- Eighty-seven percent of nonbreastfeeding children age 6-23 months consume foods made from grains (including fortified baby foods) and 64% consume foods made from roots and tubers, compared with 72% and 54%, respectively, of breastfeeding children.
- Nonbreastfeeding children are much more likely than breastfeeding children to consume meat, fish, and poultry (35% and 17%, respectively) and eggs (34% and 24%, respectively).
- Eleven percent of breastfeeding children also receive infant formula, 37% receive other milk, and 33% receive cheese, yogurt, or other milk products, as compared with 13%, 48%, and 42%, respectively, of nonbreastfeeding children.
- Consumption of fruits and vegetables is relatively low among children in Tajikistan. Just one in three (30%) nonbreastfeeding children age 6-23 months consume fruits and vegetables rich in vitamin A and 42% consume other fruits and vegetables, compared with 19% and 28%, respectively, of breastfeeding children.

12.2.3 Minimum Acceptable Diet

Infants and young children should be fed a minimum acceptable diet to ensure appropriate growth and development. Without adequate diversity and meal frequency, infants and young children are vulnerable to undernutrition, especially stunting and micronutrient deficiencies, and to increased morbidity and mortality. The WHO minimum acceptable diet recommendation, which is a combination of dietary diversity and minimum meal frequency, is different for breastfed and nonbreastfed children. The composite indicator of a minimum acceptable diet for all children age 6-23 months is defined in the box below.

Minimum acceptable diet

Proportion of children age 6-23 months who receive a minimum acceptable diet. This indicator is a composite of the following two groups:

Breastfed children age 6-23 months who had at least the minimum dietary diversity and the minimum meal frequency during the previous day

Breastfed children age 6-23 months

and

Nonbreastfed children age 6-23 months who received at least two milk feedings and had at least the minimum dietary diversity (not including milk feeds) and the minimum meal frequency during the previous day

Nonbreastfed children age 6-23 months

Sample: Youngest children age 6-23 months living with their mother

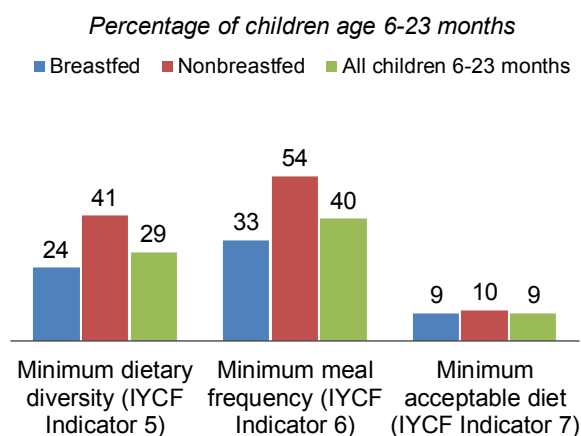
Dietary diversity is a proxy for adequate micronutrient density of foods. Minimum dietary diversity means feeding the child food from at least four food groups. The cutoff of four food groups is associated with better-quality diets for both breastfed and nonbreastfed children. Consumption of food from at least four groups means that the child has a high likelihood of consuming at least one animal source of food and at least one fruit or vegetable in addition to a staple food (grains, roots, or tubers) (WHO 2008). The four groups should come from a list of seven food groups: grains, roots, and tubers; legumes and nuts; dairy products (milk yogurt, cheese); flesh foods (meat, fish, poultry, and liver/organ meat); eggs; vitamin A-rich fruits and vegetables; and other fruits and vegetables.

Minimum meal frequency is a proxy for a child's energy requirements. For infants and young children, the indicator is based on how much energy the child needs and, if the child is breastfed, the amount of energy needs not met by breast milk. Breastfed children are considered to be fed with a minimum meal frequency

if they receive solid, semisolid, or soft foods at least twice a day (for infants age 6-8 months) or at least three times a day (for children age 9-23 months). Nonbreastfed children age 6-23 months are considered to be fed with a minimum meal frequency if they receive solid, semisolid, or soft foods at least four times a day.

The results presented in **Table 12.6** and **Figure 12.4** show that the feeding practices of only 9% of children age 6-23 months in Tajikistan meet the minimum standards with respect to all three IYCF practices (breastfeeding status, number of food groups, and times they were fed during the day or night before the survey). Overall, 29% of children had an adequately diverse diet in which they had been given foods from the appropriate number of food groups, and 40% had been fed the minimum number of times appropriate for their age.

Figure 12.4 IYCF indicators on minimum acceptable diet



Patterns by background characteristics

- A similar proportion of breastfed (9%) and nonbreastfed (10%) children age 6-23 months were fed a minimum acceptable diet in the 24 hours preceding the interview.
- Breastfed children were less likely to have minimum dietary diversity and minimum meal frequency (24% and 33%, respectively) than nonbreastfed children (41% and 54%, respectively). Only half (52%) of nonbreastfed children are fed with milk or milk products as recommended.
- The proportion of children receiving a minimum acceptable diet varies by region, from 5% in DRS to 13% in Sughd.
- The likelihood that a child is receiving a minimum acceptable diet generally improves with increasing household wealth. However, the proportions of children fed according to the minimum acceptable dietary standards are quite low even among children in the highest wealth quintile (13%).

12.3 ANEMIA PREVALENCE IN CHILDREN

Anemia in children

Anemia status	Hemoglobin level in grams/deciliter*
Any anemia	<11.0
Mild anemia	10.0-10.9
Moderate anemia	7.0-9.9
Severe anemia	<7.0
No anemia	11.0 or higher

* Hemoglobin levels are adjusted for altitude in enumeration areas that are above 1,000 meters.

Sample: Children age 6-59 months

Anemia is a condition characterized by a reduction in red blood cell volume and a decrease in the concentration of hemoglobin in the blood. Hemoglobin is necessary for transporting oxygen to tissues and organs in the body. Iron is a key component of hemoglobin, and iron deficiency is estimated to be responsible for half of all anemia globally. Other causes of anemia include malaria, hookworm and other helminths, other nutritional deficiencies, chronic infections, and genetic conditions. Anemia is a serious

concern for children because it can impair cognitive development, stunt growth, and increase morbidity from infectious diseases.

The 2017 TjDHS used the HemoCue Hb201+ analyzer to determine anemia levels. A total of 5,605 (unweighted) children age 6-59 months were eligible for hemoglobin testing, and 97% of these children were successfully tested. The TjDHS hemoglobin testing methodology is described in Chapter 1. The prevalence of anemia in children is presented in **Table 12.7**.

The results in Table 12.7 indicate that anemia is common among children in Tajikistan. Overall, 4 in 10 children age 6-59 months (42%) have some level of anemia. Almost all children who suffer from anemia are mildly anemic (24%) or moderately anemic (17%). Less than 1% of children age 6-59 months are severely anemic.

Patterns by background characteristics

- Anemia is more prevalent among children less than age 24 months than among older children, peaking at 66% among children age 12-17 months. Children age 48-59 months (23%) are less than half as likely to be anemic as children age 18-23 months (58%), and are less than three times as likely to be anemic as children age 12-17 months.
- Children living in rural areas (44%) are more likely to be anemic than children living in urban areas (33%) (**Figure 12.5**).
- The prevalence of anemia ranges from 24% in Dushanbe to 62% in GBAO (**Figure 12.6**).
- The prevalence of anemia in children generally decreases with increasing household wealth.

Figure 12.5 Childhood anemia status by residence

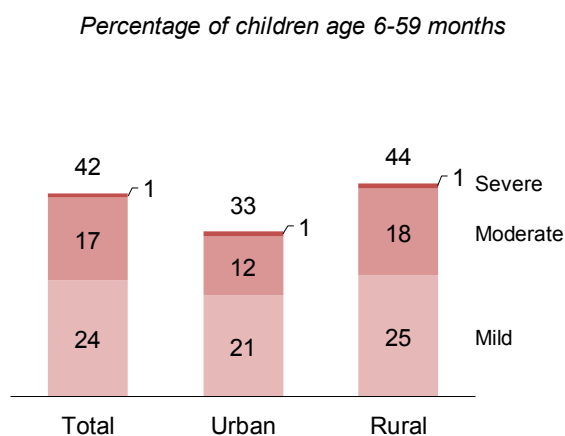
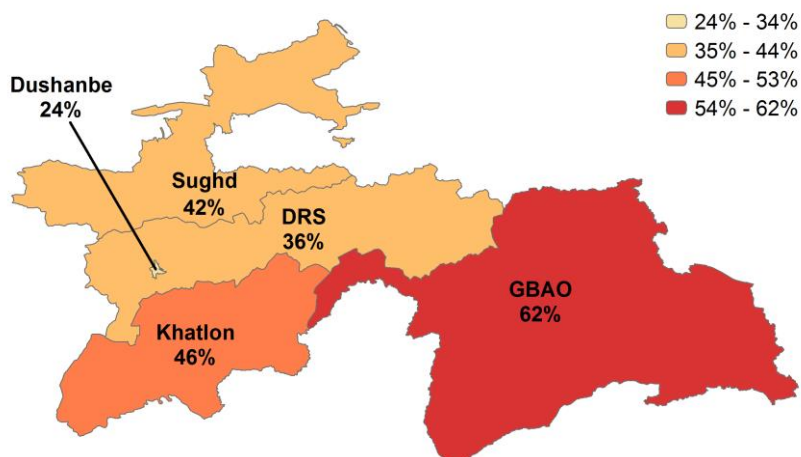


Figure 12.6 Anemia in children by region

Percentage of children age 6-59 months with any anemia



12.4 PRESENCE OF IODIZED SALT IN HOUSEHOLDS

Iodine is an essential micronutrient, and iodized salt prevents goiter and other thyroid-related health problems among children and adults. In line with food and drug regulations, household salt should be fortified with iodine to at least 15 parts per million (ppm).

Since 1997, the government and donor communities have addressed iodine deficiency disorder (IDD) through the National Programme for Elimination of IDD, which requires that salt be iodized to 45 parts per million (ppm) (SCS 2007). A subsequent law (№ 344) regulating the production, distribution, and consumption of iodized salt in Tajikistan was adopted in 2002 (SCS 2007). According to the World Health Organization, a country's salt iodization program is considered to be on a good track to eliminate iodine deficiency when 90% of households use iodized salt.

In the 2017 TjDHS, household salt samples were tested for iodine levels. Two types of MBI rapid test kits were used to test salt for the presence of iodine: one for salt fortified with potassium *iodate* and the second for salt fortified with potassium *iodide*. If the first test did not show the presence of potassium iodate in the salt, the second kit for salt fortified with potassium iodide was used on a fresh sample of salt.

Table 12.8 shows the proportion of households with iodized salt according to background characteristics. Overall, salt was tested in nearly 100% of households, and 92% of the tested households were found to use salt with at least some iodine.

Trends: The percentage of households with iodized salt has increased in the last 5 years, from 84% in 2012² to 92% in 2017. Among the regions, DRS experienced the greatest increase in household salt iodization (from 75% of households in 2012 to 88% in 2017).

Patterns by background characteristics

- The proportion of households using salt with at least some iodine ranges from 87% in Khatlon to 97% each in Dushanbe and Sughd.
- Urban households are slightly more likely than rural households to consume iodized salt (96% versus 90%).
- The presence of iodized salt increases with increasing household wealth, from 85% in the poorest households to 97% in the wealthiest.

12.5 MICRONUTRIENT INTAKE AND SUPPLEMENTATION AMONG CHILDREN

Micronutrient deficiency is a major contributor to childhood morbidity and mortality. Micronutrients are available in foods and can also be provided through direct supplementation. Breastfeeding children benefit from supplements given to their mother.

The information collected on food consumption among the youngest children under age 2 is useful in assessing the extent to which children are consuming food groups rich in two key micronutrients—vitamin A and iron—in their daily diet. Iron deficiency is one of the primary causes of anemia, which has serious health consequences for both women and children. Vitamin A is an essential micronutrient for the immune system and plays an important role in maintaining the epithelial tissue in the body. Severe vitamin A deficiency (VAD) can cause eye damage and is the leading cause of childhood blindness. VAD also increases the severity of infections such as measles and diarrheal disease in children and slows recovery from illness. VAD is common in environments where fresh fruits and vegetables are not readily available.

The 2017 TjDHS collected information on consumption of foods rich in vitamin A and iron, consumption of micronutrient sprinkles, vitamin A and iron supplementation, and deworming status among children age 6-59 months.

Table 12.9 shows, by background characteristics, the percentage of youngest children age 6-23 months living with their mother who consumed foods rich in vitamin A and iron during the day or night preceding

² In the 2012 TjDHS, the MBI rapid test kit for salt fortified with potassium iodate was used to test salt for the presence of iodine.

the survey. The table also shows the proportion of all children age 6-23 months given micronutrient sprinkles in the week before the survey. In addition, the table shows the proportion of all children age 6-59 months who received iron supplements in the week before the survey and vitamin A supplements or deworming medication in the 6 months preceding the survey. Finally, the table presents information on children age 6-59 months who live in households with iodized salt.

Consumption of foods rich in vitamin A or iron remains low among young children in Tajikistan; overall, only 46% of children age 6-23 months consumed foods rich in vitamin A during the 24 hours before the interview, while 38% consumed foods rich in iron. In the 7 days preceding the survey, 17% of children age 6-23 months were given micronutrient sprinkles.

Among children age 6-59 months, 26% were given iron supplements in the 7 days preceding the interview. Seventy-six percent had been given vitamin A supplements in the last 6 months, and 15% had been given deworming medication during the same period.

At the national level, 91% of children live in households that use iodized salt (95% in urban areas and 90% in rural areas).

Table 12.10 shows the percentage of children age 6-35 months who received BP-100 or Super Cereal Plus (therapeutic and supplemental foods, respectively) in the 7 days preceding the survey. Overall, 15% of children received BP-100 and 12% received Super Cereal Plus.

Patterns by background characteristics

- Among children age 6-23 months, intake of both vitamin A-rich foods and iron-rich foods increases with increasing age (**Table 12.9**).
- Consumption of vitamin A-rich foods varies by region, from 37% each in DRS and Khatlon to 64% in Sughd. Consumption of foods rich in iron ranges from 30% in DRS to 52% in Sughd.
- There is considerable regional variation in consumption of sprinkles among children age 6-23 months, from 6% in Sughd to 29% in Khatlon.
- Among children age 6-59 months, those in Khatlon are most likely to be given iron supplementation (39%) in the past 7 days and vitamin A supplementation (81%) in the past 6 months.
- The percentage of children age 6-59 months given deworming medication ranges from 8% in Sughd to 23% in DRS.

12.6 NUTRITIONAL STATUS OF WOMEN

Low pre-pregnancy body mass index (BMI) and short stature among women are risk factors for poor birth outcomes and delivery complications. In developing countries, maternal underweight is the leading risk factor for preventable death and diseases. The prevalence of overweight women and men is a growing concern in developing countries and is associated with a wide range of health problems such as diabetes, heart disease, and poor birth outcomes for women. In many countries, chronic energy deficiency among adults is still a problem that leads to low work productivity and reduced resistance to illness.

The 2017 TjDHS measured the height and weight of women age 15-49. These data were used to derive two measures of nutritional status: height and body mass index (BMI). Given the relationship between maternal stature and pelvic size, women's height can be useful in predicting the risk of difficulties in delivery. The risk of giving birth to low-weight babies is higher among women of small stature. The cutoff point at which mothers are considered at risk because of short stature normally falls between 140 and 150 centimeters. BMI, used to measure thinness or obesity, is defined in the box below. Overall, only 1% of women age 15-49 are of short stature (below 145 cm in height).

Body mass index (BMI)

BMI is calculated by dividing weight in kilograms by height in meters squared (kg/m²).

Status	BMI
Too thin for their height	Less than 18.5
Normal	Between 18.5 and 24.9
Overweight	Between 25.0 and 29.9
Obese	Greater than or equal to 30.0

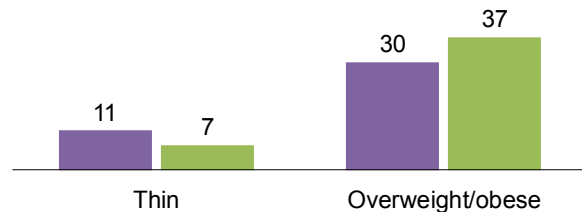
Sample: Women age 15-49 who are not pregnant and who have not had a birth in the 2 months before the survey

The mean BMI for women age 15-49 is 24.3, which falls in the normal BMI classification. Over half of women have a normal BMI (56%), 7% are thin, and 37% are overweight or obese (Table 12.11).

Trends: The proportion of women age 15-49 who are thin has declined since 2012, from 11% to 7%; the proportion who are overweight or obese has increased, from 30% to 37% (Figure 12.7). The mean BMI increased from 23.4 to 24.3 in the same period.

Figure 12.7 Trends in women's nutritional status

Percentage of women age 15-49
■ 2012 TJDHS ■ 2017 TJDHS



Patterns by background characteristics

- Adolescent girls age 15-19 are more likely to be thin (16%) than women in older age cohorts (2%-9%).
- The percentage of women who are thin ranges from 6% in Sughd to 11% in GBAO. There is little variation in thinness by residence, education, or wealth.
- The proportion of women who are overweight or obese increases with age, from 10% among those age 15-19 to 67% among those age 40-49.
- Urban women are more likely to be overweight or obese than rural women (41% versus 36%). The proportion of overweight or obese women ranges from 25% in GBAO to 41% in Sughd.
- The proportion of women who are overweight or obese tends to increase with increasing household wealth; 33%-35% of women in the lowest to middle wealth quintiles are overweight or obese, as compared with 41%-42% of women in the two highest quintiles.

12.7 ANEMIA PREVALENCE IN WOMEN

In addition to causing weakness, frequent tiredness, and lowered resistance to disease, anemia can be a particularly serious problem for pregnant women, leading to premature delivery and low birth weight.

Hemoglobin levels below which women are considered anemic

Respondents	Hemoglobin level in grams/deciliter*
Non-pregnant women age 15-49	Less than 12.0

Pregnant women age 15-49 Less than 11.0

* Hemoglobin levels are adjusted for cigarette smoking and for altitude in enumeration areas that are above 1,000 meters.

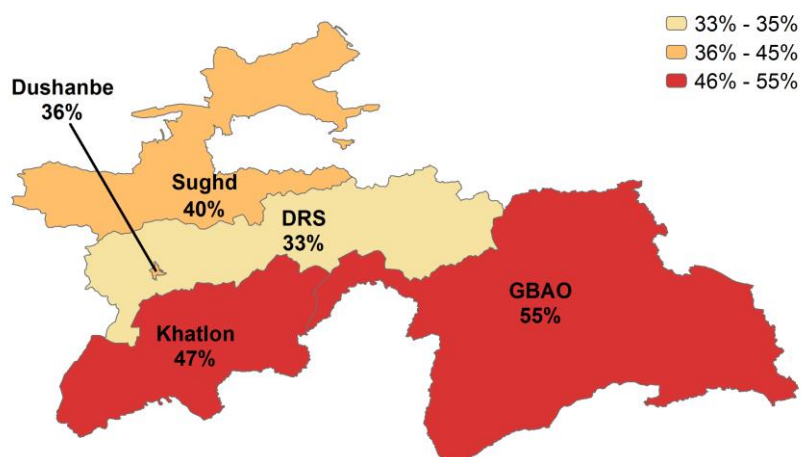
All women age 15-49 in households interviewed in the 2017 TjDHS were offered an anemia test. Ninety-nine percent of eligible women participated in the hemoglobin measurement. Anemia among women age 15-49 was measured with similar procedures used for children age 6-59 months except that capillary blood was collected exclusively from a finger prick (see details on methodology in Chapter 1). Two in five (41%) women in Tajikistan suffer from anemia (**Table 12.12**). The majority (32%) of these women are mildly anemic; 8% are moderately anemic, and less than 1% are severely anemic.³

Patterns by background characteristics

- Anemia is less prevalent among adolescent girls age 15-19 (33%) than among women age 20-49 (41%-44%).
- Women who have given birth are more likely to be anemic (42%-45%) than women who have no children (34%).
- By region, the prevalence of any anemia ranges from 33% among women in DRS to 55% among women in GBAO (**Figure 12.8**).
- The prevalence of anemia is highest among women in the poorest households (43%) and lowest among those in the wealthiest households (38%).
- The prevalence of moderate anemia is highest among pregnant women (19%) and women in GBAO (17%).

Figure 12.8 Anemia in women by region

Percentage of women age 15-49 with any anemia



³ Levels of anemia are classified as severe, moderate, and mild based on the hemoglobin concentration in the blood, according to criteria developed by WHO (DeMaeyer et al. 1989). Women with hemoglobin levels below 7.0 g/dl are classified as having severe anemia, those with levels of 7.0-9.9 g/dl are classified as having moderate anemia, and non-pregnant women with levels of 10.0-11.9 g/dl and pregnant women with levels of 10.0-10.9 g/dl are classified as having mild anemia.

12.8 DIETARY DIVERSITY IN WOMEN

Adequate micronutrient intake is important for women of reproductive age. They have high requirements for several micronutrients that can increase during pregnancy and lactation (WHO 1998). Poor micronutrient intake can affect women and their children. Minimum dietary diversity for women (MDD-W) is an indicator of the micronutrient adequacy of a woman's diet, which is one dimension of overall diet quality (FAO and FHI 360 2016). Achieving minimum dietary diversity means that a woman consumes food from five or more of the following 10 food groups: (1) grains, tubers, roots, and starchy foods; (2) legumes; (3) nuts and seeds; (4) cheese, yogurt, and other milk products; (5) eggs; (6) meat, fish, and poultry; (7) dark green leafy vegetables; (8) fruits and vegetables rich in vitamin A; (9) other vegetables; and (10) other fruits. Having a cutoff of five or more food groups means that a woman has a high likelihood of consuming at least one animal source of food and either legumes or nuts/seeds as well as food items from two or more of the fruit or vegetable groups (Martin-Preval et al. 2015). This survey, for the first time, collected data from all women age 15-49 on foods and liquids consumed in the 24 hours before the interview.

Table 12.13 shows that, overall, 80% of women age 15-49 in Tajikistan achieved minimum dietary diversity (i.e., they consumed foods from five or more groups). Almost all women consumed food made from grains (99%), and most consumed tubers/roots/starchy foods (85%). Seventy-eight percent of women consumed animal sources of food in the meat/fish/poultry category and 69% consumed milk or milk products, including cheese, yogurt, churgot, or chakka. Fewer than half of women consumed eggs (45%), legumes (45%), or foods made from nuts and seeds (39%). Sixty percent of women ate vitamin A-rich fruits and vegetables, while only 19% consumed dark green leafy vegetables. The proportions of women who consumed other fruits and other vegetables were 76% and 73%, respectively. Fifteen percent of women consumed savory and fried snack foods, nearly two-thirds consumed sugary foods (62%), and over half consumed sugar-sweetened beverages (53%).

Patterns by background characteristics

- There is considerable regional variation in the types of foods consumed by women. Consumption of foods made from nuts and seeds ranges from 21% in GBAO to 44% in Khatlon, while consumption of meat, fish, shellfish, or poultry ranges from 65% in DRS to 92% in Sughd. Women in Khatlon are least likely to consume dark green leafy vegetables (11%), while women in Dushanbe are most likely to do so (29%). Consumption of savory and fried snacks is lowest in GBAO (5%) and highest in DRS and Dushanbe (18% each).
- Consumption of savory and fried snacks, sugary foods, and sugar-sweetened beverages generally increases with increasing wealth.
- Women who have achieved minimum dietary diversity are more likely to live in smaller households; the percentage achieving minimum dietary diversity ranges from a high of 83% among women living in small households (1-5 members) to a low of 77% among women in large households (11 or more members).
- Women in urban areas (86%) are more likely than those in rural areas (79%) to have achieved minimum dietary diversity.
- The proportion of women achieving minimum dietary diversity is highest in Sughd (92%) and lowest in DRS (71%).
- The proportion of women achieving minimum dietary diversity increases with increasing education and wealth.

12.9 MICRONUTRIENT SUPPLEMENTATION AND DEWORMING DURING PREGNANCY

Women age 15-49 who had given birth in the 5 years preceding the survey were asked whether they took iron supplements, folate supplements, and/or deworming medication during their most recent pregnancy.

Table 12.14 shows that over half of women age 15-49 (55%) did not take any iron supplements during the pregnancy for their most recent birth in the 5 years before the survey. Most of the women who took iron supplements did so for fewer than 60 days (37%); only 2% of women said they took iron supplements for 90 days or more. Supplementation with folate-containing tablets is similar to that with iron; overall, only 42% of women took folate tablets during the first 3 months of the pregnancy of their last birth. Just 2% of women took deworming medication during the pregnancy of their last birth. Among women with a child born in the last 5 years, 9 out of 10 live in a household with iodized salt.

Patterns by background characteristics

- Iron or folate supplementation during pregnancy is most common among women age 15-19 and declines with age.
- Generally, the proportion of women taking iron tablets (for 90 days or more) and folate tablets for the first 3 months of pregnancy increases with increasing education and wealth.
- Urban women are more likely than rural women to take iron or folate tablets during pregnancy.
- Folate tablet consumption during the first 3 months of pregnancy is most common among women in Dushanbe (54%) and least common among women in GBAO (37%). Iron supplementation is highest in GBAO (59%) and lowest in DRS (30%).

LIST OF TABLES

For more information on nutrition of children and women, see the following tables:

- **Table 12.1** Nutritional status of children
- **Table 12.2** Initial breastfeeding
- **Table 12.3** Breastfeeding status according to age
- **Table 12.4** Median duration of breastfeeding
- **Table 12.5** Foods and liquids consumed by children in the day or night preceding the interview
- **Table 12.6** Minimum acceptable diet
- **Table 12.7** Prevalence of anemia in children
- **Table 12.8** Presence of iodized salt in household
- **Table 12.9** Micronutrient intake among children
- **Table 12.10** Therapeutic and supplemental foods
- **Table 12.11** Nutritional status of women
- **Table 12.12** Prevalence of anemia in women
- **Table 12.13** Foods and liquids consumed by women in the day or night preceding the interview
- **Table 12.14** Micronutrient intake among mothers

Table 12.1 Nutritional status of children

Percentage of children under age 5 classified as malnourished according to 3 anthropometric indices of nutritional status: height-for-age, weight-for-height, and weight-for-age, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Height-for-age ¹				Weight-for-height					Weight-for-age				
	Percent-age below -3 SD	Percent-age below -2 SD ²	Mean Z-score (SD)	Number of children	Percent-age below -3 SD	Percent-age below -2 SD ²	Percent-age above +2 SD	Mean Z-score (SD)	Number of children	Percent-age below -3 SD	Percent-age below -2 SD ²	Percent-age above +2 SD	Mean Z-score (SD)	Number of children
Age in months														
<6	1.3	6.6	0.3	622	5.7	13.7	4.3	-0.4	620	2.7	7.2	3.4	-0.1	627
6-8	1.0	4.3	0.0	317	4.2	11.1	4.4	-0.4	322	3.5	10.4	3.5	-0.3	325
9-11	2.5	9.6	-0.3	323	2.3	9.0	2.9	-0.3	323	2.4	10.1	1.9	-0.4	323
12-17	3.9	13.9	-0.6	703	2.1	8.7	2.1	-0.3	700	2.7	10.0	1.2	-0.5	704
18-23	6.1	21.3	-1.0	768	2.1	5.8	3.3	-0.1	768	1.8	7.6	1.1	-0.6	773
24-35	5.1	22.0	-1.1	1,357	1.3	3.9	3.4	0.1	1,355	1.0	7.3	0.4	-0.5	1,359
36-47	5.4	21.6	-1.1	1,386	0.7	2.2	4.3	0.1	1,381	1.3	6.3	0.2	-0.6	1,387
48-59	5.0	18.6	-1.2	1,218	0.7	2.7	2.3	0.0	1,214	1.5	6.7	0.5	-0.7	1,219
Sex														
Male	4.9	17.8	-0.8	3,366	2.1	6.1	3.5	-0.1	3,359	2.0	8.1	1.0	-0.5	3,378
Female	4.0	17.2	-0.8	3,328	1.6	5.0	3.2	-0.1	3,325	1.6	7.0	1.1	-0.5	3,338
Birth interval in months³														
First birth ⁴	3.2	17.1	-0.8	1,944	1.6	4.7	3.2	0.0	1,947	1.6	6.2	1.1	-0.5	1,953
<24	5.7	17.3	-0.9	1,887	1.9	5.9	3.5	-0.1	1,886	1.9	8.3	0.8	-0.6	1,891
24-47	4.7	18.6	-0.9	1,876	1.7	5.4	3.6	-0.1	1,871	1.8	8.3	1.0	-0.5	1,883
48+	3.9	17.0	-0.7	842	2.5	6.5	2.7	-0.1	838	1.7	7.4	1.5	-0.4	845
Size at birth³														
Very small	11.8	30.0	-1.4	110	1.1	8.7	4.9	-0.3	110	5.4	22.8	2.4	-1.0	110
Small	6.3	25.9	-1.1	842	2.0	7.3	2.5	-0.3	843	2.6	12.7	0.8	-0.9	847
Average or larger	4.0	15.9	-0.8	5,341	1.8	5.2	3.5	-0.0	5,331	1.6	6.5	1.1	-0.4	5,358
Missing	4.6	20.7	-1.0	258	1.9	4.6	1.9	-0.1	257	1.8	5.7	0.7	-0.6	258
Mother's interview status														
Interviewed	4.5	17.6	-0.8	6,550	1.8	5.5	3.3	-0.1	6,541	1.8	7.6	1.0	-0.5	6,572
Not interviewed but in household	1.7	9.1	-0.5	53	4.5	12.8	6.8	-0.1	52	5.5	11.7	4.6	-0.4	53
Not interviewed and not in the household ⁵	6.7	15.7	-0.8	91	1.9	6.6	1.7	0.1	91	1.4	5.7	0.5	-0.4	91
Mother's nutritional status⁶														
Thin (BMI <18.5)	5.1	19.2	-1.0	382	3.4	8.9	2.3	-0.5	382	4.5	13.2	0.5	-0.9	383
Normal (BMI 18.5-24.9)	4.8	19.0	-0.9	3,443	1.7	5.5	3.5	-0.1	3,441	2.0	8.1	0.9	-0.6	3,457
Overweight/obese (BMI ≥25)	3.6	15.3	-0.7	1,728	1.2	3.9	3.3	0.1	1,724	1.0	5.2	1.5	-0.3	1,734
Residence														
Urban	6.0	17.4	-0.7	1,398	3.0	8.6	5.3	-0.1	1,390	2.4	9.0	1.9	-0.5	1,405
Rural	4.1	17.5	-0.9	5,296	1.5	4.8	2.8	-0.1	5,294	1.6	7.2	0.8	-0.5	5,311
Region														
Dushanbe	9.1	18.0	-0.5	410	7.6	16.6	8.0	-0.4	401	4.1	13.1	3.7	-0.6	415
GBAO	16.7	31.9	-1.2	116	3.2	9.5	6.7	-0.1	116	4.6	15.8	0.9	-0.8	119
Sughd	3.8	16.1	-0.7	1,929	1.1	3.5	4.5	0.2	1,931	0.7	4.5	1.0	-0.3	1,933
DRS	3.9	15.3	-0.8	1,583	1.2	4.6	2.6	-0.1	1,581	1.5	7.0	0.9	-0.5	1,585
Khatlon	4.1	19.1	-0.9	2,657	1.8	5.8	2.1	-0.2	2,655	2.2	8.9	0.8	-0.7	2,664
FTF districts	3.5	17.9	-0.9	1,477	2.3	6.2	2.6	-0.1	1,475	1.8	7.8	0.7	-0.6	1,481
Mother's education⁷														
None/primary	4.5	18.4	-1.0	559	1.9	4.1	2.1	-0.1	555	0.8	6.3	1.0	-0.6	560
General basic	4.7	18.6	-0.9	2,426	2.0	5.8	2.7	-0.1	2,425	2.2	7.8	0.8	-0.6	2,436
General secondary	*	*	*	17	*	*	*	*	16	*	*	*	*	17
Professional primary/middle	3.9	17.1	-0.8	3,079	1.4	5.1	3.7	-0.0	3,076	1.5	7.3	1.2	-0.5	3,089
Higher	6.1	14.2	-0.5	523	3.1	7.9	5.3	-0.0	521	2.4	9.2	1.8	-0.3	524
Wealth quintile														
Lowest	5.9	21.5	-1.0	1,238	1.7	4.9	1.6	-0.2	1,239	1.7	8.4	0.8	-0.7	1,244
Second	3.8	19.2	-1.0	1,371	1.3	5.1	3.3	-0.1	1,370	1.9	8.1	0.6	-0.6	1,371
Middle	5.1	16.4	-0.8	1,492	1.4	4.9	2.8	-0.1	1,489	2.4	7.2	0.8	-0.5	1,498
Fourth	2.5	13.8	-0.7	1,482	1.6	5.1	3.5	0.0	1,479	0.9	6.0	1.2	-0.4	1,483
Highest	5.4	17.2	-0.6	1,112	3.6	8.4	5.7	-0.1	1,107	2.0	8.6	2.3	-0.4	1,121
Total	4.5	17.5	-0.8	6,694	1.8	5.6	3.3	-0.1	6,684	1.8	7.6	1.1	-0.5	6,716

Note: Each of the indices is expressed in standard deviation units (SD) from the median of the WHO Child Growth Standards. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Recumbent length is measured for children under age 2; standing height is measured for all other children.

² Includes children who are below -3 standard deviations (SD) from the WHO Child Growth Standards population median

³ Excludes children whose mothers were not interviewed

⁴ First-born twins (triplets, etc.) are counted as first births because they do not have a previous birth interval.

⁵ Includes children whose mothers are deceased

⁶ Excludes children whose mothers were not weighed and measured, children whose mothers were not interviewed, and children whose mothers are pregnant or gave birth within the preceding 2 months. Mother's nutritional status in terms of BMI (body mass index) is presented in Table 12.11.

⁷ 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 12.2 Initial breastfeeding

Among last-born children who were born in the 2 years preceding the survey, percentage who were ever breastfed and percentages who started breastfeeding within 1 hour and within 1 day of birth, and among last-born children born in the 2 years preceding the survey who were ever breastfed, percentage who received a prelacteal feed, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among last-born children born in the past 2 years:			Among last-born children born in the past 2 years who were ever breastfed:		
	Percentage ever breastfed	Percentage who started breastfeeding within 1 hour of birth	Percentage who started breastfeeding within 1 day of birth ¹	Number of last-born children	Percentage who received a prelacteal feed ²	Number of last-born children ever breastfed
Sex						
Male	97.4	61.9	93.7	1,281	12.5	1,248
Female	97.8	61.3	94.1	1,200	9.4	1,173
Assistance at delivery						
Health personnel ³	97.8	61.1	93.8	2,190	11.5	2,141
Traditional birth attendant	96.1	65.9	94.7	276	6.8	265
No one	*	*	*	2	*	2
Missing	*	*	*	13	*	13
Place of delivery						
Health facility	97.8	61.3	93.8	2,217	11.4	2,168
At home	96.6	65.5	95.5	256	7.4	247
Other	*	*	*	8	*	6
Residence						
Urban	98.4	63.0	94.1	476	10.2	469
Rural	97.4	61.3	93.8	2,005	11.2	1,952
Region						
Dushanbe	98.6	70.9	96.2	142	13.8	140
GBAO	98.5	57.3	87.4	37	8.3	36
Sughd	99.2	66.3	95.9	721	9.5	715
DRS	95.9	54.0	90.8	594	12.4	570
Khatlon	97.2	61.7	94.2	987	10.9	960
FTF districts	96.5	54.4	94.7	542	12.4	523
Mother's education						
None/primary	97.5	65.3	95.1	193	8.8	188
General basic	97.0	58.1	92.6	892	12.1	865
General secondary	97.5	64.0	94.7	1,014	10.6	988
Professional primary/middle	98.3	65.6	94.2	188	10.1	185
Higher	99.7	57.9	94.2	195	10.9	194
Wealth quintile						
Lowest	97.2	65.3	94.3	445	11.4	432
Second	96.7	60.8	91.7	503	12.4	487
Middle	97.2	58.3	93.9	579	10.0	563
Fourth	99.1	63.1	95.8	552	10.6	547
Highest	97.7	61.4	93.5	402	10.8	393
Total	97.6	61.6	93.9	2,481	11.0	2,421

Note: Table is based on last-born children born in the 2 years preceding the survey regardless of whether the children are living or dead at the time of the interview. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Includes children who started breastfeeding within 1 hour of birth

² Children given something other than breast milk during the first 3 days of life

³ Doctor, nurse, or midwife

Table 12.3 Breastfeeding status according to age

Percent distribution of youngest children under age 2 who are living with their mother by breastfeeding status and percentage currently breastfeeding, and percentage of all children under age 2 using a bottle with a nipple, according to age in months, Tajikistan DHS 2017

Age in months	Breastfeeding status						Total	Percentage currently breastfeeding	Number of youngest children under age 2 living with their mother	Percentage using a bottle with a nipple	Number of all children under age 2
	Not breast-feeding	Exclusively breastfed	Breast-feeding and consuming plain water only	Breast-feeding and consuming non-milk liquids ¹	Breast-feeding and consuming other milk	Breast-feeding and consuming complementary foods					
0-1	5.7	55.2	25.8	0.8	6.4	6.1	100.0	94.3	196	12.3	197
2-3	4.5	37.5	33.1	1.7	14.6	8.6	100.0	95.5	195	32.9	197
4-5	5.9	14.8	35.6	5.6	16.0	22.0	100.0	94.1	197	42.8	197
6-8	8.0	7.2	17.0	3.9	7.2	56.7	100.0	92.0	307	56.7	309
9-11	11.7	2.0	5.8	2.1	5.3	73.2	100.0	88.3	301	51.3	305
12-17	30.8	1.0	0.9	1.6	2.0	63.7	100.0	69.2	642	51.6	667
18-23	55.9	0.0	0.7	0.3	0.9	42.2	100.0	44.1	594	32.3	727
0-3	5.1	46.4	29.5	1.2	10.5	7.3	100.0	94.9	391	22.6	393
0-5	5.4	35.8	31.5	2.7	12.4	12.3	100.0	94.6	588	29.3	590
6-9	9.3	5.8	14.5	3.5	7.3	59.6	100.0	90.7	394	56.3	397
6-11	9.8	4.6	11.4	3.0	6.2	64.9	100.0	90.2	608	54.0	614
12-15	27.8	1.5	1.4	1.8	2.0	65.6	100.0	72.2	436	53.6	450
12-23	42.9	0.5	0.8	1.0	1.5	53.4	100.0	57.1	1,237	41.5	1,394
20-23	62.4	0.0	0.2	0.5	0.7	36.2	100.0	37.6	393	29.5	503

Note: Breastfeeding status refers to a "24-hour" period (yesterday and last night). Children who are classified as breastfeeding and consuming plain water only consumed no liquid or solid supplements. The categories of not breastfeeding, exclusively breastfed, breastfeeding and consuming plain water, non-milk liquids, other milk, and complementary foods (solids and semisolids) are hierarchical and mutually exclusive, and their percentages add to 100%. 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.

¹ Non-milk liquids include juice, juice drinks, clear broth, or other liquids

Table 12.4 Median duration of breastfeeding

Median duration of any breastfeeding, exclusive breastfeeding, and predominant breastfeeding among children born in the 3 years preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Median duration (months) of breastfeeding among children born in the past 3 years ¹		
	Any breastfeeding	Exclusive breastfeeding	Predominant breastfeeding ²
Sex			
Male	19.4	1.7	5.3
Female	17.9	1.2	5.2
Residence			
Urban	19.1	1.2	4.6
Rural	18.6	1.5	5.4
Region			
Dushanbe	16.4	*	5.2
GBAO	(19.4)	a	a
Sughd	20.0	(1.6)	4.8
DRS	19.6	(1.4)	5.1
Khatlon	17.6	1.4	5.7
FTF districts	17.3	(1.3)	6.4
Mother's education			
None/primary	17.1	(3.3)	(6.3)
General basic	19.6	a	5.7
General secondary	18.2	1.7	4.9
Professional primary/ middle	(17.9)	*	(4.9)
Higher	18.6	a	4.3
Wealth quintile			
Lowest	19.3	(2.1)	6.5
Second	18.9	*	5.2
Middle	18.3	a	4.5
Fourth	18.7	(1.7)	5.0
Highest	17.5	(1.2)	5.1
Total	18.7	1.4	5.2
Mean for all children	18.7	3.5	6.5

Note: Median and mean durations are based on breastfeeding status of the child at the time of the survey (current status). Includes living and deceased children. 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.

a = Not possible to calculate median because fewer than 50% of children under age 2 months were breastfed

¹ For last-born children under age 24 months who live with their mother and are breastfeeding, information to determine exclusive and predominant breastfeeding comes from a 24-hour dietary recall. Tabulations assume that last-born children age 24 months or older who live with their mother and are breastfeeding are neither exclusively nor predominantly breastfed. It is assumed that last-born children not currently living with their mother and all non-last-born children are not currently breastfeeding.

² Either exclusively breastfed or received breast milk and plain water and/or non-milk liquids only

Table 12.5 Foods and liquids consumed by children in the day or night preceding the interview

Percentage of youngest children under age 2 who are living with their mother by type of foods consumed in the day or night preceding the interview, according to breastfeeding status and age, Tajikistan DHS 2017

Age in months	Liquids			Solid or semisolid foods									Number of children under age 2	
	Infant formula	Other milk ¹	Other liquids ²	Fortified baby foods	Food made from grains ³	Fruits and vegetables rich in vitamin A ⁴	Other fruits and vegetables	Food made from roots and tubers	Food made from legumes and nuts	Meat, fish, poultry	Eggs	Cheese, yogurt, other milk products		Any solid or semi-solid food
BREASTFEEDING CHILDREN														
0-1	0.7	8.9	3.4	1.9	4.5	1.6	0.0	2.5	0.7	0.0	1.0	1.0	6.5	185
2-3	13.9	7.9	5.0	3.2	6.3	0.8	0.9	0.9	0.7	0.9	0.7	1.9	9.0	186
4-5	13.0	13.6	21.5	6.3	17.2	2.6	3.2	9.5	0.7	0.7	1.0	4.9	23.4	185
6-8	13.8	28.4	52.1	6.4	41.9	4.7	6.5	31.2	0.3	3.0	5.4	15.0	61.6	282
9-11	11.9	36.0	65.2	4.5	70.3	13.9	19.7	50.0	3.1	9.8	14.7	32.2	82.9	266
12-17	11.0	39.6	76.4	5.1	81.9	24.9	35.7	62.7	8.9	21.0	33.3	40.1	92.1	445
18-23	8.3	43.7	79.5	5.9	87.0	27.1	44.3	66.1	9.2	30.2	38.9	40.1	95.7	262
6-23	11.3	37.2	69.2	5.4	71.5	18.5	27.5	53.6	5.8	16.5	24.3	32.8	84.0	1,255
Total	10.6	28.9	51.0	4.9	52.4	13.3	19.5	38.5	4.2	11.6	17.1	23.5	62.2	1,811
NONBREASTFEEDING CHILDREN														
0-1	*	*	*	*	*	*	*	*	*	*	*	*	*	11
2-3	*	*	*	*	*	*	*	*	*	*	*	*	*	9
4-5	*	*	*	*	*	*	*	*	*	*	*	*	*	12
6-8	*	*	*	*	*	*	*	*	*	*	*	*	*	24
9-11	(27.8)	(57.3)	(84.2)	(14.6)	(76.0)	(20.5)	(32.0)	(55.3)	(10.0)	(13.2)	(7.3)	(31.3)	(83.7)	35
12-17	17.2	53.4	79.4	13.5	87.0	27.7	35.0	59.7	9.4	24.5	29.0	46.4	93.6	198
18-23	6.7	43.3	80.8	6.8	90.8	33.3	48.6	69.8	14.6	45.3	41.2	41.2	96.4	332
6-23	12.6	47.5	79.1	9.7	87.3	30.3	41.8	64.2	12.1	35.4	34.4	42.0	94.0	590
Total	12.8	46.0	75.4	9.4	83.1	28.9	39.7	61.0	11.5	33.6	32.6	40.1	89.7	621

Note: Breastfeeding status and food consumed refer to a "24-hour" period (yesterday and last night). 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.

¹ Other milk includes fresh, tinned, and powdered cow or other animal milk.

² Does not include plain water

³ Includes fortified baby food

⁴ Includes sweet red peppers, pumpkin and carrots that are yellow or orange inside, dark green leafy vegetables, ripe persimmons, dried and fresh apricots, and dried peaches

Table 12.6 Minimum acceptable diet

Percentage of youngest children age 6-23 months living with their mother who are fed a minimum acceptable diet based on breastfeeding status, number of food groups, and times they are fed during the day or night preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among breastfed children age 6-23 months, percentage fed:			Number of breastfed children age 6-23 months	Among nonbreastfed children age 6-23 months, percentage fed:				Number of non-breastfed children age 6-23 months	Among all children age 6-23 months, percentage fed:				Number of all children age 6-23 months
	Minimum dietary diversity ¹	Minimum meal frequency ²	Minimum acceptable diet ³		Milk or milk products ⁴	Minimum dietary diversity ¹	Minimum meal frequency ⁵	Minimum acceptable diet ⁶		Breast-milk, milk, or milk products ⁷	Minimum dietary diversity ¹	Minimum meal frequency ⁸	Minimum acceptable diet ⁹	
Age in months														
6-8	3.6	35.1	2.5	282	*	*	*	*	24	97.7	5.1	37.7	2.6	307
9-11	12.6	22.5	3.1	266	(69.2)	(21.5)	(71.6)	(3.9)	35	96.4	13.6	28.3	3.2	301
12-17	32.7	31.3	10.5	445	57.1	32.8	57.7	8.7	198	86.8	32.7	39.5	9.9	642
18-23	40.4	46.2	19.3	262	45.6	49.4	48.3	12.2	332	69.6	45.4	47.4	15.3	594
Sex														
Male	23.8	35.2	10.6	651	52.1	40.3	52.2	9.0	313	84.5	29.2	40.7	10.1	964
Female	23.1	31.5	7.2	604	51.6	42.0	55.3	11.5	277	84.8	29.0	39.0	8.6	881
Residence														
Urban	25.2	32.8	10.9	236	69.6	48.3	70.2	16.5	118	89.9	32.9	45.3	12.8	354
Rural	23.1	33.6	8.5	1,020	47.4	39.3	49.5	8.6	472	83.4	28.2	38.6	8.5	1,491
Region														
Dushanbe	21.0	28.4	4.7	64	71.2	42.3	60.7	10.3	45	88.1	29.8	41.7	7.0	109
GBAO	41.1	13.7	6.9	19	(77.8)	(55.9)	(59.9)	(11.8)	7	93.8	45.2	26.5	8.3	27
Sughd	31.4	37.6	14.2	383	38.1	64.2	44.0	10.7	152	82.4	40.7	39.4	13.2	535
DRS	18.2	26.0	5.4	306	50.9	29.0	51.0	3.5	128	85.6	21.4	33.3	4.8	434
Khatlon	20.2	36.3	7.7	483	56.3	32.7	59.3	13.1	257	84.8	24.5	44.3	9.6	740
FTF districts	18.4	28.7	5.0	256	54.6	24.7	57.5	12.6	162	82.4	20.8	39.9	8.0	418
Mother's education														
None/primary	20.0	41.2	4.4	103	(46.2)	(30.3)	(46.9)	(10.0)	56	81.1	23.6	43.2	6.3	159
General basic	18.2	32.0	6.8	466	51.4	35.4	53.3	11.0	203	85.3	23.5	38.4	8.0	669
General secondary	26.4	35.1	11.4	496	51.9	45.8	52.7	9.8	242	84.2	32.8	40.9	10.9	738
Professional primary/middle	30.0	36.1	10.6	91	(46.3)	(50.5)	(53.6)	(8.0)	48	81.5	37.1	42.1	9.7	139
Higher	30.8	21.0	10.2	98	68.6	44.6	70.3	11.3	41	90.7	34.8	35.6	10.5	139
Wealth quintile														
Lowest	17.8	33.2	3.8	242	43.7	41.2	42.5	7.2	87	85.1	24.0	35.7	4.7	329
Second	24.9	37.4	10.7	259	49.4	33.0	49.8	10.8	136	82.6	27.7	41.7	10.7	394
Middle	26.4	31.0	11.0	278	54.9	35.5	56.5	7.5	156	83.8	29.7	40.2	9.7	434
Fourth	22.2	33.0	9.7	289	43.8	48.5	51.1	7.4	109	84.7	29.4	37.9	9.1	397
Highest	26.4	32.4	9.1	188	66.2	52.4	66.7	18.8	102	88.2	35.5	44.5	12.5	289
Total	23.5	33.4	9.0	1,255	51.9	41.1	53.6	10.2	590	84.6	29.1	39.9	9.3	1,845

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.

¹ Children receive foods from 4 or more of the following food groups: a. infant formula, milk other than breast milk, cheese or yogurt or other milk products; b. foods made from grains, roots, and tubers, including porridge and fortified baby food from grains; c. vitamin A-rich fruits and vegetables; d. other fruits and vegetables; e. eggs; f. meat, poultry, fish, and shellfish (and organ meats); g. legumes and nuts.

² For breastfed children, minimum meal frequency is receiving solid or semisolid food at least twice a day for infants age 6-8 months and at least 3 times a day for children age 9-23 months.

³ Breastfed children age 6-23 months are considered to be fed a minimum acceptable diet if they are fed the minimum dietary diversity as described in footnote 1 and the minimum meal frequency as defined in footnote 2.

⁴ Includes 2 or more feedings of commercial infant formula; fresh, tinned, and powdered animal milk; and yogurt

⁵ For nonbreastfed children age 6-23 months, minimum meal frequency is receiving solid or semisolid food or milk feeds at least 4 times a day.

⁶ Nonbreastfed children age 6-23 months are considered to be fed a minimum acceptable diet if they receive other milk or milk products at least twice a day, receive the minimum meal frequency as defined in footnote 5, and receive solid or semisolid foods from at least 4 food groups not including the milk or milk products food group.

⁷ Breastfeeding, or not breastfeeding and receiving 2 or more feedings of commercial infant formula; fresh, tinned, and powdered animal milk; and yogurt

⁸ Children are fed the minimum recommended number of times per day according to their age and breastfeeding status as described in footnotes 2 and 5.

⁹ Children age 6-23 months are considered to be fed a minimum acceptable diet if they receive breast milk, other milk, or milk products as described in footnote 7; are fed the minimum dietary diversity as described in footnote 1; and are fed the minimum meal frequency as described in footnotes 2 and 5.

Table 12.7 Prevalence of anemia in children

Percentage of children age 6-59 months classified as having anemia, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Anemia status by hemoglobin level				Number of children age 6-59 months
	Any anemia (<11.0 g/dl)	Mild anemia (10.0-10.9 g/dl)	Moderate anemia (7.0-9.9 g/dl)	Severe anemia (<7.0 g/dl)	
Age in months					
6-8	38.8	27.2	11.6	0.0	317
9-11	49.7	27.6	20.3	1.9	321
12-17	66.2	31.2	34.3	0.7	697
18-23	57.6	31.0	25.9	0.7	767
24-35	43.4	23.6	18.9	0.9	1,346
36-47	33.4	22.0	11.1	0.2	1,379
48-59	22.7	15.7	6.6	0.5	1,209
Sex					
Male	43.0	24.3	17.7	1.0	3,044
Female	39.9	23.4	16.3	0.2	2,992
Mother's interview status					
Interviewed	41.6	23.9	17.1	0.6	5,897
Not interviewed but in household	(28.9)	(19.4)	(9.5)	(0.0)	48
Not interviewed and not in the household ¹	42.7	25.8	15.1	1.8	90
Residence					
Urban	33.2	20.9	11.9	0.5	1,265
Rural	43.7	24.7	18.4	0.6	4,771
Region					
Dushanbe	23.6	16.4	6.7	0.5	381
GBAO	61.8	24.2	36.2	1.4	106
Sughd	42.2	27.0	14.7	0.4	1,701
DRS	35.5	20.9	14.2	0.4	1,423
Khatlon	46.4	24.5	21.1	0.8	2,424
FTF districts	50.8	24.9	24.6	1.3	1,362
Mother's education²					
None/primary	40.2	23.7	15.9	0.6	524
General basic	39.8	22.9	16.5	0.4	2,209
General secondary	*	*	*	*	15
Professional primary/middle	43.8	25.2	17.8	0.8	2,740
Higher	37.3	20.7	16.6	0.0	459
Wealth quintile					
Lowest	45.8	24.3	20.1	1.4	1,129
Second	43.6	24.8	18.2	0.6	1,261
Middle	45.5	25.1	19.8	0.6	1,335
Fourth	39.7	24.3	15.2	0.2	1,315
Highest	30.9	20.1	10.6	0.3	997
Total	41.5	23.9	17.0	0.6	6,036

Note: Table is based on children who stayed in the household on the night before the interview and who were tested for anemia. Prevalence of anemia, based on hemoglobin levels, is adjusted for altitude using formulas in CDC 1998. Hemoglobin is in grams per deciliter (g/dl). 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.

¹ Includes children whose mothers are deceased

² 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 12.8 Presence of iodized salt in household

Among all households, percentage with salt tested for iodine content, percentage with salt in the household but the salt was not tested, and percentage with no salt in the household, and among households with salt tested, percentage with iodized salt, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among all households, percentage:			Number of households	Among households with tested salt:	
	With salt tested	With salt, but salt not tested ¹	With no salt in the household		Percentage with iodized salt	Number of households
Residence						
Urban	99.3	0.1	0.7	2,390	95.8	2,373
Rural	99.6	0.1	0.3	5,453	90.0	5,433
Region						
Dushanbe	98.9	0.2	0.9	882	97.0	872
GBAO	98.9	0.0	1.1	204	94.6	201
Sughd	99.7	0.1	0.2	2,648	96.7	2,640
DRS	99.6	0.0	0.4	1,654	87.5	1,647
Khatlon	99.6	0.1	0.4	2,456	87.1	2,446
FTF districts	99.6	0.1	0.3	1,313	91.0	1,308
Wealth quintile						
Lowest	99.5	0.0	0.5	1,579	85.3	1,571
Second	99.8	0.1	0.1	1,394	89.8	1,391
Middle	99.6	0.1	0.3	1,380	92.5	1,375
Fourth	99.7	0.0	0.3	1,451	93.0	1,446
Highest	99.3	0.1	0.7	2,038	96.7	2,022
Total	99.5	0.1	0.4	7,843	91.7	7,806

¹ Includes households in which salt could not be tested for technical or logistical reasons, including availability of test kits

Table 12.9 Micronutrient intake among children

Among youngest children age 6-23 months who are living with their mother, percentages who consumed vitamin A-rich and iron-rich foods in the 24 hours preceding the survey; among all children age 6-23 months, percentage given micronutrient-containing sprinkles in the 7 days preceding the survey; among all children age 6-59 months, percentages who were given iron supplements in the 7 days preceding the survey, who were given vitamin A supplements in the 6 months preceding the survey, and who were given deworming medication in the 6 months preceding the survey; and among all children age 6-59 months who live in households in which salt was tested for iodine, percentage who live in households with iodized salt, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among youngest children age 6-23 months living with their mother:			Among all children age 6-23 months:		Among all children age 6-59 months:				Among children age 6-59 months living in households tested for iodized salt	
	Percentage who consumed foods rich in vitamin A in last 24 hours ¹	Percentage who consumed foods rich in iron in last 24 hours ²	Number of children	Percentage given sprinkles in past 7 days	Number of children	Percentage given iron supplements in past 7 days ³	Percentage given vitamin A supplements in past 6 months ⁴	Percentage given deworming medication in past 6 months ^{3,5}	Number of children	Percentage living in households with iodized salt ⁶	Number of children
Age in months											
6-8	13.0	9.5	307	12.9	309	22.6	54.7	4.1	309	93.6	308
9-11	26.8	19.1	301	17.1	305	22.5	74.1	8.0	305	93.1	305
12-17	51.5	41.8	642	17.4	667	25.4	86.1	10.3	667	90.3	665
18-23	66.3	57.4	594	18.9	727	26.4	86.3	14.2	727	89.6	726
24-35	na	na	na	na	na	27.9	85.8	14.8	1,269	90.8	1,267
36-47	na	na	na	na	na	25.7	69.0	19.1	1,294	90.3	1,292
48-59	na	na	na	na	na	23.7	64.3	17.8	1,135	90.6	1,128
Sex											
Male	46.6	39.0	964	17.5	1,040	25.6	75.6	15.3	2,889	90.5	2,880
Female	45.0	36.4	881	16.9	967	25.5	75.4	14.4	2,817	90.9	2,811
Breastfeeding status											
Breastfeeding	38.2	31.1	1,255	17.4	1,266	25.0	78.4	9.4	1,372	91.4	1,370
Not breastfeeding	62.0	52.0	590	16.8	742	25.7	74.6	16.5	4,334	90.5	4,321
Mother's age											
15-19	*	*	23	*	24	*	*	*	24	*	24
20-29	47.1	38.8	1,356	17.1	1,499	25.1	76.4	14.7	3,879	91.0	3,871
30-39	42.5	34.9	443	15.9	461	25.7	73.7	15.1	1,635	90.0	1,632
40-49	(47.0)	(43.3)	23	(50.9)	24	32.1	71.7	15.7	168	92.0	165
Residence											
Urban	50.7	38.9	354	13.5	381	25.8	69.7	10.7	1,211	95.3	1,203
Rural	44.7	37.5	1,491	18.1	1,626	25.4	77.1	15.9	4,494	89.5	4,488
Region											
Dushanbe	44.1	31.7	109	15.3	118	31.9	57.9	11.0	378	97.3	376
GBAO	59.5	43.2	27	21.4	29	30.6	60.8	11.6	93	93.0	92
Sughd	64.2	51.8	535	6.4	564	10.3	76.1	7.8	1,621	96.3	1,619
DRS	37.2	30.2	434	9.4	471	19.0	71.9	22.9	1,348	86.9	1,344
Khatlon	37.4	32.7	740	29.2	825	39.0	80.7	15.8	2,266	87.8	2,260
FTF districts	36.5	31.3	418	28.7	450	35.6	80.4	15.8	1,275	91.9	1,271
Mother's education											
None/primary	37.8	30.9	159	26.3	170	28.4	79.0	14.1	493	89.5	493
General basic	41.5	32.5	669	18.3	731	26.1	75.4	18.9	2,120	87.7	2,115
General secondary	49.0	41.2	738	16.5	798	24.6	74.9	12.3	2,224	92.4	2,218
Professional primary/middle	53.5	46.4	139	9.1	155	24.2	79.3	12.1	417	92.2	415
Higher	51.5	44.1	139	13.6	154	25.3	71.5	11.5	451	96.3	449
Wealth quintile											
Lowest	35.5	29.9	329	14.1	361	27.6	73.3	15.6	1,058	85.3	1,056
Second	47.2	39.1	394	21.1	431	27.0	78.1	15.6	1,187	88.4	1,187
Middle	49.2	41.7	434	19.6	475	25.4	77.5	17.4	1,260	90.9	1,258
Fourth	45.6	38.0	397	15.9	430	22.3	78.4	13.4	1,235	92.9	1,231
Highest	51.1	38.6	289	13.5	310	25.5	68.5	11.5	965	96.4	960
Total	45.8	37.8	1,845	17.2	2,008	25.5	75.5	14.8	5,706	90.7	5,691

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.

na = Not applicable

¹ Includes red sweet pepper, pumpkin, yellow squash, carrots, dark green leafy vegetables, ripe or dried apricots, dried peaches, persimmons, and other locally grown fruits and vegetables that are rich in vitamin A

² Includes meat (and organ meat), fish, poultry, and eggs

³ Based on mother's recall

⁴ Based on both mother's recall and the child health or vaccination card (where available)

⁵ Deworming for intestinal parasites is commonly done for helminths.

⁶ Excludes children in households in which salt was not tested

Table 12.10 Therapeutic and supplemental foods

Among children age 6-35 months, percentage who received BP-100 or Super Cereal Plus in the 7 days preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who received BP-100 in the past 7 days	Percentage who received Super Cereal Plus in the past 7 days	Number of children
Age in months			
6-8	11.2	8.8	309
9-11	14.2	11.1	305
12-17	14.7	11.5	667
18-23	16.3	13.4	727
24-35	15.5	11.4	1,269
Sex			
Male	14.8	11.1	1,655
Female	15.2	12.1	1,621
Breastfeeding status			
Breastfeeding	14.7	11.9	1,356
Not breastfeeding	15.2	11.3	1,920
Wasting status¹			
Severe acute malnutrition ²	9.2	6.1	63
Moderate acute malnutrition ³	16.4	14.0	142
Not wasted ⁴	15.2	11.7	3,024
Mother's age			
15-19	*	*	24
20-29	15.4	12.0	2,365
30-39	12.8	9.4	829
40-49	28.4	25.9	59
Residence			
Urban	11.9	11.8	646
Rural	15.7	11.5	2,630
Region			
Dushanbe	10.0	14.8	199
GBAO	11.7	13.9	53
Sughd	3.3	3.8	925
DRS	18.1	7.6	796
Khatlon	22.3	19.0	1,304
FTF districts	21.4	20.2	728
Mother's education			
None/primary	18.2	15.7	273
General basic	16.0	11.4	1,201
General secondary	15.5	12.4	1,308
Professional primary/middle	9.8	6.5	251
Higher	9.1	8.6	245
Wealth quintile			
Lowest	13.4	8.8	611
Second	16.0	11.4	699
Middle	16.3	13.4	739
Fourth	16.2	12.2	701
Highest	12.0	11.6	526
Total	15.0	11.6	3,277

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

¹ Restricted to children with valid data for weight and height

² Children with severe acute malnutrition (SAM) are those whose weight-for-height Z-score is below -3 standard deviations from the WHO Child Growth Standards population median.

³ Children with moderate acute malnutrition (MAM) are those whose weight-for-height Z-score is below -2 standard deviations or -3 standard deviations or more from the WHO Child Growth Standards population median.

⁴ Children whose weight-for-height Z-score is -2 or more standard deviations from the WHO Child Growth Standards population median

Table 12.11 Nutritional status of women

Among women age 15-49, percentage with height under 145 cm, mean body mass index (BMI), and percentage with specific BMI levels, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Height		Body mass index ¹								Number of women
	Percent-age below 145 cm	Number of women	Mean body mass index (BMI)	Normal		Thin		Overweight/obese			
				18.5-24.9 (total normal)	<18.5 (total thin)	17.0-18.4 (mildly thin)	<17 (moderately and severely thin)	≥25.0 (total over-weight or obese)	25.0-29.9 (over-weight)	≥30.0 (obese)	
Age											
15-19	1.1	1,898	21.2	73.9	16.2	12.1	4.1	10.0	8.8	1.2	1,813
20-29	1.3	3,937	22.9	66.6	8.8	6.4	2.4	24.6	19.3	5.4	3,203
30-39	1.1	2,776	25.5	48.0	4.0	3.0	1.0	48.0	30.1	17.9	2,612
40-49	1.0	2,055	27.7	31.8	1.6	1.2	0.4	66.5	35.5	31.0	2,049
Residence											
Urban	0.9	2,671	24.6	51.6	7.6	5.6	2.0	40.8	26.1	14.7	2,483
Rural	1.2	7,993	24.2	57.0	7.3	5.4	1.9	35.8	22.8	12.9	7,195
Region											
Dushanbe	0.3	945	24.3	54.3	6.8	5.0	1.8	38.9	28.2	10.7	888
GBO	0.7	208	22.9	63.8	10.8	7.8	3.0	25.4	18.9	6.5	197
Sughd	1.4	3,283	24.7	52.9	5.9	4.3	1.6	41.2	27.2	14.1	2,981
DRS	1.0	2,318	24.5	55.0	7.2	5.6	1.5	37.8	21.6	16.2	2,075
Khatlon	1.2	3,911	23.9	58.1	8.6	6.3	2.3	33.3	21.1	12.2	3,536
FTF districts	1.2	2,092	24.0	56.8	8.7	6.2	2.6	34.5	22.5	12.0	1,888
Education											
None/primary	1.6	613	24.4	57.2	5.8	5.1	0.8	36.9	25.2	11.8	547
General basic	1.4	3,601	23.9	56.9	9.1	6.9	2.2	34.0	22.4	11.6	3,249
General secondary	1.1	4,604	24.5	54.4	6.6	4.8	1.8	39.0	24.4	14.6	4,200
Professional primary/ middle	0.6	858	24.7	54.6	6.2	4.6	1.7	39.2	22.5	16.7	771
Higher	0.3	988	24.3	56.2	6.6	4.5	2.1	37.2	24.8	12.3	910
Wealth quintile											
Lowest	1.2	2,104	23.9	58.7	7.6	5.7	1.9	33.7	22.7	11.1	1,948
Second	1.5	2,090	23.9	59.2	7.4	5.7	1.7	33.4	22.0	11.4	1,896
Middle	1.3	2,108	24.2	58.5	6.8	5.0	1.8	34.7	21.8	12.9	1,866
Fourth	0.9	2,145	24.8	50.2	7.4	5.5	2.0	42.4	26.4	16.0	1,910
Highest	0.7	2,219	24.7	51.7	7.6	5.5	2.1	40.7	25.3	15.4	2,057
Total	1.1	10,665	24.3	55.6	7.4	5.5	1.9	37.1	23.7	13.4	9,677

Note: The body mass index (BMI) is expressed as the ratio of weight in kilograms to the square of height in meters (kg/m²).

¹ Excludes pregnant women and women with a birth in the preceding 2 months

Table 12.12 Prevalence of anemia in women

Percentage of women age 15-49 with anemia, by background characteristics, Tajikistan DHS 2017

Background characteristic	Anemia status by hemoglobin level				Number of women	
	Not pregnant	Any	Mild	Moderate		Severe
		Pregnant	<11.0 g/dl	10.0-10.9 g/dl		7.0-9.9 g/dl
Age						
15-19		33.3	27.9	5.1	0.2	1,892
20-29		43.3	34.2	8.4	0.6	3,930
30-39		43.5	33.9	9.1	0.5	2,768
40-49		41.1	30.2	9.7	1.2	2,046
Number of children ever born						
0		34.4	28.2	5.8	0.4	3,145
1		41.7	31.9	9.2	0.6	1,239
2-3		45.4	35.1	9.6	0.7	3,772
4-5		42.3	33.2	8.3	0.9	2,025
6+		45.1	32.5	11.5	1.2	455
Maternity status						
Pregnant		42.1	23.0	18.9	0.3	792
Breastfeeding		46.1	37.4	8.0	0.7	1,859
Neither		39.9	32.0	7.3	0.7	7,986
Using IUD						
Yes		46.2	34.2	10.9	1.1	1,409
No		40.4	31.9	7.9	0.6	9,228
Cigarette use¹						
Smokes cigarettes		54.0	39.9	13.6	0.4	49
Does not smoke cigarettes		41.1	32.2	8.2	0.6	10,588
Residence						
Urban		39.2	31.5	7.2	0.4	2,665
Rural		41.8	32.5	8.6	0.7	7,972
Region						
Dushanbe		36.1	31.0	4.9	0.3	939
GBAO		54.9	36.7	16.6	1.6	206
Sughd		39.9	32.1	7.2	0.5	3,262
DRS		33.3	25.2	7.3	0.8	2,315
Khatlon		47.3	36.5	10.1	0.7	3,915
FTF districts		54.3	40.9	12.6	0.8	2,095
Education						
None/primary		43.8	32.5	11.0	0.3	618
General basic		40.7	32.1	7.7	0.9	3,593
General secondary		42.2	33.3	8.3	0.6	4,586
Professional primary/ middle		39.8	31.0	8.5	0.4	855
Higher		37.3	28.5	8.5	0.3	985
Wealth quintile						
Lowest		42.8	33.0	8.7	1.1	2,100
Second		42.2	32.8	8.8	0.6	2,080
Middle		42.3	32.5	8.9	0.8	2,104
Fourth		40.1	31.4	8.3	0.4	2,144
Highest		38.4	31.5	6.6	0.3	2,209
Total		41.1	32.2	8.3	0.6	10,637

Note: Prevalence is adjusted for altitude and for smoking status if known using formulas in CDC 1998.

¹ Includes manufactured cigarettes and hand-rolled cigarettes

Table 12.13—Continued

Background characteristic	Foods made from white tubers and roots or other starchy foods		Food made from legumes		Food made from nuts and seeds		Milk, cheese, yogurt, and other milk products ¹		Meat, fish, shellfish, poultry		Fruits and green leafy vegetables in vitamin A ²		Other fruits		Oil and fats		Savory and fried snacks		Sugary foods ³		Sugar-sweetened beverages		Other beverages and foods ⁴		Condi-ments for flavor		Not achieving minimum dietary diversity for women ⁵		Achieving minimum dietary diversity for women ⁵		Number of women	
	Foods made from grains	Foods made from starchy foods	Food made from legumes	Food made from nuts and seeds	Milk, cheese, yogurt, and other milk products ¹	Eggs	Meat, fish, shellfish, poultry	Fruits and green leafy vegetables in vitamin A ²	Other fruits	Oil and fats	Savory and fried snacks	Sugary foods ³	Sugar-sweetened beverages	Other beverages and foods ⁴	Condi-ments for flavor	Not achieving minimum dietary diversity for women ⁵	Achieving minimum dietary diversity for women ⁵	Number of women														
Education																																
None/primary	96.4	80.8	48.3	34.6	61.8	35.4	69.0	23.1	55.2	66.4	64.9	69.8	14.9	52.8	48.4	58.5	40.9	28.3	71.7	619												
General basic	98.3	85.5	44.1	35.3	64.6	41.9	72.9	17.7	56.4	69.3	73.1	70.9	16.2	57.3	49.8	64.1	36.4	25.0	75.0	3,615												
General secondary	99.0	84.8	45.7	39.8	71.9	46.3	79.8	17.9	61.5	75.7	76.5	77.8	14.1	63.2	53.1	68.6	39.0	16.9	83.1	4,624												
Professional primary/ middle	99.1	85.4	43.9	44.6	72.2	50.6	82.8	22.3	64.2	76.0	81.9	79.5	15.1	72.6	56.0	66.9	40.7	13.3	86.7	860												
Higher	99.0	87.5	43.1	45.1	77.6	54.3	87.3	19.8	65.2	74.7	82.2	75.0	18.3	72.9	59.7	70.6	44.0	12.4	87.6	1,000												
Wealth quintile																																
Lowest	99.2	85.4	41.8	31.7	68.2	39.2	63.6	16.2	52.2	70.7	69.3	76.6	9.4	50.7	47.7	60.5	28.1	27.9	72.1	2,113												
Second	98.4	85.6	47.0	36.4	68.5	38.0	71.2	15.6	58.8	73.0	72.7	75.0	12.4	57.4	51.5	66.0	36.6	23.7	76.3	2,101												
Middle	99.2	84.2	46.9	41.4	67.5	45.9	79.7	18.7	57.2	73.3	77.3	74.1	17.0	65.6	50.3	68.0	41.8	18.7	81.3	2,109												
Fourth	99.3	86.1	44.8	44.6	68.2	48.5	85.5	19.4	64.7	75.9	79.5	77.8	16.9	69.1	54.7	68.0	40.6	14.4	85.6	2,155												
Highest	97.2	84.2	44.2	39.9	74.5	54.1	88.0	23.1	66.4	71.7	78.9	71.1	20.6	68.0	58.3	70.0	46.5	13.6	86.4	2,240												
Total	98.6	85.1	44.9	38.8	69.4	45.3	77.8	18.7	59.9	72.9	75.6	74.9	15.3	62.3	52.6	66.5	38.8	19.6	80.4	10,718												

Note: Consumption of foods and liquids refers to a "24-hour" period (yesterday and last night). An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Includes chugot and chakka

² Includes pumpkin, carrots, sweet bell peppers, ripe persimmons, ripe and dried apricots, dried peaches, and other locally grown fruits and vegetables that are rich in vitamin A

³ Includes chocolates, sweets, candies, pastries, cakes, and biscuits

⁴ Includes unsweetened tea and coffee, clear broth, alcohol, pickles, and olives

⁵ Ten food groups are used to calculate minimum dietary diversity for women (MDD-W). Women of reproductive age who consume foods from 5 or more of the 10 food groups are considered to have a diet adequate in micronutrients.

Table 12.14 Micronutrient intake among mothers

Among women age 15-49 with a child born in the 5 years preceding the survey, percent distribution by number of days they took iron tablets during the pregnancy of the last child, percentage who took folate tablets during the first 3 months of pregnancy of the last birth, and percentage who took deworming medication during the pregnancy of the last child; and among women age 15-49 with a child born in the 5 years preceding the survey and who live in households that were tested for iodized salt, percentage who live in households with iodized salt, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Among women with a child born in the past 5 years:						Percentage of women who took		Among women with a child born in the past 5 years who live in households in which salt was tested:		
	Number of days women took iron tablets during pregnancy of last birth					Total	Percentage of women who took folate tablets during the first 3 months of pregnancy of the last birth	Percentage of women who took deworming medication during pregnancy of last birth	Number of women	Percentage living in households with iodized salt ¹	Number of women
None	<60	60-89	90+	Don't know/missing							
Age											
15-19	48.7	45.5	2.5	0.0	3.3	100.0	48.3	5.2	61	82.2	61
20-29	52.4	38.1	3.5	2.3	3.8	100.0	44.3	1.7	2,799	90.9	2,792
30-39	58.8	33.8	2.1	2.2	3.0	100.0	38.4	1.6	1,366	88.8	1,364
40-49	60.4	32.4	2.5	0.6	4.1	100.0	36.3	1.1	169	91.4	166
Residence											
Urban	47.7	38.7	4.6	3.7	5.3	100.0	49.3	2.2	964	94.9	958
Rural	56.6	36.1	2.5	1.8	3.1	100.0	40.2	1.5	3,431	88.8	3,424
Region											
Dushanbe	45.0	35.2	6.5	5.1	8.2	100.0	53.8	4.2	299	96.5	298
GBAO	40.8	47.6	7.3	4.1	0.3	100.0	36.6	2.3	76	93.4	76
Sughd	49.2	38.1	4.8	4.8	3.0	100.0	40.9	1.0	1,301	96.2	1,297
DRS	64.1	28.8	0.5	0.8	5.8	100.0	43.4	2.4	1,041	86.1	1,039
Khatlon	55.3	40.2	2.2	0.4	1.9	100.0	40.6	1.3	1,677	86.7	1,672
FTF districts	48.4	47.3	1.4	0.5	2.4	100.0	42.5	1.2	951	91.4	946
Education											
None/primary	61.7	33.1	1.2	1.4	2.6	100.0	39.8	1.8	344	88.2	344
General basic	57.8	33.9	2.3	1.6	4.3	100.0	40.1	1.5	1,617	86.9	1,614
General secondary	53.5	38.9	3.0	1.8	2.8	100.0	41.5	1.6	1,730	92.0	1,725
Professional primary/ middle	51.4	37.8	5.2	2.6	3.0	100.0	48.2	2.2	321	92.2	319
Higher	42.7	40.2	5.6	6.4	5.1	100.0	51.2	2.3	382	95.8	380
Wealth quintile											
Lowest	65.4	28.6	1.9	1.3	2.8	100.0	30.2	0.9	808	83.8	806
Second	58.3	35.8	2.1	1.4	2.4	100.0	39.1	1.0	892	88.6	892
Middle	55.3	38.2	1.8	2.3	2.4	100.0	43.7	2.2	978	90.7	976
Fourth	50.1	39.6	3.6	1.9	4.8	100.0	44.7	1.4	931	91.9	927
Highest	44.0	40.3	5.7	4.2	5.8	100.0	53.2	3.0	786	95.6	781
Total	54.6	36.6	3.0	2.2	3.6	100.0	42.2	1.7	4,395	90.1	4,382

¹ Excludes women in households in which salt was not tested

Key Findings

- **Knowledge of HIV or AIDS:** Only 53% of women age 15-49 have heard of HIV or AIDS, a decrease from 62% in the 2012 TJDHS.
- **Knowledge of HIV prevention methods:** 15% of women have comprehensive knowledge about the modes of HIV transmission and prevention.
- **Discriminatory attitudes towards people living with HIV:** Three in four women expressed discriminatory attitudes towards people living with HIV.
- **HIV testing:** 29% of women know where to get an HIV test, and 19% have ever been tested for HIV and have received the results.
- **Self-reported prevalence of STIs:** One in 10 women who had ever had sexual intercourse reported having a sexually transmitted infection (STI) and/or STI symptoms in the 12 months preceding the survey. Fifty-eight percent of these women did not seek advice or treatment.
- **Knowledge of HIV prevention methods among young women:** Very few (12%) women age 15-24 have comprehensive knowledge about the modes of HIV transmission and prevention.

This chapter presents information on the current status of HIV knowledge, attitudes, and testing coverage among all women age 15-49 and among young women age 15-24. The prevalence of HIV is very low in Tajikistan, estimated at 0.3% in the adult population age 15-49 in 2016 (UNAIDS 2016). The prevalence is higher in high-risk groups such as people who inject drugs (13.5%), sex workers (3.5%), and men who have sex with men (2.7%). Among the estimated 14,000 people living with HIV in Tajikistan in 2016, only 30% were accessing antiretroviral therapy. The incidence of HIV in Tajikistan has been rising; between 2010 and 2016, new HIV infections increased by 23%.

13.1 HIV/AIDS KNOWLEDGE, TRANSMISSION, AND PREVENTION METHODS

Knowledge of HIV or AIDS among women in Tajikistan continues to be low. Only about half of women age 15-49 (53%) are aware of HIV or AIDS (**Table 13.1**). Overall, 38% of women know that using condoms is a way to prevent HIV transmission, and 43% recognize that the risk of getting HIV can be reduced by limiting sexual intercourse to one uninfected partner (**Table 13.2**). Just over one-third of women (36%) are aware of both of these prevention methods.

Comprehensive knowledge of HIV

Knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chances of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about transmission or prevention of HIV.

Sample: Women age 15-49

Comprehensive knowledge of HIV is a composite measure and indicates that a person knows that both condom use and limiting sexual intercourse to one uninfected partner can prevent HIV, knows that a healthy-looking person can have HIV, and rejects the two most common local misconceptions about the transmission of HIV, which in Tajikistan are that HIV can be transmitted through mosquito bites and that a person can become infected with HIV through saliva during a kiss.

Table 13.3 shows that only 15% of women age 15-49 have comprehensive knowledge of HIV. Twenty-two percent of women know that a healthy-looking person can have HIV and reject the misconceptions that HIV can be transmitted by mosquito bites and that a person can become infected through saliva during a kiss.

Patterns by background characteristics

- Women age 15-19 are less likely to know that HIV can be prevented by using condoms and limiting sexual intercourse to one uninfected partner (19%) and to have comprehensive knowledge of HIV (9%) than women age 20-49.

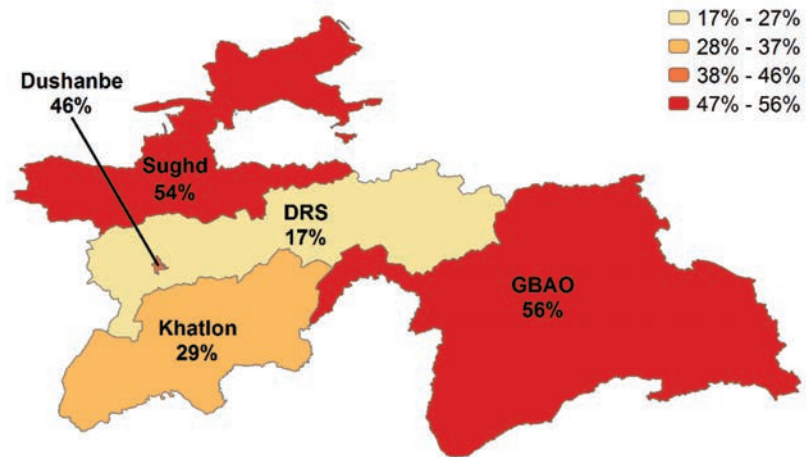
- Knowledge of the two methods of HIV prevention is higher among urban women (45%) than rural women (33%).

- By region, the percentage of women with knowledge of HIV prevention methods is lowest in DRS (17%) and highest in GBAO (56%) and Sughd (54%) (**Figure 13.1**).

- Knowledge of HIV prevention rises with increasing education and wealth. The difference is particularly striking with respect to education: 17% of women with no education or only a primary education know the two prevention methods, as compared with 66% of women with a higher education.

Figure 13.1 Knowledge of HIV prevention among women by region

Percentage of women age 15-49 who know that HIV can be prevented by using condoms and limiting sex to one uninfected partner



Trends: The percentage of women aware of HIV has decreased since 2012, from 62% to 53% (Figure 13.2). Comprehensive knowledge of HIV has increased slightly from 11% to 15%.

13.2 KNOWLEDGE ABOUT MOTHER-TO-CHILD TRANSMISSION

Increasing the level of general knowledge about transmission of HIV from mother to child and decreasing the risk of transmission using antiretroviral drugs are critical in reducing mother-to-child transmission (MTCT) of HIV. To assess MTCT knowledge, respondents were asked whether HIV can be transmitted from a mother to her child during pregnancy, during delivery, or through breastfeeding and whether a mother with HIV can reduce the risk of transmission to her baby by taking certain drugs.

Table 13.4 and Figure 13.3 show that just under half of women age 15-49 are aware of each of the three modes of mother-to-child transmission (during pregnancy, during delivery, and through breastfeeding). Women who know any method of transmission tend to know all three, as evidenced by the fact that nearly comparable percentages know that HIV can be transmitted during pregnancy (46%), during delivery (47%), and by breastfeeding (46%).

Only 1 in 5 women age 15-49 know that the risk of MTCT can be reduced by taking special drugs.

Trends: The percentage of women who know that HIV can be transmitted from mother to child through breastfeeding increased from 38% in 2012 to 46% in 2017.

Patterns by background characteristics

- Knowledge regarding prevention of MTCT increases with age. Women age 15-19 have considerably less knowledge of all three means of MTCT (23%) than women in older age groups (44%-53%). Similarly, only 1 in 10 women age 15-19 know that MTCT can be prevented if the mother takes special drugs, as compared with almost 3 in 10 (28%) women age 40-49.

13.3 DISCRIMINATORY ATTITUDES TOWARDS PEOPLE LIVING WITH HIV

Widespread stigma and discrimination in a population can adversely affect both people's willingness to be tested and their adherence to antiretroviral therapy (ART) in ART programs. Thus, reduction of stigma and discrimination in a population is an important indicator of the success of programs targeting HIV/AIDS prevention and control.

Figure 13.2 Trends in knowledge of HIV

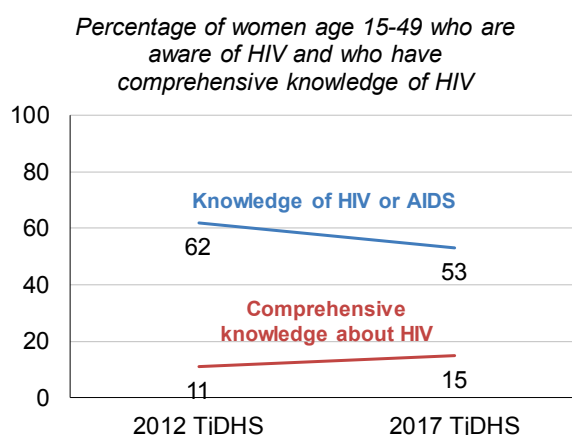
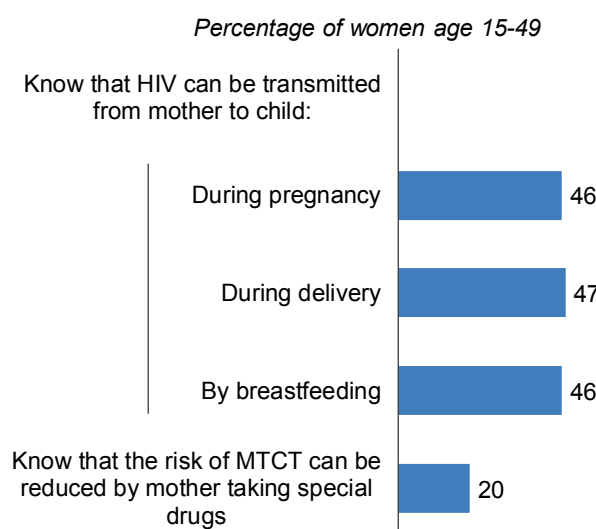


Figure 13.3 Knowledge of mother-to-child transmission (MTCT)



Discriminatory attitudes towards people living with HIV

Women are asked two questions to assess discriminatory attitudes towards people living with HIV. Respondents with discriminatory attitudes towards people living with HIV are those who say that they would not buy fresh vegetables from a shopkeeper or vendor if they knew that person had HIV or who say that children living with HIV should not be allowed to attend school with children who do not have HIV.

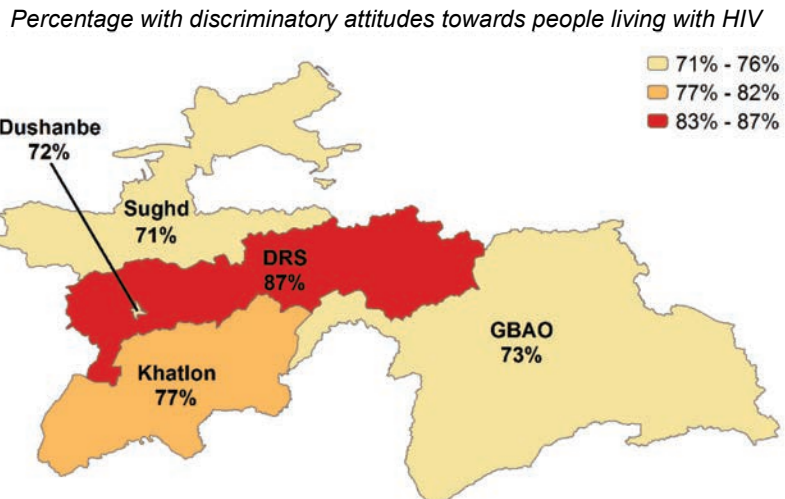
Sample: Women age 15-49 who have heard of HIV or AIDS

There is a high prevalence of discriminatory attitudes towards people living with HIV among women age 15-49 in Tajikistan. For instance, 7 in 10 women would not buy fresh vegetables from a shopkeeper who has HIV, and just over half (52%) do not think that children living with HIV should attend school with children who are HIV negative (Table 13.5). Taken together, 3 in 4 women hold one or both of these discriminatory attitudes.

Patterns by background characteristics

- Women living in DRS (87%) are more likely to have discriminatory attitudes towards people with HIV than women in other regions (71%-77%) (Figure 13.4).
- Discriminatory attitudes towards people with HIV are generally more common among women with lower levels of education and in lower wealth quintiles.

Figure 13.4 Discriminatory attitudes among women by region



13.4 MULTIPLE SEXUAL PARTNERS

Information on sexual behavior is important in designing and monitoring intervention programs to control the spread of the disease. In the context of HIV/AIDS prevention, limiting the number of sexual partners and having protected sex are crucial to combating the epidemic.

The 2017 TjDHS included questions on sexual partners of women age 15-49 during the 12 months preceding the survey. Information on use of condoms during the most recent sexual encounter was also collected. Finally, sexually active women were asked about the total number of partners they have had during their lifetime. Almost no women (less than 1%) reported having more than one sexual partner in the reference period (data not shown). Similarly, among women who have ever had sexual intercourse, the mean number of lifetime sexual partners is 1.3 (data not shown).

13.5 COVERAGE OF HIV TESTING SERVICES

Knowledge of HIV status helps HIV-negative individuals make specific decisions to reduce risk and increase safer sex practices so that they can remain disease free. Among those who are living with HIV, knowledge of their status allows them to take action to protect their sexual partners, to access care, and to receive treatment.

13.5.1 Awareness of HIV Testing Services and Experience with HIV Testing

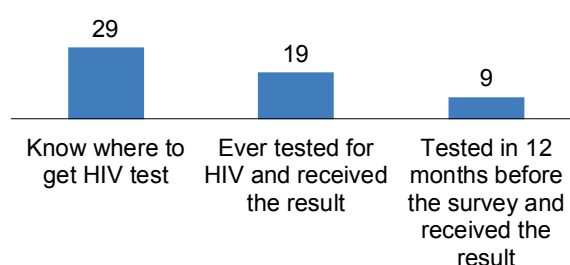
To assess awareness and coverage of HIV testing services, respondents were asked whether they had ever been tested for HIV. If they said that they had, they were asked whether they had received the results of their last test and where they had been tested. If they had never been tested, they were asked whether they knew a place where they could go to be tested.

Table 13.6 and **Figure 13.5** show that only 29% of women know where to get an HIV test, while 19% have ever been tested and received the results of their last test. Overall, 9% of women had been tested for HIV in the 12 months before the survey and received the results of their last test.

Trends: The percentage of women who, in the year before the survey, were tested for HIV and received the results of their last test increased from 5% in 2012 to 9% in 2017.

Figure 13.5 HIV testing

Percentage of women age 15-49



Patterns by background characteristics

- Women age 15-19 are much less aware of where to get tested for HIV (9%) than older women (32%-36%). Women age 15-19 are also least likely to have been tested for HIV in the past 12 months and to have received their test results (2%), while slightly older women age 20-24 are most likely to have been tested and to have received the results (15%). This peak in testing coincides with the median age at first marriage among women in Tajikistan (20.2 years).
- Knowledge of where to obtain HIV test services is much higher among urban women (40%) than among rural women (26%).
- The proportion of women who have been tested for HIV and received test results is more than twice as high among those who have been employed abroad in the past 3 years (19%) as among those who have not been employed abroad (8%).
- HIV testing coverage is highest in GBAO (21%) and lowest in DRS and Khatlon (6% each).
- The likelihood of having been tested for HIV generally increases as education and wealth increase.

13.5.2 HIV Testing of Pregnant Women

Table 13.7 presents information on self-reported HIV testing during pregnancy and delivery among women age 15-49 who gave birth in the 2 years before the survey. Thirteen percent of women received counseling on HIV during antenatal care (ANC). One-third of women had an HIV test during ANC or labor and received the test results. Overall, 11% of women received counseling, an HIV test, and the test results during ANC.

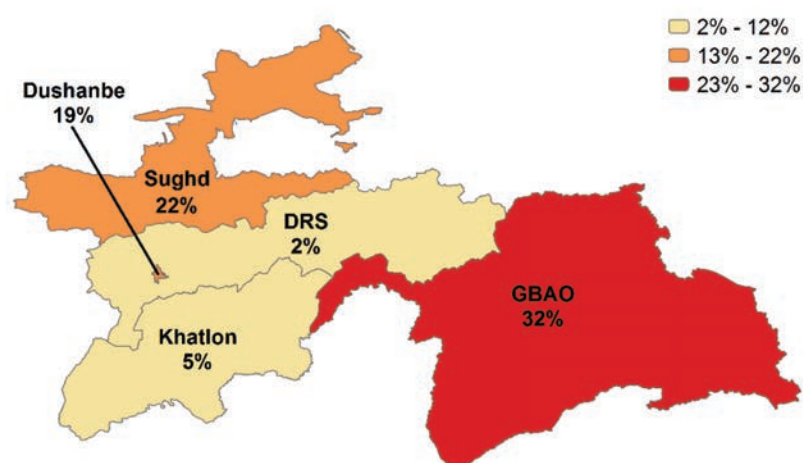
Patterns by background characteristics

- Rural women are less likely than urban women to have been counseled on and tested for HIV during ANC and to have received the test results (10% versus 14%).

- Coverage of HIV counseling and testing during ANC is highest in GBAO (32%) and lowest in DRS (2%) and Khatlon (5%) (Figure 13.6).

Figure 13.6 Pregnant women counseled and tested for HIV

Percentage of women age 15-49 who gave birth in the 2 years preceding the survey who received counseling on HIV and an HIV test during ANC, and the results



- More educated and wealthier women are more likely to receive HIV counseling and testing during ANC than women with less education and wealth.

13.5.3 Knowledge and Use of HIV Self-test Kits

Nine percent of women have heard of HIV self-test kits, and 2% have ever used an HIV self-test kit (Table 13.8).

Patterns by background characteristics

- Women age 15-19 are less likely than older women to have heard of HIV self-test kits (2% versus 10%-15%).
- Awareness of self-test kits is higher among urban women (15%) than rural women (8%).
- Awareness and use of self-test kits are highest in GBAO (22% and 4%, respectively) and lowest in DRS (4% and 1%, respectively).
- Women with a professional primary/middle or higher education and women in the two highest wealth quintiles are considerably more likely to know of and use HIV self-test kits than women at lower levels of education and in lower wealth quintiles.

13.6 SELF-REPORTING OF SEXUALLY TRANSMITTED INFECTIONS

Sexually transmitted infections (STIs) and symptoms

Respondents who had ever had sex were asked whether they had an STI or symptoms of an STI (a bad-smelling, abnormal discharge from the vagina or a genital sore or ulcer) in the 12 months before the survey.

Sample: Women age 15-49 who have ever had sex

Overall, 10% of women reported having an STI and/or symptoms of an STI in the 12 months preceding the survey (Table 13.9). Among them, 58% did not seek any advice or treatment (Table 13.10).

Trends: The percentage of women who had an STI or STI symptoms in the 12 months preceding the survey has increased since 2012, from 6% to 10%. The proportion of these women who, at the time of the survey, had not sought advice or treatment has also increased, from 40% to 58%.

Patterns by background characteristics

- Women in Khatlon (15%) are most likely to report an STI or STI symptoms, while women in Dushanbe (3%) are least likely to do so.
- Less educated and poorer women are more likely to report an STI or STI symptoms than more educated and wealthier women.

13.7 HIV/AIDS-RELATED KNOWLEDGE AND BEHAVIOR AMONG YOUNG WOMEN

This section addresses HIV/AIDS-related knowledge among young women age 15-24 and also assesses the extent to which young women are engaged in behaviors that may place them at risk of contracting HIV.

13.7.1 Knowledge

Knowledge of how HIV is transmitted is crucial in enabling people to avoid HIV infection, and this is especially true for young people, who are often at greater risk because they may have shorter relationships with more partners or engage in other risky behaviors.

Only 12% of young women have comprehensive knowledge about HIV (defined as knowing that consistent condom use and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about HIV transmission) (**Table 13.11**).

Trends: The percentage of young women with comprehensive knowledge about HIV has increased slightly since 2012, from 9% to 12%.

Patterns by background characteristics

- Comprehensive knowledge about HIV is lower among women age 15-17 (5%) than among those age 18-24 (14%-17%).
- Young women who have been employed abroad in the past 3 years are more than twice as likely as those who have not been employed abroad to have comprehensive knowledge of HIV (29% versus 12%).
- Comprehensive HIV knowledge among young women generally increases with increasing education. Only 1% of women age 15-24 with no education or a primary education have comprehensive knowledge of HIV, as compared with 33% of women with a higher education.

13.7.2 First Sex

Young women who initiate sex at an early age are typically at higher risk of becoming pregnant or contracting an STI than young women who initiate sex later. Consistent condom use can reduce such risks.

In Tajikistan, less than 1% of women age 15-24 had sexual intercourse before age 15. Seven percent of women age 18-24 had sexual intercourse before age 18 (**Table 13.12**).

Trends: The percentage of young women who had sexual intercourse before age 18 decreased from 11% in 2012 to 7% in 2017.

Patterns by background characteristics

- The percentage of women age 15-24 who had sexual intercourse before age 18 decreases considerably with increasing education, from 19% among those with no education or only a primary education to less than 1% among those with a higher education.

13.7.3 Coverage of HIV Testing Services

Seeking an HIV test may be more difficult for young people than adults because many young people lack experience in accessing health services for themselves and because there are often barriers to young people obtaining services.

Table 13.13 presents information on HIV testing among young women age 15-24 who had sexual intercourse in the past 12 months. Overall, 19% of young women had been tested for HIV in the 12 months preceding the survey and had received the results of their last test.

Trends: The proportion of sexually active young women who were tested for HIV and received the results has almost doubled over the past 5 years, increasing from 10% in 2012 to 19% in 2017.

LIST OF TABLES

For more information on HIV/AIDS-related knowledge, attitudes, and behavior, see the following tables:

- **Table 13.1 Knowledge of HIV or AIDS**
- **Table 13.2 Knowledge of HIV prevention methods**
- **Table 13.3 Comprehensive knowledge about HIV**
- **Table 13.4 Knowledge of prevention of mother-to-child transmission of HIV**
- **Table 13.5 Discriminatory attitudes towards people living with HIV**
- **Table 13.6 Coverage of prior HIV testing**
- **Table 13.7 Pregnant women counseled and tested for HIV**
- **Table 13.8 Knowledge and coverage of self-testing for HIV**
- **Table 13.9 Self-reported prevalence of sexually transmitted infections (STIs)**
- **Table 13.10 Women seeking treatment for STIs**
- **Table 13.11 Comprehensive knowledge about HIV among young women**
- **Table 13.12 Age at first sexual intercourse among young women**
- **Table 13.13 Recent HIV tests among young women**

Table 13.1 Knowledge of HIV or AIDS

Percentage of women age 15-49 who have heard of HIV or AIDS, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Has heard of HIV or AIDS	Number of women
Age		
15-24	44.5	3,942
15-19	33.3	1,911
20-24	55.1	2,031
25-29	53.4	1,921
30-39	56.4	2,791
40-49	65.8	2,064
Marital status		
Never married	38.6	2,388
Ever had sex	53.7	48
Never had sex	38.2	2,340
Married or living together	57.2	7,747
Divorced/separated/widowed	61.9	583
Employment abroad (past 3 years)¹		
Yes	71.9	364
No	52.7	10,354
Spousal employment abroad reported by currently married women²		
Respondent worked abroad		
herself	69.7	109
Spouse worked abroad	53.6	2,779
Both worked abroad	73.3	207
Neither worked abroad	58.3	4,653
Not currently married	43.1	2,971
Residence		
Urban	67.0	2,694
Rural	48.7	8,024
Region		
Dushanbe	72.6	955
GBAO	82.3	209
Sughd	70.9	3,292
DRS	33.1	2,342
Khatlon	44.4	3,920
FTF districts	34.6	2,096
Education		
None/primary	29.1	619
General basic	38.1	3,615
General secondary	54.7	4,624
Professional primary/middle	86.1	860
Higher	88.5	1,000
Wealth quintile		
Lowest	40.8	2,113
Second	43.0	2,101
Middle	49.8	2,109
Fourth	61.5	2,155
Highest	70.2	2,240
Total	53.3	10,718

¹ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

² Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.2 Knowledge of HIV prevention methods

Percentage of women age 15-49 who, in response to prompted questions, say that people can reduce the risk of getting HIV by using condoms every time they have sexual intercourse and by having one sex partner who is not infected and has no other partners, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Using condoms ¹	Limiting sexual intercourse to one uninfected partner ²	Using condoms and limiting sexual intercourse to one uninfected partner ^{1,2}	Number of women
Age				
15-24	30.1	34.5	28.4	3,942
15-19	20.1	22.9	18.5	1,911
20-24	39.4	45.4	37.6	2,031
25-29	38.4	43.3	35.7	1,921
30-39	42.2	46.9	38.9	2,791
40-49	49.3	55.8	46.9	2,064
Employment abroad (past 3 years)³				
Yes	50.9	56.5	46.1	364
No	38.0	42.9	35.6	10,354
Spousal employment abroad reported by currently married women⁴				
Respondent worked abroad herself	44.8	51.0	42.6	109
Spouse worked abroad	40.2	44.5	37.4	2,779
Both worked abroad	56.9	61.0	50.4	207
Neither worked abroad	43.4	48.8	41.0	4,653
Not currently married	27.5	32.4	25.6	2,971
Residence				
Urban	47.3	53.9	45.0	2,694
Rural	35.4	39.9	33.0	8,024
Region				
Dushanbe	47.8	54.9	45.7	955
GBAO	57.3	70.7	55.8	209
Sughd	56.6	60.9	54.0	3,292
DRS	19.4	26.4	17.1	2,342
Khatlon	31.2	34.5	28.7	3,920
FTF districts	24.0	27.3	22.5	2,096
Education				
None/primary	19.1	21.5	17.0	619
General basic	25.6	29.5	23.6	3,615
General secondary	38.6	43.6	35.9	4,624
Professional primary/middle	69.6	77.5	67.7	860
Higher	69.1	76.9	65.7	1,000
Wealth quintile				
Lowest	30.1	33.3	28.0	2,113
Second	31.7	34.2	28.9	2,101
Middle	34.4	39.3	31.9	2,109
Fourth	45.1	51.5	42.6	2,155
Highest	50.0	57.7	47.7	2,240
Total	38.4	43.4	36.0	10,718

¹ Using condoms every time they have sexual intercourse

² Partner who has no other partners

³ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

⁴ Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.3 Comprehensive knowledge about HIV

Percentage of women age 15-49 who say that a healthy-looking person can have HIV and who, in response to prompted questions, correctly reject local misconceptions about transmission or prevention of HIV, and percentage with comprehensive knowledge about HIV, according to age, Tajikistan DHS 2017

Age	Percentage of respondents who say that:					Percentage who say that a healthy-looking person can have HIV and who reject the two most common local misconceptions ¹	Percentage with comprehensive knowledge about HIV ²	Number of women
	A healthy-looking person can have HIV	HIV cannot be transmitted by mosquito bites	HIV cannot be transmitted by shaking hands with a person who has HIV	HIV cannot be transmitted through saliva during a kiss	A person cannot become infected by sharing food with a person who has HIV			
15-24	30.0	30.4	37.5	26.4	33.8	17.7	12.3	3,942
15-19	21.3	22.3	27.4	19.3	24.7	12.3	8.5	1,911
20-24	38.2	38.0	46.9	33.1	42.3	22.8	16.0	2,031
25-29	37.6	35.0	43.7	30.2	39.3	21.5	15.3	1,921
30-39	38.5	36.5	46.9	32.6	42.1	22.3	15.5	2,791
40-49	48.6	45.0	56.8	40.3	51.6	28.5	20.8	2,064
Total	37.1	35.6	44.7	31.4	40.4	21.7	15.3	10,718

¹ Two most common local misconceptions: HIV can be transmitted by mosquito bites and through saliva during a kiss

² Comprehensive knowledge means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about transmission or prevention of HIV.

Table 13.4 Knowledge of prevention of mother-to-child transmission of HIV

Percentage of women age 15-49 who know that HIV can be transmitted from mother to child during pregnancy, during delivery, by breastfeeding, and by all three means, and percentage who know that the risk of mother-to-child transmission (MTCT) of HIV can be reduced by the mother taking special drugs, according to age, Tajikistan DHS 2017

Age	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		
15-24	37.4	37.2	37.0	34.1	14.8	3,942
15-19	26.1	25.7	25.3	23.4	10.1	1,911
20-24	48.0	48.0	48.1	44.2	19.3	2,031
25-29	47.2	48.0	47.8	43.9	19.7	1,921
30-39	50.5	51.2	49.8	47.5	21.5	2,791
40-49	57.6	58.4	58.4	53.3	27.9	2,064
Total	46.4	46.9	46.4	43.1	19.9	10,718

Table 13.5 Discriminatory attitudes towards people living with HIV

Among women age 15-49 who have heard of HIV or AIDS, 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, and percentage with discriminatory attitudes towards people living with HIV, according to background characteristics, Tajikistan DHS 2017

Background characteristic	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	52.9	69.8	75.4	1,756
15-19	51.8	70.7	74.7	636
20-24	53.5	69.3	75.7	1,120
25-29	52.9	71.7	75.1	1,025
30-39	52.8	70.4	75.9	1,575
40-49	48.6	69.2	74.6	1,357
Marital status				
Never married	47.1	67.9	72.4	921
Ever had sex	(60.3)	(84.7)	(88.9)	26
Never had sex	46.7	67.4	71.9	895
Married or living together	52.7	70.8	75.9	4,432
Divorced/separated/widowed	53.2	68.3	74.8	361
Employment abroad (past 3 years)²				
Yes	46.6	69.6	75.2	261
No	52.1	70.2	75.3	5,452
Spousal employment abroad reported by currently married women³				
Respondent worked abroad herself	48.6	71.6	73.1	76
Spouse worked abroad	54.0	72.5	77.4	1,490
Both worked abroad	45.9	70.5	78.6	151
Neither worked abroad	52.5	69.9	74.9	2,715
Not currently married	48.8	68.0	73.1	1,281
Residence				
Urban	48.4	70.3	74.3	1,806
Rural	53.4	70.1	75.7	3,907
Region				
Dushanbe	48.7	69.5	72.0	694
GBAO	43.8	66.4	73.4	172
Sughd	41.9	67.7	71.2	2,334
DRS	67.0	82.8	86.9	774
Khatlon	60.5	68.5	77.0	1,740
FTF districts	66.3	71.8	77.6	725
Education				
None/primary	62.9	71.4	76.4	180
General basic	60.6	77.4	81.7	1,378
General secondary	55.1	72.1	78.0	2,530
Professional primary/middle	39.6	57.9	64.8	741
Higher	36.7	63.5	65.9	885
Wealth quintile				
Lowest	53.9	69.2	75.6	862
Second	56.1	72.6	78.5	903
Middle	55.3	72.2	77.8	1,051
Fourth	50.9	69.4	74.2	1,325
Highest	46.8	68.6	72.4	1,573
Total	51.8	70.2	75.3	5,713

Note: Figures in parentheses are based on 25-49 unweighted cases.

¹ Percentage who do not think that children living with HIV should be able to attend school with children who are HIV negative or would not buy fresh vegetables from a shopkeeper who has HIV

² Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

³ Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.6 Coverage of prior HIV testing

Percentage of women age 15-49 who know where to get an HIV test, percent distribution of women by testing status and by whether they received the results of the last test, percentage of women ever tested, and percentage of women who were tested in the past 12 months and received the results of the last test, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who know where to get an HIV test	Percent distribution of women by testing status and by whether they received the results of the last test			Total	Percentage ever tested	Percentage who have been tested for HIV in the past 12 months and received the results of the last test	Number of women
		Ever tested and received results	Ever tested, did not receive results	Never tested ¹				
Age								
15-24	22.3	14.4	1.2	84.4	100.0	15.6	8.8	3,942
15-19	9.0	2.8	0.3	96.9	100.0	3.1	2.1	1,911
20-24	34.8	25.3	2.1	72.6	100.0	27.4	15.2	2,031
25-29	35.7	28.4	2.7	68.8	100.0	31.2	12.2	1,921
30-39	32.7	22.6	1.8	75.6	100.0	24.4	8.0	2,791
40-49	32.2	14.5	1.8	83.7	100.0	16.3	5.6	2,064
Marital status								
Never married	10.5	2.3	0.0	97.7	100.0	2.3	1.3	2,388
Ever had sex	16.5	4.9	0.0	95.1	100.0	4.9	0.3	48
Never had sex	10.4	2.2	0.0	97.8	100.0	2.2	1.3	2,340
Married or living together	34.8	24.3	2.3	73.4	100.0	26.6	10.9	7,747
Divorced/separated/widowed	32.7	19.0	1.1	79.9	100.0	20.1	7.9	583
Employment abroad (past 3 years)²								
Yes	46.2	30.9	3.0	66.0	100.0	34.0	18.8	364
No	28.7	18.7	1.7	79.6	100.0	20.4	8.2	10,354
Spousal employment abroad reported by currently married women³								
Respondent worked abroad								
herself	42.1	26.9	2.3	70.8	100.0	29.2	19.6	109
Spouse worked abroad	33.2	23.6	2.4	74.0	100.0	26.0	11.0	2,779
Both worked abroad	50.5	35.1	3.3	61.7	100.0	38.3	20.5	207
Neither worked abroad	34.9	24.2	2.2	73.6	100.0	26.4	10.2	4,653
Not currently married	14.9	5.5	0.2	94.2	100.0	5.8	2.6	2,971
Residence								
Urban	39.9	25.9	1.8	72.3	100.0	27.7	11.0	2,694
Rural	25.8	16.8	1.7	81.5	100.0	18.5	7.8	8,024
Region								
Dushanbe	42.6	28.8	1.4	69.8	100.0	30.2	10.4	955
GBAO	54.7	40.8	1.3	57.9	100.0	42.1	20.6	209
Sughd	43.1	27.0	3.7	69.2	100.0	30.8	12.2	3,292
DRS	14.1	9.9	0.7	89.4	100.0	10.6	5.6	2,342
Khatlon	22.2	14.4	0.8	84.9	100.0	15.1	6.3	3,920
FTF districts	20.0	13.3	0.7	86.0	100.0	14.0	5.5	2,096
Education								
None/primary	13.2	9.6	0.8	89.6	100.0	10.4	2.9	619
General basic	18.6	12.5	1.1	86.4	100.0	13.6	4.9	3,615
General secondary	27.7	17.4	1.8	80.9	100.0	19.1	7.4	4,624
Professional primary/middle	61.6	40.0	4.1	56.0	100.0	44.0	22.6	860
Higher	57.6	38.9	2.4	58.7	100.0	41.3	18.8	1,000
Wealth quintile								
Lowest	17.0	10.7	0.6	88.7	100.0	11.3	4.7	2,113
Second	20.3	11.9	1.2	86.9	100.0	13.1	4.2	2,101
Middle	27.3	18.7	2.6	78.6	100.0	21.4	8.9	2,109
Fourth	36.2	23.6	2.6	73.8	100.0	26.2	11.7	2,155
Highest	44.6	29.8	1.6	68.6	100.0	31.4	13.1	2,240
Total	29.3	19.1	1.7	79.2	100.0	20.8	8.6	10,718

¹ Includes "don't know/missing"

² Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

³ Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.7 Pregnant women counseled and tested for HIV

Among all women age 15-49 who gave birth in the 2 years preceding the survey, percentage who received HIV pretest counseling, percentage who received an HIV test during antenatal care for their most recent birth by whether they received their results and post-test counseling, and percentage who received an HIV test during ANC or labor for their most recent birth by whether they received their test results, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who received counseling on HIV during antenatal care ¹	Percentage who were tested for HIV during antenatal care and who:			Percentage who received counseling on HIV and an HIV test during ANC, and the results	Percentage who had an HIV test during ANC or labor and who: ²		Number of women who gave birth in the past 2 years ³
		Received post-test counseling	Did not receive post-test counseling	Did not receive results		Received results	Did not receive results	
Age								
15-24	12.6	17.0	15.0	2.4	10.5	33.3	3.0	1,063
15-19	11.3	8.3	16.0	2.6	5.7	24.3	4.8	61
20-24	12.7	17.5	15.0	2.4	10.8	33.8	2.9	1,001
25-29	12.2	20.3	10.8	2.4	10.5	33.0	2.3	824
30-39	12.0	19.7	13.0	1.6	10.5	33.5	1.7	563
40-49	29.6	21.6	6.3	0.0	19.0	27.9	4.5	31
Marital status								
Married or living together	12.6	18.8	13.0	2.3	10.6	33.1	2.5	2,432
Divorced/separated/widowed	(14.2)	(18.1)	(16.5)	(0.0)	(11.2)	(35.7)	(0.0)	45
Employment abroad (past 3 years)⁴								
Yes	17.8	32.5	12.5	3.6	12.4	49.3	4.6	93
No	12.4	18.2	13.0	2.2	10.5	32.5	2.4	2,388
Spousal employment abroad reported by currently married women⁵								
Respondent worked abroad								
herself	(9.8)	(26.8)	(12.7)	(0.0)	(7.4)	(43.9)	(0.0)	27
Spouse worked abroad	13.5	17.9	12.5	2.4	11.8	31.7	2.8	961
Both worked abroad	19.6	33.6	12.7	5.2	13.0	50.6	6.6	65
Neither worked abroad	11.6	18.5	13.4	2.1	9.7	33.2	2.2	1,379
Not currently married	(13.0)	(16.6)	(15.1)	(0.0)	(10.3)	(32.7)	(0.0)	49
Residence								
Urban	16.5	27.3	15.3	2.7	13.7	44.4	3.1	476
Rural	11.6	16.7	12.5	2.1	9.9	30.5	2.3	2,005
Region								
Dushanbe	22.2	34.5	9.8	3.4	18.8	47.6	3.1	142
GBAO	34.2	44.5	23.4	0.0	32.3	68.8	0.0	37
Sughd	24.8	27.2	23.6	4.4	22.2	52.5	4.8	721
DRS	2.6	8.1	5.8	1.0	2.1	15.4	1.4	594
Khatlon	7.5	15.8	9.7	1.2	5.3	26.3	1.5	987
FTF districts	5.9	12.9	10.9	1.3	4.4	24.8	1.6	542
Education								
None/primary	3.4	10.3	6.8	0.6	2.5	17.1	1.1	193
General basic	7.3	13.9	8.4	1.0	6.0	23.1	1.1	892
General secondary	13.1	17.4	15.5	2.2	11.1	34.8	2.6	1,014
Professional primary/middle	31.4	42.0	13.6	9.0	26.2	57.1	9.0	188
Higher	24.7	34.1	26.9	3.0	22.3	63.4	3.8	195
Wealth quintile								
Lowest	8.9	12.1	9.5	1.0	8.0	22.6	1.0	445
Second	9.2	16.0	9.4	1.1	7.2	26.1	1.7	503
Middle	9.9	17.5	11.7	2.8	8.2	30.6	3.0	579
Fourth	16.9	19.5	17.3	3.2	13.8	38.2	3.8	552
Highest	18.7	30.3	17.4	2.6	16.8	50.4	2.7	402
Total	12.6	18.8	13.0	2.2	10.6	33.1	2.5	2,481

Note: Figures in parentheses are based on 25-49 unweighted cases.

¹ In this context, pretest counseling means that someone talked with the respondent about all three of the following topics: (1) babies getting HIV from their mother, (2) preventing the virus, and (3) getting tested for HIV.

² Women were asked whether they received an HIV test during labor only if they gave birth in a health facility.

³ Denominator for percentages includes women who did not receive antenatal care for their last birth in the past 2 years and women who were never married.

⁴ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

⁵ Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.8 Knowledge and coverage of self-testing for HIV

Percentage of women age 15-49 who have ever heard of HIV self-test kits, and percentage who have ever used an HIV self-test kit, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Ever heard of HIV self-test kits	Ever used an HIV self-test kit	Number of women
Age			
15-19	2.2	0.2	1,911
20-24	10.2	1.5	2,031
25-29	10.1	1.6	1,921
30-34	9.9	2.3	1,551
35-39	11.4	1.1	1,240
40-44	11.9	2.2	1,068
45-49	14.7	2.9	996
Residence			
Urban	14.5	2.6	2,694
Rural	7.7	1.2	8,024
Region			
Dushanbe	14.6	1.7	955
GBAO	21.5	4.0	209
Sughd	13.8	1.8	3,292
DRS	4.1	0.9	2,342
Khatlon	7.1	1.6	3,920
FTF districts	6.5	1.6	2,096
Education			
None/primary	4.3	0.6	619
General basic	4.6	0.7	3,615
General secondary	7.8	1.3	4,624
Professional primary/ middle	27.9	5.2	860
Higher	22.0	3.6	1,000
Wealth quintile			
Lowest	5.1	0.6	2,113
Second	4.9	0.5	2,101
Middle	8.1	1.3	2,109
Fourth	12.2	2.6	2,155
Highest	16.4	2.7	2,240
Total	9.4	1.6	10,718

Table 13.9 Self-reported prevalence of sexually transmitted infections (STIs)

Among women age 15-49 who ever had sexual intercourse, percentage reporting having an STI and/or symptoms of an STI in the past 12 months, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of women who reported having in the past 12 months:				Number of women who ever had sexual intercourse
	STI	Bad-smelling/ abnormal genital discharge	Genital sore or ulcer	STI/genital discharge/sore or ulcer	
Age					
15-24	0.6	8.5	2.4	9.9	1,872
15-19	0.0	4.4	1.0	4.4	248
20-24	0.7	9.2	2.7	10.8	1,624
25-29	1.4	8.2	2.3	10.2	1,803
30-39	0.7	8.8	2.3	10.1	2,669
40-49	0.9	8.1	3.6	10.0	2,030
Marital status					
Never married	0.0	0.6	1.1	1.7	48
Married or living together	0.8	8.4	2.6	9.9	7,743
Divorced/separated/widowed	1.4	9.8	4.1	12.4	583
Employment abroad (past 3 years)¹					
Yes	2.1	7.8	1.7	9.6	338
No	0.8	8.5	2.7	10.1	8,036
Spousal employment abroad reported by currently married women²					
Respondent worked abroad					
herself	0.7	6.2	2.3	6.4	109
Spouse worked abroad	0.8	8.3	2.1	9.8	2,777
Both worked abroad	2.8	8.9	1.6	11.6	206
Neither worked abroad	0.7	8.4	2.9	10.0	4,651
Not currently married	1.3	9.1	3.9	11.6	631
Residence					
Urban	1.7	4.8	2.0	6.5	2,043
Rural	0.6	9.6	2.9	11.2	6,331
Region					
Dushanbe	2.1	1.4	0.7	2.7	676
GBAO	2.1	8.2	5.7	10.8	154
Sughd	0.8	4.4	0.8	5.2	2,664
DRS	0.8	8.9	3.0	10.8	1,847
Khatlon	0.6	13.3	4.4	15.4	3,034
FTF districts	0.7	12.5	2.7	14.4	1,669
Education					
None/primary	0.4	11.4	3.1	12.4	517
General basic	0.9	9.7	2.8	11.4	2,726
General secondary	0.7	7.9	2.7	9.6	3,674
Professional primary/middle	1.4	8.4	3.1	9.5	703
Higher	1.5	4.6	1.1	6.1	754
Wealth quintile					
Lowest	1.0	10.0	3.0	12.1	1,597
Second	0.4	12.3	3.5	14.1	1,639
Middle	0.8	9.3	2.9	11.2	1,697
Fourth	0.4	6.3	2.3	7.2	1,753
Highest	1.7	4.5	1.6	6.0	1,688
Total	0.9	8.4	2.7	10.1	8,374

¹ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

² Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.10 Women seeking treatment for STIs

Percentage of women age 15-49 reporting an STI or symptoms of an STI in the past 12 months who sought advice or treatment, Tajikistan DHS 2017

Source of advice or treatment	Percentage of women
Clinic/hospital/private doctor/other health professional	41.7
Advice or medicine from shop/pharmacy	0.2
No advice or treatment	58.3
Number with STI or symptoms of STI	842

Table 13.11 Comprehensive knowledge about HIV among young women

Percentage of young women age 15-24 with comprehensive knowledge about HIV, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage with comprehensive knowledge of HIV ¹	Number of women
Age		
15-19	8.5	1,911
15-17	5.0	1,134
18-19	13.5	777
20-24	16.0	2,031
20-22	15.2	1,254
23-24	17.3	777
Marital status		
Never married	10.3	2,078
Ever had sex	*	11
Never had sex	10.3	2,067
Ever married	14.6	1,865
Employment abroad (past 3 years)²		
Yes	29.1	84
No	12.0	3,859
Spousal employment abroad reported by currently married women³		
Respondent worked abroad herself	(51.5)	26
Spouse worked abroad	13.4	747
Both worked abroad	(24.0)	36
Neither worked abroad	14.7	987
Not currently married	10.2	2,145
Residence		
Urban	14.3	925
Rural	11.7	3,017
Education		
None/primary	0.7	163
General basic	5.2	1,432
General secondary	10.1	1,697
Professional primary/middle	41.1	315
Higher	32.9	335
Total 15-24	12.3	3,942

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.

¹ Comprehensive knowledge means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about transmission or prevention of HIV. The components of comprehensive knowledge are presented in Tables 13.2 and 13.3.

² Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

³ Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.12 Age at first sexual intercourse among young women

Percentage of young women age 15-24 who had sexual intercourse before age 15 and percentage of young women age 18-24 who had sexual intercourse before age 18, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Women age 15-24		Women age 18-24	
	Percentage who had sexual intercourse before age 15	Number of women	Percentage who had sexual intercourse before age 18	Number of women
Age				
15-19	0.1	1,911	na	na
15-17	0.0	1,134	na	na
18-19	0.2	777	4.4	777
20-24	0.1	2,031	7.6	2,031
20-22	0.1	1,254	6.6	1,254
23-24	0.1	777	9.2	777
Employment abroad (past 3 years)¹				
Yes	0.0	84	12.5	73
No	0.1	3,859	6.6	2,735
Spousal employment abroad reported by currently married women²				
Respondent worked abroad				
herself	(0.0)	26	(9.4)	26
Spouse worked abroad	0.1	747	10.0	745
Both worked abroad	(0.0)	36	(16.0)	36
Neither worked abroad	0.2	987	9.6	979
Not currently married	0.0	2,145	1.2	1,022
Residence				
Urban	0.1	925	6.9	653
Rural	0.0	3,017	6.7	2,155
Education				
None/primary	0.0	163	18.8	135
General basic	0.0	1,432	12.6	790
General secondary	0.1	1,697	4.4	1,257
Professional primary/middle	0.0	315	2.2	296
Higher	0.0	335	0.5	331
Total	0.1	3,942	6.7	2,808

Note: Figures in parentheses are based on 25-49 unweighted cases.

na = Not applicable

¹ Employment abroad refers to working abroad during the 3 years before the survey for 3 or more months at a time.

² Information is based on currently married women's report of their own and their husband's employment abroad for a period of 3 or more months.

Table 13.13 Recent HIV tests among young women

Among young women age 15-24 who have had sexual intercourse in the past 12 months, percentage who were tested for HIV in the past 12 months and received the results of the last test, according to age, Tajikistan DHS 2017

Age	Women age 15-24 who have had sexual intercourse in the past 12 months:	
	Percentage who have been tested for HIV in the past 12 months and received the results of the last test	Number of women
15-19	13.8	243
15-17	*	10
18-19	13.9	233
20-24	19.4	1,472
20-22	20.3	864
23-24	18.1	608
Total	18.6	1,716

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

Key Findings

- **Physical or sexual violence:** 24% of women age 15-49 have experienced physical violence since age 15, and 17% experienced physical violence in the 12 months preceding the survey. Two percent of women have ever experienced sexual violence.
- **Marital control:** 29% of ever-married women reported that their current or most recent husband had ever exhibited at least three types of specified controlling behaviors.
- **Fear of husband:** 39% of ever-married women say that they are afraid of their current or most recent husband most of the time, and 52% say that they are afraid of him some of the time.
- **Spousal violence:** 31% of ever-married women have experienced physical, sexual, or emotional violence by their current or most recent husband. The prevalence of spousal violence has increased by 7 percentage points in the 5 years since the 2012 TjDHS.
- **Injuries due to spousal violence:** Among ever-married women who have experienced spousal physical or sexual violence, 23% have sustained some form of injury.
- **Help seeking:** One in 10 women sought help to stop the violence they had experienced. Three in four women neither sought help nor told anyone about the violence.

Gender-based violence against women has been acknowledged worldwide as a violation of basic human rights. Increasing research has highlighted the health burdens, intergenerational effects, and demographic consequences of such violence (UN 2006). Gender-based violence is defined by the United Nations as any act of violence that results in physical, sexual, or psychological harm or suffering to women and girls, as well as threats of such acts, coercion, or the arbitrary deprivation of liberty. This chapter focuses on domestic violence, one of the most common forms of gender-based violence against women and girls.

In 2013, in recognition of the seriousness of domestic violence, Tajikistan enacted the Law on the Prevention of Domestic Violence. In the same year, the Code of Administrative Offences was amended to include articles specifying liability for violation of the requirements of this legislation and for any violation of a restraining order. In addition, the State Programme for the Prevention of Domestic Violence is working to strengthen various mechanisms that have been put in place to prevent domestic violence.

To monitor progress made in the elimination of domestic violence in Tajikistan, the DHS domestic violence module was administered in all households sampled in the 2017 TjDHS. In accordance with the World Health Organization's guidelines on the ethical collection of information on domestic violence, only one eligible woman per household was randomly selected for the module, and the module was not

implemented if privacy could not be assured. In total, 6,743 women age 15-49 were eligible for the domestic violence module questions; however, in the case of 390 women, privacy could not be obtained. Thus, 6,353 women were successfully interviewed with the domestic violence questions. Specially constructed weights were used to ensure that the domestic violence subsample was nationally representative. The 2012 TjDHS involved a similar module and selection methodology.

14.1 MEASUREMENT OF VIOLENCE

In the 2017 TjDHS, information was obtained from never-married women on their experience of violence committed by anyone and from ever-married women on their experience of violence committed by their current and former husbands and by others. More specifically, violence committed by the current husband (for currently married women) and by the most recent husband (for formerly married women) was measured by asking all ever-married women if their husband ever did the following to them:

Physical spousal violence: push you, shake you, or throw something at you; slap you; twist your arm or pull your hair; punch you with his fist or with something that could hurt 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 spousal 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, or force you with threats or in any other way to perform sexual acts you did not want to

Emotional spousal 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

Women married more than once were also asked specifically about physical, sexual, and emotional violence by any former husband. In addition, information was obtained from all women (married and unmarried) about physical violence committed by anyone (other than a husband) since they were age 15 by asking if anyone had hit, slapped, kicked, or done something else to hurt them physically. Information was collected from all women about experiences of sexual violence committed by anyone (other than a husband) at any time in their life, as a child or as an adult, by asking if they were forced in any way to have sexual intercourse or to perform any other sexual acts when they did not want to. Finally, women who had ever been pregnant were asked about their experience of physical violence committed by anyone during any pregnancy.

Married women include both women who said they were married and women who said they were living with a partner as if married. Correspondingly, husbands include both husbands of married women and partners of women who are not married but are living together with a partner as if married.

14.2 EXPERIENCE OF PHYSICAL VIOLENCE

Physical violence by anyone

Percentage of women who have experienced any physical violence (committed by a husband or anyone else) since age 15 and in the 12 months before the survey.

Sample: Women age 15-49

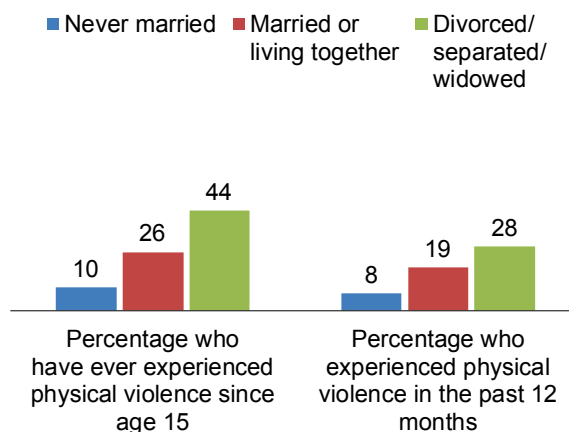
About one-quarter (24%) of women age 15-49 have experienced physical violence since age 15. Seventeen percent experienced physical violence often or sometimes in the 12 months preceding the survey (**Table 14.1**).

Trends: The percentage of women who have experienced physical violence since age 15 increased from 19% in 2012 to 24% in 2017. The percentage of women who experienced violence in the past 12 months also increased, from 13% to 17%.

Patterns by background characteristics

- Women’s likelihood of experiencing physical violence since age 15 increases with age, from 12% among those age 15-19 to 29% among those age 30-49.
- Divorced, separated, or widowed women are more likely (44%) to have experienced physical violence since age 15 than married women (26%) and never-married women (10%) (**Figure 14.1**).
- The percentage of women who have experienced physical violence since age 15 varies greatly by region, from a low of 9% in Dushanbe to a high of 36% in Khatlon.
- The proportion of women who have experienced physical violence since age 15 tends to decline with increasing education, from 27% among those with no education or a primary education to 15% among those with a higher education. This proportion also decreases with increasing wealth, from 32% among women in the lowest wealth quintile to 16% among women in the highest quintile.

Figure 14.1 Women’s experience of physical violence by marital status



14.2.1 Perpetrators of Physical Violence

Women who had experienced physical violence since age 15 were asked who had committed the violence; respondents could report multiple perpetrators. Among ever-married women who reported physical violence, the most common perpetrator was the current husband (83%), followed by a former husband (14%). Among never-married women, the most common perpetrators were mothers/stepmothers (82%) and sisters/brothers (29%) (**Table 14.2**).

14.3 EXPERIENCE OF SEXUAL VIOLENCE

Sexual violence

Percentage of women who have experienced any sexual violence (committed by a husband or anyone else) ever and in the 12 months before the survey.

Sample: Women age 15-49

14.3.1 Prevalence of Sexual Violence

Two percent of women age 15-49 have ever experienced sexual violence, and 1% experienced sexual violence in the 12 months preceding the survey (**Table 14.3**).

Virtually no women reported having experienced sexual violence by age 18 (0.1%), and 1% experienced sexual violence by age 22 (**Table 14.4**).

Patterns by background characteristics

- Women’s experience of sexual violence increases with age, from less than 1% among women age 15-19 to 3% among women age 40-49.

- Four percent of women who are divorced, separated, or widowed report sexual violence, as compared with 2% of currently married women. No never-married women reported sexual violence.

14.3.2 Perpetrators of Sexual Violence

Women who had ever experienced sexual violence were asked who had committed the violence. Ever-married respondents could report more than one perpetrator (current husband, former husband, and/or one other person). Among ever-married women who have experienced sexual violence, the most common perpetrators are the current husband (73%), followed by the former husband (27%) (Table 14.5).

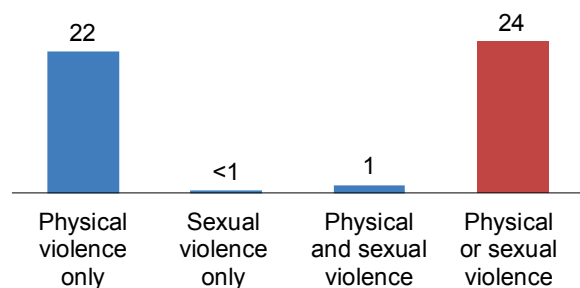
14.4 EXPERIENCE OF DIFFERENT FORMS OF VIOLENCE

Physical and sexual violence may occur in isolation from each other, or they may occur in combination. About one-quarter (24%) of women age 15-49 have experienced physical and/or sexual violence: 22% have experienced physical violence only, less than 1% have experienced sexual violence only, and 1% have experienced both physical and sexual violence (Table 14.6 and Figure 14.2).

One percent of women age 15-49 who have ever been pregnant have experienced physical violence during any pregnancy (Table 14.7). Women who are divorced, separated, or widowed (6%) and women age 15-19 (4%) are most likely to have experienced such violence.

Figure 14.2 Experience of different forms of violence

Percentage of women age 15-49



14.5 MARITAL CONTROL BY SPOUSE

Marital control

Percentage of women whose current husband (if currently married) or most recent husband (if formerly married) demonstrates at least one of the following controlling behaviors: is jealous or angry if she talks to other men, frequently accuses her of being unfaithful, does not permit her to meet her female friends, tries to limit her contact with her family, and insists on knowing where she is at all times.

Sample: Ever-married women age 15-49

Attempts to control and monitor one's spouse's behavior are important early warning signs and correlates of violence in a relationship. Since the concentration of controlling behaviors is more significant than the display of any single behavior, the proportion of women whose husbands display at least three of the specified behaviors is also discussed.

Overall, 29% of ever-married women age 15-49 reported that their current or most recent husband had ever exhibited three or more specific types of controlling behaviors. One in five women (19%) report that their husband does not display any of the specific controlling behaviors asked about (Table 14.8).

The controlling behavior most often exhibited by husbands is getting jealous or angry if the respondent talks to other men (74%). More than half of women (53%) reported that their husband insists on knowing where they are at all times, and 29% reported that their husband does not permit them to meet their female friends. Smaller percentages reported that their husband frequently accuses them of being unfaithful (18%) and limits their contact with their families (12%).

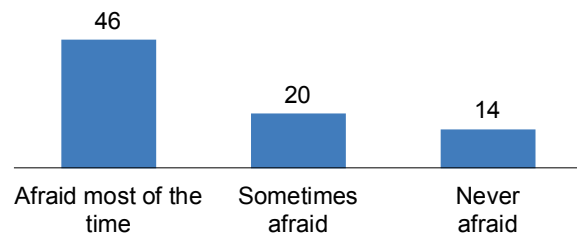
Thirty-nine percent of ever-married women say that they are afraid of their current or most recent husband most of the time, and 52% say that they are afraid of him some of the time (data not shown).

Patterns by background characteristics

- Women’s experience of marital controlling behaviors declines with age; 32% to 34% of women age 15-29 report experiencing at least three controlling behaviors, as compared with 23% of women age 40-49.
- The percentage of women experiencing at least three controlling behaviors varies by region, from 20% in DRS to 36% in Khatlon and 34% in Dushanbe.
- The proportion of women experiencing at least three controlling behaviors declines with increasing education, from 37% among those with no education or only a primary education to 23% among those with a higher education.
- Women’s reports of controlling behaviors vary strongly by whether or not they report being afraid of their husbands. Forty-six percent of women who are afraid of their husbands most of the time experience at least three controlling behaviors, as compared with 20% of women who are sometimes afraid of their husbands and 14% of women who are never afraid of their husbands (**Figure 14.3**).

Figure 14.3 Marital controlling behaviors by fear of husband

Percentage of ever-married women age 15-49 who have experienced at least three specified controlling behaviors



14.6 FORMS OF SPOUSAL VIOLENCE

Spousal violence

Percentage of women who have experienced any of the specified acts of physical, sexual, or emotional violence committed by their current husband (if currently married) or most recent husband (if formerly married), ever and in the 12 months preceding the survey.

Sample: Ever-married women age 15-49

14.6.1 Prevalence of Spousal Violence

Thirty-one percent of ever-married women have experienced some form of physical, sexual, or emotional violence by their current or most recent husband. One in four women (24%) experienced such violence in the 12 months preceding the survey (**Table 14.9**). Women are more likely to have experienced spousal physical (25%) or emotional (16%) violence than spousal sexual violence (2%).

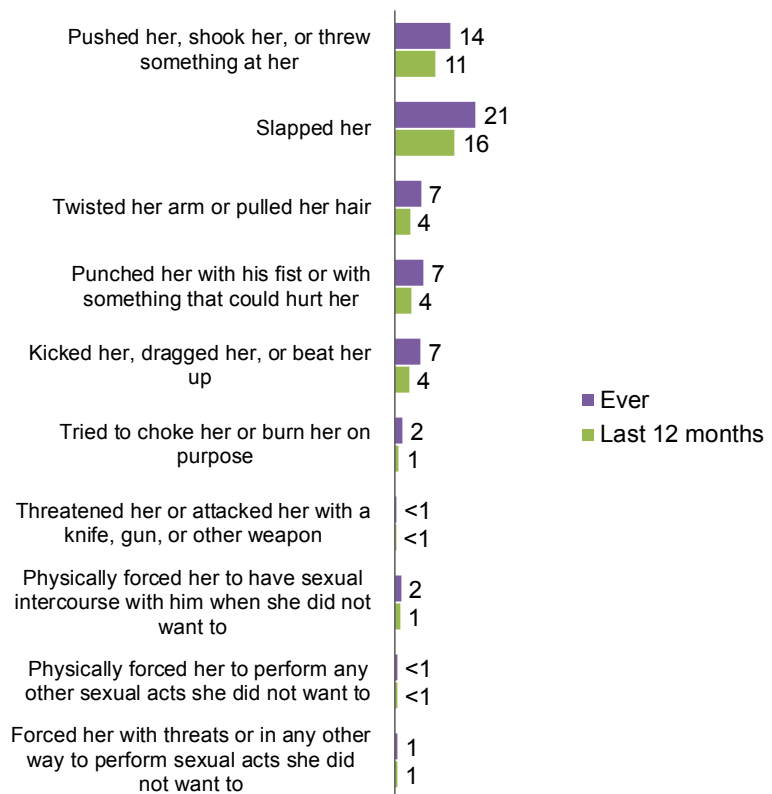
Among the different types of non-emotional acts of violence asked about, women were most likely to report being slapped (21%), followed by being pushed or shaken or having something thrown at them (14%). Women were about equally likely to report being punched with a fist or object that could hurt them, having their arm twisted or hair pulled, and being kicked, dragged, or beaten (7% each) (Figure 14.4).

Among specific kinds of emotional violence, women are most likely to report being insulted or made to feel bad about themselves (12%) and being humiliated in front of others (11%).

Trends: The proportion of women who have ever experienced physical, sexual, or emotional violence by their current or most recent husband has increased since 2012, from 24% to 31%. The proportion experiencing spousal violence in the 12 months before the survey has also increased, from 20% to 24%.

Figure 14.4 Forms of spousal violence

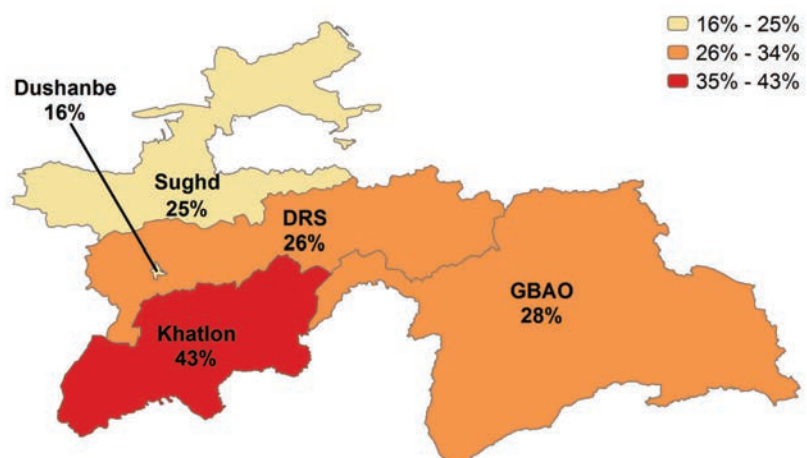
Percentage of ever-married women age 15-49 who have ever experienced specific acts of violence by their husband



Patterns by background characteristics

- In general, women’s experience of spousal physical, sexual, or emotional violence by their current or most recent husband increases with age and number of children. For example, 20% of women with no children report such violence, as compared with 35% of women with five or more children (Table 14.10).
- Women who are divorced, separated, or widowed are more likely to have experienced spousal violence (47%) than those who are currently married (30%).
- The proportion of women who have experienced spousal violence varies greatly by region, from 16% in Dushanbe to 43% in Khatlon (Figure 14.5).

Figure 14.5 Spousal violence by region



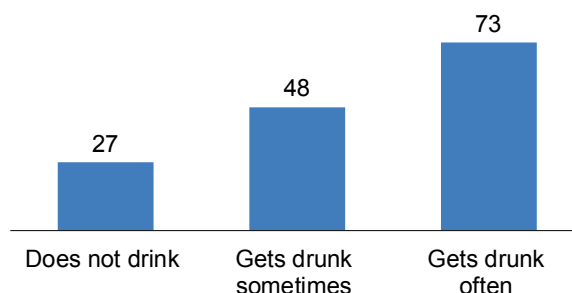
- Women’s experience of spousal violence tends to decrease with increasing education; 32% to 33% of women with no education or a primary, general basic, or general secondary education report any form of spousal violence, as compared with 22% of women with a higher education.
- Experience of spousal violence varies more consistently with wealth, ranging from a high of 40% among women in the lowest wealth quintile to a low of 23% among women in the highest quintile.

Patterns by spouse’s characteristics and empowerment indicators

- Women’s likelihood of experiencing physical, sexual, or emotional violence from their current husband varies inconsistently by the husband’s education. Women whose husbands have a professional primary/middle education are more likely to have experienced spousal violence (37%) than women whose husbands have no or less education (28%-32%) or a higher education (27%) (Table 14.11).
- Women who are 10 or more years younger than their husband are less likely (22%) than their counterparts in the other age differential categories to report having experienced any type of spousal violence (29%-31%).
- Women whose husband is often drunk are much more likely (73%) to experience spousal violence than women whose husband is sometimes drunk (48%) or does not drink alcohol (27%) (Figure 14.6).
- Women’s likelihood of experiencing spousal violence increases with the number of marital control behaviors exhibited by their spouse. Ten percent of women whose husband exhibits no controlling behaviors have experienced spousal violence, as compared with 62% of women whose husband exhibits all five controlling behaviors.
- Intergenerational effects of spousal violence are evident in Tajikistan. Women who report that their fathers beat their mothers are more likely (59%) to have themselves experienced spousal violence than women who report that their fathers did not beat their mothers (26%).
- Women who report fearing their husband are more likely to report experiencing spousal violence. Half of women who say that they are afraid of their husband most of the time have experienced spousal violence, compared with 19% of women who are only sometimes afraid of their husband and 20% of women who are never afraid of their husband.

Figure 14.6 Spousal violence by husband’s alcohol consumption

Percentage of ever-married women who have ever experienced spousal (physical, sexual, or emotional) violence by their husband



Some women have been married more than once and could have experienced spousal violence by a previous husband. Table 14.12 provides information on women’s experience of spousal physical, sexual, or emotional violence by any husband in the past 12 months. Overall, 24% of women experienced violence perpetrated by their current husband and/or any previous husband in the past 12 months. Table 14.13 shows that experience of spousal physical or sexual violence increases with the duration of marriage; among currently married women who have been married only once, 12% experienced spousal violence within 2 years of marriage and 22% within the first 5 years of marriage. One percent of women say that the violence began before marriage.

14.6.2 Injuries due to Spousal Violence

Injuries due to spousal violence

Percentage of ever-married women who have had the following types of injuries from spousal violence: cuts, bruises, or aches; eye injuries, sprains, dislocations, or burns; or deep wounds, broken bones, broken teeth, or any other serious injury.

Sample: Ever-married women age 15-49 who have experienced physical or sexual violence committed by their current husband (if currently married) or most recent husband (if formerly married)

Among ever-married women age 15-49 who have experienced physical or sexual violence at the hands of their current or most recent husband, 23% have ever sustained an injury and 19% sustained an injury in the 12 months preceding the survey (**Table 14.14**). The most common form of injury is cuts, bruises, and aches (21%). Eight percent of women have ever sustained eye injuries, sprains, dislocations, or burns, and 4% have sustained deep wounds, broken bones, broken teeth, or any other serious injury.

Trends: The proportion of ever-married women who have sustained injuries after experiencing violence from their current or most recent husband has declined over the past 5 years (27% in 2012, 23% in 2017). The percentage of ever-married women who sustained an injury in the past 12 months has also declined (28% in 2012, 19% in 2017).

14.6.3 Violence Initiated by Women against Their Husbands

Initiation of physical violence by wives

Percentage of women who have ever hit, slapped, kicked, or done anything else to physically hurt their current (if currently married) or most recent (if formerly married) husband at times when he was not already beating or physically hurting them.

Sample: Ever-married women age 15-49

Less than 1% of women have ever committed physical violence against their current or most recent husband when he was not already beating or physically hurting them, and a similar proportion of women committed such violence in the 12 months preceding the survey (**Table 14.15**).

Trends: There has been a decline in the percentage of women who have ever initiated violence against their husband, from 2% in 2012 to 0.4% in 2017.

Patterns by background characteristics

- Women's initiation of physical violence against their husband varies by whether women themselves have experienced spousal violence: 1% of women who have ever experienced spousal physical violence and 2% who experienced such violence in the 12 months preceding the survey have ever initiated physical violence against their husband, as compared with 0.2% of women who have never experienced spousal physical violence.
- The only other groups in which the percentage of women who have initiated physical violence against their husbands is relatively high are women whose husbands show all five marital control behaviors (3%) and women whose husband has no education or only a primary education, women whose husband is often drunk, and women who are divorced, separated, or widowed (2% each) (**Tables 14.15 and 14.16**).

14.7 HELP SEEKING AMONG THOSE WHO HAVE EXPERIENCED VIOLENCE

Three out of four women age 15-49 who have experienced physical or sexual violence have never sought help or told anyone about the violence. Only 10% of women sought help to stop the violence, and another 15% did not seek help but told someone about the violence (**Table 14.17**).

Patterns by background characteristics

- Women who have experienced both physical and sexual violence are much more likely (33%) to have sought help than women who have experienced only physical violence (9%).
- Never-married women who have experienced violence are least likely to seek help (2%), followed by married women (9%); women who are divorced, separated, or widowed (25%) are most likely to do so.
- Help seeking for violence does not vary consistently by education: it is highest among women with a higher education (13%) but lowest among those with a professional primary/middle education (3%).

Sources for Help

Among women age 15-49 who have experienced physical or sexual violence and sought help, the most common source of help is their own family (72%). Women's next most common source of help is their husband's family (36%). Nine percent of women sought help from a lawyer, 8% from a neighbor, and 6% each from a friend or the police (**Table 14.18**).

LIST OF TABLES

For more information on domestic violence, see the following tables:

- **Table 14.1** Experience of physical violence
- **Table 14.2** Persons committing physical violence
- **Table 14.3** Experience of sexual violence
- **Table 14.4** Age at first experience of sexual violence
- **Table 14.5** Persons committing sexual violence
- **Table 14.6** Experience of different forms of violence
- **Table 14.7** Experience of violence during pregnancy
- **Table 14.8** Marital control exercised by husbands
- **Table 14.9** Forms of spousal violence
- **Table 14.10** Spousal violence by background characteristics
- **Table 14.11** Spousal violence by husband's characteristics and empowerment indicators
- **Table 14.12** Violence by any husband in the last 12 months
- **Table 14.13** Experience of spousal violence by duration of marriage
- **Table 14.14** Injuries to women due to spousal violence
- **Table 14.15** Violence by women against their husband by women's background characteristics
- **Table 14.16** Violence by women against their husband by husband's characteristics and empowerment indicators
- **Table 14.17** Help seeking to stop violence
- **Table 14.18** Sources for help to stop the violence

Table 14.1 Experience of physical violence

Percentage of women age 15-49 who have experienced physical violence since age 15 and percentage who have experienced physical violence during the 12 months preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who have experienced physical violence since age 15 ¹	Percentage who have experienced physical violence in the past 12 months			Number of women
		Often	Sometimes	Often or sometimes ²	
Age					
15-19	11.5	0.5	8.1	8.6	1,089
20-24	19.3	1.5	15.5	17.0	1,253
25-29	27.1	2.0	19.1	21.1	1,136
30-39	28.8	2.6	18.0	20.7	1,630
40-49	29.0	1.2	15.6	16.8	1,245
Residence					
Urban	20.0	1.9	12.1	14.0	1,598
Rural	24.9	1.6	16.7	18.3	4,755
Region					
Dushanbe	8.5	0.9	6.1	6.9	568
GBAO	18.4	0.5	15.8	16.3	125
Sughd	16.5	1.1	8.7	9.8	1,950
DRS	20.2	1.5	12.5	14.1	1,380
Khatlon	35.8	2.5	25.3	27.8	2,330
FTF districts	21.7	1.1	15.6	16.8	1,211
Marital status					
Never married	10.4	0.3	7.5	7.8	1,322
Married or living together	26.0	1.3	17.7	19.1	4,701
Divorced/separated/widowed	44.2	11.2	17.1	28.3	330
Employment					
Employed for cash	25.0	1.5	14.2	15.7	1,386
Employed not for cash	28.4	0.5	18.4	19.3	263
Not employed	23.1	1.8	15.8	17.5	4,705
Number of living children					
0	13.0	1.3	8.3	9.6	1,864
1-2	25.8	2.2	18.3	20.5	1,898
3-4	29.3	1.5	18.9	20.4	2,053
5+	32.0	1.3	18.3	19.6	537
Education					
None/primary	27.1	2.9	18.7	21.6	380
General basic	24.3	2.1	15.1	17.2	2,133
General secondary	25.6	1.5	17.5	19.0	2,708
Professional primary/middle	19.1	0.9	13.3	14.1	524
Higher	14.8	0.7	8.6	9.3	609
Wealth quintile					
Lowest	32.3	1.8	19.9	21.8	1,235
Second	29.1	2.3	21.8	24.0	1,242
Middle	22.5	1.8	14.3	16.1	1,262
Fourth	19.6	0.9	13.8	14.6	1,294
Highest	15.8	1.6	8.4	10.0	1,319
Total	23.7	1.7	15.5	17.2	6,353

¹ Includes violence in the past 12 months. For women who were married before age 15 and reported physical violence only by their husband, the violence could have occurred before age 15.

² Includes women for whom frequency in the past 12 months is not known

Table 14.2 Persons committing physical violence

Among women age 15-49 who have experienced physical violence since age 15, percentage who report specific persons who committed the violence, according to the respondent's current marital status, Tajikistan DHS 2017

Person	Marital status		Total
	Ever married	Never married	
Current husband	83.1	na	75.5
Former husband	13.9	na	12.7
Current boyfriend	0.0	0.0	0.0
Former boyfriend	0.1	0.0	0.1
Father/stepfather	1.6	1.7	1.6
Mother/stepmother	7.8	81.8	14.5
Sister/brother	3.2	29.2	5.5
Daughter/son	0.0	0.6	0.1
Other relative	0.5	3.1	0.7
Mother-in-law	0.1	na	0.1
Father-in-law	0.1	na	0.1
Other in-law	1.2	na	1.1
Teacher	0.1	1.3	0.2
Other	0.4	4.3	0.8
Number of women who have experienced physical violence since age 15	1,368	137	1,505

Note: Women can report more than one person who committed the violence.
na = Not applicable

Table 14.3 Experience of sexual violence

Percentage of women age 15-49 who have ever experienced sexual violence and percentage who have experienced sexual violence in the 12 months preceding the survey, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who have experienced sexual violence:		Number of women
	Ever ¹	In the past 12 months	
Age			
15-19	0.2	0.2	1,089
20-24	1.4	1.0	1,253
25-29	2.0	1.6	1,136
30-39	1.7	1.3	1,630
40-49	2.8	1.3	1,245
Residence			
Urban	1.5	1.0	1,598
Rural	1.7	1.1	4,755
Region			
Dushanbe	1.3	0.9	568
GBAO	1.1	0.9	125
Sughd	1.2	0.5	1,950
DRS	1.9	1.4	1,380
Khatlon	2.0	1.5	2,330
FTF districts	2.7	2.2	1,211
Marital status			
Never married	0.0	0.0	1,322
Married or living together	2.0	1.3	4,701
Divorced/separated/widowed	3.9	2.4	330
Employment			
Employed for cash	1.0	0.6	1,386
Employed not for cash	2.6	1.6	263
Not employed	1.8	1.2	4,705
Number of living children			
0	0.8	0.4	1,864
1-2	2.0	1.7	1,898
3-4	2.2	1.2	2,053
5+	1.3	1.1	537
Education			
None/primary	1.9	1.7	380
General basic	1.9	1.6	2,133
General secondary	1.8	1.0	2,708
Professional primary/middle	0.6	0.5	524
Higher	0.9	0.4	609
Wealth quintile			
Lowest	2.1	1.3	1,235
Second	1.3	1.1	1,242
Middle	2.2	1.5	1,262
Fourth	1.1	0.6	1,294
Highest	1.6	1.1	1,319
Total	1.6	1.1	6,353

¹ Includes violence in the past 12 months

Table 14.4 Age at first experience of sexual violence

Percentage of women age 15-49 who experienced sexual violence by specific exact ages, according to current age, Tajikistan DHS 2017

Background characteristic	Percentage who first experienced sexual violence by exact age:					Percentage who have not experienced sexual violence	Number of women
	10	12	15	18	22		
Age							
15-19	0.0	0.0	0.0	na	na	99.8	1,089
20-24	0.0	0.0	0.0	0.0	na	98.6	1,253
25-29	0.0	0.0	0.0	0.1	1.2	98.0	1,136
30-39	0.0	0.0	0.0	0.1	0.7	98.3	1,630
40-49	0.0	0.0	0.0	0.2	1.4	97.2	1,245
Total	0.0	0.0	0.0	0.1	0.9	98.4	6,353

na = Not applicable

Table 14.5 Persons committing sexual violence

Among ever-married women age 15-49 who have experienced sexual violence, percentage who report specific persons who committed the violence, Tajikistan DHS 2017

Person	Percentage
Current husband	72.9
Former husband	27.2
Current/former boyfriend	2.6
Other relative	0.3
Own friend/acquaintance	0.8
Number of women who have experienced sexual violence	105

Note: Ever-married women can report up to three perpetrators: a current husband, former husband, or one other person who is not a current or former husband.

Table 14.6 Experience of different forms of violence

Percentage of women age 15-49 who have ever experienced different forms of violence by current age, Tajikistan DHS 2017

Age	Physical violence only	Sexual violence only	Physical and sexual violence	Physical or sexual violence	Number of women
15-19	11.3	0.1	0.1	11.6	1,089
15-17	13.1	0.0	0.0	13.1	638
18-19	8.9	0.2	0.3	9.4	451
20-24	18.1	0.2	1.2	19.4	1,253
25-29	25.6	0.6	1.5	27.6	1,136
30-39	27.3	0.1	1.5	29.0	1,630
40-49	27.1	0.8	1.9	29.9	1,245
Total	22.4	0.4	1.3	24.0	6,353

Table 14.7 Experience of violence during pregnancy

Among women age 15-49 who have ever been pregnant, percentage who have ever experienced physical violence during pregnancy, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who experienced violence during pregnancy	Number of women who have ever been pregnant
Age		
15-19	3.6	96
20-24	1.0	848
25-29	1.0	1,034
30-39	1.5	1,513
40-49	1.1	1,211
Residence		
Urban	1.0	1,165
Rural	1.3	3,538
Region		
Dushanbe	0.1	378
GBAO	1.8	90
Sughd	0.6	1,512
DRS	2.3	1,052
Khatlon	1.4	1,671
FTF districts	1.9	888
Marital status		
Never married	*	18
Married or living together	1.0	4,409
Divorced/separated/ widowed	5.6	276
Number of living children		
0	1.9	214
1-2	1.6	1,898
3-4	0.7	2,053
5+	1.6	537
Education		
None/primary	1.6	281
General basic	1.8	1,551
General secondary	0.7	2,041
Professional primary/ middle	0.7	396
Higher	1.9	435
Wealth quintile		
Lowest	1.0	914
Second	1.9	912
Middle	1.4	952
Fourth	0.8	968
Highest	1.1	956
Total	1.2	4,703

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

Table 14.8 Marital control exercised by husbands

Percentage of ever-married women age 15-49 whose husbands have ever demonstrated specific types of controlling behaviors, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage of women whose husband:							Number of ever-married women
	Is jealous or angry if she talks to other men	Frequently accuses her of being unfaithful	Does not permit her to meet her female friends	Tries to limit her contact with her family	Insists on knowing where she is at all times	Displays 3 or more of the specific behaviors	Displays none of the specific behaviors	
Age								
15-19	75.9	11.7	29.8	11.9	54.0	31.6	22.4	183
20-24	80.4	15.9	34.4	11.4	58.7	33.8	15.0	985
25-29	81.0	21.0	33.3	13.0	54.9	33.2	14.0	1,076
30-39	74.3	18.4	27.4	13.3	52.9	28.5	18.8	1,564
40-49	62.4	17.4	20.9	10.3	48.3	22.8	27.6	1,222
Residence								
Urban	75.8	20.7	31.2	11.4	58.1	33.4	17.9	1,225
Rural	73.5	17.1	27.7	12.4	51.9	27.9	19.8	3,806
Region								
Dushanbe	69.3	18.1	33.3	6.7	59.2	33.9	22.6	396
GBAO	56.2	22.1	18.2	6.4	50.4	23.4	27.9	95
Sughd	81.6	11.5	26.8	8.7	57.6	26.6	12.7	1,608
DRS	65.0	14.1	17.5	8.9	41.8	20.2	26.2	1,108
Khatlon	74.9	25.8	36.3	18.5	55.6	36.4	19.8	1,823
FTF districts	65.4	20.0	35.2	14.7	44.8	32.0	27.5	971
Marital status								
Married or living together	75.1	17.0	27.8	11.3	53.7	28.5	18.3	4,701
Divorced/separated/widowed	59.0	32.2	39.3	23.5	48.7	40.1	34.0	330
Number of living children								
0	70.3	14.7	31.1	12.8	49.7	31.2	24.5	560
1-2	78.4	19.2	31.1	12.4	56.8	31.9	16.0	1,882
3-4	73.6	17.8	26.5	11.4	52.7	27.5	19.5	2,052
5+	64.8	17.8	24.7	12.8	48.2	24.5	24.6	537
Employment								
Employed for cash	73.6	20.3	27.3	11.8	53.1	29.4	20.3	1,155
Employed not for cash	73.6	12.2	27.2	13.6	54.1	25.5	18.1	214
Not employed	74.3	17.6	29.0	12.1	53.5	29.4	19.1	3,662
Education								
None/primary	69.9	25.6	34.4	19.8	54.3	37.1	24.8	308
General basic	74.8	19.5	29.6	14.6	51.8	31.1	19.5	1,640
General secondary	73.6	17.1	29.1	11.1	53.8	29.2	19.3	2,199
Professional primary/middle	75.8	14.6	23.2	9.1	54.8	23.6	17.4	423
Higher	75.4	14.6	23.1	5.5	55.2	22.9	16.7	460
Wealth quintile								
Lowest	66.0	15.4	25.4	11.5	49.9	25.9	25.9	974
Second	73.5	20.3	31.0	15.1	51.1	31.8	19.4	970
Middle	78.6	20.3	26.6	14.1	52.8	28.8	16.3	1,026
Fourth	76.8	16.0	30.4	11.5	55.2	28.7	16.3	1,050
Highest	75.1	17.8	29.3	8.5	57.6	31.2	19.0	1,012
Woman afraid of husband								
Afraid most of the time	83.4	27.1	43.1	19.4	69.5	46.1	11.4	1,950
Sometimes afraid	70.1	11.7	19.8	8.0	46.0	19.5	22.2	2,604
Never afraid	57.7	14.9	17.0	4.9	27.7	14.0	36.2	477
Total	74.1	18.0	28.6	12.1	53.4	29.3	19.3	5,031

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women.

Table 14.9 Forms of spousal violence

Percentage of ever-married women age 15-49 who have experienced various forms of violence ever or in the 12 months preceding the survey committed by their current or most recent husband, Tajikistan DHS 2017

Type of violence experienced	Ever experienced	Experienced in the past 12 months	Frequency in the past 12 months	
			Often	Sometimes
SPOUSAL VIOLENCE COMMITTED BY CURRENT OR MOST RECENT HUSBAND¹				
Physical violence				
Any physical violence	25.3	18.7	1.8	16.9
Pushed her, shook her, or threw something at her	14.4	10.5	1.0	9.5
Slapped her	21.0	15.5	1.1	14.4
Twisted her arm or pulled her hair	6.7	3.8	0.4	3.4
Punched her with his fist or with something that could hurt her	7.4	4.2	0.5	3.7
Kicked her, dragged her, or beat her up	6.6	3.6	0.5	3.2
Tried to choke her or burn her on purpose	1.9	0.9	0.2	0.7
Threatened her or attacked her with a knife, gun, or other weapon	0.2	0.1	0.0	0.1
Sexual violence				
Any sexual violence	1.7	1.4	0.2	1.2
Physically forced her to have sexual intercourse with him when she did not want to	1.5	1.2	0.2	1.0
Physically forced her to perform any other sexual acts she did not want to	0.4	0.4	0.1	0.2
Forced her with threats or in any other way to perform sexual acts she did not want to	0.6	0.5	0.1	0.3
Emotional violence				
Any emotional violence	15.8	13.3	2.2	11.1
Said or did something to humiliate her in front of others	10.7	8.7	1.6	7.1
Threatened to hurt or harm her or someone she cared about	2.6	2.1	0.4	1.7
Insulted her or made her feel bad about herself	11.6	9.6	1.2	8.4
Any form of physical and/or sexual violence	25.7	19.0	1.9	17.1
Any form of emotional and/or physical and/or sexual violence	30.8	24.1	3.1	21.0
SPOUSAL VIOLENCE COMMITTED BY ANY HUSBAND				
Physical violence	25.9	18.7	na	na
Sexual violence	2.0	1.4	na	na
Emotional violence	16.2	13.3	na	na
Any form of physical or sexual violence	26.4	19.0	na	na
Any form of emotional or physical or sexual violence	31.4	24.1	na	na
Number of ever-married women	5,031	5,031	5,031	5,031

¹ Includes current husband for currently married women and most recent husband for divorced, separated, or widowed women
na = Not available

Table 14.10 Spousal violence by background characteristics

Percentage of ever-married women age 15-49 who have ever experienced emotional, physical, or sexual violence committed by their current or most recent husband, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of ever-married women
Age								
15-19	2.8	7.1	1.4	0.7	0.7	7.7	7.7	183
20-24	12.8	21.4	1.5	1.3	1.0	21.6	26.3	985
25-29	16.1	26.6	2.0	1.5	0.7	27.2	33.3	1,076
30-39	17.9	28.3	1.7	1.5	1.2	28.4	33.5	1,564
40-49	17.3	26.2	1.8	1.1	0.6	26.8	32.4	1,222
Residence								
Urban	14.3	22.2	1.8	1.6	1.0	22.5	27.7	1,225
Rural	16.3	26.3	1.7	1.3	0.8	26.7	31.8	3,806
Region								
Dushanbe	9.3	10.9	1.8	1.2	0.3	11.4	15.5	396
GBAO	19.0	19.9	1.2	0.5	0.1	20.7	28.2	95
Sughd	12.5	18.8	1.2	0.8	0.7	19.3	24.9	1,608
DRS	13.7	21.0	1.9	1.6	1.0	21.3	25.6	1,108
Khatlon	21.3	37.0	2.1	1.8	1.1	37.3	42.7	1,823
FTF districts	12.6	24.2	2.8	2.4	1.2	24.6	28.1	971
Marital status								
Married or living together	14.6	24.1	1.6	1.2	0.7	24.5	29.7	4,701
Divorced/separated/widowed	33.4	42.6	3.3	3.2	3.0	42.7	47.1	330
Number of living children								
0	11.3	16.7	2.1	1.6	1.4	17.1	19.6	560
1-2	15.5	24.3	1.8	1.4	1.1	24.8	29.9	1,882
3-4	16.5	27.5	1.6	1.3	0.7	27.9	33.6	2,052
5+	19.5	29.0	1.3	1.1	0.5	29.2	35.1	537
Employment								
Employed for cash	18.7	25.6	1.0	1.0	0.6	25.6	32.3	1,155
Employed not for cash	14.7	30.1	1.9	1.1	0.0	30.9	33.6	214
Not employed	15.0	24.9	1.9	1.5	1.0	25.4	30.2	3,662
Education								
None/primary	17.1	29.2	2.4	2.1	1.8	29.5	32.3	308
General basic	17.5	26.4	2.2	1.6	1.1	26.9	32.5	1,640
General secondary	15.5	27.0	1.6	1.2	0.8	27.4	32.2	2,199
Professional primary/middle	13.2	20.3	0.8	0.6	0.5	20.4	26.0	423
Higher	13.0	15.3	1.0	1.0	0.6	15.3	21.7	460
Wealth quintile								
Lowest	19.2	33.8	1.9	1.2	0.7	34.5	40.1	974
Second	18.0	31.4	1.4	1.2	0.7	31.6	36.7	970
Middle	14.9	23.2	2.0	1.6	1.1	23.6	26.9	1,026
Fourth	15.4	21.0	1.3	1.0	0.8	21.3	28.7	1,050
Highest	11.9	17.9	2.0	1.7	1.2	18.2	22.5	1,012
Total	15.8	25.3	1.7	1.3	0.9	25.7	30.8	5,031

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women.

Table 14.11 Spousal violence by husband's characteristics and empowerment indicators

Percentage of ever-married women age 15-49 who have ever experienced emotional, physical, or sexual violence committed by their current or most recent husband, according to the husband's characteristics and women's empowerment indicators, Tajikistan DHS 2017

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of ever-married women
Husband's education¹								
None/primary	17.3	23.6	2.0	1.5	0.3	24.1	32.4	100
General basic	10.8	23.9	3.1	2.6	1.1	24.4	27.5	722
General secondary	15.4	23.5	1.4	1.1	0.8	23.8	29.7	2,367
Professional primary/middle	18.3	32.2	1.8	1.3	1.1	32.7	37.3	483
Higher	13.2	21.9	0.9	0.3	0.2	22.5	27.1	1,023
Husband's alcohol consumption								
Does not drink alcohol	14.0	21.0	1.5	1.1	0.6	21.4	26.6	4,126
Drinks alcohol but is never drunk	*	*	*	*	*	*	*	14
Is sometimes drunk	22.2	42.9	1.9	1.5	1.3	43.2	48.3	807
Is often drunk	48.5	65.3	12.5	12.3	11.9	65.6	73.4	84
Spousal age difference¹								
Wife older	14.2	23.5	2.0	1.6	1.4	23.8	28.7	158
Wife is same age	11.3	26.4	0.8	0.8	0.3	26.4	30.0	403
Wife 1-4 years younger	14.6	24.9	1.7	1.3	0.9	25.4	30.7	2,489
Wife 5-9 years younger	15.7	23.5	1.4	1.0	0.5	23.9	29.3	1,397
Wife 10 or more years younger	14.1	15.8	2.8	2.2	0.9	16.5	22.3	253
Number of marital control behaviors displayed by husband²								
0	3.5	8.6	0.8	0.6	0.2	8.8	9.6	971
1-2	12.4	22.3	1.2	0.8	0.5	22.7	27.5	2,587
3-4	25.6	39.0	2.7	2.1	1.5	39.6	47.6	1,161
5	46.4	50.8	5.7	5.4	4.6	51.1	61.8	312
Number of decisions in which women participate³								
0	14.2	24.7	2.1	1.6	1.1	25.2	29.4	2,311
1-2	15.6	28.0	1.0	0.6	0.3	28.4	35.0	868
3	14.7	20.9	1.2	1.0	0.4	21.2	27.2	1,521
Number of reasons for which wife beating is justified⁴								
0	10.6	17.7	1.2	0.8	0.4	18.1	21.7	1,506
1-2	11.6	24.9	1.1	0.9	0.7	25.2	30.4	950
3-4	18.6	32.3	1.3	1.1	0.8	32.5	37.8	1,379
5	22.6	27.1	3.3	2.6	1.8	27.8	34.6	1,196
Father beat mother								
Yes	26.6	50.2	2.6	2.3	1.4	50.5	58.9	634
No	14.2	20.9	1.4	1.1	0.7	21.3	26.0	3,940
Don't know/missing	14.8	28.6	2.9	2.2	2.1	29.3	33.6	457
Woman afraid of husband								
Afraid most of the time	28.4	41.2	2.7	2.1	1.7	41.8	49.8	1,950
Sometimes afraid	7.6	15.1	1.0	0.7	0.3	15.4	18.7	2,604
Never afraid	9.3	15.6	1.6	1.5	0.4	15.7	19.5	477
Total	15.8	25.3	1.7	1.3	0.9	25.7	30.8	5,031

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women. Total includes women who did not know their husband's level of education. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Includes only currently married women

² According to the wife's report. See Table 14.8 for list of behaviors.

³ According to the wife's report. Includes only currently married women. See Table 15.8 for list of decisions.

⁴ According to the wife's report. See Table 15.9 for list of reasons.

Table 14.12 Violence by any husband in the last 12 months

Percentage of ever-married women who have experienced emotional, physical, or sexual violence by any husband in the past 12 months, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Emotional violence	Physical violence	Sexual violence	Physical and sexual	Physical and sexual and emotional	Physical or sexual	Physical or sexual or emotional	Number of ever-married women
Age								
15-19	2.3	5.6	0.7	0.7	0.7	5.6	5.6	183
20-24	11.2	18.2	1.3	1.1	0.9	18.5	22.9	985
25-29	13.0	21.1	1.7	1.2	0.5	21.6	27.2	1,076
30-39	15.6	20.8	1.4	1.2	0.9	21.0	26.3	1,564
40-49	13.8	16.3	1.3	0.9	0.5	16.7	22.3	1,222
Residence								
Urban	11.6	16.0	1.3	1.1	0.7	16.2	21.4	1,225
Rural	13.8	19.6	1.4	1.1	0.7	20.0	25.0	3,806
Region								
Dushanbe	8.8	9.5	1.2	0.9	0.2	9.8	13.9	396
GBAO	18.6	18.1	1.1	0.4	0.0	18.8	26.1	95
Sughd	9.5	11.7	0.6	0.3	0.3	12.0	17.3	1,608
DRS	11.4	15.8	1.8	1.5	1.0	16.1	20.3	1,108
Khatlon	18.4	28.7	1.9	1.6	0.9	29.1	34.5	1,823
FTF districts	11.5	19.1	2.7	2.2	1.1	19.6	22.8	971
Education								
None/primary	15.1	23.9	2.1	2.1	1.8	23.9	25.5	308
General basic	14.2	19.2	2.0	1.5	1.0	19.8	25.2	1,640
General secondary	13.1	20.0	1.1	0.9	0.5	20.3	25.4	2,199
Professional primary/ middle	11.2	14.9	0.6	0.4	0.3	15.0	19.9	423
Higher	11.2	11.0	0.5	0.5	0.3	11.0	17.1	460
Wealth quintile								
Lowest	15.9	24.5	1.5	1.0	0.5	25.0	30.5	974
Second	16.4	25.9	1.4	1.0	0.6	26.3	31.2	970
Middle	12.4	16.5	1.9	1.5	1.0	16.9	20.8	1,026
Fourth	12.3	15.5	0.7	0.7	0.6	15.5	22.0	1,050
Highest	9.7	11.8	1.4	1.1	0.8	12.0	16.7	1,012
Total	13.3	18.7	1.4	1.1	0.7	19.0	24.1	5,031

Note: Any husband includes all current, most recent, and former husbands.

Table 14.13 Experience of spousal violence by duration of marriage

Among currently married women age 15-49 who have been married only once, the percentage who first experienced physical or sexual violence committed by their current husband by specific exact years since marriage, according to marital duration, Tajikistan DHS 2017

Duration of marriage	Percentage who first experienced spousal physical or sexual violence by exact marital duration				Percentage who have not experienced physical or sexual violence	Number of currently married women who have been married only once
	Before marriage	2 years	5 years	10 years		
Years since marriage						
<2	0.0	na	na	na	89.4	481
2-4	0.7	16.7	na	na	76.5	699
5-9	1.9	13.5	26.4	na	72.7	1,087
10+	1.6	10.7	22.6	25.3	73.5	2,191
Total	1.4	12.2	22.4	23.9	75.5	4,458

na = Not applicable

Table 14.14 Injuries to women due to spousal violence

Among ever-married women age 15-49 who have experienced violence committed by their current or most recent husband, the percentage who have been injured as a result of the violence, by types of injuries, according to the type of violence, Tajikistan DHS 2017

Type of violence experienced	Cuts, bruises, or aches	Eye injuries, sprains, dislocations, or burns	Deep wounds, broken bones, broken teeth, or any other serious injury	Any of these injuries	Number of ever-married women who have experienced physical or sexual violence
Physical violence¹					
Ever ²	21.4	7.4	4.4	22.8	1,272
Past 12 months	17.2	6.9	2.6	19.2	941
Sexual violence					
Ever ²	23.2	14.6	10.0	29.5	87
Past 12 months	22.3	16.8	9.3	30.1	69
Physical or sexual violence¹					
Ever ²	21.1	7.5	4.4	22.7	1,292
Past 12 months	17.0	7.2	2.6	19.2	956

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women.

¹ Excludes women who reported violence only in response to a direct question on violence during pregnancy

² Includes in the past 12 months

Table 14.15 Violence by women against their husband by women's background characteristics

Percentage of ever-married women who have committed physical violence against their current or most recent husband when he was not already beating or physically hurting them, ever and in the past 12 months, according to women's own experience of spousal violence and background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who committed physical violence against their husband		Number of ever-married women
	Ever ¹	Past 12 months	
Women experienced spousal physical violence			
Ever ¹	1.3	1.0	1,272
In the past 12 months	1.6	1.3	941
Never	0.2	0.2	3,759
Age			
15-19	0.7	0.7	183
20-24	0.3	0.2	985
25-29	0.8	0.8	1,076
30-39	0.3	0.2	1,564
40-49	0.4	0.3	1,222
Residence			
Urban	0.8	0.6	1,225
Rural	0.3	0.3	3,806
Region			
Dushanbe	0.9	0.9	396
GBAO	0.3	0.3	95
Sughd	0.2	0.1	1,608
DRS	1.0	0.8	1,108
Khatlon	0.3	0.2	1,823
FTF districts	0.2	0.2	971
Marital status			
Married or living together	0.3	0.3	4,701
Divorced/separated/widowed	2.0	1.8	330
Employment			
Employed for cash	0.4	0.4	1,155
Employed not for cash	0.0	0.0	214
Not employed	0.5	0.4	3,662
Number of living children			
0	0.7	0.6	560
1-2	0.7	0.6	1,882
3-4	0.3	0.2	2,052
5+	0.0	0.0	537
Education			
None/primary	0.4	0.4	308
General basic	0.3	0.2	1,640
General secondary	0.4	0.4	2,199
Professional primary/middle	0.6	0.6	423
Higher	0.9	0.6	460
Wealth quintile			
Lowest	0.4	0.2	974
Second	0.8	0.7	970
Middle	0.1	0.1	1,026
Fourth	0.2	0.2	1,050
Highest	0.8	0.7	1,012
Total	0.4	0.4	5,031

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women.

¹ Includes in the past 12 months

Table 14.16 Violence by women against their husband by husband's characteristics and empowerment indicators

Percentage of ever-married women who have committed physical violence against their current or most recent husband when he was not already beating or physically hurting them, ever and in the past 12 months, according to the husband's characteristics and women's empowerment indicators, Tajikistan DHS 2017

Background characteristic	Percentage who committed physical violence against their husband		Number of ever-married women
	Ever ¹	Past 12 months	
Husband's education²			
None/primary	2.2	2.2	100
General basic	0.4	0.4	722
General secondary	0.3	0.2	2,367
Professional primary/middle	0.3	0.2	483
Higher	0.3	0.2	1,023
Husband's alcohol consumption			
Does not drink alcohol	0.4	0.3	4,126
Drinks alcohol but is never drunk	*	*	14
Is sometimes drunk	0.7	0.7	807
Is often drunk	1.9	0.8	84
Spousal age difference²			
Wife older	0.5	0.5	158
Wife is same age	0.0	0.0	403
Wife 1-4 years younger	0.4	0.4	2,489
Wife 5-9 years younger	0.4	0.2	1,397
Wife 10 or more years younger	0.5	0.1	253
Number of marital control behaviors displayed by husband³			
0	0.1	0.1	971
1-2	0.3	0.2	2,587
3-4	0.6	0.6	1,161
5	2.5	1.6	312
Number of decisions in which women participate⁴			
0	0.5	0.4	2,311
1-2	0.0	0.0	868
3	0.3	0.2	1,521
Number of reasons for which wife beating is justified⁵			
0	0.2	0.2	1,506
1-2	0.4	0.3	950
3-4	0.5	0.4	1,379
5	0.7	0.7	1,196
Father beat mother			
Yes	0.3	0.2	634
No	0.5	0.4	3,940
Don't know/missing	0.2	0.1	457
Woman afraid of husband			
Afraid most of the time	0.8	0.7	1,950
Sometimes afraid	0.2	0.2	2,604
Never afraid	0.2	0.1	477
Total	0.4	0.4	5,031

Note: Husband refers to the current husband for currently married women and the most recent husband for divorced, separated, or widowed women. Total includes women who did not know their husband's level of education. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Includes in the past 12 months

² Includes only currently married women

³ According to the wife's report. See Table 14.8 for list of behaviors.

⁴ According to the wife's report. Includes only currently married women. See Table 15.8 for list of decisions.

⁵ According to the wife's report. See Table 15.9 for list of reasons.

Table 14.17 Help seeking to stop violence

Percent distribution of women age 15-49 who have ever experienced physical or sexual violence by their help-seeking behavior, according to type of violence and background characteristics, Tajikistan DHS 2017

Background characteristic	Sought help to stop violence	Never sought help but told someone	Never sought help, never told anyone	Total	Number of women who have ever experienced any physical or sexual violence
Type of violence experienced					
Physical only	8.5*	15.5*	76.0	100.0	1,423
Sexual only	*	*	*	100.0	22
Both physical and sexual	32.8	13.0	54.2	100.0	82
Age					
15-19	5.5	11.6	82.9	100.0	126
20-24	9.9	6.0	84.1	100.0	244
25-29	8.9	15.0	76.1	100.0	314
30-39	11.4	16.7	71.9	100.0	473
40-49	9.5	21.5	69.0	100.0	372
Residence					
Urban	11.3	18.5	70.3	100.0	323
Rural	9.3	14.6	76.2	100.0	1,205
Region					
Dushanbe	0.7	12.7	86.5	100.0	51
GBAO	6.3	13.0	80.7	100.0	24
Sughd	11.8	21.8	66.5	100.0	328
DRS	12.0	18.3	69.7	100.0	283
Khatlon	8.7	12.1	79.1	100.0	843
FTF districts					
	5.4	7.5	87.1	100.0	269
Marital status					
Never married	1.9	10.0	88.1	100.0	137
Married or living together	8.7	14.4	76.9	100.0	1,244
Divorced/separated/ widowed	25.0	29.0	46.0	100.0	146
Number of living children					
0	13.3	13.4	73.4	100.0	245
1-2	8.5	18.3	73.2	100.0	499
3-4	9.2	12.0	78.8	100.0	612
5+	9.5	22.0	68.5	100.0	173
Employment					
Employed for cash	11.5	20.4	68.1	100.0	347
Employed not for cash	15.8	6.5	77.7	100.0	76
Not employed	8.7	14.4	76.9	100.0	1,104
Education					
None/primary	9.8	15.5	74.8	100.0	104
General basic	10.3	15.7	74.0	100.0	529
General secondary	9.8	14.4	75.8	100.0	703
Professional primary/ middle	2.8	13.3	84.0	100.0	101
Higher	13.1	23.1	63.8	100.0	90
Wealth quintile					
Lowest	10.6	15.0	74.4	100.0	408
Second	8.6	13.0	78.4	100.0	364
Middle	10.4	18.3	71.2	100.0	289
Fourth	7.8	13.4	78.8	100.0	256
Highest	11.1	18.6	70.2	100.0	211
Total	9.7	15.4	74.9	100.0	1,528

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

Table 14.18 Sources for help to stop the violence

Percentage of women age 15-49 who have experienced physical or sexual violence and sought help by sources from which they sought help, according to the type of violence that women reported, Tajikistan DHS 2017

Source	Type of violence experienced		
	Physical only	Both physical and sexual	Physical or sexual
Own family	73.4	*	72.2
Husband's family	31.8	*	36.0
Friend	5.7	*	5.9
Neighbor	8.6	*	8.2
Doctor/medical personnel	6.1	*	5.0
Police	5.9	*	5.5
Lawyer	10.8	*	8.9
Other	1.8	*	1.5
Number of women who have sought help	121	27	148

Note: Women can report more than one source from which they sought help. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Key Findings

- **Employment:** One quarter of currently married women age 15-49 are employed. The majority of currently married women who are employed are paid in cash only (74%), and another 10% are paid in cash and in-kind.
- **Control over earnings:** 71% of currently married women age 15-49 with cash earnings participate in decisions about the use of their earnings; 29% decide on their own, and 43% decide jointly with their husbands.
- **Ownership of property:** 36% of women age 15-49 own a house alone or jointly with someone else. The majority of women who own a house have a title or deed with their name on it (58%).
- **Bank account use and mobile phone ownership:** Only 1% of women have a bank account that they use; 54% of women own a mobile phone. Only 9% of women who own a mobile phone use it for financial transactions.
- **Decision making:** 33% of currently married women age 15-49 participate in three specific household decisions either alone or jointly with their husbands; 49% do not participate in any of the three decisions.
- **Attitudes toward wife beating:** About two out of three women age 15-49 (64%) agree with at least one justification for wife beating.
- **Negotiating sexual relations:** More than half (53%) of currently married women age 15-49 can say no to their husbands if they do not want to have sexual intercourse, and 50% can ask their husbands to use a condom.

This chapter explores women's empowerment in terms of employment, earnings, control over earnings, magnitude of earnings relative to those of their partners, household decision making, empowering attitudes, and house ownership. Responses to specific questions are also used to define two different indicators of women's empowerment: their participation in household decision making and their attitudes towards wife beating. Together, the indicators in this chapter provide information about the status of women in Tajikistan and shed light on the context in which women make family and health choices.

15.1 MARRIED WOMEN'S EMPLOYMENT

Employment

Women are considered to be employed if they have done any work other than their housework in the 12 months before the survey.

Sample: Currently married women age 15-49

Earning cash for employment

Women are asked if they are paid for their labor in cash or in-kind. Only those who receive payment in cash only or in cash and in-kind are considered to earn cash for their employment.

Sample: Currently married women age 15-49 employed in the 12 months before the survey

Only a minority (25%) of currently married women age 15-49 in Tajikistan are employed. Among those employed, 74% are paid in cash only and 10% are paid both in cash and in-kind. Thirteen percent of currently married women who are employed are not paid at all (**Table 15.1**).

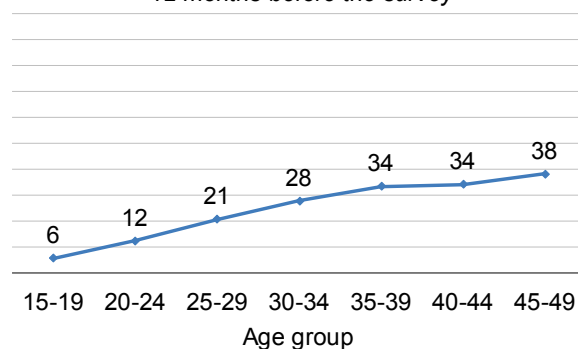
Trends: The proportion of currently married women employed in the past 12 months has declined since 2012, from 32% to 25%; however, the proportion earning only cash has increased, from 52% to 74%.

Patterns by background characteristics

- Employment among currently married women increases with age, from 6% among those age 15-19 to 38% among those age 45-49 (**Figure 15.1**).
- The likelihood of women being paid for the work they do varies inconsistently with age but is somewhat higher among those age 35-49 than among those age 20-34.

Figure 15.1 Employment by age

Percentage of currently married women who were employed at any time in the 12 months before the survey



15.2 CONTROL OVER WOMEN'S EARNINGS

Control over one's own cash earnings

Women are considered to have control over their own earnings if they participate in decisions alone or jointly with their husbands about how their own earnings will be used.

Sample: Currently married women age 15-49 who received cash earnings for employment during the 12 months before the survey

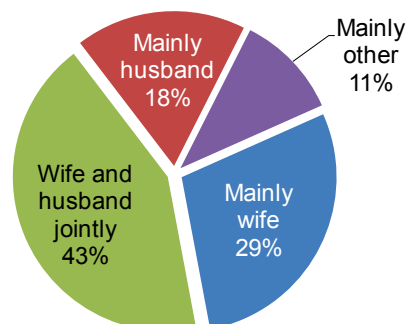
Seven out of 10 (71%) currently married women age 15-49 with cash earnings decide on their own or jointly with their husbands how their earnings will be used. Twenty-nine percent decide on their own how to use earnings, while 43% decide jointly with their husbands. Eighteen percent of women report that their husband is the main decision maker, and 11% say that the primary decision maker is someone other than themselves or their husband (**Table 15.2.1** and **Figure 15.2**).

Eleven percent of currently married women with cash earnings earn more than their husbands, and similarly 11% earn the same as their husbands. Seventy-one percent of women earn less than their husbands.

Trends: The proportion of women who decide on their own or jointly with their husband how they will use earnings declined by 10 percentage points between 2012 and 2017, from 81% to 71%. While there was not much change in women’s cash earnings relative to their husbands’ earnings, the proportion of women earning more than their husbands do increased from 8% to 11% in the 5-year period between the two surveys.

Figure 15.2 Control over women’s earnings: Person who decides how the wife’s cash earnings are used

Percent distribution of currently married women age 15-49 with cash earnings in the 12 months before the survey



Patterns by background characteristics

- The proportion of women who decide on their own how their cash earnings will be used increases with age, from 20% among those age 20-24 to 35% among those age 45-49.
- The percentage of women who decide on their own how their cash earnings will be used varies only minimally among those with 0-4 children (26%-28%) but is much higher among women with 5 or more children (40%).
- The proportion of women who participate alone or jointly with their husbands in decisions about the use of their earnings varies from a low of 56% in Khatlon to a high of 92% in GBAO.
- Women’s participation in decisions about their own earnings tends to increase with increasing education; 52% of women with no education or a primary education participate alone or jointly with their husbands in such decisions, as compared with 77% of women with a professional primary or middle education and 74% of women with a higher education. Women’s participation in these decisions varies inconsistently with wealth, however.
- Among currently married women who earn cash, the proportion who earn more than their husbands do ranges from a low of 6% in Sughd to a high of 25% in GBAO.
- Women who earn the same as their husbands are less likely (13%) to decide on their own what to do with their earnings than women who earn more (44%) or less (28%) than their husbands. However, these women are more likely (75%) than their counterparts who earn more (33%) or less (41%) than their husbands to decide jointly with their husbands what to do with their earnings (**Table 15.3**).

15.3 CONTROL OVER HUSBAND’S EARNINGS

Seven percent of currently married women age 15-49 whose husbands have cash earnings report that they are the main decision maker about how their husband’s cash earnings are used, while 40% report that their husband mainly decides how his earnings are used. Notably, the likelihood of joint decision making by the wife and husband is lower for decisions about use of the husband’s earnings (31%) than about use of the wife’s earnings (43%) (**Table 15.2.2**).

Women who earn the same as their husband are more likely (80%) than women who earn more (40%) or less (48%) than their husband to decide jointly with their husband about use of his cash earnings. Notably, one in three women who earn more than their husband mainly decide how his earnings are used, as compared with less than 1 in 10 women who earn less than or the same as their husband (**Table 15.3**).

15.4 WOMEN'S OWNERSHIP OF A HOUSE

Ownership of a house

Women who own a house, whether alone or jointly with someone else.

Sample: Women age 15-49

Thirty-six percent of women age 15-49 own a house alone and/or jointly with someone else. Overall, 3% own a house alone, 17% own a house jointly with someone else, and 15% own houses both alone and jointly with someone else (Table 15.4 and Figure 15.3).

Trends: The proportion of women who own a house alone and/or jointly with someone else declined sharply from 53% in 2012 to 36% in 2017.

Patterns by background characteristics

- The proportion of women who do not own a house decreases sharply with age, from 82% among those age 15-19 to 39% among those age 45-49.
- House ownership among women is most common in GBAO (52%) and least common in DRS (27%).
- The proportion of women who do not own a house varies inconsistently with wealth; the proportion is higher among women in the fourth wealth quintile (72%) than among women in the lower quintiles (63%-64%) or the highest quintile (61%). House ownership does not vary much or consistently with education.

Documentation of Ownership

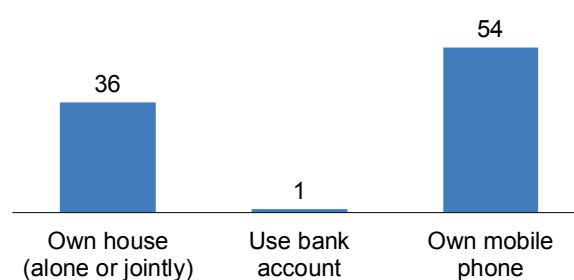
Documentation of ownership of a house is important with respect to security of tenure as well as the ability to leverage or liquidate the asset if needed. Among women who own a house, 58% possess a title or deed for the house with their name on it; 35% do not possess a title or deed (Table 15.5).

Patterns by background characteristics

- Women in rural areas who own a house are more likely not to have a title or deed (37%) and less likely to have a title or deed with their name on it (55%) than women in urban areas (29% and 65%, respectively).
- Women in Khatlon who own a house are more likely to have their name on the title or deed (74%) than women in other regions, in particular in DRS, where only 23% of women have their name on the title or deed.

Figure 15.3 Ownership of assets

Percentage of women age 15-49 by ownership of specific items



15.5 BANK ACCOUNTS AND MOBILE PHONES

Has and uses a bank account

Women who have an account in a bank or other financial institution that they themselves use.

Sample: Women age 15-49

Mobile phone ownership

Women who own a mobile phone.

Sample: Women age 15-49

Very few women (1%) in Tajikistan have an account in a bank or other financial institution that they use. More than half of women (54%) own a mobile phone (**Table 15.6** and **Figure 15.3**).

Women who own a mobile phone were asked if they use it for financial transactions. Among those who own a mobile phone, only 9% say that they use it for financial transactions.

Patterns by background characteristics

- Use of bank accounts is rare among women in all groups. Women in Dushanbe (6%) and women with a higher education (5%) are most likely to have an account in a bank or another financial institution.
- Mobile phone ownership is much lower in rural areas (48%) than in urban areas (71%). Similarly, among women who own a mobile phone, urban women are much more likely (18%) than rural women (4%) to use the phone for financial transactions.
- By region, mobile phone ownership is highest in Dushanbe, where 81% of women own a mobile phone, and lowest in Khatlon (41%). Among women who own a mobile phone, 37% of women in Dushanbe use the phone for financial transactions, followed by 9% in Khatlon.
- While mobile phone ownership tends to rise sharply with increasing education and wealth, the increase is sharper by education than by wealth. Notably, 90% of women with a higher education have a mobile phone, a larger percentage than any other subgroup of women. Among women who own a mobile phone, use of the phone for financial transactions varies inconsistently with education and is highest among women with a higher education (15%) and those with no education or a primary education (11%). Use of mobile phones for financial transactions tends to increase with increasing wealth, from 3% of women in the lowest wealth quintile to 20% of women in the highest quintile.

15.6 PARTICIPATION IN DECISION MAKING

Participation in major household decisions

Women are considered to participate in household decisions if they make decisions alone or jointly with their husband in all three of the following areas: (1) their own health care, (2) major household purchases, and (3) visits to their family or relatives.

Sample: Currently married women age 15-49

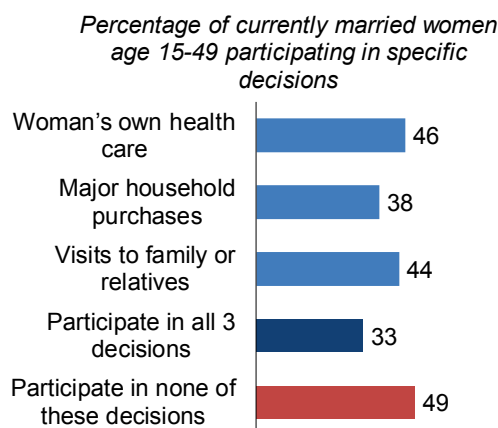
One-third (33%) of currently married women age 15-49 participate in all three specified household decisions either alone or jointly with their husbands. Women are more likely to participate in decisions about their own health care (46%) and visits to their family or relatives (44%) than in decisions about major household purchases (38%). Almost half (49%) of currently married women do not participate in any of the three decisions (**Table 15.7**, **Table 15.8**, and **Figure 15.4**).

Trends: The proportion of currently married women age 15-49 who participate in all three decisions has declined since 2012, from 43% to 33%. Women’s participation in each of the separate decisions has also declined, with the sharpest decrease observed for participation in decisions about major household purchases. In 2012, 55% of women said that they participated in decisions about major household purchases, as compared with 38% in 2017.

Patterns by background characteristics

- Women’s participation in all three decisions increases steadily with age, from 8% among women age 15-19 to 55%-56% among women age 40-49 (Table 15.8).
- Employed women, particularly those employed for cash (51%), are more likely to participate in all three decisions than women who are not employed (27%).
- By region, women’s participation in all three decisions varies from a low of 27% each in DRS and Khatlon to a high of 62% in GBAO.
- Women’s participation in all three decisions does not vary consistently according to wealth but increases steadily with increasing education, from 24% among women with no education or a primary education to 45% among women with a higher education.

Figure 15.4 Women’s participation in decision making



15.7 ATTITUDES TOWARD WIFE BEATING

Attitudes toward wife beating

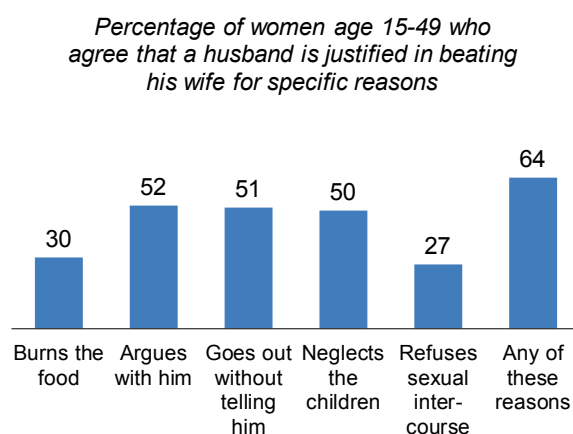
Women are asked if they agree that a husband is justified in hitting or beating his wife under each of the following five circumstances: she burns the food, she argues with him, she goes out without telling him, she neglects the children, and she refuses to have sex with him. If respondents answer yes in at least one circumstance, they are considered to have attitudes justifying wife beating.

Sample: Women age 15-49

About two-thirds (64%) of women age 15-49 agree with at least one justification for a husband hitting or beating his wife; 52% agree that wife beating is justified if she argues with her husband, 51% agree that it is justified if she goes out without telling him, and 50% agree that it is justified if she neglects the children. A smaller proportion of women agree that wife beating is justified if she burns the food (30%) or refuses to have sex with him (27%) (Table 15.9 and Figure 15.5).

Trends: The proportion of women who agree with one or more justifications for wife beating increased slightly from 60% in 2012 to 64% in 2017.

Figure 15.5 Attitudes towards wife beating



Patterns by background characteristics

- Agreement with at least one reason for wife beating is less likely among women who are employed and paid in cash (58%) than among women who are not employed (65%) and women who are employed but not paid in cash (64%).
- Currently married women are more likely (70%) than never-married women (43%) and women who are divorced, separated, or widowed (60%) to agree with one or more reasons for wife beating.
- Rural women (66%) are more likely than urban women (55%) to agree with at least one reason for wife beating.
- Agreement with at least one reason for wife beating varies greatly by region, from a low of 45% among women in Dushanbe to a high of 71% among women in Khatlon.
- Agreement with wife beating declines with increasing education but does not vary consistently with wealth.

15.8 NEGOTIATING SEXUAL RELATIONS

To assess attitudes toward negotiating safer sexual relations with husbands, women were asked whether they thought that a wife is justified in refusing to have sexual intercourse with her husband if she knows he has sex with other women and in asking him to use a condom if she knows he has a sexually transmitted infection (STI).

A majority of women believe that a wife is justified in negotiating sexual relations with her husband. Sixty percent of women agree that a wife is justified in refusing to have sexual intercourse with her husband if her husband has other partners, and 58% agree that she is justified in asking her husband to wear a condom if he has an STI (**Table 15.10**).

To assess the ability of women to actually negotiate safer sexual relations with their husbands, currently married women were asked whether they can say no to their husband if they do not want to have sexual intercourse and whether they could ask their husband to use a condom. Fifty-three percent of women reported that they can say no to their husband if they do not want to have sex, and 50% reported that they can ask their husband to use a condom (**Table 15.11**).

Patterns by background characteristics

- Currently married women's ability to negotiate safer sex increases with age. For example, 46% of women age 15-24 report that they can say no to their husbands if they do not want to have sexual intercourse, as compared with 61% of women age 40-49 (**Table 15.11**).
- Women's ability to negotiate safer sex with their husbands varies by region. The proportion of women who can say no to their husbands if they do not want to have sexual intercourse ranges from 35% in Khatlon to 70% in GBAO, and the proportion who can ask their husbands to use a condom varies from 31% in Khatlon to 71% in Dushanbe.
- The proportion of women who say that they can negotiate safer sex with their husbands is higher in urban than in rural areas and increases with increasing education and wealth.

For information on how indicators of women's empowerment relate to each other, see **Table 15.12**, and to see how key reproductive health indicators vary by women's empowerment, see **Tables 15.13-15.15**.

LIST OF TABLES

For more information on women's empowerment, see the following tables:

- **Table 15.1** Employment and cash earnings of currently married women
- **Table 15.2.1** Control over women's cash earnings and relative magnitude of women's cash earnings
- **Table 15.2.2** Control over men's cash earnings
- **Table 15.3** Women's control over their own earnings and over those of their husbands
- **Table 15.4** Ownership of assets
- **Table 15.5** Ownership of title or deed for house
- **Table 15.6** Ownership and use of bank accounts and mobile phones
- **Table 15.7** Participation in decision making
- **Table 15.8** Women's participation in decision making by background characteristics
- **Table 15.9** Attitude toward wife beating
- **Table 15.10** Attitudes toward negotiating safer sexual relations with husband
- **Table 15.11** Ability to negotiate sexual relations with husband
- **Table 15.12** Indicators of women's empowerment
- **Table 15.13** Current use of contraception by women's empowerment
- **Table 15.14** Ideal number of children and unmet need for family planning by women's empowerment
- **Table 15.15** Reproductive health care by women's empowerment

Table 15.1 Employment and cash earnings of currently married women

Percentage of currently married women age 15-49 who were employed at any time in the past 12 months and percent distribution of currently married women employed in the past 12 months by type of earnings, according to age, Tajikistan DHS 2017

Age	Among currently married women:		Percent distribution of currently married women employed in the past 12 months, by type of earnings					Total	Number of women
	Percentage employed in past 12 months	Number of women	Cash only	Cash and in-kind	In-kind only	Not paid			
15-19	5.8	240	*	*	*	*	100.0	14	
20-24	12.4	1,557	69.9	9.5	4.2	16.4	100.0	193	
25-29	20.8	1,688	76.4	6.8	2.9	13.8	100.0	351	
30-34	27.8	1,374	67.7	11.4	2.0	18.9	100.0	382	
35-39	33.5	1,089	75.9	9.1	3.8	11.3	100.0	365	
40-44	34.2	953	76.8	13.1	2.8	7.3	100.0	326	
45-49	38.2	847	76.2	10.6	3.2	10.1	100.0	323	
Total	25.2	7,747	73.8	10.1	3.0	13.1	100.0	1,953	

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

Table 15.2.1 Control over women's cash earnings and relative magnitude of women's cash earnings

Percent distribution of currently married women age 15-49 who received cash earnings for employment in the 12 months preceding the survey by person who decides how wife's cash earnings are used and by whether she earned more or less than her husband, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Person who decides how the wife's cash earnings are used:				Total	Wife's cash earnings compared with husband's cash earnings:					Total	Number of women
	Mainly wife	Wife and husband jointly	Mainly husband	Other		More	Less	About the same	Husband has no earnings	Don't know		
Age												
15-19	*	*	*	*	100.0	*	*	*	*	*	100.0	9
20-24	20.4	26.7	19.1	33.9	100.0	12.7	72.7	8.6	4.1	2.0	100.0	153
25-29	22.3	35.8	20.2	21.6	100.0	6.3	80.6	6.3	4.0	2.8	100.0	292
30-34	25.6	42.4	15.9	16.1	100.0	7.6	75.4	7.6	6.4	3.0	100.0	302
35-39	30.9	47.6	18.7	2.7	100.0	9.5	68.9	12.3	6.6	2.7	100.0	310
40-44	33.0	51.0	15.1	1.0	100.0	14.0	67.9	13.2	1.6	3.3	100.0	293
45-49	35.3	45.5	18.7	0.5	100.0	15.2	62.4	13.5	7.9	1.1	100.0	280
Number of living children												
0	27.0	28.4	19.8	24.8	100.0	15.2	68.1	10.2	3.7	2.8	100.0	102
1-2	25.7	40.8	18.9	14.6	100.0	9.6	72.2	9.6	5.5	3.1	100.0	547
3-4	28.3	47.5	15.8	8.4	100.0	9.9	71.3	11.5	5.0	2.3	100.0	825
5+	40.4	34.5	23.9	1.2	100.0	14.5	69.0	8.5	6.5	1.5	100.0	164
Residence												
Urban	29.2	47.7	19.0	4.1	100.0	12.0	69.4	11.5	4.9	2.3	100.0	459
Rural	28.3	40.9	17.5	13.4	100.0	10.0	71.9	10.1	5.4	2.6	100.0	1,179
Region												
Dushanbe	25.9	44.9	29.1	0.0	100.0	16.7	65.8	11.3	4.7	1.4	100.0	138
GBAO	30.9	61.1	4.4	3.6	100.0	24.9	63.8	8.7	1.8	0.8	100.0	49
Sughd	26.3	53.8	11.8	8.1	100.0	5.5	78.0	11.4	3.9	1.2	100.0	718
DRS	31.5	48.9	19.1	0.5	100.0	13.4	73.8	6.3	2.3	4.1	100.0	163
Khatlon	30.9	25.1	23.6	20.3	100.0	13.4	63.9	10.4	8.2	4.1	100.0	570
FTF districts	34.7	23.3	16.6	25.4	100.0	16.6	55.1	12.8	9.6	5.9	100.0	338
Education												
None/primary	19.9	31.9	21.7	26.5	100.0	15.9	56.1	5.6	17.0	5.3	100.0	63
General basic	35.4	33.2	19.4	12.0	100.0	8.3	77.7	6.8	3.7	3.5	100.0	295
General secondary	29.1	41.2	19.4	10.3	100.0	8.9	72.6	11.0	5.5	1.9	100.0	591
Professional primary/middle	29.4	47.3	11.6	11.6	100.0	14.2	65.0	11.3	6.5	2.9	100.0	287
Higher	23.4	50.7	18.4	7.4	100.0	11.3	71.1	12.5	3.2	2.0	100.0	401
Wealth quintile												
Lowest	32.0	46.2	16.0	5.9	100.0	15.2	67.0	9.4	5.9	2.6	100.0	253
Second	22.1	39.3	24.6	14.0	100.0	6.6	75.3	13.3	3.6	1.2	100.0	274
Middle	31.9	35.3	16.9	15.9	100.0	10.8	77.9	5.6	3.9	1.8	100.0	319
Fourth	27.0	43.6	15.1	14.4	100.0	9.8	68.8	10.7	6.4	4.2	100.0	384
Highest	29.6	48.2	18.0	4.2	100.0	11.0	68.1	12.7	5.9	2.3	100.0	409
Total	28.5	42.8	17.9	10.8	100.0	10.6	71.2	10.5	5.2	2.5	100.0	1,638

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

Table 15.2.2 Control over men's cash earnings

Percent distribution of currently married women age 15-49 whose husbands receive cash earnings by person who decides how husband's cash earnings are used, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Person who decides how husband's cash earnings are used:				Total	Number of women
	Mainly wife	Husband and wife jointly	Mainly husband	Other		
Age						
15-19	0.8	7.7	40.7	50.8	100.0	232
20-24	1.7	14.9	37.5	45.9	100.0	1,514
25-29	4.5	22.8	43.1	29.6	100.0	1,664
30-34	6.5	32.8	43.4	17.3	100.0	1,349
35-39	10.7	44.0	40.1	5.2	100.0	1,057
40-44	14.1	47.9	36.3	1.7	100.0	945
45-49	12.4	48.9	38.0	0.6	100.0	817
Number of living children						
0	3.1	14.9	41.0	41.0	100.0	714
1-2	4.5	26.0	38.8	30.7	100.0	2,795
3-4	8.3	37.8	40.6	13.3	100.0	3,251
5+	14.7	39.3	42.1	3.8	100.0	817
Residence						
Urban	7.3	36.4	43.4	12.9	100.0	1,761
Rural	7.0	30.0	39.2	23.8	100.0	5,816
Region						
Dushanbe	8.4	37.1	53.1	1.4	100.0	571
GBAO	13.6	62.7	20.6	3.1	100.0	143
Sughd	4.0	43.7	28.2	24.1	100.0	2,477
DRS	3.3	23.2	67.1	6.4	100.0	1,691
Khatlon	11.6	22.5	32.5	33.3	100.0	2,695
FTF districts	14.5	21.6	26.2	37.7	100.0	1,496
Education						
None/primary	6.1	20.7	48.3	25.0	100.0	451
General basic	5.8	26.6	47.7	19.9	100.0	2,482
General secondary	8.1	32.7	37.1	22.1	100.0	3,380
Professional primary/middle	7.2	37.8	29.4	25.6	100.0	601
Higher	7.5	44.8	31.5	16.2	100.0	663
Wealth quintile						
Lowest	9.2	33.4	42.0	15.4	100.0	1,437
Second	8.4	29.9	38.9	22.8	100.0	1,479
Middle	5.7	27.7	39.1	27.5	100.0	1,577
Fourth	5.2	29.9	38.1	26.9	100.0	1,628
Highest	7.4	36.9	43.0	12.7	100.0	1,456
Total	7.1	31.4	40.1	21.3	100.0	7,577

Table 15.3 Women's control over their own earnings and over those of their husbands

Percent distribution of currently married women age 15-49 with cash earnings in the last 12 months by person who decides how the wife's cash earnings are used; and percent distribution of currently married women age 15-49 whose husbands have cash earnings by person who decides how the husband's cash earnings are used, according to the relation between wife's and husband's cash earnings, Tajikistan DHS 2017

Women's earnings relative to husband's earnings	Person who decides how the wife's cash earnings are used:					Number of women	Person who decides how husband's cash earnings are used:					Number of women
	Mainly wife	Wife and husband jointly	Mainly husband	Other	Total		Mainly wife	Wife and husband jointly	Mainly husband	Other	Total	
More than husband	44.3	33.4	11.8	10.5	100.0	174	32.9	40.2	15.0	11.9	100.0	174
Less than husband	27.9	41.3	19.6	11.2	100.0	1,167	8.8	48.0	29.4	13.7	100.0	1,167
Same as husband	12.6	74.6	11.1	1.7	100.0	171	4.6	79.8	14.7	0.9	100.0	171
Husband has no cash earnings or did not work	34.9	28.8	20.1	16.3	100.0	85	na	na	na	na	na	0
Woman worked but has no cash earnings	na	na	na	na	na	0	4.5	46.6	25.1	23.7	100.0	310
Woman did not work	na	na	na	na	na	0	6.1	25.6	44.7	23.6	100.0	5,714
Total¹	28.5	42.8	17.9	10.8	100.0	1,638	7.1	31.4	40.1	21.3	100.0	7,577

na = Not applicable

¹ Includes cases where a woman does not know whether she earned more or less than her husband

Table 15.4 Ownership of assets

Percent distribution of women age 15-49 by ownership of housing, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who own a house:			Percentage who do not own a house	Total	Number of women
	Alone	Jointly	Alone and jointly			
Age						
15-19	0.2	4.9	12.6	82.3	100.0	1,911
20-24	0.3	12.3	12.3	75.0	100.0	2,031
25-29	1.3	15.7	14.9	68.0	100.0	1,921
30-34	2.6	21.7	13.7	61.9	100.0	1,551
35-39	5.8	23.9	16.3	54.0	100.0	1,240
40-44	7.8	26.8	21.0	44.4	100.0	1,068
45-49	13.3	29.1	18.2	39.4	100.0	996
Residence						
Urban	7.5	18.6	13.3	60.6	100.0	2,694
Rural	2.0	16.9	15.5	65.6	100.0	8,024
Region						
Dushanbe	10.1	24.9	8.4	56.6	100.0	955
GBAO	3.8	28.3	19.9	48.0	100.0	209
Sughd	1.9	18.2	11.7	68.2	100.0	3,292
DRS	2.4	19.1	5.1	73.3	100.0	2,342
Khatlon	3.6	13.0	24.8	58.6	100.0	3,920
FTF districts	4.2	19.9	11.5	64.3	100.0	2,096
Education						
None/primary	3.2	20.1	15.5	61.2	100.0	619
General basic	2.2	15.5	13.9	68.4	100.0	3,615
General secondary	3.2	18.4	16.9	61.6	100.0	4,624
Professional primary/ middle	5.5	15.7	14.2	64.6	100.0	860
Higher	7.0	18.6	9.8	64.5	100.0	1,000
Wealth quintile						
Lowest	3.0	18.7	15.8	62.6	100.0	2,113
Second	1.9	17.2	18.4	62.5	100.0	2,101
Middle	1.4	16.9	17.3	64.4	100.0	2,109
Fourth	1.8	14.2	12.5	71.5	100.0	2,155
Highest	8.6	19.6	10.9	60.9	100.0	2,240
Total	3.4	17.3	14.9	64.4	100.0	10,718

Table 15.5 Ownership of title or deed for house

Among women age 15-49 who own a house, percent distribution by whether the house owned has a title or deed and whether or not the woman's name appears on the title or deed, according to background characteristics, Tajikistan DHS 2017

Background characteristic	House has a title or deed and:				Total	Number who own a house ²
	Woman's name is on title/deed	Woman's name is not on title/deed	Does not have a title/deed	Don't know/missing ¹		
Age						
15-19	55.5	0.3	41.3	2.9	100.0	338
20-24	40.4	0.0	46.9	12.7	100.0	507
25-29	44.2	0.7	42.8	12.4	100.0	614
30-34	52.6	0.9	40.4	6.1	100.0	590
35-39	62.8	1.7	30.1	5.4	100.0	570
40-44	68.3	0.8	27.9	3.0	100.0	594
45-49	76.8	1.6	19.3	2.2	100.0	604
Residence						
Urban	65.4	0.7	29.0	4.9	100.0	1,061
Rural	54.7	1.0	37.2	7.1	100.0	2,757
Region						
Dushanbe	62.8	0.8	32.0	4.4	100.0	415
GBAO	50.2	6.7	37.3	5.8	100.0	109
Sughd	51.9	0.8	36.0	11.3	100.0	1,047
DRS	23.1	1.5	67.3	8.1	100.0	625
Khatlon	73.9	0.4	22.3	3.4	100.0	1,622
FTF districts	56.2	0.0	38.7	5.0	100.0	747
Education						
None/primary	45.2	0.4	45.5	8.9	100.0	240
General basic	54.7	0.4	38.4	6.5	100.0	1,143
General secondary	58.5	1.3	33.2	7.0	100.0	1,776
Professional primary/middle	70.0	0.6	25.1	4.3	100.0	305
Higher	61.1	1.0	33.4	4.4	100.0	354
Wealth quintile						
Lowest	61.5	1.5	29.7	7.4	100.0	791
Second	59.8	0.8	34.1	5.4	100.0	787
Middle	46.9	0.6	42.7	9.7	100.0	750
Fourth	53.7	0.9	39.3	6.2	100.0	615
Highest	64.3	0.7	30.6	4.3	100.0	875
Total	57.7	0.9	34.9	6.5	100.0	3,818

¹ Includes women whose house has a title/deed but they do not know if their name is on it (or this information is missing) and women who do not know if the house has a title/deed (or this information is missing)

² Includes sole, joint, or sole and joint ownership

Table 15.6 Ownership and use of bank accounts and mobile phones

Percentage of women age 15-49 who use an account in a bank or other financial institution and percentage who own a mobile phone, and among women who own a mobile phone, percentage who use it for financial transactions, according to background characteristics, Tajikistan DHS 2017

Background characteristic	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	0.7	21.4	1,911	11.4	408
20-24	0.8	42.3	2,031	8.6	860
25-29	1.0	53.3	1,921	8.4	1,025
30-34	1.4	64.9	1,551	8.9	1,007
35-39	1.1	74.7	1,240	7.3	926
40-44	1.9	74.5	1,068	9.3	796
45-49	1.4	74.1	996	9.1	738
Residence					
Urban	3.0	71.3	2,694	18.0	1,920
Rural	0.5	47.8	8,024	4.2	3,839
Region					
Dushanbe	5.6	80.6	955	36.8	770
GBAO	2.3	75.7	209	4.1	158
Sughd	0.7	64.2	3,292	2.2	2,115
DRS	0.5	47.0	2,342	1.7	1,101
Khatlon	0.6	41.2	3,920	9.3	1,615
FTF districts	0.5	42.3	2,096	11.3	886
Education					
None/primary	1.9	41.9	619	10.5	260
General basic	0.3	41.8	3,615	6.9	1,512
General secondary	0.9	53.1	4,624	7.9	2,457
Professional primary/ middle	0.7	73.8	860	7.2	635
Higher	4.6	89.5	1,000	14.9	895
Wealth quintile					
Lowest	0.3	41.5	2,113	3.0	877
Second	0.4	41.8	2,101	6.0	878
Middle	0.5	49.0	2,109	4.2	1,033
Fourth	0.7	58.1	2,155	3.8	1,252
Highest	3.4	76.8	2,240	19.5	1,720
Total	1.1	53.7	10,718	8.8	5,759

Table 15.7 Participation in decision making

Percent distribution of currently married women age 15-49 by person who usually makes decisions about various issues, Tajikistan DHS 2017

Decision	Mainly wife	Wife and husband jointly	Mainly husband	Someone else	Other	Total	Number of women
Own health care	12.2	33.6	33.0	7.2	14.0	100.0	7,747
Major household purchases	7.8	29.7	35.4	10.2	16.9	100.0	7,747
Visits to her family or relatives	11.8	31.8	33.1	8.7	14.6	100.0	7,747

Table 15.8 Women's participation in decision making by background characteristics

Percentage of currently married women age 15-49 who usually make specific decisions either alone or jointly with their husband, by background characteristics, Tajikistan DHS 2017

Background characteristic	Specific decisions				None of the three decisions	Number of women
	Woman's own health care	Making major household purchases	Visits to her family or relatives	All three decisions		
Age						
15-19	14.1	9.8	14.0	7.9	81.2	240
20-24	23.3	14.6	20.6	11.9	71.9	1,557
25-29	34.8	25.5	32.3	21.4	59.2	1,688
30-34	47.2	39.7	45.1	35.2	47.9	1,374
35-39	61.8	52.5	58.7	47.6	33.4	1,089
40-44	68.8	62.5	67.2	56.0	25.3	953
45-49	68.7	60.6	68.2	55.2	25.5	847
Employment (past 12 months)						
Not employed	38.6	31.5	37.3	27.4	55.8	5,795
Employed for cash	68.6	56.9	63.1	51.3	26.7	1,638
Employed not for cash	56.9	47.5	58.7	43.8	37.4	314
Number of living children						
0	25.2	17.2	21.8	13.8	70.5	737
1-2	37.9	28.9	35.4	24.9	56.9	2,865
3-4	53.9	46.4	52.5	41.6	40.2	3,313
5+	58.4	50.0	55.9	45.2	37.2	833
Residence						
Urban	54.2	47.5	49.1	40.1	39.5	1,803
Rural	43.1	34.5	42.0	31.1	51.8	5,944
Region						
Dushanbe	53.5	54.6	46.7	40.2	36.2	585
GBAO	86.5	74.9	80.2	62.4	6.7	144
Sughd	59.6	44.3	58.7	40.9	33.5	2,533
DRS	34.6	30.6	33.6	26.6	60.8	1,709
Khatlon	36.1	30.1	33.5	27.0	60.5	2,776
FTF districts	37.2	34.4	35.4	31.8	60.4	1,548
Education						
None/primary	33.3	26.1	30.5	23.8	63.9	468
General basic	37.8	31.7	36.9	27.5	56.6	2,532
General secondary	48.1	39.0	46.6	34.7	46.3	3,442
Professional primary/middle	55.2	45.9	52.0	41.7	39.6	626
Higher	62.7	51.7	54.9	44.8	31.5	680
Wealth quintile						
Lowest	47.2	38.3	46.2	33.4	46.1	1,469
Second	43.6	36.1	42.1	32.8	52.1	1,508
Middle	39.7	31.0	38.8	28.1	55.7	1,606
Fourth	43.6	34.9	41.7	31.5	51.5	1,668
Highest	55.1	48.2	49.9	40.6	38.4	1,496
Total	45.7	37.5	43.6	33.1	48.9	7,747

Table 15.9 Attitude toward wife beating

Percentage of all women age 15-49 who agree that a husband is justified in hitting or beating his wife for specific reasons, by background characteristics, Tajikistan DHS 2017

Background characteristic	Husband is justified in hitting or beating his wife if she:					Percentage who agree with at least one specified reason	Number of women
	Burns the food	Argues with him	Goes out without telling him	Neglects the children	Refuses to have sexual intercourse with him		
Age							
15-19	18.1	31.8	31.4	32.5	9.8	44.2	1,911
20-24	31.5	56.4	54.7	53.1	28.9	66.5	2,031
25-29	35.3	58.1	58.2	55.2	32.6	69.6	1,921
30-34	34.6	58.3	58.3	55.4	33.7	69.8	1,551
35-39	28.6	57.6	56.5	54.2	29.9	68.4	1,240
40-44	29.4	55.6	51.8	51.2	27.4	66.1	1,068
45-49	30.1	52.8	51.6	51.6	27.5	64.8	996
Employment (past 12 months)							
Not employed	31.2	53.9	52.9	51.5	28.1	65.1	7,985
Employed for cash	24.9	46.9	45.7	44.1	22.3	58.3	2,310
Employed not for cash	25.1	51.3	51.2	51.5	23.7	63.6	423
Number of living children							
0	20.8	37.3	35.6	36.6	13.8	48.7	3,215
1-2	34.2	58.5	57.8	55.2	32.8	69.8	3,216
3-4	31.8	58.3	56.7	54.2	31.5	69.2	3,428
5+	36.5	61.3	64.2	62.9	32.4	73.3	859
Marital status							
Never married	17.6	30.8	29.5	31.5	8.3	43.4	2,388
Married or living together	33.4	59.3	58.4	55.7	32.3	70.1	7,747
Divorced/separated/widowed	27.6	47.0	46.4	48.5	27.7	59.5	583
Residence							
Urban	23.5	45.1	41.0	41.7	20.7	55.1	2,694
Rural	31.6	54.7	54.8	52.7	28.7	66.4	8,024
Region							
Dushanbe	19.3	37.5	29.9	36.9	16.1	45.3	955
GBAO	24.0	32.1	33.0	48.1	12.1	57.7	209
Sughd	19.2	53.6	41.8	38.1	20.1	59.5	3,292
DRS	33.3	49.6	54.1	50.0	32.0	64.2	2,342
Khatlon	38.9	57.5	63.8	63.1	32.3	71.4	3,920
FTF districts	42.4	53.1	57.2	56.7	37.9	63.3	2,096
Education							
None/primary	40.7	56.5	59.9	57.3	35.7	67.1	619
General basic	32.1	54.1	56.2	54.1	29.4	66.7	3,615
General secondary	30.3	54.9	52.4	51.0	27.4	65.4	4,624
Professional primary/middle	21.6	46.7	40.9	40.7	19.8	57.9	860
Higher	17.1	35.8	32.2	33.1	13.7	46.4	1,000
Wealth quintile							
Lowest	30.8	55.8	53.7	52.3	26.9	66.3	2,113
Second	32.2	53.2	57.0	54.0	26.4	66.5	2,101
Middle	34.4	58.8	58.3	56.2	32.9	70.5	2,109
Fourth	28.9	53.5	52.2	48.7	28.4	65.4	2,155
Highest	22.0	41.0	36.2	39.1	19.0	50.0	2,240
Total	29.6	52.3	51.3	49.9	26.7	63.6	10,718

Table 15.10 Attitudes toward negotiating safer sexual relations with husband

Percentage of women age 15-49 who believe that a woman is justified in refusing to have sexual intercourse with her husband if she knows that he has sexual intercourse with other women, and percentage who believe that a woman is justified in asking that they use a condom if she knows that her husband has a sexually transmitted infection (STI), according to background characteristics, Tajikistan DHS 2017

Background characteristic	Woman is justified in:		Number of women
	Refusing to have sexual intercourse with her husband if she knows he has sex with other women	Asking that they use a condom if she knows that her husband has an STI	
Age			
15-24	44.8	41.8	3,942
15-19	27.1	23.8	1,911
20-24	61.4	58.7	2,031
25-29	63.6	63.3	1,921
30-39	69.4	67.4	2,791
40-49	70.8	69.7	2,064
Marital status			
Never married	28.6	25.9	2,388
Ever had sex	59.7	55.1	48
Never had sex	27.9	25.3	2,340
Married/living together	68.7	67.1	7,747
Divorced/separated/widowed	64.8	62.5	583
Residence			
Urban	63.2	62.8	2,694
Rural	58.3	56.0	8,024
Region			
Dushanbe	58.8	58.5	955
GBAO	75.0	78.6	209
Sughd	69.1	68.7	3,292
DRS	47.4	40.6	2,342
Khatlon	58.2	57.4	3,920
FTF districts	51.3	48.1	2,096
Education			
None/primary	47.8	41.0	619
General basic	51.9	49.6	3,615
General secondary	61.5	60.0	4,624
Professional primary/middle	73.9	74.8	860
Higher	73.1	71.9	1,000
Wealth quintile			
Lowest	54.6	51.4	2,113
Second	56.1	53.9	2,101
Middle	59.8	57.2	2,109
Fourth	63.9	62.4	2,155
Highest	63.1	63.1	2,240
Total	59.6	57.7	10,718

Table 15.11 Ability to negotiate sexual relations with husband

Percentage of currently married women age 15-49 who can say no to their husband if they do not want to have sexual intercourse, and percentage who can ask their husband to use a condom, according to background characteristics, Tajikistan DHS 2017

Background characteristic	Percentage who can say no to their husband if they do not want to have sexual intercourse	Percentage who can ask their husband to use a condom	Number of women
Age			
15-24	45.8	41.4	1,797
15-19	34.2	35.4	240
20-24	47.6	42.3	1,557
25-29	49.7	46.7	1,688
30-39	54.3	52.4	2,462
40-49	61.2	56.6	1,800
Residence			
Urban	61.5	59.5	1,803
Rural	50.3	46.6	5,944
Region			
Dushanbe	68.0	70.6	585
GBAO	69.5	64.6	144
Sughd	67.9	65.3	2,533
DRS	52.6	48.1	1,709
Khatlon	35.4	31.0	2,776
FTF districts	40.4	33.3	1,548
Education			
None/primary	40.2	34.6	468
General basic	47.3	43.9	2,532
General secondary	52.6	48.9	3,442
Professional primary/ middle	66.5	63.8	626
Higher	71.4	71.5	680
Wealth quintile			
Lowest	47.5	42.0	1,469
Second	46.5	44.7	1,508
Middle	50.5	46.4	1,606
Fourth	55.5	53.0	1,668
Highest	64.4	61.6	1,496
Total	52.9	49.6	7,747

Table 15.12 Indicators of women's empowerment

Percentage of currently married women age 15-49 who participate in all decision making and percentage who disagree with all of the reasons justifying wife beating, by value on each of the indicators of women's empowerment, Tajikistan DHS 2017

Empowerment indicator	Percentage who participate in all decision making	Percentage who disagree with all of the reasons justifying wife beating	Number of women
Number of decisions in which women participate¹			
0	na	26.4	3,790
1-2	na	31.4	1,389
3	na	34.2	2,568
Number of reasons for which wife beating is justified²			
0	37.9	na	2,317
1-2	35.9	na	1,516
3-4	35.7	na	2,087
5	21.9	na	1,827

na = Not applicable

¹ See Table 15.8 for the list of decisions.

² See Table 15.9 for the list of reasons.

Table 15.13 Current use of contraception by women's empowerment

Percent distribution of currently married women age 15-49 by current contraceptive method, according to selected indicators of women's status, Tajikistan DHS 2017

Empowerment indicator	Any method	Any modern method ¹	Modern methods			Any traditional method	Not currently using	Total	Number of women
			Female sterilization	Temporary modern female methods ²	Male condom				
Number of decisions in which women participate³									
0	23.7	21.7	0.6	18.6	2.5	2.0	76.3	100.0	3,790
1-2	34.5	32.0	0.7	26.3	5.0	2.5	65.5	100.0	1,389
3	34.6	32.4	1.1	26.2	5.1	2.2	65.4	100.0	2,568
Number of reasons for which wife beating is justified⁴									
0	32.1	29.4	0.8	22.8	5.8	2.7	67.9	100.0	2,317
1-2	30.8	29.5	1.0	24.6	4.0	1.3	69.2	100.0	1,516
3-4	28.8	26.8	0.8	22.7	3.2	2.1	71.2	100.0	2,087
5	24.9	22.6	0.6	20.2	1.8	2.3	75.1	100.0	1,827
Total	29.3	27.1	0.8	22.5	3.8	2.2	70.7	100.0	7,747

Note: If more than one method is used, only the most effective method is considered in this tabulation.

¹ Female sterilization, male sterilization, pill, IUD, injectables, implants, male condom, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods

² Pill, IUD, injectables, implants, female condom, emergency contraception, lactational amenorrhea method (LAM), and other modern methods

³ See Table 15.8 for the list of decisions.

⁴ See Table 15.9 for the list of reasons.

Table 15.14 Ideal number of children and unmet need for family planning by women's empowerment

Mean ideal number of children for women age 15-49 and percentage of currently married women age 15-49 with an unmet need for family planning, by indicators of women's empowerment, Tajikistan DHS 2017

Empowerment indicator	Mean ideal number of children ¹	Number of women	Percentage of currently married women with an unmet need for family planning ²			Number of women
			For spacing	For limiting	Total	
Number of decisions in which women participate³						
0	3.7	3,779	15.4	8.3	23.7	3,790
1-2	3.7	1,384	10.1	12.9	23.0	1,389
3	3.8	2,556	6.0	15.1	21.1	2,568
Number of reasons for which wife beating is justified⁴						
0	3.3	3,852	10.9	12.5	23.4	2,317
1-2	3.3	2,082	10.6	12.5	23.0	1,516
3-4	3.5	2,610	10.2	10.2	20.4	2,087
5	3.7	2,075	13.8	10.5	24.3	1,827
Total	3.4	10,619	11.4	11.4	22.7	7,747

¹ Mean excludes respondents who gave non-numeric responses.

² Figures for unmet need correspond to the revised definition described in Bradley et al. 2012.

³ Restricted to currently married women. See Table 15.8 for the list of decisions.

⁴ See Table 15.9 for the list of reasons.

Table 15.15 Reproductive health care by women's empowerment

Percentage of women age 15-49 with a live birth in the 5 years preceding the survey who received antenatal care, delivery assistance, and postnatal care from health personnel for the most recent birth, according to indicators of women's empowerment, Tajikistan DHS 2017

Empowerment indicator	Percentage receiving antenatal care from a skilled provider ¹	Percentage receiving delivery care from a skilled provider ¹	Percentage of women with a postnatal checkup in the first 2 days after birth ²	Number of women with a child born in the last 5 years
Number of decisions in which women participate³				
0	91.2	93.4	88.3	2,466
1-2	95.7	97.4	92.3	744
3	91.5	95.6	92.0	1,046
Number of reasons for which wife beating is justified⁴				
0	93.9	96.0	92.3	1,232
1-2	93.5	94.4	91.3	821
3-4	92.6	94.2	89.6	1,205
5	87.6	93.8	86.6	1,137
Total	91.8	94.6	89.9	4,395

¹ Skilled provider includes doctor, nurse, or midwife.

² Includes women who received a postnatal checkup from a doctor, nurse, midwife, or traditional birth attendant in the first 2 days after the birth. Includes women who gave birth in a health facility and those who did not give birth in a health facility.

³ Restricted to currently married women. See Table 15.8 for the list of decisions.

⁴ See Table 15.9 for the list of reasons.

REFERENCES

- ADA, American Diabetes Association. 2004. "Diagnosis and Classification of Diabetes Mellitus." *Diabetes Care* 27 Suppl 1 (January): S5–10.
- ADA, American Diabetes Association. 2014. "Diagnosis and Classification of Diabetes Mellitus." *Diabetes Care* 37 Suppl 1 (January): S81-90. <https://doi.org/10.2337/dc14-S081>.
- Bradley, Sarah E. K., Trevor N. Croft, Joy D. Fishel, and Charles F. Westoff. 2012. "Revising Unmet Need for Family Planning." <http://dhsprogram.com/publications/publication-as25-analytical-studies.cfm>.
- Cedefop. 2014. "Coping with Changes in International Classifications of Sectors and Occupations." Cedefop research paper 43. Luxembourg: Publications Office of the European Union. <http://www.cedefop.europa.eu/en/publications-and-resources/publications/5543>.
- CDC, Centers for Disease Control and Prevention. 1998. "Recommendations to Prevent and Control Iron Deficiency in the United States." *Morbidity and Mortality Weekly Report* 47 (RR-3): 1–29.
- DeMaeyer, E. M., P. Dallman, J. Michael Gurney, L. Hallberg, S. K. Sood, S. G. Srikantia, and World Health Organization. 1989. "Preventing and controlling iron deficiency anaemia through primary health care : a guide for health administrators and programme managers." <http://apps.who.int/iris/handle/10665/39849>.
- FAO and FHI 360. 2016. "Minimum Dietary Diversity for Women: A Guide to Measurement." Rome: FAO. <http://www.fao.org/3/a-i5486e.pdf>.
- GOT, Government of the Republic of Tajikistan. 2008. *Land Code of the Republic of Tajikistan. As Amended by Law No. 498 of December 12, 1997; Law No. 746 of May 14, 1999; Law No. 15 of May 12, 2001; Law No. 23 of February 28, 2004; Law No. 199 of July 28, 2006; Law No. 357 of January 5, 2008; Law No. 405 of June 2008.*
- GOT, Government of the Republic of Tajikistan. 2010. "National Health Strategy of the Republic of Tajikistan 2010–2020." Dushanbe: Republic of Tajikistan.
- ILO, International Labour Organization. 2012. "ISCO - International Standard Classification of Occupations." ISCO-08. Geneva: ILO. <http://www.ilo.org/public/english/bureau/stat/isco/>.
- Martin-Prével, Y., P. Allemand, D. Wiesmann, M. Arimond, T. Ballard, M. Deitchler, M. C. Dop, G. Kennedy, W. T. Lee, and M. Mousi. 2015. *Moving Forward on Choosing a Standard Operational Indicator of Women's Dietary Diversity*. Rome: FAO.
- Pippitt, Karly, Marlana Li, and Holly E. Gurgle. 2016. "Diabetes Mellitus: Screening and Diagnosis." *American Family Physician* 93 (2): 103–9.
- Rutstein, S. O. and G. Rojas. 2006. *Guide to DHS Statistics*. Calverton, Maryland, USA: ORC Macro.
- SA, Statistical Agency under the President of the Republic of Tajikistan. 2016a. "Healthcare in the Republic of Tajikistan." Dushanbe: Republic of Tajikistan.
- SA, Statistical Agency under the President of the Republic of Tajikistan. 2016b. "Report Based on the Labor Force Survey Conducted during the Period of July 20 to August 20, 2016." Dushanbe: Republic of Tajikistan.

State Committee on Statistics (SCS) of the Republic of Tajikistan. 2007. *Tajikistan Multiple Indicator Cluster Survey 2005*. Final Report. Dushanbe, Tajikistan: SCS.

UN, United Nations. 2006. "The Secretary-General's in-Depth Study on All Forms of Violence against Women." New York: United Nations. <http://www.un.org/womenwatch/daw/vaw/SGstudyvaw.htm#more>.

UNAIDS, The Joint United Nations Programme on HIV/AIDS. 2016. "Country Overview - Tajikistan." Unaid.Org. 2016. <http://www.un.org/womenwatch/daw/vaw/SGstudyvaw.htm#more>.

WHO, World Health Organization. 1998. "Complementary Feeding of Young Children in Developing Countries." WHO/NUT/98.1. Geneva: WHO. http://www.who.int/nutrition/publications/infantfeeding/WHO_NUT_98.1/en/.

WHO, World Health Organization. 1999. "1999 World Health Organization-International Society of Hypertension Guidelines for the Management of Hypertension. Guidelines Subcommittee." *Journal of Hypertension* 17 (2): 151–83.

WHO, World Health Organization. 2001. "Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women." Geneva: WHO. http://www.who.int/gender-equity-rights/knowledge/who_fch_gwh_01.1/en/.

WHO, World Health Organization. 2006. "Neonatal and perinatal mortality: Country, Regional and Global Estimates." Geneva: WHO. http://apps.who.int/iris/bitstream/handle/10665/43444/9241563206_eng.pdf

WHO, World Health Organization. 2008. "Indicators for Assessing Infant and Young Child Feeding Practices." Geneva: WHO. http://www.who.int/maternal_child_adolescent/documents/9789241596664/en/.

WHO, World Health Organization. 2011. "ICD-10 International Statistical Classification of Diseases and Related Health Problems", 10th revision, volume 2, Instruction manual, 2010 edition. Geneva: WHO

WHO, World Health Organization. 2016. "WHO recommendations on antenatal care for a positive pregnancy experience." Geneva: WHO

WHO, World Health Organization. 2017. "Noncommunicable Diseases Progress Monitor 2017." Geneva: WHO. <http://www.who.int/nmh/publications/ncd-progress-monitor-2017/en/>.

World Bank. 2018. "World Development Indicators Table: Personal Remittances, Received (% of GDP) - Tajikistan." Worldbank.Org. 2018. <https://data.worldbank.org/indicator/BX.TRF.PWKR.DT.GD.ZS?locations=TJ>.

A.1 INTRODUCTION

The 2017 Tajikistan Demographic and Health Survey (TjDHS) is the second DHS survey conducted in Tajikistan, following the 2012 survey. A nationally representative sample of approximately 8,052 households was selected for the 2017 TjDHS from 366 clusters. All women age 15-49 who were usual members of the selected households or who spent the night before the survey in the selected households were eligible for an interview. The main objectives of the interviews with women were to provide up-to-date information on fertility and fertility preferences, abortions, awareness and use of family planning methods, maternal and child health and nutrition, childhood mortality, domestic violence against women, child discipline, awareness and behavior regarding HIV/AIDS and other sexually transmitted infections (STIs), and other health-related issues.

In addition, the TjDHS collected domestic violence data from one randomly selected woman age 15-49 in each household. The survey also collected information on several biomarkers for women as well as for young children. All women age 15-49 living in the households sampled for the 2017 TjDHS were asked to provide a few drops of blood from a finger prick for on-the-spot anemia testing, and parents or guardians of all children age 6-59 months living in the interviewed households were asked for permission to test the children for anemia. All women age 15-49 and all children age 0-59 months were also eligible for collection of anthropometric indicators (height and weight).

There are five administrative regions in Tajikistan: Dushanbe, Sughd, Khatlon, Districts of Republican Subordination (DRS), and Gorno-Badakhshan Autonomous Oblast (GBAO). In addition to providing estimates for the country as a whole and for urban and rural areas separately, the survey provides estimates for each of these five regions. Also, as in the previous TjDHS survey, the sample was designed to allow certain indicators to be presented for the 12 districts in the Khatlon region covered under the Feed the Future program (FTF); these 12 districts were combined as a single FTF domain.

A.2 SAMPLE FRAME

The sampling frame used for the 2017 TjDHS is the 2010 Tajikistan Population and Housing Census (TPHC), conducted by the Statistical Agency (SA). The sampling frame is a list of enumeration areas (EAs) and natural villages covering all urban and rural areas of the country. An EA is a geographical area, usually a city block, consisting of a specified number of households; each EA serves as a counting unit for the population census. The sampling frame contains information about EA location, type of residence (urban or rural), and estimated number of residential households (as enumerated in the 2010 TPHC). A sketch map delineating EA geographic boundaries was available for each urban EA. Such maps were not available for rural areas. The Statistical Agency collected a list of natural villages through its regional offices in 2010 with estimated village populations.

Each of Tajikistan's five regions is subdivided into districts, each district into census divisions, each census division into instruction areas, and each instruction area into urban EAs or rural villages. **Table A.1** shows the distribution of residential households at the time of the census by region and by type of residence (urban or rural). The table indicates that nearly two-thirds of residential households in Tajikistan are in Sughd (32.6%) and Khatlon (31.4%), whereas only 2.7% are in GBAO. One-third of residential households are in urban areas. Other than the predominantly urban Dushanbe, the regional share of urban households varies from 16.8% in GBAO to 30.0% in Sughd.

Table A.1 Households

Distribution of residential households in the sampling frame by region and residence, Tajikistan DHS 2017

Region	Number of households in frame			Percentage of households in the frame	Percentage urban
	Urban	Rural	Total		
Dushanbe	141,966	na	141,966	12.4	100.0
Sughd	111,902	260,495	372,397	32.6	30.0
Khatlon	76,785	282,755	359,540	31.4	21.4
DRS	41,857	196,912	238,769	20.9	17.5
GBAO	5,254	25,958	31,212	2.7	16.8
Tajikistan	377,764	766,120	1,143,884	100.0	33.0

na = Not applicable

Source: 2010 TPHC, conducted by the Statistical Agency

Table A.2 shows the number of EAs in the 2017 TjDHS sampling frame and the average number of residential households in each EA by region and type of residence. Of the 20,478 EAs, 5,110 are in urban areas and 15,368 are in rural areas. Overall, each EA has an average of 56 households, with EAs in urban areas averaging 74 households and those in rural areas averaging 50 households. The average size of EAs makes them convenient as a first-stage survey cluster, with a sample “take” of around 22 households per cluster at the second stage of sampling. Therefore, a 2017 TjDHS cluster corresponds to a census EA.

Table A.2 Enumeration areas

Distribution of the enumeration areas in the sampling frame and average number of residential households per enumeration area, by region and residence, Tajikistan DHS 2017

Region	Number of enumeration areas in frame			Average number of residential households in enumeration area		
	Urban	Rural	Total	Urban	Rural	Total
Dushanbe	1,897	na	1,897	75	na	75
Sughd	1,425	4,662	6,087	79	56	61
Khatlon	1,145	6,098	7,243	67	46	50
DRS	571	4,039	4,610	73	49	52
GBAO	72	569	641	73	46	49
Tajikistan	5,110	15,368	20,478	74	50	56

na = Not applicable

Source: 2010 TPHC, conducted by the Statistical Agency

A.3 SAMPLE DESIGN AND IMPLEMENTATION

The sample for the 2017 TjDHS was a stratified sample selected in two stages. In the first stage, 366 EAs were selected with stratified probability proportional to size (PPS) sampling from the sampling frame. The EA size is the number of residential households in the EA as recorded in the census. Stratification was achieved by separating every region into urban and rural areas; Dushanbe has only urban areas. Therefore, the 2017 TjDHS contained nine sampling strata (four rural strata and five urban strata). Samples were selected independently in every stratum with a predetermined number of EAs selected, as shown in **Table A.3**. Implicit stratification and proportional allocation were achieved at each of the lower administrative levels by sorting the sampling frame within each sampling stratum before sample selection, according to administrative units at different levels, and by using probability proportional to size selection in the first stage of sampling.

A household listing operation was carried out in all of the selected EAs before the main survey. The listing operation consisted of visiting each of the 366 selected EAs, drawing a location map and a detailed sketch map, and recording on the household listing forms all residential households found in the EA, including the address and the name of the head of the household. The resulting list of households served as the sampling frame for selection of households in the second stage.

In the second stage, a fixed number of 22 households were selected for each EA with equal probability systematic selection from the list created during the household listing. Household selection was performed

in the central office prior to the main survey. The survey interviewers interviewed only the pre-selected households. To prevent bias, no replacements and no changes in the pre-selected households were allowed in the implementing stages. As noted, all women age 15-49 who were usual members of the selected households or who spent the night before the survey in the selected households were eligible for an interview.

Table A.3 shows the allocation of enumeration areas (clusters) and households selected by region and by urban-rural residence. Among the 366 clusters selected, 166 were from urban areas and 200 were from rural areas. With regard to the household sample, 3,652 households were from urban areas and 4,400 from rural areas.

Region	Allocation of clusters			Allocation of selected households		
	Urban	Rural	Total	Urban	Rural	Total
Dushanbe	75	0	75	1,650	0	1,650
Sughd	29	51	80	638	1,122	1,760
Khatlon	36	54	90	792	1,188	1,980
DRS	17	62	79	374	1,364	1,738
GBAO	9	33	42	198	726	924
Tajikistan	166	200	366	3,652	4,400	8,052

Table A.4 shows the expected number of completed interviews with women age 15-49 by region and type of residence. The total expected number of interviewed women in the 2017 TjDHS was 11,537 (4,403 women in urban areas and 7,134 in rural areas). These calculations were based on the results of the 2012 TjDHS using the following assumptions: a household completion rate of 94.4% in urban areas and 97.9% in rural areas, a response rate among women of 99% in urban areas and 98% in rural areas, and an average number of women age 15-49 per household of 1.29 in urban areas and 1.69 in rural areas.

Region	Women age 15-49		
	Urban	Rural	Total
Dushanbe	1,990	0	1,990
Sughd	769	1,819	2,588
Khatlon	955	1,926	2,881
DRS	450	2,211	2,661
GBAO	239	1,178	1,417
Tajikistan	4,403	7,134	11,537

A.4 SAMPLE PROBABILITIES AND SAMPLING WEIGHTS

As a result of the nonproportional allocation of the sample to the different reporting domains, sampling weights will be required for any analysis using the 2017 TjDHS data to ensure the actual representativeness of the sample. Because the 2017 TjDHS sample is a two-stage stratified cluster sample, sampling weights were calculated based on sampling probabilities, which were calculated separately for each sampling stage and for each cluster. We use the following notations:

- P_{1hi} : first-stage sampling probability of the i^{th} cluster in stratum h
- P_{2hi} : second-stage sampling probability within the i^{th} cluster (households)
- P_{hi} : overall sampling probability of any households within the i^{th} cluster in stratum h

Let a_h be the number of clusters selected in stratum h , M_{hi} the number of households according to the sampling frame in the i^{th} cluster, and $\sum M_{hi}$ the total number of households in stratum h . The probability of selecting the i^{th} cluster in stratum h is calculated as follows:

$$P_{1hi} = \frac{a_h M_{hi}}{\sum M_{hi}}$$

Let L_{hi} be the number of households in the household listing operation in cluster i in stratum h , and let g_{hi} be the number of households selected in the cluster. The second-stage selection probability for each household in the cluster is calculated as follows:

$$P_{2hi} = \frac{g_{hi}}{L_{hi}}$$

The overall selection probability of each household in cluster i of stratum h is therefore the product of the two stages of selection probabilities:

$$P_{hi} = P_{1hi} \times P_{2hi}$$

The design weight for each household in cluster i of stratum h is the inverse of its overall selection probability:

$$W_{hi} = 1 / P_{hi}$$

A spreadsheet containing all of the sampling parameters and selection probabilities was prepared to facilitate the calculation of the design weights. Design weights were adjusted for nonresponse to obtain sampling weights for households and for women. In turn, the sampling weights were normalized so that, at the national level, the total number of weighted cases would be equal to the total number of unweighted cases. Normalized weights are relative weights that are valid for estimating means, proportions, and ratios but not for estimating population totals and pooled data. In addition, the number of cases obtained by applying the normalized weights has no direct relation with survey precision because it is relative; therefore, especially for oversampled areas, the number of weighted cases will be much smaller than the number of unweighted cases, which is directly related to survey precision.

Two sets of general weights were calculated for the 2017 TjDHS:

- one set for all households selected for the survey
- one set for women

In addition, there were two sets of special weights that applied to the subsample of women age 15-49 selected randomly for the domestic violence module and the subsample of children age 1-14 selected for the child discipline module.

A.5 SURVEY IMPLEMENTATION

Table A.5 presents the results of the household and individual interviews and response rates by residence and region.

Table A.5 Sample implementation

Percent distribution of households and eligible women age 15-49 by results of the household and individual interviews and household, eligible women's, and overall women's response rates, according to residence and region (unweighted), Tajikistan DHS 2017

Result	Residence		Region					Total
	Urban	Rural	Dushanbe	GBAO	Sughd	DRS	Khatlon	
Selected households								
Completed (C)	96.3	98.1	95.9	96.9	97.5	96.4	99.1	97.3
Household present but no competent respondent at home (HP)	0.6	0.6	0.6	1.2	0.5	0.9	0.2	0.6
Postponed (P)	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0
Refused (R)	0.5	0.1	0.5	0.0	0.2	0.4	0.1	0.3
Dwelling not found (DNF)	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Household absent (HA)	2.1	1.2	2.1	1.9	1.7	2.1	0.5	1.6
Dwelling vacant/address not a dwelling (DV)	0.2	0.0	0.5	0.0	0.0	0.1	0.0	0.1
Dwelling destroyed (DD)	0.2	0.0	0.4	0.0	0.0	0.0	0.1	0.1
Other (O)	0.1	0.0	0.1	0.0	0.2	0.1	0.0	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of sampled households	3,654	4,410	1,650	924	1,770	1,738	1,982	8,064
Household response rate (HRR) ¹	98.8	99.3	98.8	98.8	99.3	98.6	99.6	99.1
Eligible women								
Completed (EWC)	99.3	99.2	99.0	99.6	99.1	99.1	99.5	99.2
Not at home (EWNH)	0.3	0.4	0.3	0.0	0.4	0.6	0.3	0.4
Refused (EWR)	0.1	0.0	0.1	0.1	0.0	0.0	0.0	0.0
Partly completed (EWPC)	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Incapacitated (EWI)	0.4	0.3	0.5	0.2	0.5	0.2	0.2	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	4,243	6,556	1,832	977	2,256	2,501	3,233	10,799
Eligible women response rate (EWRR) ²	99.3	99.2	99.0	99.6	99.1	99.1	99.5	99.2
Overall women response rate (OWRR) ³	98.1	98.6	97.8	98.4	98.4	97.8	99.2	98.3

¹ Using the number of households falling into specific response categories, the household response rate (HRR) is calculated as:

$$\frac{100 * C}{C + HP + P + R + DNF}$$

² The eligible women response rate (EWRR) is equivalent to the percentage of interviews completed (EWC).

³ The overall women response rate (OWRR) is calculated as:

$$OWRR = HRR * EWRR/100$$

The estimates from a sample survey are affected by two types of errors: nonsampling errors and sampling errors. Nonsampling 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 2017 Tajikistan Demographic and Health Survey (TjDHS) to minimize this type of error, nonsampling 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 2017 TjDHS is only one of many samples that could have been selected from the same population, using the same design and expected 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 as a simple random sample, it would have been possible to use straightforward formulas for calculating sampling errors. However, the 2017 TjDHS sample is the result of a multi-stage stratified design, and, consequently, it was necessary to use more complex formulas. Sampling errors are computed in SAS using programs developed by ICF. These programs use the Taylor linearization method to estimate variances for survey estimates that are means, proportions, or ratios. The Jackknife repeated replication method is used for variance estimation of more complex statistics such as fertility and mortality rates.

The Taylor linearization method treats any percentage or average 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:

$$SE^2(r) = var(r) = \frac{1-f}{x^2} \sum_{h=1}^H \left[\frac{m_h}{m_h - 1} \left(\sum_{i=1}^{m_h} z_{hi}^2 - \frac{z_h^2}{m_h} \right) \right]$$

in which

$$z_{hi} = y_{hi} - rx_{hi} \text{ and } z_h = y_h - rx_h$$

where h represents the stratum, which varies from 1 to H ;

- m_h is the total number of clusters selected in the h^{th} stratum;
- y_{hi} is the sum of the weighted values of variable y in the i^{th} cluster in the h^{th} stratum;
- x_{hi} is the sum of the weighted number of cases in the i^{th} cluster in the h^{th} stratum; and
- f is the overall sampling fraction, which is so small that it is ignored.

The Jackknife repeated replication method derives estimates of complex rates from each of several replications of the parent sample and calculates standard errors for these estimates using simple formulas. Each replication considers *all but one* cluster in the calculation of the estimates. Pseudo-independent replications are thus created. In the 2017 TjDHS, there were 366 non-empty clusters. Hence, 366 replications were created. The variance of a rate r is calculated as follows:

$$SE^2(r) = var(r) = \frac{1}{k(k-1)} \sum_{i=1}^k (r_i - r)^2$$

in which

$$r_i = kr - (k-1)r_{(i)}$$

where r is the estimate computed from the full sample of 366 clusters,

- $r_{(i)}$ is the estimate computed from the reduced sample of 365 clusters (i^{th} cluster excluded),
- and
- k is the total number of clusters.

In addition to the standard error, the design effect (DEFT) for each estimate is also calculated. The design effect is defined as the ratio between the standard error using the given sample design and the standard error that would result if a simple random sample had been used. A DEFT value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a value greater than 1.0 indicates the increase in the sampling error due to the use of a more complex and less statistically efficient design. Relative standard errors and confidence limits for the estimates are also calculated.

Sampling errors for the 2017 TjDHS 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 urban and rural areas, and for each of the country's five regions. For each variable, the type of statistic (mean, proportion, or rate) and the base population are given in Table B.1. Tables B.2 through B.10 present the value of the statistic (R), its standard error (SE), the number of unweighted (N) and weighted (WN) cases, the design effect (DEFT), the relative standard error (SE/R), and the 95% confidence limits ($R \pm 2SE$) for each selected variable. When the value of the estimate R is 0 or 1, the value of the standard error is zero, and therefore the following are considered undefined: DEFT, the relative standard error and the confidence limits.

The confidence interval (e.g., as calculated for ideal number of children according to women age 15-49) can be interpreted as follows: the overall average from the national sample is 3.44, and its standard error is 0.02. Therefore, to obtain the 95% confidence limits, one adds and subtracts twice the standard error to the sample estimate, that is, $3.44 \pm 2 \times 0.02$. There is a high probability (95%) that the true ideal average number of children according to women age 15-49 is between 3.40 and 3.48.

For the total sample, the value of the DEFT, averaged over all variables, is 1.5. This means that, due to multi-stage clustering of the sample, the average standard error is increased by a factor of 1.5 over that in an equivalent simple random sample.

Table B.1 List of selected variables for sampling errors, Tajikistan DHS 2017

Variable	Estimate	Base population
Urban residence	Proportion	Women 15-49
Literacy	Proportion	Women 15-49
No education	Proportion	Women 15-49
Secondary education or higher	Proportion	Women 15-49
Never married/never in union	Proportion	Women 15-49
Currently married/in union	Proportion	Women 15-49
Married before age 18	Proportion	Women 20-49
Had sexual intercourse before age 18	Proportion	Women 20-49
Currently pregnant	Proportion	Women 15-49
Know any contraceptive method	Proportion	Currently married women 15-49
Know a modern method	Proportion	Currently married women 15-49
Currently using any method	Proportion	Currently married women 15-49
Currently using a modern method	Proportion	Currently married women 15-49
Currently using pill	Proportion	Currently married women 15-49
Currently using IUD	Proportion	Currently married women 15-49
Currently using male condom	Proportion	Currently married women 15-49
Currently using injectables	Proportion	Currently married women 15-49
Currently using implants	Proportion	Currently married women 15-49
Currently using female sterilization	Proportion	Currently married women 15-49
Currently using rhythm	Proportion	Currently married women 15-49
Currently using withdrawal	Proportion	Currently married women 15-49
Used public sector source	Proportion	Current users of modern method
Want no more children	Proportion	Currently married women 15-49
Want to delay next birth at least 2 years	Proportion	Currently married women 15-49
Ideal number of children	Mean	Women 15-49
Mothers received antenatal care for last birth	Proportion	Women with at least one live birth in past 5 years
Births with skilled attendant at delivery	Proportion	Births occurring 1-59 months before survey
Treated with ORS	Proportion	Children under 5 with diarrhea in past 2 weeks
Sought medical treatment for diarrhea	Proportion	Children under 5 with diarrhea in past 2 weeks
Ever had vaccination card	Proportion	Children 12-23 months
Received BCG vaccination	Proportion	Children 12-23 months
Received birth dose HepB vaccination	Proportion	Children 12-23 months
Received DPT-HepB-Hib vaccination (3 doses)	Proportion	Children 12-23 months
Received birth dose polio 0 vaccination	Proportion	Children 12-23 months
Received polio vaccination (3 doses)	Proportion	Children 12-23 months
Received rotavirus vaccination (2 doses)	Proportion	Children 12-23 months
Received all age-appropriate vaccinations (12-23 months)	Proportion	Children 12-23 months
Received measles and rubella vaccination	Proportion	Children 24-35 months
Received DPT vaccination (fourth dose)	Proportion	Children 24-35 months
Received polio vaccination (fourth dose)	Proportion	Children 24-35 months
Received all basic vaccinations (24-35 months)	Proportion	Children 24-35 months
Received all age-appropriate vaccinations (24-35 months)	Proportion	Children 24-35 months
Height-for-age (-2 SD)	Proportion	Children under 5 who were measured
Weight-for-height (-2 SD)	Proportion	Children under 5 who were measured
Weight-for-age (-2 SD)	Proportion	Children under 5 who were measured
Body mass index (BMI) <18.5	Proportion	Women 15-49 who were measured
Body mass index (BMI) ≥25	Proportion	Women 15-49 who were measured
Prevalence of anemia (children 6-59 months)	Proportion	Children 6-59 months who were tested
Prevalence of anemia (women 15-49)	Proportion	Women 15-49 who were tested
Had an HIV test and received results in past 12 months	Proportion	Women 15-49
Discriminatory attitudes towards people living with HIV	Proportion	Women who have heard of HIV/AIDS
Prevalence of hypertension	Proportion	Women 15-49 with blood pressure measured
Ever experienced any physical violence since age 15	Proportion	Women 15-49
Ever experienced any sexual violence	Proportion	Women 15-49
Ever experienced any physical or sexual violence by husband/partner	Proportion	Ever-married women 15-49
Ever experienced any physical or sexual violence by husband/partner in last 12 months	Proportion	Ever-married women 15-49
Experienced any violent discipline in last month (children age 1-14)	Proportion	Children 1-14
Total fertility rate (3 years)	Rate	Woman-years of exposure to childbearing
Total abortion rate (3 years)	Rate	Woman-years of exposure to childbearing
Neonatal mortality rate ¹	Rate	Children exposed to the risk of mortality
Postneonatal mortality rate ¹	Rate	Children exposed to the risk of mortality
Infant mortality rate ¹	Rate	Children exposed to the risk of mortality
Child mortality rate ¹	Rate	Children exposed to the risk of mortality
Under-5 mortality rate ¹	Rate	Children exposed to the risk of mortality

¹The mortality rates are calculated for 5 years before the survey for the national sample, urban, and rural samples and for the 10 years before the survey for regional samples

Table B.2 Sampling errors: Total sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.251	0.007	10,718	10,718	1.707	0.028	0.237	0.266
Literacy	0.945	0.005	10,718	10,718	2.275	0.005	0.935	0.955
No education	0.021	0.003	10,718	10,718	2.348	0.157	0.014	0.027
Secondary education or higher	0.942	0.006	10,718	10,718	2.479	0.006	0.931	0.953
Never married/never in union	0.223	0.005	10,718	10,718	1.277	0.023	0.213	0.233
Currently married/in union	0.723	0.006	10,718	10,718	1.283	0.008	0.712	0.734
Married before age 18	0.123	0.005	8,820	8,807	1.484	0.042	0.112	0.133
Had sexual intercourse before age 18	0.101	0.005	8,820	8,807	1.653	0.052	0.091	0.112
Currently pregnant	0.074	0.003	10,718	10,718	1.252	0.043	0.068	0.081
Know any contraceptive method	0.976	0.003	7,545	7,747	1.436	0.003	0.971	0.981
Know a modern method	0.976	0.003	7,545	7,747	1.428	0.003	0.971	0.981
Currently using any method	0.293	0.008	7,545	7,747	1.553	0.028	0.277	0.309
Currently using a modern method	0.271	0.008	7,545	7,747	1.518	0.029	0.256	0.287
Currently using pill	0.019	0.002	7,545	7,747	1.258	0.103	0.015	0.023
Currently using IUD	0.183	0.006	7,545	7,747	1.423	0.035	0.170	0.195
Currently using male condom	0.038	0.003	7,545	7,747	1.408	0.081	0.032	0.044
Currently using injectables	0.013	0.002	7,545	7,747	1.472	0.150	0.009	0.016
Currently using implants	0.001	0.000	7,545	7,747	1.111	0.372	0.000	0.002
Currently using female sterilization	0.008	0.001	7,545	7,747	1.218	0.157	0.005	0.010
Currently using rhythm	0.000	0.000	7,545	7,747	na	na	na	na
Currently using withdrawal	0.021	0.003	7,545	7,747	1.775	0.138	0.015	0.027
Using public sector source	0.886	0.009	2,046	2,044	1.260	0.010	0.869	0.904
Want no more children	0.440	0.009	7,545	7,747	1.612	0.021	0.421	0.458
Want to delay next birth at least 2 years	0.053	0.004	7,545	7,747	1.390	0.068	0.046	0.060
Ideal number of children	3.439	0.018	10,619	10,619	1.432	0.005	3.402	3.476
Mothers received antenatal care for last birth	0.918	0.007	4,238	4,395	1.772	0.008	0.904	0.933
Births with skilled attendant at delivery	0.948	0.007	6,195	6,486	2.006	0.007	0.935	0.961
Treated with ORS	0.617	0.021	802	833	1.161	0.034	0.575	0.660
Sought medical treatment for diarrhea	0.493	0.021	802	833	1.150	0.043	0.451	0.536
Ever had vaccination card	0.968	0.005	1,297	1,394	1.030	0.005	0.958	0.977
Received BCG vaccination	0.953	0.007	1,297	1,394	1.206	0.007	0.939	0.967
Received birth dose HepB vaccination	0.937	0.007	1,297	1,394	1.083	0.008	0.923	0.951
Received DPT-HepB-Hib vaccination (3 doses)	0.870	0.011	1,297	1,394	1.171	0.012	0.848	0.891
Received birth dose polio 0 vaccination	0.939	0.007	1,297	1,394	1.098	0.008	0.924	0.953
Received polio vaccination (3 doses)	0.871	0.011	1,297	1,394	1.202	0.013	0.849	0.893
Received rotavirus vaccination (2 doses)	0.856	0.012	1,297	1,394	1.240	0.014	0.832	0.879
Received all age-appropriate vaccinations (12-23 months)	0.787	0.015	1,297	1,394	1.329	0.019	0.757	0.817
Received measles and rubella vaccination	0.873	0.014	1,247	1,269	1.424	0.016	0.846	0.900
Received DPT vaccination (fourth dose)	0.747	0.018	1,247	1,269	1.424	0.024	0.712	0.783
Received polio vaccination (fourth dose)	0.838	0.014	1,247	1,269	1.351	0.017	0.809	0.866
Received all basic vaccinations (24-35 months)	0.821	0.015	1,247	1,269	1.398	0.019	0.791	0.852
Received all age-appropriate vaccinations (24-35 months)	0.702	0.018	1,247	1,269	1.404	0.026	0.666	0.739
Height-for-age (-2 SD)	0.175	0.007	6,038	6,694	1.446	0.042	0.160	0.190
Weight-for-height (-2 SD)	0.056	0.004	6,022	6,684	1.263	0.067	0.048	0.063
Weight-for-age (-2 SD)	0.076	0.005	6,070	6,716	1.355	0.063	0.066	0.085
Body mass index (BMI) <18.5	0.074	0.003	9,748	9,677	1.246	0.045	0.067	0.080
Body mass index (BMI) ≥25	0.371	0.007	9,748	9,677	1.394	0.018	0.357	0.384
Prevalence of anemia (children 6-59 months)	0.415	0.012	5,461	6,036	1.722	0.028	0.391	0.438
Prevalence of anemia (women 15-49)	0.411	0.009	10,618	10,637	1.925	0.022	0.393	0.430
Had an HIV test and received results in past 12 months	0.086	0.005	10,718	10,718	1.696	0.053	0.077	0.095
Discriminatory attitudes towards people living with HIV	0.753	0.010	6,089	5,713	1.854	0.014	0.732	0.773
Prevalence of hypertension	0.098	0.004	10,655	10,672	1.374	0.040	0.090	0.106
Ever experienced any physical violence since age 15	0.237	0.015	6,353	6,353	2.839	0.064	0.207	0.267
Ever experienced any sexual violence	0.016	0.002	6,353	6,353	1.329	0.129	0.012	0.021
Ever experienced any physical or sexual violence by husband/partner	0.257	0.015	5,313	5,031	2.493	0.058	0.227	0.287
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.190	0.011	5,313	5,031	2.001	0.057	0.169	0.212
Experienced any violent discipline in last month (children age 1-14)	0.690	0.011	5,775	5,775	1.814	0.016	0.668	0.712
Total fertility rate (3 years)	3.769	0.063	30,535	30,522	1.205	0.017	3.643	3.895
Total abortion rate (3 years)	0.477	0.033	30,535	30,522	1.333	0.068	0.412	0.542
Neonatal mortality rate (5 years)	12.820	1.810	6,214	6,507	1.177	0.141	9.201	16.440
Post-neonatal mortality rate (5 years)	14.146	1.817	6,231	6,516	1.178	0.128	10.513	17.779
Infant mortality rate (5 years)	26.966	2.561	6,220	6,514	1.160	0.095	21.845	32.087
Child mortality rate (5 years)	6.584	1.346	6,108	6,350	1.310	0.204	3.893	9.275
Under-5 mortality rate (5 years)	33.372	3.001	6,230	6,527	1.234	0.090	27.370	39.374

na = Not applicable

Table B.3 Sampling errors: Urban sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	1.000	0.000	4,212	2,694	na	na	na	na
Literacy	0.976	0.004	4,212	2,694	1.561	0.004	0.969	0.984
No education	0.010	0.002	4,212	2,694	1.136	0.171	0.007	0.014
Secondary education or higher	0.950	0.005	4,212	2,694	1.422	0.005	0.940	0.959
Never married/never in union	0.245	0.008	4,212	2,694	1.131	0.031	0.230	0.260
Currently married/in union	0.669	0.009	4,212	2,694	1.294	0.014	0.651	0.688
Married before age 18	0.125	0.007	3,484	2,233	1.203	0.054	0.112	0.139
Had sexual intercourse before age 18	0.105	0.007	3,484	2,233	1.283	0.064	0.091	0.118
Currently pregnant	0.059	0.005	4,212	2,694	1.302	0.080	0.049	0.068
Know any contraceptive method	0.985	0.003	2,762	1,803	1.184	0.003	0.980	0.991
Know a modern method	0.985	0.003	2,762	1,803	1.184	0.003	0.980	0.991
Currently using any method	0.339	0.013	2,762	1,803	1.466	0.039	0.313	0.365
Currently using a modern method	0.315	0.013	2,762	1,803	1.418	0.040	0.290	0.341
Currently using pill	0.024	0.003	2,762	1,803	1.153	0.139	0.018	0.031
Currently using IUD	0.211	0.009	2,762	1,803	1.148	0.042	0.193	0.229
Currently using male condom	0.057	0.007	2,762	1,803	1.472	0.114	0.044	0.070
Currently using injectables	0.004	0.001	2,762	1,803	1.147	0.331	0.001	0.007
Currently using implants	0.001	0.001	2,762	1,803	1.182	0.628	0.000	0.003
Currently using female sterilization	0.006	0.002	2,762	1,803	1.189	0.282	0.003	0.010
Currently using rhythm	0.000	0.000	2,762	1,803	0.894	1.001	0.000	0.001
Currently using withdrawal	0.023	0.004	2,762	1,803	1.318	0.162	0.016	0.031
Using public sector source	0.864	0.015	821	554	1.270	0.018	0.833	0.894
Want no more children	0.435	0.011	2,762	1,803	1.206	0.026	0.412	0.457
Want to delay next birth at least 2 years	0.055	0.005	2,762	1,803	1.155	0.091	0.045	0.065
Ideal number of children	3.267	0.025	4,166	2,662	1.360	0.008	3.216	3.317
Mothers received antenatal care for last birth	0.952	0.007	1,465	964	1.237	0.007	0.939	0.966
Births with skilled attendant at delivery	0.976	0.004	2,061	1,354	1.236	0.005	0.968	0.985
Treated with ORS	0.659	0.034	275	169	1.118	0.052	0.590	0.728
Sought medical treatment for diarrhea	0.538	0.035	275	169	1.101	0.065	0.468	0.607
Ever had vaccination card	0.969	0.008	408	269	0.946	0.008	0.953	0.985
Received BCG vaccination	0.933	0.020	408	269	1.600	0.022	0.892	0.973
Received birth dose HepB vaccination	0.912	0.016	408	269	1.109	0.017	0.881	0.944
Received DPT-HepB-Hib vaccination (3 doses)	0.787	0.026	408	269	1.262	0.033	0.735	0.839
Received birth dose polio 0 vaccination	0.916	0.014	408	269	1.027	0.016	0.888	0.945
Received polio vaccination (3 doses)	0.808	0.024	408	269	1.209	0.030	0.760	0.856
Received rotavirus vaccination (2 doses)	0.771	0.027	408	269	1.259	0.034	0.718	0.825
Received all age-appropriate vaccinations (12-23 months)	0.682	0.030	408	269	1.274	0.044	0.623	0.742
Received measles and rubella vaccination	0.861	0.020	413	265	1.146	0.023	0.821	0.901
Received DPT vaccination (fourth dose)	0.695	0.031	413	265	1.339	0.044	0.634	0.756
Received polio vaccination (fourth dose)	0.810	0.023	413	265	1.193	0.029	0.763	0.856
Received all basic vaccinations (24-35 months)	0.763	0.025	413	265	1.180	0.033	0.713	0.813
Received all age-appropriate vaccinations (24-35 months)	0.626	0.032	413	265	1.305	0.050	0.563	0.689
Height-for-age (-2 SD)	0.174	0.012	1,999	1,398	1.294	0.067	0.151	0.198
Weight-for-height (-2 SD)	0.086	0.009	1,984	1,390	1.266	0.102	0.068	0.103
Weight-for-age (-2 SD)	0.090	0.008	2,011	1,405	1.240	0.093	0.073	0.107
Body mass index (BMI) <18.5	0.076	0.005	3,894	2,483	1.196	0.067	0.066	0.086
Body mass index (BMI) ≥25	0.408	0.010	3,894	2,483	1.248	0.024	0.388	0.428
Prevalence of anemia (children 6-59 months)	0.332	0.015	1,814	1,265	1.267	0.044	0.303	0.362
Prevalence of anemia (women 15-49)	0.392	0.012	4,162	2,665	1.649	0.032	0.367	0.417
Had an HIV test and received results in past 12 months	0.110	0.008	4,212	2,694	1.571	0.069	0.095	0.125
Discriminatory attitudes towards people living with HIV	0.743	0.013	2,861	1,806	1.582	0.017	0.717	0.769
Prevalence of hypertension	0.088	0.006	4,176	2,675	1.290	0.064	0.077	0.100
Ever experienced any physical violence since age 15	0.200	0.013	2,653	1,598	1.731	0.067	0.173	0.227
Ever experienced any sexual violence	0.015	0.003	2,653	1,598	1.142	0.178	0.010	0.021
Ever experienced any physical or sexual violence by husband/partner	0.225	0.014	2,162	1,225	1.607	0.064	0.196	0.254
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.162	0.012	2,162	1,225	1.526	0.075	0.137	0.186
Experienced any violent discipline in last month (children age 1-14)	0.655	0.018	2,310	1,354	1.782	0.027	0.620	0.691
Total fertility rate (3 years)	3.042	0.100	12,008	7,667	1.309	0.033	2.841	3.243
Total abortion rate (3 years)	0.435	0.043	12,008	7,667	1.113	0.099	0.348	0.521
Neonatal mortality rate (5 years)	11.461	2.466	2,067	1,359	1.020	0.215	6.530	16.392
Post-neonatal mortality rate (5 years)	5.559	2.006	2,078	1,365	1.195	0.361	1.546	9.571
Infant mortality rate (5 years)	17.020	2.980	2,068	1,359	1.023	0.175	11.060	22.979
Child mortality rate (5 years)	3.276	1.304	2,081	1,366	1.086	0.398	0.667	5.885
Under-5 mortality rate (5 years)	20.240	3.247	2,070	1,361	1.033	0.160	13.747	26.733

na = Not applicable

Table B.4 Sampling errors: Rural sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.000	0.000	6,506	8,024	na	na	na	na
Literacy	0.934	0.007	6,506	8,024	2.149	0.007	0.921	0.948
No education	0.024	0.004	6,506	8,024	2.244	0.178	0.015	0.032
Secondary education or higher	0.940	0.007	6,506	8,024	2.470	0.008	0.925	0.954
Never married/never in union	0.215	0.006	6,506	8,024	1.257	0.030	0.202	0.228
Currently married/in union	0.741	0.007	6,506	8,024	1.251	0.009	0.727	0.754
Married before age 18	0.122	0.007	5,336	6,574	1.464	0.054	0.109	0.135
Had sexual intercourse before age 18	0.100	0.007	5,336	6,574	1.640	0.067	0.087	0.114
Currently pregnant	0.079	0.004	6,506	8,024	1.175	0.050	0.072	0.087
Know any contraceptive method	0.974	0.003	4,783	5,944	1.373	0.003	0.967	0.980
Know a modern method	0.973	0.003	4,783	5,944	1.364	0.003	0.967	0.980
Currently using any method	0.279	0.010	4,783	5,944	1.510	0.035	0.259	0.298
Currently using a modern method	0.258	0.009	4,783	5,944	1.482	0.036	0.239	0.277
Currently using pill	0.018	0.002	4,783	5,944	1.253	0.135	0.013	0.022
Currently using IUD	0.174	0.008	4,783	5,944	1.423	0.045	0.158	0.190
Currently using male condom	0.032	0.004	4,783	5,944	1.376	0.109	0.025	0.040
Currently using injectables	0.015	0.002	4,783	5,944	1.373	0.160	0.010	0.020
Currently using implants	0.001	0.001	4,783	5,944	1.057	0.450	0.000	0.002
Currently using female sterilization	0.008	0.002	4,783	5,944	1.158	0.182	0.005	0.011
Currently using rhythm	0.000	0.000	4,783	5,944	0.768	0.788	0.000	0.001
Currently using withdrawal	0.021	0.004	4,783	5,944	1.782	0.177	0.013	0.028
Using public sector source	0.895	0.011	1,225	1,489	1.232	0.012	0.873	0.916
Want no more children	0.441	0.011	4,783	5,944	1.600	0.026	0.418	0.464
Want to delay next birth at least 2 years	0.053	0.004	4,783	5,944	1.369	0.084	0.044	0.061
Ideal number of children	3.496	0.023	6,453	7,957	1.370	0.007	3.450	3.543
Mothers received antenatal care for last birth	0.909	0.009	2,773	3,431	1.689	0.010	0.890	0.927
Births with skilled attendant at delivery	0.940	0.008	4,134	5,132	1.885	0.009	0.924	0.957
Treated with ORS	0.606	0.025	527	664	1.094	0.041	0.556	0.657
Sought medical treatment for diarrhea	0.482	0.025	527	664	1.082	0.051	0.432	0.532
Ever had vaccination card	0.967	0.006	889	1,125	0.978	0.006	0.956	0.979
Received BCG vaccination	0.957	0.007	889	1,125	1.049	0.007	0.943	0.971
Received birth dose HepB vaccination	0.943	0.008	889	1,125	1.029	0.008	0.927	0.959
Received DPT-HepB-Hib vaccination (3 doses)	0.889	0.012	889	1,125	1.103	0.013	0.866	0.913
Received birth dose polio 0 vaccination	0.944	0.008	889	1,125	1.064	0.009	0.928	0.960
Received polio vaccination (3 doses)	0.886	0.012	889	1,125	1.148	0.014	0.861	0.910
Received rotavirus vaccination (2 doses)	0.876	0.013	889	1,125	1.179	0.015	0.850	0.902
Received all age-appropriate vaccinations (12-23 months)	0.812	0.017	889	1,125	1.273	0.021	0.778	0.845
Received measles and rubella vaccination	0.876	0.016	834	1,004	1.388	0.019	0.843	0.909
Received DPT vaccination (fourth dose)	0.761	0.021	834	1,004	1.367	0.027	0.720	0.803
Received polio vaccination (fourth dose)	0.845	0.017	834	1,004	1.309	0.020	0.811	0.879
Received all basic vaccinations (24-35 months)	0.837	0.018	834	1,004	1.376	0.022	0.800	0.873
Received all age-appropriate vaccinations (24-35 months)	0.722	0.022	834	1,004	1.355	0.030	0.679	0.766
Height-for-age (-2 SD)	0.175	0.009	4,039	5,296	1.359	0.051	0.157	0.193
Weight-for-height (-2 SD)	0.048	0.004	4,038	5,294	1.231	0.087	0.039	0.056
Weight-for-age (-2 SD)	0.072	0.006	4,059	5,311	1.290	0.078	0.061	0.083
Body mass index (BMI) <18.5	0.073	0.004	5,854	7,195	1.201	0.056	0.064	0.081
Body mass index (BMI) ≥25	0.358	0.009	5,854	7,195	1.355	0.024	0.341	0.375
Prevalence of anemia (children 6-59 months)	0.437	0.014	3,647	4,771	1.629	0.032	0.409	0.465
Prevalence of anemia (women 15-49)	0.418	0.012	6,456	7,972	1.881	0.028	0.395	0.441
Had an HIV test and received results in past 12 months	0.078	0.006	6,506	8,024	1.672	0.071	0.067	0.089
Discriminatory attitudes towards people living with HIV	0.757	0.014	3,228	3,907	1.826	0.018	0.729	0.784
Prevalence of hypertension	0.102	0.005	6,479	7,997	1.309	0.048	0.092	0.112
Ever experienced any physical violence since age 15	0.249	0.020	3,700	4,755	2.757	0.079	0.210	0.289
Ever experienced any sexual violence	0.017	0.003	3,700	4,755	1.268	0.159	0.012	0.022
Ever experienced any physical or sexual violence by husband/partner	0.267	0.019	3,151	3,806	2.424	0.072	0.229	0.305
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.200	0.014	3,151	3,806	1.916	0.068	0.172	0.227
Experienced any violent discipline in last month (children age 1-14)	0.700	0.013	3,465	4,421	1.716	0.019	0.674	0.727
Total fertility rate (3 years)	4.000	0.073	18,526	22,855	1.139	0.018	3.854	4.146
Total abortion rate (3 years)	0.490	0.041	18,526	22,855	1.289	0.083	0.408	0.572
Neonatal mortality rate (5 years)	13.180	2.194	4,147	5,148	1.114	0.166	8.791	17.569
Post-neonatal mortality rate (5 years)	16.464	2.224	4,153	5,151	1.081	0.135	12.015	20.913
Infant mortality rate (5 years)	29.644	3.123	4,152	5,155	1.082	0.105	23.398	35.890
Child mortality rate (5 years)	7.582	1.702	4,027	4,985	1.221	0.224	4.178	10.986
Under-5 mortality rate (5 years)	37.001	3.682	4,160	5,166	1.152	0.099	29.638	44.364

na = Not applicable.

Table B.5 Sampling errors: Dushanbe sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	1.000	0.000	1,814	955	na	na	na	na
Literacy	0.988	0.003	1,814	955	1.133	0.003	0.982	0.994
No education	0.009	0.002	1,814	955	0.936	0.231	0.005	0.013
Secondary education or higher	0.938	0.008	1,814	955	1.488	0.009	0.921	0.955
Never married/never in union	0.299	0.011	1,814	955	1.019	0.037	0.277	0.321
Currently married/in union	0.613	0.012	1,814	955	1.055	0.020	0.588	0.637
Married before age 18	0.145	0.010	1,465	771	1.114	0.071	0.125	0.166
Had sexual intercourse before age 18	0.129	0.012	1,465	771	1.331	0.090	0.106	0.152
Currently pregnant	0.052	0.006	1,814	955	1.130	0.114	0.040	0.063
Know any contraceptive method	0.989	0.004	1,112	585	1.176	0.004	0.982	0.997
Know a modern method	0.989	0.004	1,112	585	1.176	0.004	0.982	0.997
Currently using any method	0.299	0.015	1,112	585	1.067	0.049	0.269	0.328
Currently using a modern method	0.295	0.015	1,112	585	1.060	0.049	0.266	0.324
Currently using pill	0.023	0.005	1,112	585	1.048	0.206	0.013	0.032
Currently using IUD	0.189	0.013	1,112	585	1.067	0.066	0.164	0.214
Currently using male condom	0.074	0.009	1,112	585	1.163	0.123	0.056	0.093
Currently using injectables	0.001	0.001	1,112	585	1.002	1.001	0.000	0.003
Currently using implants	0.001	0.001	1,112	585	0.759	1.009	0.000	0.002
Currently using female sterilization	0.006	0.003	1,112	585	1.229	0.493	0.000	0.011
Currently using rhythm	0.001	0.001	1,112	585	0.996	1.002	0.000	0.003
Currently using withdrawal	0.003	0.001	1,112	585	0.955	0.569	0.000	0.005
Using public sector source	0.799	0.024	335	174	1.098	0.030	0.751	0.848
Want no more children	0.362	0.015	1,112	585	1.040	0.041	0.332	0.392
Want to delay next birth at least 2 years	0.039	0.006	1,112	585	1.047	0.155	0.027	0.052
Ideal number of children	3.302	0.033	1,798	947	1.191	0.010	3.236	3.367
Mothers received antenatal care for last birth	0.943	0.012	570	299	1.232	0.013	0.919	0.967
Births with skilled attendant at delivery	0.983	0.007	790	413	1.530	0.007	0.968	0.997
Treated with ORS	0.710	0.058	73	39	1.036	0.081	0.595	0.826
Sought medical treatment for diarrhea	0.488	0.062	73	39	1.009	0.127	0.364	0.613
Ever had vaccination card	0.974	0.012	154	80	0.961	0.013	0.949	0.999
Received BCG vaccination	0.953	0.020	154	80	1.164	0.021	0.913	0.993
Received birth dose HepB vaccination	0.922	0.025	154	80	1.135	0.027	0.872	0.971
Received DPT-HepB-Hib vaccination (3 doses)	0.715	0.042	154	80	1.133	0.059	0.630	0.799
Received birth dose polio 0 vaccination	0.883	0.025	154	80	0.966	0.029	0.833	0.934
Received polio vaccination (3 doses)	0.743	0.041	154	80	1.136	0.055	0.660	0.825
Received rotavirus vaccination (2 doses)	0.659	0.046	154	80	1.183	0.070	0.566	0.751
Received all age-appropriate vaccinations (12-23 months)	0.563	0.047	154	80	1.159	0.084	0.468	0.658
Received measles and rubella vaccination	0.868	0.029	155	80	1.057	0.033	0.810	0.926
Received DPT vaccination (fourth dose)	0.669	0.042	155	80	1.094	0.063	0.585	0.753
Received polio vaccination (fourth dose)	0.753	0.040	155	80	1.142	0.053	0.673	0.833
Received all basic vaccinations (24-35 months)	0.705	0.034	155	80	0.918	0.048	0.637	0.773
Received all age-appropriate vaccinations (24-35 months)	0.619	0.042	155	80	1.055	0.068	0.535	0.703
Height-for-age (-2 SD)	0.180	0.020	741	410	1.237	0.110	0.140	0.220
Weight-for-height (-2 SD)	0.166	0.023	725	401	1.455	0.138	0.120	0.212
Weight-for-age (-2 SD)	0.131	0.019	751	415	1.426	0.146	0.093	0.169
Body mass index (BMI) <18.5	0.068	0.008	1,687	888	1.239	0.111	0.053	0.084
Body mass index (BMI) ≥25	0.389	0.010	1,687	888	0.873	0.027	0.368	0.410
Prevalence of anemia (children 6-59 months)	0.236	0.023	691	381	1.275	0.096	0.191	0.281
Prevalence of anemia (women 15-49)	0.361	0.017	1,784	939	1.526	0.048	0.326	0.396
Had an HIV test and received results in past 12 months	0.104	0.009	1,814	955	1.203	0.083	0.087	0.121
Discriminatory attitudes towards people living with HIV	0.720	0.018	1,331	694	1.451	0.025	0.685	0.756
Prevalence of hypertension	0.069	0.009	1,781	939	1.482	0.129	0.051	0.087
Ever experienced any physical violence since age 15	0.085	0.009	1,142	568	1.094	0.106	0.067	0.103
Ever experienced any sexual violence	0.013	0.004	1,142	568	1.074	0.277	0.006	0.020
Ever experienced any physical or sexual violence by husband/partner	0.114	0.011	884	396	1.039	0.097	0.092	0.137
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.098	0.010	884	396	0.988	0.101	0.078	0.118
Experienced any violent discipline in last month (children age 1-14)	0.698	0.022	993	452	1.503	0.031	0.654	0.742
Total fertility rate (3 years)	2.736	0.129	5,134	2,702	1.054	0.047	2.479	2.993
Total abortion rate (3 years)	0.434	0.061	5,134	2,702	1.003	0.141	0.312	0.557
Neonatal mortality rate (10 years)	6.686	2.185	1,591	838	0.990	0.327	2.315	11.056
Post-neonatal mortality rate (10 years)	1.835	1.049	1,601	844	0.986	0.572	0.000	3.933
Infant mortality rate (10 years)	8.521	2.351	1,591	838	0.962	0.276	3.820	13.222
Child mortality rate (10 years)	2.167	1.254	1,584	837	1.059	0.579	0.000	4.675
Under-5 mortality rate (10 years)	10.669	2.504	1,591	838	0.927	0.235	5.662	15.677

na = Not applicable

Table B.6 Sampling errors: GBAO sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.136	0.008	973	209	0.744	0.060	0.120	0.153
Literacy	0.976	0.008	973	209	1.568	0.008	0.961	0.992
No education	0.004	0.002	973	209	0.937	0.485	0.000	0.008
Secondary education or higher	0.988	0.003	973	209	0.975	0.003	0.982	0.995
Never married/never in union	0.266	0.015	973	209	1.068	0.057	0.236	0.297
Currently married/in union	0.690	0.017	973	209	1.140	0.024	0.656	0.724
Married before age 18	0.046	0.008	842	180	1.153	0.181	0.029	0.063
Had sexual intercourse before age 18	0.022	0.006	842	180	1.157	0.269	0.010	0.033
Currently pregnant	0.046	0.007	973	209	1.028	0.151	0.032	0.059
Know any contraceptive method	0.988	0.004	665	144	1.075	0.005	0.979	0.997
Know a modern method	0.988	0.004	665	144	1.075	0.005	0.979	0.997
Currently using any method	0.365	0.029	665	144	1.554	0.080	0.307	0.423
Currently using a modern method	0.356	0.028	665	144	1.523	0.080	0.300	0.413
Currently using pill	0.020	0.006	665	144	1.041	0.285	0.008	0.031
Currently using IUD	0.261	0.025	665	144	1.452	0.095	0.212	0.311
Currently using male condom	0.023	0.006	665	144	1.044	0.263	0.011	0.035
Currently using injectables	0.047	0.012	665	144	1.455	0.254	0.023	0.071
Currently using implants	0.001	0.001	665	144	0.991	1.003	0.000	0.004
Currently using female sterilization	0.004	0.003	665	144	1.083	0.699	0.000	0.009
Currently using rhythm	0.002	0.002	665	144	1.180	1.003	0.000	0.006
Currently using withdrawal	0.007	0.003	665	144	0.944	0.440	0.001	0.013
Using public sector source	0.856	0.023	234	52	0.982	0.026	0.811	0.901
Want no more children	0.333	0.017	665	144	0.933	0.051	0.299	0.367
Want to delay next birth at least 2 years	0.075	0.019	665	144	1.854	0.253	0.037	0.113
Ideal number of children	3.346	0.048	973	209	1.185	0.014	3.249	3.443
Mothers received antenatal care for last birth	0.943	0.016	353	76	1.337	0.017	0.910	0.976
Births with skilled attendant at delivery	0.980	0.018	490	106	2.224	0.019	0.943	1.016
Treated with ORS	0.640	0.059	58	12	0.811	0.092	0.522	0.757
Sought medical treatment for diarrhea	0.459	0.060	58	12	0.863	0.130	0.340	0.579
Ever had vaccination card	0.956	0.020	89	19	0.920	0.021	0.916	0.996
Received BCG vaccination	0.924	0.031	89	19	1.118	0.034	0.861	0.986
Received birth dose HepB vaccination	0.829	0.041	89	19	1.041	0.050	0.746	0.911
Received DPT-HepB-Hib vaccination (3 doses)	0.761	0.051	89	19	1.136	0.067	0.658	0.863
Received birth dose polio 0 vaccination	0.922	0.028	89	19	0.976	0.030	0.866	0.977
Received polio vaccination (3 doses)	0.733	0.063	89	19	1.342	0.086	0.608	0.859
Received rotavirus vaccination (2 doses)	0.772	0.046	89	19	1.045	0.060	0.680	0.865
Received all age-appropriate vaccinations (12-23 months)	0.588	0.069	89	19	1.324	0.117	0.450	0.725
Received measles and rubella vaccination	0.808	0.032	112	24	0.865	0.040	0.743	0.873
Received DPT vaccination (fourth dose)	0.606	0.042	112	24	0.900	0.070	0.521	0.691
Received polio vaccination (fourth dose)	0.740	0.045	112	24	1.057	0.061	0.650	0.830
Received all basic vaccinations (24-35 months)	0.697	0.040	112	24	0.899	0.057	0.617	0.777
Received all age-appropriate vaccinations (24-35 months)	0.530	0.045	112	24	0.930	0.084	0.441	0.620
Height-for-age (-2 SD)	0.319	0.042	500	116	1.873	0.131	0.236	0.403
Weight-for-height (-2 SD)	0.095	0.018	501	116	1.362	0.189	0.059	0.132
Weight-for-age (-2 SD)	0.158	0.024	512	119	1.315	0.150	0.111	0.206
Body mass index (BMI) <18.5	0.108	0.013	919	197	1.303	0.124	0.081	0.135
Body mass index (BMI) ≥25	0.254	0.022	919	197	1.536	0.087	0.210	0.298
Prevalence of anemia (children 6-59 months)	0.618	0.029	456	106	1.174	0.047	0.560	0.676
Prevalence of anemia (women 15-49)	0.549	0.024	960	206	1.465	0.043	0.502	0.596
Had an HIV test and received results in past 12 months	0.206	0.021	973	209	1.596	0.101	0.164	0.247
Discriminatory attitudes towards people living with HIV	0.734	0.030	806	172	1.946	0.041	0.674	0.795
Prevalence of hypertension	0.108	0.016	973	209	1.611	0.148	0.076	0.140
Ever experienced any physical violence since age 15	0.184	0.018	683	125	1.204	0.097	0.148	0.220
Ever experienced any sexual violence	0.011	0.003	683	125	0.743	0.272	0.005	0.017
Ever experienced any physical or sexual violence by husband/partner	0.207	0.020	549	95	1.155	0.097	0.167	0.247
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.188	0.020	549	95	1.181	0.105	0.149	0.228
Experienced any violent discipline in last month (children age 1-14)	0.812	0.026	603	109	1.651	0.032	0.759	0.865
Total fertility rate (3 years)	3.481	0.237	2,814	603	1.311	0.068	3.007	3.955
Total abortion rate (3 years)	0.236	0.072	2,814	603	0.968	0.304	0.093	0.380
Neonatal mortality rate (10 years)	11.779	4.242	913	197	1.105	0.360	3.294	20.263
Post-neonatal mortality rate (10 years)	14.274	3.931	909	196	1.014	0.275	6.413	22.135
Infant mortality rate (10 years)	26.053	5.849	914	197	1.081	0.224	14.355	37.750
Child mortality rate (10 years)	3.548	2.559	888	192	0.978	0.721	0.000	8.666
Under-5 mortality rate (10 years)	29.508	6.665	914	197	1.076	0.226	16.178	42.839

Table B.7 Sampling errors: Sughd sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.223	0.015	2,235	3,292	1.726	0.068	0.193	0.254
Literacy	0.974	0.005	2,235	3,292	1.420	0.005	0.965	0.984
No education	0.007	0.002	2,235	3,292	1.221	0.314	0.003	0.011
Secondary education or higher	0.987	0.003	2,235	3,292	1.356	0.003	0.980	0.993
Never married/never in union	0.191	0.011	2,235	3,292	1.334	0.058	0.169	0.213
Currently married/in union	0.769	0.012	2,235	3,292	1.341	0.016	0.745	0.793
Married before age 18	0.096	0.012	1,889	2,792	1.713	0.121	0.072	0.119
Had sexual intercourse before age 18	0.075	0.010	1,889	2,792	1.617	0.131	0.056	0.095
Currently pregnant	0.072	0.007	2,235	3,292	1.190	0.090	0.059	0.085
Know any contraceptive method	0.993	0.002	1,702	2,533	0.915	0.002	0.989	0.997
Know a modern method	0.992	0.002	1,702	2,533	0.911	0.002	0.989	0.996
Currently using any method	0.400	0.016	1,702	2,533	1.342	0.040	0.368	0.432
Currently using a modern method	0.343	0.015	1,702	2,533	1.332	0.045	0.312	0.374
Currently using pill	0.023	0.005	1,702	2,533	1.253	0.200	0.014	0.032
Currently using IUD	0.215	0.012	1,702	2,533	1.220	0.057	0.190	0.239
Currently using male condom	0.062	0.008	1,702	2,533	1.338	0.126	0.047	0.078
Currently using injectables	0.011	0.003	1,702	2,533	1.341	0.315	0.004	0.017
Currently using implants	0.001	0.001	1,702	2,533	0.822	0.706	0.000	0.002
Currently using female sterilization	0.012	0.003	1,702	2,533	1.089	0.244	0.006	0.017
Currently using rhythm	0.000	0.000	1,702	2,533	na	na	na	na
Currently using withdrawal	0.057	0.009	1,702	2,533	1.541	0.152	0.039	0.074
Using public sector source	0.882	0.017	549	823	1.237	0.019	0.848	0.916
Want no more children	0.536	0.015	1,702	2,533	1.206	0.027	0.507	0.566
Want to delay next birth at least 2 years	0.059	0.007	1,702	2,533	1.294	0.126	0.044	0.073
Ideal number of children	3.253	0.025	2,220	3,272	1.150	0.008	3.203	3.303
Mothers received antenatal care for last birth	0.978	0.007	877	1,301	1.340	0.007	0.964	0.991
Births with skilled attendant at delivery	0.995	0.002	1,247	1,853	1.122	0.002	0.991	1.000
Treated with ORS	0.669	0.056	88	122	1.066	0.084	0.557	0.781
Sought medical treatment for diarrhea	0.482	0.059	88	122	1.041	0.122	0.364	0.599
Ever had vaccination card	1.000	0.000	254	383	na	na	na	na
Received BCG vaccination	0.997	0.003	254	383	0.868	0.003	0.991	1.003
Received birth dose HepB vaccination	0.989	0.007	254	383	0.998	0.007	0.976	1.002
Received DPT-HepB-Hib vaccination (3 doses)	0.958	0.011	254	383	0.917	0.012	0.936	0.981
Received birth dose polio 0 vaccination	0.994	0.004	254	383	0.917	0.005	0.985	1.003
Received polio vaccination (3 doses)	0.944	0.014	254	383	1.005	0.015	0.916	0.973
Received rotavirus vaccination (2 doses)	0.950	0.013	254	383	0.965	0.014	0.924	0.976
Received all age-appropriate vaccinations (12-23 months)	0.913	0.018	254	383	1.021	0.020	0.877	0.949
Received measles and rubella vaccination	0.953	0.015	242	361	1.124	0.016	0.922	0.983
Received DPT vaccination (fourth dose)	0.829	0.029	242	361	1.207	0.035	0.771	0.887
Received polio vaccination (fourth dose)	0.921	0.017	242	361	1.009	0.019	0.887	0.956
Received all basic vaccinations (24-35 months)	0.918	0.019	242	361	1.100	0.021	0.879	0.956
Received all age-appropriate vaccinations (24-35 months)	0.794	0.030	242	361	1.162	0.038	0.734	0.854
Height-for-age (-2 SD)	0.161	0.012	1,227	1,929	1.055	0.076	0.136	0.186
Weight-for-height (-2 SD)	0.035	0.005	1,229	1,931	0.973	0.145	0.025	0.045
Weight-for-age (-2 SD)	0.045	0.008	1,230	1,933	1.409	0.179	0.029	0.062
Body mass index (BMI) <18.5	0.059	0.006	2,030	2,981	1.083	0.096	0.047	0.070
Body mass index (BMI) ≥25	0.412	0.014	2,030	2,981	1.309	0.035	0.384	0.441
Prevalence of anemia (children 6-59 months)	0.422	0.023	1,079	1,701	1.470	0.054	0.376	0.467
Prevalence of anemia (women 15-49)	0.399	0.014	2,214	3,262	1.365	0.036	0.370	0.427
Had an HIV test and received results in past 12 months	0.122	0.011	2,235	3,292	1.543	0.088	0.101	0.143
Discriminatory attitudes towards people living with HIV	0.712	0.020	1,592	2,334	1.726	0.028	0.672	0.751
Prevalence of hypertension	0.095	0.008	2,234	3,290	1.245	0.081	0.080	0.111
Ever experienced any physical violence since age 15	0.165	0.016	1,452	1,950	1.644	0.097	0.133	0.197
Ever experienced any sexual violence	0.012	0.003	1,452	1,950	1.099	0.258	0.006	0.019
Ever experienced any physical or sexual violence by husband/partner	0.193	0.018	1,271	1,608	1.635	0.094	0.156	0.229
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.120	0.014	1,271	1,608	1.504	0.115	0.092	0.147
Experienced any violent discipline in last month (children age 1-14)	0.598	0.021	1,222	1,674	1.500	0.035	0.556	0.640
Total fertility rate (3 years)	3.487	0.105	6,393	9,422	1.049	0.030	3.277	3.697
Total abortion rate (3 years)	0.393	0.055	6,393	9,422	1.167	0.139	0.284	0.502
Neonatal mortality rate (10 years)	13.355	2.561	2,306	3,418	1.010	0.192	8.232	18.477
Post-neonatal mortality rate (10 years)	12.271	2.674	2,300	3,410	1.135	0.218	6.923	17.620
Infant mortality rate (10 years)	25.626	3.731	2,307	3,420	1.103	0.146	18.165	33.087
Child mortality rate (10 years)	7.537	2.039	2,214	3,289	0.975	0.271	3.458	11.616
Under-5 mortality rate (10 years)	32.970	4.474	2,310	3,424	1.139	0.136	24.022	41.917

na = Not applicable

Table B.8 Sampling errors: DRS sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.129	0.009	2,479	2,342	1.316	0.069	0.111	0.146
Literacy	0.948	0.009	2,479	2,342	1.920	0.009	0.931	0.965
No education	0.027	0.006	2,479	2,342	1.768	0.214	0.015	0.038
Secondary education or higher	0.933	0.009	2,479	2,342	1.707	0.009	0.915	0.950
Never married/never in union	0.221	0.008	2,479	2,342	1.004	0.038	0.204	0.237
Currently married/in union	0.730	0.008	2,479	2,342	0.944	0.012	0.713	0.747
Married before age 18	0.157	0.009	2,003	1,887	1.052	0.054	0.140	0.175
Had sexual intercourse before age 18	0.134	0.008	2,003	1,887	1.074	0.061	0.117	0.150
Currently pregnant	0.085	0.006	2,479	2,342	1.150	0.076	0.072	0.098
Know any contraceptive method	0.960	0.006	1,810	1,709	1.266	0.006	0.948	0.972
Know a modern method	0.960	0.006	1,810	1,709	1.266	0.006	0.948	0.972
Currently using any method	0.253	0.013	1,810	1,709	1.288	0.052	0.227	0.280
Currently using a modern method	0.248	0.013	1,810	1,709	1.266	0.052	0.222	0.273
Currently using pill	0.017	0.003	1,810	1,709	1.084	0.197	0.010	0.023
Currently using IUD	0.184	0.012	1,810	1,709	1.339	0.066	0.159	0.208
Currently using male condom	0.031	0.005	1,810	1,709	1.215	0.160	0.021	0.041
Currently using injectables	0.007	0.002	1,810	1,709	0.978	0.269	0.003	0.011
Currently using implants	0.001	0.001	1,810	1,709	1.033	0.711	0.000	0.003
Currently using female sterilization	0.007	0.002	1,810	1,709	0.997	0.283	0.003	0.011
Currently using rhythm	0.001	0.001	1,810	1,709	0.966	1.002	0.000	0.002
Currently using withdrawal	0.005	0.002	1,810	1,709	0.948	0.308	0.002	0.008
Using public sector source	0.886	0.019	463	425	1.257	0.021	0.849	0.924
Want no more children	0.426	0.019	1,810	1,709	1.675	0.046	0.387	0.465
Want to delay next birth at least 2 years	0.054	0.006	1,810	1,709	1.133	0.111	0.042	0.066
Ideal number of children	3.250	0.046	2,444	2,310	1.613	0.014	3.159	3.342
Mothers received antenatal care for last birth	0.917	0.015	1,100	1,041	1.834	0.017	0.887	0.948
Births with skilled attendant at delivery	0.927	0.012	1,621	1,534	1.638	0.013	0.903	0.952
Treated with ORS	0.642	0.039	209	197	1.103	0.060	0.565	0.720
Sought medical treatment for diarrhea	0.486	0.042	209	197	1.162	0.087	0.402	0.571
Ever had vaccination card	0.908	0.017	342	326	1.080	0.019	0.874	0.941
Received BCG vaccination	0.880	0.023	342	326	1.336	0.026	0.834	0.927
Received birth dose HepB vaccination	0.850	0.021	342	326	1.095	0.025	0.808	0.892
Received DPT-HepB-Hib vaccination (3 doses)	0.738	0.027	342	326	1.123	0.037	0.684	0.792
Received birth dose polio 0 vaccination	0.873	0.019	342	326	1.089	0.022	0.834	0.912
Received polio vaccination (3 doses)	0.751	0.028	342	326	1.173	0.037	0.696	0.807
Received rotavirus vaccination (2 doses)	0.744	0.028	342	326	1.191	0.038	0.688	0.801
Received all age-appropriate vaccinations (12-23 months)	0.615	0.032	342	326	1.207	0.052	0.551	0.678
Received measles and rubella vaccination	0.781	0.029	348	324	1.266	0.037	0.723	0.840
Received DPT vaccination (fourth dose)	0.630	0.033	348	324	1.254	0.053	0.563	0.697
Received polio vaccination (fourth dose)	0.728	0.030	348	324	1.195	0.041	0.669	0.787
Received all basic vaccinations (24-35 months)	0.688	0.034	348	324	1.338	0.050	0.620	0.757
Received all age-appropriate vaccinations (24-35 months)	0.551	0.036	348	324	1.328	0.066	0.479	0.624
Height-for-age (-2 SD)	0.153	0.012	1,579	1,583	1.237	0.078	0.129	0.177
Weight-for-height (-2 SD)	0.046	0.006	1,577	1,581	1.059	0.125	0.034	0.057
Weight-for-age (-2 SD)	0.070	0.008	1,581	1,585	1.131	0.115	0.054	0.086
Body mass index (BMI) <18.5	0.072	0.006	2,205	2,075	1.013	0.078	0.061	0.083
Body mass index (BMI) ≥25	0.378	0.012	2,205	2,075	1.153	0.032	0.355	0.402
Prevalence of anemia (children 6-59 months)	0.355	0.017	1,419	1,423	1.237	0.047	0.322	0.389
Prevalence of anemia (women 15-49)	0.333	0.014	2,450	2,315	1.489	0.043	0.305	0.361
Had an HIV test and received results in past 12 months	0.056	0.006	2,479	2,342	1.399	0.116	0.043	0.069
Discriminatory attitudes towards people living with HIV	0.869	0.015	838	774	1.298	0.017	0.839	0.899
Prevalence of hypertension	0.116	0.008	2,452	2,317	1.245	0.070	0.100	0.132
Ever experienced any physical violence since age 15	0.202	0.020	1,328	1,380	1.807	0.099	0.162	0.242
Ever experienced any sexual violence	0.019	0.005	1,328	1,380	1.415	0.283	0.008	0.029
Ever experienced any physical or sexual violence by husband/partner	0.213	0.020	1,129	1,108	1.648	0.094	0.173	0.253
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.161	0.017	1,129	1,108	1.525	0.104	0.127	0.194
Experienced any violent discipline in last month (children age 1-14)	0.723	0.018	1,346	1,328	1.459	0.025	0.688	0.759
Total fertility rate (3 years)	4.024	0.116	7,009	6,621	1.070	0.029	3.792	4.256
Total abortion rate (3 years)	0.538	0.063	7,009	6,621	1.164	0.117	0.412	0.663
Neonatal mortality rate (10 years)	14.846	2.759	2,921	2,752	1.072	0.186	9.328	20.363
Post-neonatal mortality rate (10 years)	9.938	1.794	2,921	2,750	0.969	0.180	6.351	13.526
Infant mortality rate (10 years)	24.784	3.245	2,922	2,753	1.017	0.131	18.294	31.274
Child mortality rate (10 years)	4.882	1.709	2,823	2,656	1.205	0.350	1.465	8.299
Under-5 mortality rate (10 years)	29.545	3.601	2,923	2,754	1.024	0.122	22.344	36.746

Table B.9 Sampling errors: Khatlon sample, Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.172	0.010	3,217	3,920	1.515	0.059	0.152	0.192
Literacy	0.906	0.012	3,217	3,920	2.365	0.013	0.882	0.931
No education	0.032	0.008	3,217	3,920	2.527	0.245	0.016	0.048
Secondary education or higher	0.909	0.014	3,217	3,920	2.747	0.015	0.881	0.937
Never married/never in union	0.230	0.009	3,217	3,920	1.159	0.037	0.213	0.247
Currently married/in union	0.708	0.009	3,217	3,920	1.155	0.013	0.690	0.727
Married before age 18	0.125	0.008	2,621	3,177	1.277	0.066	0.108	0.141
Had sexual intercourse before age 18	0.103	0.010	2,621	3,177	1.748	0.101	0.083	0.124
Currently pregnant	0.076	0.005	3,217	3,920	1.129	0.069	0.066	0.087
Know any contraceptive method	0.968	0.006	2,256	2,776	1.539	0.006	0.956	0.979
Know a modern method	0.967	0.006	2,256	2,776	1.525	0.006	0.956	0.979
Currently using any method	0.214	0.013	2,256	2,776	1.529	0.062	0.188	0.241
Currently using a modern method	0.211	0.013	2,256	2,776	1.533	0.063	0.184	0.237
Currently using pill	0.017	0.003	2,256	2,776	1.061	0.169	0.011	0.023
Currently using IUD	0.147	0.011	2,256	2,776	1.495	0.076	0.125	0.170
Currently using male condom	0.014	0.003	2,256	2,776	1.128	0.200	0.008	0.020
Currently using injectables	0.019	0.004	2,256	2,776	1.446	0.221	0.010	0.027
Currently using implants	0.002	0.001	2,256	2,776	1.143	0.589	0.000	0.004
Currently using female sterilization	0.006	0.002	2,256	2,776	1.146	0.312	0.002	0.010
Currently using rhythm	0.000	0.000	2,256	2,776	na	na	na	na
Currently using withdrawal	0.004	0.001	2,256	2,776	0.967	0.337	0.001	0.006
Using public sector source	0.922	0.012	465	570	0.982	0.013	0.898	0.946
Want no more children	0.382	0.018	2,256	2,776	1.733	0.046	0.346	0.417
Want to delay next birth at least 2 years	0.049	0.006	2,256	2,776	1.366	0.127	0.037	0.061
Ideal number of children	3.746	0.038	3,184	3,881	1.427	0.010	3.671	3.821
Mothers received antenatal care for last birth	0.867	0.016	1,338	1,677	1.706	0.018	0.836	0.899
Births with skilled attendant at delivery	0.919	0.015	2,047	2,580	2.080	0.016	0.889	0.948
Treated with ORS	0.584	0.032	374	463	1.135	0.054	0.521	0.647
Sought medical treatment for diarrhea	0.501	0.029	374	463	1.080	0.059	0.442	0.559
Ever had vaccination card	0.979	0.006	458	585	0.991	0.007	0.966	0.992
Received BCG vaccination	0.965	0.009	458	585	1.052	0.009	0.947	0.983
Received birth dose HepB vaccination	0.958	0.010	458	585	1.018	0.010	0.939	0.977
Received DPT-HepB-Hib vaccination (3 doses)	0.910	0.016	458	585	1.191	0.017	0.878	0.941
Received birth dose polio 0 vaccination	0.947	0.012	458	585	1.129	0.012	0.924	0.971
Received polio vaccination (3 doses)	0.912	0.016	458	585	1.202	0.017	0.880	0.943
Received rotavirus vaccination (2 doses)	0.885	0.019	458	585	1.281	0.021	0.848	0.923
Received all age-appropriate vaccinations (12-23 months)	0.837	0.023	458	585	1.340	0.027	0.792	0.883
Received measles and rubella vaccination	0.879	0.027	390	479	1.615	0.030	0.826	0.933
Received DPT vaccination (fourth dose)	0.785	0.033	390	479	1.606	0.042	0.718	0.852
Received polio vaccination (fourth dose)	0.868	0.027	390	479	1.581	0.031	0.814	0.923
Received all basic vaccinations (24-35 months)	0.864	0.027	390	479	1.577	0.032	0.809	0.919
Received all age-appropriate vaccinations (24-35 months)	0.757	0.033	390	479	1.530	0.044	0.691	0.824
Height-for-age (-2 SD)	0.191	0.014	1,991	2,657	1.512	0.075	0.162	0.219
Weight-for-height (-2 SD)	0.058	0.007	1,990	2,655	1.329	0.121	0.044	0.073
Weight-for-age (-2 SD)	0.089	0.009	1,996	2,664	1.312	0.100	0.071	0.107
Body mass index (BMI) <18.5	0.086	0.007	2,907	3,536	1.274	0.077	0.073	0.100
Body mass index (BMI) ≥25	0.333	0.012	2,907	3,536	1.320	0.035	0.310	0.356
Prevalence of anemia (children 6-59 months)	0.464	0.021	1,816	2,424	1.744	0.046	0.422	0.506
Prevalence of anemia (women 15-49)	0.473	0.020	3,210	3,915	2.286	0.043	0.433	0.514
Had an HIV test and received results in past 12 months	0.063	0.007	3,217	3,920	1.695	0.116	0.048	0.077
Discriminatory attitudes towards people living with HIV	0.770	0.015	1,522	1,740	1.420	0.020	0.740	0.801
Prevalence of hypertension	0.097	0.007	3,215	3,916	1.307	0.070	0.084	0.111
Ever experienced any physical violence since age 15	0.358	0.034	1,748	2,330	2.998	0.096	0.289	0.427
Ever experienced any sexual violence	0.020	0.004	1,748	2,330	1.197	0.201	0.012	0.028
Ever experienced any physical or sexual violence by husband/partner	0.373	0.033	1,480	1,823	2.653	0.090	0.307	0.440
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.291	0.024	1,480	1,823	2.011	0.082	0.243	0.338
Experienced any violent discipline in last month (children age 1-14)	0.731	0.020	1,611	2,212	1.825	0.028	0.691	0.772
Total fertility rate (3 years)	4.090	0.117	9,186	11,174	1.228	0.029	3.855	4.325
Total abortion rate (3 years)	0.537	0.065	9,186	11,174	1.332	0.122	0.406	0.668
Neonatal mortality rate (10 years)	17.632	2.666	3,691	4,641	1.082	0.151	12.301	22.964
Post-neonatal mortality rate (10 years)	15.794	2.335	3,684	4,628	1.115	0.148	11.124	20.465
Infant mortality rate (10 years)	33.427	3.271	3,693	4,643	0.994	0.098	26.884	39.969
Child mortality rate (10 years)	7.086	1.686	3,575	4,484	1.114	0.238	3.714	10.459
Under-5 mortality rate (10 years)	40.276	3.689	3,698	4,649	0.997	0.092	32.899	47.653

na = Not applicable

Table B.10 Sampling errors: Feed the Future districts (FTF), Tajikistan DHS 2017

Variable	Value (R)	Standard error (SE)	Number of cases		Design effect (DEFT)	Relative error (SE/R)	Confidence limits	
			Un-weighted (N)	Weighted (WN)			Lower (R-2SE)	Upper (R+2SE)
Urban residence	0.097	0.010	1,578	2,096	1.336	0.103	0.077	0.117
Literacy	0.872	0.020	1,578	2,096	2.362	0.023	0.832	0.912
No education	0.045	0.014	1,578	2,096	2.613	0.302	0.018	0.073
Secondary education or higher	0.879	0.023	1,578	2,096	2.849	0.027	0.832	0.926
Never married/never in union	0.209	0.012	1,578	2,096	1.142	0.056	0.186	0.233
Currently married/in union	0.738	0.012	1,578	2,096	1.095	0.016	0.714	0.763
Married before age 18	0.120	0.012	1,299	1,724	1.340	0.101	0.096	0.144
Had sexual intercourse before age 18	0.119	0.016	1,299	1,724	1.765	0.133	0.087	0.151
Currently pregnant	0.081	0.008	1,578	2,096	1.239	0.105	0.064	0.098
Know any contraceptive method	0.956	0.009	1,157	1,548	1.519	0.010	0.938	0.975
Know a modern method	0.955	0.009	1,157	1,548	1.497	0.010	0.937	0.974
Currently using any method	0.186	0.016	1,157	1,548	1.393	0.086	0.155	0.218
Currently using a modern method	0.183	0.016	1,157	1,548	1.384	0.086	0.151	0.214
Currently using pill	0.011	0.003	1,157	1,548	1.026	0.289	0.005	0.017
Currently using IUD	0.130	0.014	1,157	1,548	1.433	0.109	0.101	0.158
Currently using male condom	0.012	0.004	1,157	1,548	1.159	0.308	0.005	0.020
Currently using injectables	0.015	0.004	1,157	1,548	1.167	0.277	0.007	0.024
Currently using implants	0.003	0.002	1,157	1,548	1.087	0.584	0.000	0.006
Currently using female sterilization	0.007	0.003	1,157	1,548	1.174	0.406	0.001	0.013
Currently using rhythm	0.000	0.000	1,157	1,548	na	na	0.000	0.000
Currently using withdrawal	0.004	0.002	1,157	1,548	0.937	0.448	0.000	0.007
Using public sector source	0.939	0.016	208	277	0.953	0.017	0.907	0.970
Want no more children	0.344	0.026	1,157	1,548	1.837	0.075	0.293	0.396
Want to delay next birth at least 2 years	0.052	0.009	1,157	1,548	1.406	0.177	0.033	0.070
Ideal number of children	3.831	0.047	1,561	2,073	1.232	0.012	3.738	3.924
Mothers received antenatal care for last birth	0.817	0.023	695	951	1.580	0.028	0.772	0.863
Births with skilled attendant at delivery	0.934	0.014	1,051	1,444	1.652	0.015	0.905	0.962
Treated with ORS	0.439	0.063	116	152	1.320	0.144	0.312	0.565
Sought medical treatment for diarrhea	0.529	0.048	116	152	0.979	0.091	0.433	0.624
Ever had vaccination card	0.972	0.010	236	326	0.991	0.011	0.951	0.993
Received BCG vaccination	0.961	0.013	236	326	1.051	0.013	0.935	0.987
Received birth dose HepB vaccination	0.961	0.013	236	326	1.045	0.013	0.935	0.987
Received DPT-HepB-Hib vaccination (3 doses)	0.942	0.018	236	326	1.226	0.019	0.906	0.979
Received birth dose polio 0 vaccination	0.932	0.018	236	326	1.130	0.019	0.896	0.968
Received polio vaccination (3 doses)	0.946	0.018	236	326	1.250	0.019	0.910	0.982
Received rotavirus vaccination (2 doses)	0.934	0.019	236	326	1.175	0.020	0.896	0.971
Received all age appropriate vaccinations (12-23 months)	0.893	0.023	236	326	1.170	0.026	0.847	0.940
Received measles and rubella vaccination	0.917	0.034	201	278	1.758	0.037	0.849	0.986
Received DPT vaccination (fourth dose)	0.830	0.043	201	278	1.651	0.052	0.744	0.916
Received polio vaccination (fourth dose)	0.891	0.036	201	278	1.633	0.040	0.820	0.963
Received all basic vaccinations (24-35 months)	0.903	0.035	201	278	1.668	0.039	0.833	0.972
Received all age appropriate vaccinations (24-35 months)	0.807	0.043	201	278	1.574	0.054	0.720	0.894
Height-for-age (-2SD)	0.179	0.017	1,014	1,477	1.290	0.093	0.146	0.213
Weight-for-height (-2SD)	0.062	0.011	1,012	1,475	1.398	0.173	0.040	0.083
Weight-for-age (-2SD)	0.078	0.010	1,016	1,481	1.093	0.124	0.059	0.098
Body Mass Index (BMI) <18.5	0.087	0.010	1,422	1,888	1.276	0.109	0.068	0.106
Body Mass Index (BMI) ≥25	0.345	0.013	1,422	1,888	1.055	0.039	0.318	0.372
Prevalence of anemia (children 6-59 months)	0.508	0.031	935	1,362	1.762	0.061	0.446	0.570
Prevalence of anemia (women 15-49)	0.543	0.023	1,576	2,095	1.800	0.042	0.497	0.588
Had an HIV test and received results in past 12 months	0.055	0.010	1,578	2,096	1.717	0.180	0.035	0.074
Discriminatory attitudes towards people with HIV	0.776	0.022	561	725	1.276	0.029	0.731	0.821
Prevalence of hypertension	0.105	0.010	1,576	2,093	1.309	0.096	0.084	0.125
Ever experienced any physical violence since age 15	0.217	0.023	844	1,211	1.610	0.105	0.171	0.263
Ever experienced any sexual violence	0.027	0.006	844	1,211	1.161	0.240	0.014	0.040
Ever experienced any physical or sexual violence by husband/partner	0.246	0.023	729	971	1.439	0.094	0.200	0.292
Ever experienced any physical or sexual violence by husband/partner in last 12 months	0.196	0.020	729	971	1.377	0.103	0.156	0.237
Experienced any violent discipline in last month (children age 1-14)	0.690	0.023	802	1,249	1.381	0.033	0.644	0.735
Total fertility rate (3 years)	4.088	0.166	4,525	6,014	1.229	0.041	3.757	4.420
Total abortion rate (3 years)	0.537	0.083	4,525	6,014	1.311	0.154	0.372	0.702
Neonatal mortality rate (10 years)	19.001	3.924	1,927	2,640	1.145	0.207	11.153	26.849
Post-neonatal mortality rate (10 years)	17.123	3.001	1,925	2,640	0.990	0.175	11.121	23.125
Infant mortality rate (10 years)	36.124	4.824	1,927	2,640	1.036	0.134	26.476	45.773
Child mortality rate (10 years)	8.354	2.509	1,899	2,590	1.104	0.300	3.336	13.373
Under-5 mortality rate (10 years)	44.177	5.306	1,930	2,644	1.026	0.120	33.565	54.789

FTF= 12 districts in Khatlon covered under the Feed the Future program

na = Not applicable

Table C.1 Household age distribution

Single-year age distribution of the de facto household population by sex (weighted), Tajikistan DHS 2017

Age	Female		Male		Age	Female		Male	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
0	628	2.7	639	3.1	37	265	1.1	170	0.8
1	715	3.0	761	3.7	38	280	1.2	204	1.0
2	705	3.0	682	3.3	39	259	1.1	184	0.9
3	680	2.9	748	3.6	40	207	0.9	189	0.9
4	622	2.6	588	2.8	41	221	0.9	137	0.7
5	582	2.5	550	2.7	42	283	1.2	188	0.9
6	655	2.8	653	3.1	43	221	0.9	178	0.9
7	571	2.4	637	3.1	44	207	0.9	159	0.8
8	552	2.3	564	2.7	45	249	1.1	153	0.7
9	485	2.1	496	2.4	46	242	1.0	179	0.9
10	424	1.8	510	2.5	47	218	0.9	147	0.7
11	436	1.8	406	2.0	48	195	0.8	204	1.0
12	422	1.8	454	2.2	49	158	0.7	187	0.9
13	423	1.8	406	2.0	50	326	1.4	156	0.8
14	438	1.9	432	2.1	51	250	1.1	176	0.8
15	334	1.4	489	2.4	52	241	1.0	185	0.9
16	441	1.9	440	2.1	53	216	0.9	167	0.8
17	436	1.8	514	2.5	54	189	0.8	166	0.8
18	434	1.8	344	1.7	55	220	0.9	202	1.0
19	402	1.7	294	1.4	56	215	0.9	187	0.9
20	464	2.0	270	1.3	57	222	0.9	205	1.0
21	428	1.8	247	1.2	58	196	0.8	177	0.9
22	450	1.9	311	1.5	59	181	0.8	152	0.7
23	435	1.8	270	1.3	60	140	0.6	144	0.7
24	394	1.7	274	1.3	61	151	0.6	137	0.7
25	423	1.8	297	1.4	62	145	0.6	104	0.5
26	402	1.7	277	1.3	63	105	0.4	120	0.6
27	451	1.9	331	1.6	64	118	0.5	96	0.5
28	385	1.6	331	1.6	65	113	0.5	89	0.4
29	393	1.7	271	1.3	66	83	0.4	75	0.4
30	379	1.6	291	1.4	67	84	0.4	80	0.4
31	338	1.4	297	1.4	68	52	0.2	82	0.4
32	376	1.6	246	1.2	69	62	0.3	41	0.2
33	298	1.3	218	1.1	70+	537	2.3	561	2.7
34	264	1.1	207	1.0	Don't know/ missing	1	0.0	2	0.0
35	259	1.1	204	1.0	Total	23,631	100.0	20,729	100.0
36	255	1.1	200	1.0					

Note: The de facto population includes all residents and nonresidents who stayed in the household the night before the interview.

Table C.2 Age distribution of eligible and interviewed women

De facto household population of women age 10-54, number and percent distribution of interviewed women age 15-49, and percentage of eligible women who were interviewed (weighted), by 5-year age groups, Tajikistan DHS 2017

Age group	Household population of women age 10-54	Interviewed women age 15-49		Percentage of eligible women interviewed
		Number	Percentage	
10-14	2,142	na	na	na
15-19	2,048	2,031	17.9	99.1
20-24	2,170	2,159	19.0	99.5
25-29	2,053	2,030	17.9	98.8
30-34	1,656	1,643	14.5	99.2
35-39	1,318	1,311	11.5	99.4
40-44	1,139	1,132	10.0	99.3
45-49	1,062	1,054	9.3	99.3
50-54	1,223	na	na	na
15-49	11,447	11,358	100.0	99.2

Note: The de facto population includes all residents and nonresidents who stayed in the household the night before the interview. Weights for both the household population of women and interviewed women are household weights. Age is based on the Household Questionnaire.
na = Not applicable

Table C.3 Completeness of reporting

Percentage of observations missing information for selected demographic and health questions (weighted), Tajikistan DHS 2017

Subject	Reference group	Percentage with information missing	Number of cases
Birth date	Births in the 15 years preceding the survey		
Day only		0.57	15,646
Day and month		0.09	15,646
Day, month, and year		0.05	15,646
Age at death	Deceased children born in the 15 years preceding the survey	0.00	577
Age/date at first union¹	Ever-married women age 15-49	0.64	8,330
Respondent's education	Women age 15-49	0.00	10,718
Diarrhea in past 2 weeks	Living children age 0-59 months	0.40	6,296
Anthropometry of children	Living children age 0-59 months (from the Biomarker Questionnaire)		
Height		1.24	6,801
Weight		1.21	6,801
Height or weight		1.24	6,801
Anthropometry of women	Women age 15-49 from (from the Biomarker Questionnaire)		
Height		1.02	11,447
Weight		1.03	11,447
Height or weight		1.03	11,447
Anemia			
Children	Living children age 6-59 months (from the Biomarker Questionnaire)	2.75	6,206
Women	All women (from the Biomarker Questionnaire)	1.36	11,447

¹ Both year and age missing**Table C.4 Births by calendar years**

Number of births, percentage with complete birth date, sex ratio at birth, and calendar year ratio by calendar year, according to living, dead, and total children (weighted), Tajikistan DHS 2017

Calendar year	Number of births			Percentage with year and month of birth given			Sex ratio at birth ¹			Calendar year ratio ²		
	Living	Dead	Total	Living	Dead	Total	Living	Dead	Total	Living	Dead	Total
2017	852	17	869	100.0	100.0	100.0	95.2	80.7	94.9	na	na	na
2016	1,307	37	1,344	100.0	100.0	100.0	103.6	270.9	106.1	na	na	na
2015	1,324	42	1,366	100.0	100.0	100.0	105.5	122.4	106.0	102.6	103.3	102.6
2014	1,274	44	1,318	100.0	100.0	100.0	109.7	119.1	110.0	100.0	103.8	100.1
2013	1,224	44	1,268	99.9	95.2	99.8	93.1	192.4	95.4	104.4	99.1	104.2
2012	1,071	43	1,114	99.9	98.0	99.8	99.5	202.3	102.2	92.4	133.0	93.5
2011	1,094	22	1,116	100.0	76.0	99.5	98.2	103.9	98.3	98.1	50.0	96.3
2010	1,160	44	1,204	100.0	93.5	99.8	106.7	134.4	107.6	110.6	164.9	111.9
2009	1,004	31	1,035	100.0	93.3	99.8	103.3	282.5	106.2	95.0	77.8	94.3
2008	954	37	991	100.0	94.4	99.8	98.8	221.0	101.7	105.3	99.6	105.1
2013-2017	5,980	184	6,164	100.0	98.9	99.9	101.8	150.3	103.0	na	na	na
2008-2012	5,283	178	5,461	100.0	92.6	99.7	101.4	179.4	103.2	na	na	na
2003-2007	3,637	203	3,841	100.0	97.9	99.9	109.8	141.1	111.3	na	na	na
1998-2002	3,247	208	3,454	100.0	97.6	99.9	113.8	140.3	115.3	na	na	na
<1998	3,300	355	3,655	99.9	97.1	99.6	110.8	147.3	113.8	na	na	na
All	21,448	1,127	22,575	100.0	96.9	99.8	106.1	149.8	107.9	na	na	na

na = Not applicable

¹ $(B_m/B_f) \times 100$, where B_m and B_f are the numbers of male and female births, respectively² $[2B_x / (B_{x-1} + B_{x+1})] \times 100$, where B_x is the number of births in calendar year x

Table C.5 Reporting of age at death in days

Distribution of reported deaths under age 1 month by age at death in days and percentage of neonatal deaths reported to occur at age 0-6 days, for 5-year periods of birth preceding the survey (weighted), Tajikistan DHS 2017

Age at death (days)	Number of years preceding the survey				Total 0-19
	0-4	5-9	10-14	15-19	
<1	13	17	10	14	55
1	29	23	20	16	88
2	3	4	4	7	17
3	10	12	13	9	43
4	5	5	0	7	17
5	8	9	8	3	28
6	3	2	2	0	7
7	2	6	5	4	17
8	1	0	1	0	3
9	1	2	2	1	6
10	4	3	0	2	9
12	0	2	1	2	5
13	0	1	1	0	3
14	1	1	0	1	2
15	0	1	1	3	4
18	0	0	2	1	4
20	1	0	4	7	12
21	0	0	2	0	2
23	2	3	0	1	6
25	2	1	1	0	4
27	1	0	0	1	2
30	1	0	0	0	1
Total 0-30	87	93	79	77	335
Percentage early neonatal ¹	82.1	78.1	73.5	72.1	76.7

¹ ≤6 days/≤30 days

Table C.6 Reporting of age at death in months

Distribution of reported deaths under age 2 by age at death in months and percentage of infant deaths reported to occur at age under 1 month, for 5-year periods of birth preceding the survey (weighted), Tajikistan DHS 2017

Age at death (months)	Number of years preceding the survey				Total 0-19
	0-4	5-9	10-14	15-19	
<1 ^a	87	93	79	77	335
1	7	8	6	13	34
2	8	4	6	10	28
3	7	7	7	14	35
4	5	2	6	6	20
5	9	6	8	3	26
6	12	4	7	3	27
7	9	2	8	7	27
8	3	6	9	10	28
9	4	6	11	4	25
10	5	4	3	6	17
11	11	3	10	9	33
12	8	5	11	9	33
13	1	0	2	1	4
14	1	0	1	2	4
15	0	2	0	0	2
16	0	1	1	1	4
17	0	0	1	0	1
18	2	2	2	3	8
19	2	0	0	0	2
20	1	2	2	0	5
Total 0-11	168	146	160	163	637
Percentage neonatal ¹	51.7	63.9	49.2	47.0	52.7

^a Includes deaths under 1 month reported in days

¹ Under 1 month/under 1 year

Table C.7 Height and weight data completeness and quality for children

Among children under age 5 (age 0-59 months) who were eligible for anthropometry, percentage with incomplete or missing height and/or weight measurements and/or date of birth, percentage with out-of-range height-for-age and/or weight-for-height and/or weight-for-age data, and percentage with valid data, according to background characteristics (unweighted), Tajikistan DHS 2017

Background characteristic	Percentage with missing or incomplete data for:			Percentage with out-of-range data for ⁴ :			Percentage with valid data for ⁸ :			Number of children
	Height ¹	Weight ²	Age in months ³	Height-for-age ⁵	Weight-for-height ⁶	Weight-for-age ⁷	Height-for-age	Weight-for-height	Weight-for-age	
Age in months										
<6	0.9	0.9	0.4	0.0	0.2	0.0	97.9	97.3	99.1	562
6-8	2.1	2.1	0.3	0.0	0.0	0.0	94.8	97.2	97.9	288
9-11	1.3	1.3	0.0	0.0	0.0	0.0	98.3	98.3	98.7	297
12-17	1.4	1.4	0.2	0.0	0.2	0.0	97.8	97.2	98.3	644
18-23	0.8	0.8	0.2	0.0	0.0	0.0	98.3	98.3	99.2	664
24-35	1.5	1.5	0.5	0.0	0.1	0.0	98.3	97.9	98.5	1,281
36-47	2.0	1.9	0.3	0.0	0.1	0.0	97.9	97.5	98.0	1,274
48-59	1.8	1.8	0.2	0.0	0.0	0.0	98.0	97.5	98.2	1,157
Sex										
Male	1.8	1.7	0.3	0.0	0.1	0.0	97.7	97.2	98.2	3,112
Female	1.3	1.3	0.3	0.0	0.0	0.0	98.2	98.1	98.7	3,055
Mother's interview status										
Interviewed	1.1	1.0	0.0	0.0	0.1	0.0	98.4	98.2	98.9	5,965
Not interviewed but in household	37.0	37.0	19.8	0.0	0.0	0.0	63.0	61.7	63.0	81
Not interviewed and not in the household ⁹	0.8	0.8	0.8	0.0	0.0	0.0	97.5	96.7	99.2	121
Residence										
Urban	2.3	2.3	0.3	0.0	0.1	0.0	97.0	96.3	97.6	2,061
Rural	1.1	1.1	0.3	0.0	0.0	0.0	98.4	98.3	98.9	4,106
Region										
Dushanbe	4.2	4.2	0.6	0.0	0.3	0.0	94.3	92.2	95.5	786
GBAO	1.0	1.0	0.2	0.0	0.2	0.0	96.7	96.9	99.0	517
Sughd	1.1	1.0	0.4	0.0	0.0	0.0	98.7	98.9	99.0	1,243
DRS	1.9	1.9	0.3	0.0	0.1	0.0	98.0	97.9	98.1	1,611
Khatlon	0.6	0.6	0.0	0.0	0.0	0.0	99.1	99.0	99.3	2,010
FTF districts	0.6	0.6	0.0	0.0	0.0	0.0	99.1	98.9	99.3	1,023
Mother's education										
None/primary	0.6	0.6	0.0	0.0	0.0	0.0	99.2	98.1	99.4	483
General basic	1.4	1.4	0.2	0.0	0.0	0.0	98.1	97.9	98.5	2,210
General secondary	1.4	1.3	0.4	0.0	0.2	0.0	97.9	97.9	98.6	2,242
Professional primary/middle	2.8	2.8	0.4	0.0	0.0	0.0	96.8	96.8	97.2	463
Higher	2.3	2.3	0.2	0.0	0.0	0.0	97.2	96.6	97.7	648
Total	1.5	1.5	0.3	0.0	0.1	0.0	97.9	97.6	98.4	6,167

¹ Child's height in centimeters is missing, child was not present, child refused, and "other" result codes

² Child's weight in kilograms is missing, child was not present, child refused, and "other" result codes

³ Incomplete date of birth; a complete date of birth is month/day/year or month/year.

⁴ Cases with missing or incomplete data are not considered to be out-of-range cases.

⁵ Out-of-range cases for height-for-age are defined as more than 6 standard deviations (SD) above or below the standard population median (Z-scores) based on the WHO Child Growth Standards.

⁶ Out-of-range cases for weight-for-height are defined as more than 5 SD above or below the standard population median (Z-scores) based on the WHO Child Growth Standards.

⁷ Out-of-range cases for weight-for-age are defined as more than 6 SD below or 5 SD above the standard population median (Z-scores) based on the WHO Child Growth Standards.

⁸ No missing data, incomplete data, or out-of-range data

⁹ Includes children whose mothers are deceased

NATIONAL COORDINATOR

Hasanzoda Gulnora Kenja, Director, Statistical Agency under the President of the Republic of Tajikistan

NATIONAL COORDINATORS FOR MEDICAL AFFAIRS

Saida Umarzoda, First Deputy Minister of Health and Social Protection of Population
Sherali Rakhmatulloev, Head of the Health Services Department for Mothers, Children and Family Planning

STATISTICAL AGENCY UNDER THE PRESIDENT OF THE REPUBLIC OF TAJIKISTAN

Abduvali Kulov, 2017 Tajikistan DHS Technical Director
Elena Budnikova, 2017 Tajikistan DHS Deputy Technical Director
Zuhro Kholiqova, Secretary/Assistant
Furkat Mirpochchoev, Data Entry Coordinator
Khamza Madzhidov, Data Entry Coordinator
Amirsho Komilov, Administrative and Legal Support
Salohiddin Fayziev, Administrative Support

MINISTRY OF HEALTH AND SOCIAL PROTECTION OF POPULATION

Mirkhamuddin Kamolzoda, Deputy Minister
Munira Ganieva, Director, National Center of Reproductive Health
Mohtob Bobokhonova, Head of Division, Republican Center for Immunoprophylaxis
Urunbish Uzakova, Main Untenured Specialist on Obstetrics and Gynecology
Olimdzhon Manonov, Head of the Department for Reforms, Primary Health Care and International Relations
Dilorom Yunusova, Head of Division, Health Services Department for Mothers, Children and Family Planning
Sanovbar Rakhmatulloeva, Main Specialist, Health Services Department for Mothers, Children and Family Planning
Sukhrob Vokhidov, Head of the Sanitary and Epidemiological Security, Emergencies and First Aid Department
Ibodullo Sheraliev, Deputy Director, Republican Center of Medical Statistics and Information
Tatyana Madzhidova, Republican HIV/AIDS Center

COMMITTEE ON WOMEN'S AND FAMILY AFFAIRS UNDER THE GOVERNMENT OF TAJIKISTAN

Javohir Akobirova, Head of Division

HOUSEHOLD LISTING AND MAPPING

Zebo Ismoilova, Regional Coordinator
Jumakhon Ashurov, Regional Coordinator
Qumrinisso Shamsieva, Regional Coordinator
Komil Shoismatulloev, Regional Coordinator
Amirsho Yunusov, Regional Coordinator

Listers

Abduaziz Asrorov	Guldasta Safarova
Abdullojon Ismatov	Hasan Tursunov
Alibakhsh Alibakhshov	Khayrullo Rahmonov
Ashurali Haqberdiev	Muhammadali Babaev
Badakhshon Amrieva	Nargis Nurbekova
Davlatmurod Sirojev	Narzullo Abdulloev
Dilshod Komilov	Nazar Nusratov
Ehsonmurod Davlatmamadov	Sohibnazar Gulmadov
Fayzullo Kholov	Togoybek Rajabov
Firuza Sultonova	Zarina Roziqova

Mappers

Abdujabor Azimov	Mahmadzohid Nozimov
Abdurasul Andamov	Manuchehr Siltaliev
Alisher Isoev	Murodbeg Murodov
Azizkhoja Khojaev	Nuriddin Hamroev
Daler Saidov	Saidhasan Olimshoev
Farukh Qayumov	Saidqodir Khusinov
Firuz Shojamolov	Salohiddini Abdukaum
Huseinboy Qahorov	Sayrohim Sharifov
Izatullo Kholov	Shamsiddin Laqae
Khudoynazar Makhanov	Tohir Yusupov

FIELDWORK IMPLEMENTATION

Rajabek Rajabekov, GBAO Regional Coordinator
Sabiddin Davlatzoda, DRS Regional Coordinator
Said Karimov, Dushanbe Regional Coordinator
Sayera Anvarova, Sughd Regional Coordinator
Shavkat Muminov, Khatlon Regional Coordinator

Team Supervisors

Bakhtigul Abduganieva	Muyasar Davronova
Farzona Kholova	Rano Jamolidinova
Firuza Chalishova	Rokhat Fayozova
Gulrukhsor Rahmonova	Sadbarg Mahmadrulova
Khosiyat Aliboeva	Surayo Teshaeva
Latifa Guldzhonova	Tojigul Odzhibangieva
Mayramkhon Sangova	Zebigul Shoeva

Health Investigators

Alijon Qayumov
Azamatkhon Berdieva
Dilorom Ashurova
Dilovar Nazarzoda
Gulchehra Safarova
Gulnamo Lashkarova
Hikoyat Sharipova

Komilboy Sultonov
Munira Khojaeva
Munojot Yuldasheva
Ozoda Kholova
Ranogul Gulova
Shahlo Rahimova
Sohibnazar Qodirov

Interviewers

Amina Fayzova
Barno Hakimova
Dilafruz Rustamova
Dilbar Mirova
Dilbar Rasulova
Dolat Mamadaslamova
Firuzakhon Ganieva
Gulandom Malikova
Gulazor Rakhmatkhudoeva
Gulchehra Komilova
Gulnora Dodajonova
Gulnora Tabarova
Gulsuman Mirzoalizoda
Hafiza Negmatulloeva
Kholdona Rajabova
Madina Muqimova
Manizha Safarova
Marjona Rajabova
Matluba Barotova

Mavjuda Khumorikova
Mavluda Fayzova
Mavzuna Nazarshoeva
Mehrafruz Tagoeva
Mehriniso Yuldosheva
Munira Abdurasulova
Muqaddas Qodirova
Muqaddas Sharipova
Nargis Rahimova
Nigina Abdurahmonova
Nigina Gazalova
Nuriniso Shoziyoeva
Robiya Babaeva
Roziyakhon Jalolova
Rukhsora Tagoymurodova
Ruzigul Solieva
Sabohat Barotalieva
Sabzina Aqdodova
Sadafmo Kuvvatova

Sanovbar Mamadjonova
Saodat Valieva
Sarvinoz Qurbonazarova
Satrimo Zamirova
Shahlo Boboeva
Shahlo Oshurbekova
Shahlo Saburova
Sitora Safarova
Yagona Saymahmadova
Zamira Burieva
Zamira Zoidova
Zarina Gaforova
Zarina Mazbutova
Zarina Tukhtanazarova
Zuhro Khomidova
Zulaykho Kuganova
Zulfiya Mazorieva
Zulkhumor Nurulloeva

ICF—THE DEMOGRAPHIC AND HEALTH SURVEYS PROGRAM

Gulnara Semenov, Technical Director, Senior Medical Officer

Jeremy Taglieri, Survey Manager

Mahmound Elkasabi, Sampling Specialist

Alex Izmukhambetov, Data Processing Consultant

Ikhtier Kholmatov, Data Processing Consultant

Jehan Ahmed, Technical Reviewer

Ann Way, Technical Reviewer

Sunita Kishor, Technical Reviewer

Julia Fleuret, Technical Reviewer

Christian Reed, Technical Reviewer

Rukundo Benedict, Technical Reviewer

Joy Fishel, Technical Reviewer

Joanna Lowell, Technical Reviewer

Chris Gramer, Report Production Specialist

Joan Wardell, Report Production Specialist

Nancy Johnson, Editor

Greg Edmondson, Editor

Tom Fish, GIS Specialist

Trinadh Dontamsetti, GIS Specialist

Megan Gottfried, GIS Specialist

Erica Nybro, Communication Specialist

Sarah Balian, Communication Specialist

2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY
 HOUSEHOLD QUESTIONNAIRE

STATISTICAL AGENCY UNDER PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
 MINISTRY OF HEALTH AND SOCIAL PROTECTION OF POPULATION

IDENTIFICATION										
PLACE NAME _____										
NAME OF HOUSEHOLD HEAD _____										
CLUSTER NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>						
HOUSEHOLD NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>						
INTERVIEWER VISITS										
	1	2	3	FINAL VISIT						
DATE	_____	_____	_____	DAY <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
				MONTH <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
INTERVIEWER'S NAME	_____	_____	_____	YEAR <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
				INT. NO. <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
RESULT*	_____	_____	_____	RESULT* <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
TIME	_____	_____								
*RESULT CODES: 1 COMPLETED 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 4 POSTPONED 5 REFUSED 6 DWELLING VACANT OR ADDRESS NOT A DWELLING 7 DWELLING DESTROYED 8 DWELLING NOT FOUND 9 OTHER _____ <div style="text-align: right;">(SPECIFY)</div>				TOTAL PERSONS IN HOUSEHOLD <table border="1" style="width: 40px; height: 20px; float: right;"></table> TOTAL ELIGIBLE WOMEN <table border="1" style="width: 40px; height: 20px; float: right;"></table> LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE <table border="1" style="width: 40px; height: 20px; float: right;"></table>						
LANGUAGE OF QUESTIONNAIRE**	<table border="1" style="width: 20px; height: 20px;">0</table> <table border="1" style="width: 20px; height: 20px;">0</table>	LANGUAGE OF INTERVIEW**	<table border="1" style="width: 20px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px;"></table>	NATIVE LANGUAGE OF RESPONDENT**	<table border="1" style="width: 20px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px;"></table>					
LANGUAGE OF QUESTIONNAIRE** ENGLISH		**LANGUAGE CODES: 00 ENGLISH 02 TAJIK 01 RUSSIAN 03 OTHER								
SUPERVISOR			OFFICE EDITOR							
<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>							<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td></tr> </table>			
NAME			NUMBER							
<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>							<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td></tr> </table>			
NUMBER			NUMBER							

THIS PAGE IS INTENTIONALLY BLANK

INTRODUCTION AND CONSENT

Hello. My name is _____. I am working with the Agency on Statistics Under the President of the Republic of Tajikistan. We are conducting a survey about health and other topics all over Tajikistan. The information we collect will help the government to plan health 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. You don't have to be in the survey, 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 person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER _____ DATE _____

RESPONDENT AGREES
TO BE INTERVIEWED .. 1
↓

RESPONDENT DOES NOT AGREE
TO BE INTERVIEWED .. 2 → END

100	RECORD THE TIME.	HOURS <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MINUTES <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>								

HOUSEHOLD SCHEDULE

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	IF AGE 15 OR OLDER	ELIGIBILITY		IF AGE 0-4 YEARS
				8	9		11	11A		
1	2	3	4	5	6	7	8	9	11	11A
	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. AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK QUESTIONS 2A-2C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-20 FOR EACH PERSON.	What is the relationship of (NAME) to the head of the household? SEE CODES BELOW.	Is (NAME) male or female? M F 1 2	Does (NAME) usually live here? Y N 1 2	Did (NAME) stay here last night? Y N 1 2	How old is (NAME)? IN YEARS IF 95 OR MORE, RECORD '95'.	What is (NAME)'s current marital status? 1 = MARRIED OR LIVING TOGETHER 2 = DIVORCED/SEPARATED 3 = WIDOWED 4 = NEVER-MARRIED AND NEVER LIVED TOGETHER	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	Does (NAME) have a birth certificate? IF NO, PROBE: Has (NAME)'s birth ever been registered with the civil authority? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW
01		<input type="text"/>	M F 1 2	Y N 1 2	Y N 1 2	<input type="text"/>	<input type="text"/>	01	01	<input type="text"/>
02		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	02	02	<input type="text"/>
03		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	03	03	<input type="text"/>
04		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	04	04	<input type="text"/>
05		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	05	05	<input type="text"/>
06		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	06	06	<input type="text"/>
07		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	07	07	<input type="text"/>
08		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	08	08	<input type="text"/>
09		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	09	09	<input type="text"/>
10		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	10	10	<input type="text"/>

2A) Just to make sure that I have a complete listing: are there any other people such as small children or infants that we have not listed? YES → ADD TO TABLE NO

2B) Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here? YES → ADD TO TABLE NO

2C) Are there any guests or temporary visitors staying here, or anyone else who stayed here last night, who have not been listed? YES → ADD TO TABLE NO

- CODES FOR Q. 3: RELATIONSHIP TO HEAD OF HOUSEHOLD**
- 01 = HEAD
 - 02 = WIFE/HUSBAND
 - 03 = SON/ DAUGHTER
 - 04 = SON-IN-LAW OR DAUGHTER-IN-LAW
 - 05 = GRANDCHILD
 - 06 = PARENT
 - 07 = PARENT-IN-LAW
 - 08 = BROTHER/SISTER
 - 09 = OTHER RELATIVE
 - 10 = ADOPTED/FOSTER/STEPCHILD
 - 11 = NOT RELATED
 - 98 = DON'T KNOW

HOUSEHOLD SCHEDULE

LINE NO.	IF AGE 0-17 YEARS				IF AGE 3 YEARS OR OLDER				IF AGE 3-24 YEARS			
	SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS				EVER ATTENDED SCHOOL				ATTESTAT	CURRENT/RECENT SCHOOL ATTENDANCE		
	12	13	14	15	16	16A	17	17C	17D	18	19	
	Is (NAME)'s natural mother alive? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Does (NAME)'s natural mother usually live in this household or was she a guest last night? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Is (NAME)'s natural father alive? IF YES: What is his name? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.	Does (NAME)'s natural father usually live in this household or was he a guest last night? IF YES: What is his name? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.	Has (NAME) ever attended school or pre-school?	What is the total number of completed years of schooling (NAME) has had, including school and other institutions?	What is the highest level of school (NAME) has attended? What is the highest grade (NAME) completed at that level? SEE CODES BELOW.	IF 17: LEVEL "2" PROFESSIONAL-PRIMARY OR LEVEL "3" PROFESSIONAL MIDDLE How many classes did (NAME) complete in general school before (NAME) enrolled in uchilishe, college or technikum?	IF 17: LEVEL 1 CLASS 10 OR CLASS 11 OR LEVEL "2" PROF-PRIMARY OR LEVEL "3" PROF-MIDDLE Did (NAME) receive attestat for completing general school?	Did (NAME) attend school or pre-school at any time during the 2016-2017 school year?	During [this/that] school year, what level and grade [is/was] (NAME) attending? SEE CODES BELOW.	
01	Y N DK 1 2 8 ↓ GO TO 14	<input type="text"/>	Y N DK 1 2 8 ↓ GO TO 16	<input type="text"/>	Y N 1 2 ↓ NEXT LINE	<input type="text"/>	LEVEL GRADE <input type="text"/> <input type="text"/>	<input type="text"/>	Y N 1 2	Y N 1 2 ↓ NEXT LINE	LEVEL GRADE <input type="text"/> <input type="text"/>	
02	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
03	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
04	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
05	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
06	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
07	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
08	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
09	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	
10	1 2 8 ↓ GO TO 14	<input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	

CODES FOR Qs. 17 AND 19: EDUCATION

LEVEL

0 = PRESCHOOL
1 = GENERAL SCHOOL (1-11)
2 = PROFESSIONAL PRIMARY
3 = PROF. MIDDLE

4 = HIGHER (1-5+)
5 = POSTGRADUATE
8 = DON'T KNOW

GRADE

00 = LESS THAN 1 YEAR COMPLETED
(USE '00' FOR Q. 17 ONLY.
THIS CODE IS NOT ALLOWED FOR Q. 19.)
98 = DON'T KNOW

HOUSEHOLD SCHEDULE

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	IF AGE 15 OR OLDER	ELIGIBILITY		IF AGE 0-4 YEARS
				8	9		11	11A		
1	2	3	4	5	6	7	8	9	11	11A
	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. AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK QUESTIONS 2A-2C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-20 FOR EACH PERSON.	What is the relationship of (NAME) to the head of the household? SEE CODES BELOW.	Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)? IF 95 OR MORE, RECORD '95'.	What is (NAME)'s current marital status? 1 = MARRIED OR LIVING TOGETHER 2 = DIVORCED/SEPARATED 3 = WIDOWED 4 = NEVER-MARRIED AND NEVER LIVED TOGETHER	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	Does (NAME) have a birth certificate? IF NO, PROBE: Has (NAME)'s birth ever been registered with the civil authority? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DONT KNOW
11		<input type="text"/>	M F 1 2	Y N 1 2	Y N 1 2	IN YEARS <input type="text"/>	<input type="text"/>	11	11	<input type="text"/>
12		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	12	12	<input type="text"/>
13		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	13	13	<input type="text"/>
14		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	14	14	<input type="text"/>
15		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	15	15	<input type="text"/>
16		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	16	16	<input type="text"/>
17		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	17	17	<input type="text"/>
18		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	18	18	<input type="text"/>
19		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	19	19	<input type="text"/>
20		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	20	20	<input type="text"/>
TICK HERE IF CONTINUATION SHEET USED <input type="checkbox"/>										

CODES FOR Q. 3: RELATIONSHIP TO HEAD OF HOUSEHOLD

- | | |
|------------------------------------|-------------------------------|
| 01 = HEAD | 07 = PARENT-IN-LAW |
| 02 = WIFE OR HUSBAND | 08 = BROTHER OR SISTER |
| 03 = SON OR DAUGHTER | 09 = OTHER RELATIVE |
| 04 = SON-IN-LAW OR DAUGHTER-IN-LAW | 10 = ADOPTED/FOSTER/STEPCHILD |
| 05 = GRANDCHILD | 11 = NOT RELATED |
| 06 = PARENT | 98 = DONT KNOW |

HOUSEHOLD SCHEDULE

LINE NO.	IF AGE 0-17 YEARS				IF AGE 3 YEARS OR OLDER				IF AGE 3-24 YEARS			
	SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS				EVER ATTENDED SCHOOL				ATTESTAT	CURRENT/RECENT SCHOOL ATTENDANCE		
	12	13	14	15	16	16A	17	17C	17D	18	19	
	Is (NAME)'s natural mother alive? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Does (NAME)'s natural mother usually live in this household or was she a guest last night? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Is (NAME)'s natural father alive? IF YES: What is his name? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.	Does (NAME)'s natural father usually live in this household or was he a guest last night? IF YES: What is his name? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.	Has (NAME) ever attended school or pre-school?	What is the total number of completed years of schooling (NAME) has had, including school and other institutions?	What is the highest level of school (NAME) has attended? What is the highest grade (NAME) completed at that level? SEE CODES BELOW.	IF 17: LEVEL "2" PROFESSIONAL-PRIMARY OR LEVEL "3" PROFESSIONAL MIDDLE How many classes did (NAME) complete in general school before (NAME) enrolled in uchilishe, college or technikum?	IF 17: LEVEL 1 CLASS 10 OR CLASS 11 OR LEVEL "2" PROF-PRIMARY OR LEVEL "3" PROF-MIDDLE Did (NAME) receive attestat for completing general school?	Did (NAME) attend school or pre-school at any time during the 2016-2017 school year?	During [this/that] school year, what level and grade [is/was] (NAME) attending? SEE CODES BELOW.	
11	Y N DK 1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	Y N DK 1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	Y N 1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	LEVEL GRADE <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	Y N 1 2 ↓ NEXT LINE	LEVEL GRADE <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
12	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
13	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
14	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
15	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
16	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
17	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
18	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
19	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
20	1 2 8 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2 8 ↓ GO TO 16	<input type="text"/> <input type="text"/>	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	1 2	1 2 ↓ NEXT LINE	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

CODES FOR Qs. 17 AND 19: EDUCATION

LEVEL

- 0 = PRESCHOOL(1-4)
- 1 = GENERAL EDUCATION SCHOOL (1-11)
- 2 = PROFESSIONAL PRIMARY (1-3)
- 3 = PROF. MIDDLE (1-4)
- 4 = HIGHER (1-5+)
- 5=POSTGRADUATE
- 8 = DON'T KNOW

GRADE

- 00 = LESS THAN 1 YEAR COMPLETED (USE '00' FOR Q. 17 ONLY. THIS CODE IS NOT ALLOWED FOR Q. 19.)
- 98 = DON'T KNOW

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES
31	CHECK COL. 7 IN THE LIST OF HOUSEHOLD MEMBERS AND WRITE THE TOTAL NUMBER OF CHILDREN AGE 1-14 YEARS.	TOTAL NUMBER <input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
32	<p>CHECK THE NUMBER OF CHILDREN AGE 1-14 YEARS IN 31:</p> <p style="text-align:center;">ZERO <input style="width:20px; height:20px;" type="checkbox"/> →</p> <p style="text-align:center;">TWO OR MORE <input style="width:20px; height:20px;" type="checkbox"/> ↓</p> <p style="text-align:center;">ONE <input style="width:20px; height:20px;" type="checkbox"/> →</p>	<p>SKIP TO 51 DV SELECTION TABLE</p> <p>SKIP TO 39 AND RECORD THE RANK NUMBER AS '1', ENTER THE LINE NUMBER, CHILD'S NAME AND AGE</p>

32A LIST EACH OF THE CHILDREN AGE 1-14 YEARS BELOW IN THE ORDER THEY APPEAR IN THE LIST OF HOUSEHOLD MEMBERS. DO NOT INCLUDE OTHER HOUSEHOLD MEMBERS OUTSIDE OF THE AGE RANGE 1-14 YEARS. RECORD THE LINE NUMBER, NAME, SEX, AND AGE FOR EACH CHILD.

33. RANK NUMBER	34. HH LINE NUMBER	35. NAME FROM COL. 2	36. SEX FROM COL. 4		37. AGE FROM COL. 7
RANK	LINE	NAME	M	F	AGE
1	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
3	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
4	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
5	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
6	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
7	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
8	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>
9	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>	_____	1	2	<input style="width:20px; height:20px;" type="text"/> <input style="width:20px; height:20px;" type="text"/>

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE

38 LOOK AT THE LAST DIGIT OF THE HOUSEHOLD NUMBER ON THE COVER PAGE. THIS IS THE ROW NUMBER YOU SHOULD GO TO. CHECK THE TOTAL NUMBER OF ELIGIBLE CHILDREN **31** ON THE PREVIOUS PAGE. THIS IS THE COLUMN NUMBER YOU SHOULD GO TO. FOLLOW THE SELECTED ROW AND COLUMN TO THE CELL WHERE THEY MEET AND CIRCLE THE NUMBER IN THE CELL. THIS IS THE RANK NUMBER OF THE CHILD SELECTED FOR THE CHILD LABOUR/CHILD DISCIPLINE QUESTIONS FROM THE BOX OF ELIGIBLE CHILDREN IN **33**. WRITE THE NAME, LINE NUMBER, AND RANK NUMBER OF THE SELECTED CHILD IN THE SPACE BELOW THE TABLE.

EXAMPLE: THE HOUSEHOLD NUMBER IS '16' AND **31** SHOWS THAT THERE ARE THREE ELIGIBLE CHILDREN AGE 1-14 IN THE HOUSEHOLD. SINCE THE LAST DIGIT OF THE HOUSEHOLD NUMBER IS '6' GO TO ROW '6' AND SINCE THERE ARE THREE ELIGIBLE CHILDREN IN THE HOUSEHOLD, GO TO COLUMN '3'. FOLLOW THE ROW AND COLUMN AND FIND THE NUMBER IN THE CELL WHERE THEY MEET ('2') AND CIRCLE THE NUMBER. NOW GO TO **33** AND FIND THE SECOND CHILD. WRITE THE NAME, LINE NUMBER, AND RANK NUMBER OF THE CHILD IN THE SPACE BELOW THE TABLE.

LAST DIGIT OF THE HOUSEHOLD NUMBER	TOTAL NUMBER OF ELIGIBLE CHILDREN AGE 1-14 IN HOUSEHOLD FROM 31							
	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5

39 NAME OF SELECTED CHILD _____

HH LINE NUMBER OF SELECTED CHILD

--	--

RANK NUMBER OF SELECTED CHILD

--	--

AGE OF SELECTED CHILD

--	--

CHILD DISCIPLINE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																				
41	<p>CHECK THE SELECTED CHILD'S AGE FROM 39:</p> <p style="text-align: center;">1-14 YEARS <input type="checkbox"/> NO CHILDREN OR OTHER AGE <input type="checkbox"/></p> <p style="text-align: center;">↓ →</p>		51																																				
42	<p>WRITE THE LINE NUMBER AND NAME OF THE CHILD FROM 39.</p>	<p>LINE NUMBER <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/></p> <p>NAME _____</p>																																					
43	<p>Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if you or anyone else in the household has used this method with (NAME) in the past month.</p> <p>a) Took away privileges, forbade something (NAME) liked or did not allow (NAME) to leave the house.</p> <p>b) Explained why (NAME)'s behaviour was wrong.</p> <p>c) Shook (NAME).</p> <p>d) Shouted, yelled at or screamed at (NAME).</p> <p>e) Gave (NAME) something else to do.</p> <p>f) Spanked, hit or slapped (NAME) on the bottom with bare hand.</p> <p>g) Hit (NAME) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick, or other hard object.</p> <p>h) Called (NAME) dumb, lazy, or another name like that.</p> <p>i) Hit or slapped (NAME) on the face, head, or ears.</p> <p>j) Hit or slapped (NAME) on the hand, arm, or leg.</p> <p>k) Beat (NAME) up, that is hit (NAME) over and over as hard as one could.</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 5%; text-align: center;">YES</th> <th style="width: 15%; text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>a) TOOK AWAY PRIVILEGES</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>b) EXPLAINED WRONG BEHAVIOUR ..</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>c) SHOOK HIM/HER</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>d) SHOUTED, YELLED, SCREAMED ..</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>e) GAVE SOMETHING ELSE TO DO</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>f) HIT ON BOTTOM WITH BARE HAND ..</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>g) HIT WITH HARD OBJECT</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>h) CALLED NAME</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>i) HIT ON HEAD/FACE/EARS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>j) HIT ON HAND/ARM/LEG</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>k) BEAT HIM/HER UP</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		YES	NO	a) TOOK AWAY PRIVILEGES	1	2	b) EXPLAINED WRONG BEHAVIOUR ..	1	2	c) SHOOK HIM/HER	1	2	d) SHOUTED, YELLED, SCREAMED ..	1	2	e) GAVE SOMETHING ELSE TO DO	1	2	f) HIT ON BOTTOM WITH BARE HAND ..	1	2	g) HIT WITH HARD OBJECT	1	2	h) CALLED NAME	1	2	i) HIT ON HEAD/FACE/EARS	1	2	j) HIT ON HAND/ARM/LEG	1	2	k) BEAT HIM/HER UP	1	2	
	YES	NO																																					
a) TOOK AWAY PRIVILEGES	1	2																																					
b) EXPLAINED WRONG BEHAVIOUR ..	1	2																																					
c) SHOOK HIM/HER	1	2																																					
d) SHOUTED, YELLED, SCREAMED ..	1	2																																					
e) GAVE SOMETHING ELSE TO DO	1	2																																					
f) HIT ON BOTTOM WITH BARE HAND ..	1	2																																					
g) HIT WITH HARD OBJECT	1	2																																					
h) CALLED NAME	1	2																																					
i) HIT ON HEAD/FACE/EARS	1	2																																					
j) HIT ON HAND/ARM/LEG	1	2																																					
k) BEAT HIM/HER UP	1	2																																					
44	<p>Do you believe that in order to bring up, raise or educate a child properly, the child needs to be physically punished?</p>	<p>YES</p> <p>NO</p> <p>DON'T KNOW / NO OPINION</p>	<p>1</p> <p>2</p> <p>8</p>																																				

SELECTION OF WOMAN FOR THE DOMESTIC VIOLENCE QUESTIONS (PAPER OPTION)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP					
51	CHECK COL. 4, 7 AND 9 IN THE LIST OF HOUSEHOLD MEMBERS AND WRITE THE TOTAL NUMBER OF WOMEN AGE 15-49 YEARS.	TOTAL NUMBER <input type="text"/> <input type="text"/>						
52	CHECK THE NUMBER OF WOMEN AGE 15-49 YEARS IN 51: ZERO <input type="text"/> → TWO OR MORE <input type="text"/> ↓	ONE <input type="text"/> →	101 53					
	<p>LOOK AT THE LAST DIGIT OF THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER ON THE COVER PAGE. THIS IS THE ROW NUMBER YOU SHOULD GO TO. CHECK THE TOTAL NUMBER OF ELIGIBLE WOMEN (COLUMN 9) IN THE HOUSEHOLD SCHEDULE. THIS IS THE COLUMN NUMBER YOU SHOULD GO TO. FOLLOW THE SELECTED ROW AND COLUMN TO THE CELL WHERE THEY MEET AND CIRCLE THE NUMBER IN THE CELL. THIS IS THE NUMBER OF THE WOMAN SELECTED FOR THE DOMESTIC VIOLENCE QUESTIONS FROM THE LIST OF ELIGIBLE WOMEN IN COLUMN 9 OF THE HOUSEHOLD SCHEDULE. WRITE THE NAME AND LINE NUMBER OF THE SELECTED WOMAN IN THE SPACE BELOW THE TABLE.</p> <p>EXAMPLE: THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER IS '16' AND THE HOUSEHOLD SCHEDULE COLUMN 9 SHOWS THAT THERE ARE THREE ELIGIBLE WOMEN AGE 15-49 IN THE HOUSEHOLD (LINE NUMBERS 02, 04, AND 05). SINCE THE LAST DIGIT OF THE HOUSEHOLD SERIAL NUMBER IS '6' GO TO ROW '6' AND SINCE THERE ARE THREE ELIGIBLE WOMEN IN THE HOUSEHOLD, GO TO COLUMN '3'. FOLLOW THE ROW AND COLUMN AND FIND THE NUMBER IN THE CELL WHERE THEY MEET ('2') AND CIRCLE THE NUMBER. NOW GO TO THE HOUSEHOLD SCHEDULE AND FIND THE SECOND WOMAN WHO IS ELIGIBLE FOR THE WOMAN'S INTERVIEW (LINE NUMBER '04' IN THIS EXAMPLE). WRITE HER NAME AND LINE NUMBER IN THE SPACE BELOW THE TABLE.</p>							
LAST DIGIT OF THE HOUSEHOLD SERIAL NUMBER	TOTAL NUMBER OF ELIGIBLE WOMEN AGE 15-49 IN HOUSEHOLD SCHEDULE COLUMN 9							
	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5
53	NAME OF SELECTED WOMAN _____		HH LINE NUMBER OF SELECTED WOMAN		<input type="text"/> <input type="text"/>			

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	What is the main source of drinking water for members of your household?	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD/PLOT 12</p> <p>PIPED TO NEIGHBOR 13</p> <p>PUBLIC TAP/STANDPIPE 14</p> <p>TUBE WELL OR BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>WATER FROM SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER 51</p> <p>TANKER TRUCK 61</p> <p>CART WITH SMALL TANK 71</p> <p>SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) 81</p> <p>BOTTLED WATER 91</p> <p>OTHER _____ 96 (SPECIFY)</p>	<p>→ 106</p> <p>→ 103</p> <p>→ 103</p>
102	What is the main source of water used by your household for other purposes such as cooking and handwashing?	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD/PLOT 12</p> <p>PIPED TO NEIGHBOR 13</p> <p>PUBLIC TAP/STANDPIPE 14</p> <p>TUBE WELL OR BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>WATER FROM SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER 51</p> <p>TANKER TRUCK 61</p> <p>CART WITH SMALL TANK 71</p> <p>SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) 81</p> <p>OTHER _____ 96 (SPECIFY)</p>	<p>→ 106</p>
103	Where is that water source located?	<p>IN OWN DWELLING 1</p> <p>IN OWN YARD/PLOT 2</p> <p>ELSEWHERE 3</p>	<p>→ 105</p>
104	How long does it take to go there, get water, and come back?	<p>MINUTES <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 998</p>	
104A	Who usually goes to this source to fetch the water for your household?	<p>ADULT WOMAN 1</p> <p>ADULT MAN 2</p> <p>FEMALE CHILD UNDER 15 YEARS OLD 3</p> <p>MALE CHILD UNDER 15 YEARS OLD 4</p> <p>OTHER _____ 6 (SPECIFY)</p>	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																				
113	What type of fuel does your household mainly use for cooking?	ELECTRICITY 01 LPG 02 NATURAL GAS 03 BIOGAS 04 KEROSENE 05 COAL, LIGNITE 06 CHARCOAL 07 WOOD 08 STRAW/SHRUBS/GRASS 09 AGRICULTURAL CROP 10 ANIMAL DUNG 11 NO FOOD COOKED IN HOUSEHOLD 95 OTHER _____ 96 (SPECIFY)	→ 116																				
114	Is the cooking usually done in the house, in a separate building, or outdoors?	IN THE HOUSE 1 IN A SEPARATE BUILDING 2 OUTDOORS 3 OTHER _____ 6 (SPECIFY)	→ 116																				
115	Do you have a separate room which is used as a kitchen?	YES 1 NO 2																					
116	How many rooms in this household are used for sleeping?	ROOMS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																					
117	Does this household own any livestock, herds, other farm animals, or poultry?	YES 1 NO 2	→ 119																				
118	How many of the following animals does this household own? IF NONE, RECORD '00'. IF 95 OR MORE, RECORD '95'. IF UNKNOWN, RECORD '98'. a) Milk cows or bulls? b) Other cattle? c) Horses, donkeys, or mules? d) Goats? e) Sheep? f) Chickens or other poultry? g) Pigs? h) Rabbits? i) Animals for fur? j) Beehives?	 a) COWS/BULLS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> b) OTHER CATTLE <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> c) HORSES/DONKEYS/MULES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> d) GOATS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> e) SHEEP <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> f) CHICKENS/POULTRY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> f) PIGS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> f) RABBITS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> f) FUR ANIMALS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> f) BEEHIVES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																					
119	Does any member of this household use any agricultural land?	YES 1 NO 2	→ 121																				
120	How many ares of agricultural land do members of this household use? IF 9500 OR MORE, CIRCLE '9500'.	ARES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> 9500 OR MORE ARES 9500 DON'T KNOW 9998																					

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES		SKIP
121	Does your household have:	YES	NO	
	a) Electricity?	a) ELECTRICITY 1	2	
	b) A radio?	b) RADIO 1	2	
	c) A television?	c) TELEVISION 1	2	
	d) A non-mobile telephone?	d) NON-MOBILE TELEPHONE .. 1	2	
	e) A computer?	e) COMPUTER 1	2	
	f) A refrigerator?	f) REFRIGERATOR 1	2	
	g) A washing machine?	g) WASHING MACHINE 1	2	
	h) A vacuum cleaner?	h) VACUUM CLEANER 1	2	
	i) A digital camera?	i) DIGITAL CAMERA 1	2	
	j) A video camera/camcorder?	j) VIDEO CAMERA/CAMCORDER 1	2	
	k) A table/hon-tohta?	k) TABLE/HON-TOHTA 1	2	
	l) A chair?	l) CHAIR 1	2	
	m) A sofa/divan?	m) SOFA 1	2	
	n) A bed?	n) BED 1	2	
	o) A buffet/curio cabinet/wall unit?	o) BUFFET/CURIO CABINET 1	2	
	p) An air conditioner?	p) AIR CONDITIONER 1	2	
	q) A DVD player?	q) DVD PLAYER 1	2	
	r) A satellite antenna/dish?	r) SATELLITE ANTENNA/DISH .. 1	2	
	s) A freezer?	s) FREEZER 1	2	
	t) An electric fan?	t) ELECTRIC FAN 1	2	
	u) A sewing machine?	u) SEWING MACHINE 1	2	
	v) A wood/coal/gas stove (in-door heater "burzhuika")?	v) FURNACE BOURGEOUIKA .. 1	2	
	w) A mini-generator ("dvizhok")?	w) MINI-GENERATOR 1	2	
	x) A fuel or wood stock?	x) FUEL OR WOOD STOCK 1	2	
	y) A carpet (handmade or machine made)?	y) CARPET 1	2	
	z) A connection to the Internet (world wide web)?	z) INTERNET 1	2	
122	Does any member of this household own:	YES	NO	
	a) A watch?	a) WATCH 1	2	
	b) A mobile phone?	b) MOBILE PHONE 1	2	
	c) A bicycle?	c) BICYCLE 1	2	
	d) A motorcycle or motor scooter?	d) MOTORCYCLE/SCOOTER 1	2	
	e) An animal-drawn cart?	e) ANIMAL-DRAWN CART 1	2	
	f) A car?	f) CAR 1	2	
	g) A boat with a motor?	g) BOAT WITH MOTOR 1	2	
	h) A truck?	h) TRUCK 1	2	
	i) A tractor?	i) TRACTOR 1	2	
	j) A combine-harvester?	j) COMBINE 1	2	
	k) Any agricultural equipment, such as a plow, a trailer, a mower or similar?	k) AGRICULTURAL EQUIPMENT/ PLOW/TRAILER/ MOWER 1	2	
123	Does any member of this household have a bank account?	YES 1	NO 2	
124	How often does anyone smoke inside your house? Would you say daily, weekly, monthly, less often than once a month, or never?	DAILY 1	WEEKLY 2	
		MONTHLY 3	LESS OFTEN THAN ONCE A MONTH 4	
		NEVER 5		
124A	In the past 3 years, has any member of the household worked abroad for three or more months at a time, including those currently working abroad?	YES 1	NO 2	
		DON'T KNOW 8		

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
139	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?	OBSERVED, FIXED PLACE 1 OBSERVED, MOBILE 2 NOT OBSERVED, NOT IN DWELLING/YARD/PLOT 3 NOT OBSERVED, NO PERMISSION TO SEE 4 NOT OBSERVED, OTHER REASON 5	→ 142
140	OBSERVE PRESENCE OF WATER AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	WATER IS AVAILABLE 1 WATER IS NOT AVAILABLE 2	
141	OBSERVE PRESENCE OF SOAP, DETERGENT, OR OTHER CLEANSING AGENT AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	SOAP OR DETERGENT (BAR, LIQUID, POWDER, PASTE) A ASH, MUD, SAND B NONE Y	
142	OBSERVE MAIN MATERIAL OF THE FLOOR OF THE DWELLING. RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND 11 RUDIMENTARY FLOOR WOOD PLANKS 21 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR LINOLEUM 32 CERAMIC TILES 33 CEMENT 34 CARPETED 35 OTHER _____ 96 (SPECIFY)	
143	OBSERVE MAIN MATERIAL OF THE ROOF OF THE DWELLING. RECORD OBSERVATION.	NATURAL ROOFING NO ROOF 11 THATCH 12 SOD 13 RUDIMENTARY ROOFING WOOD PLANKS 23 CARDBOARD 24 FINISHED ROOFING METAL 31 WOOD 32 SCHIEFER/CEMENT FIBER 33 CERAMIC TILES 34 CEMENT 35 ROOFING SHINGLES SOFT 36 TAULE (RUBEROID) 37 OTHER _____ 96 (SPECIFY)	

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
144	<p>OBSERVE MAIN MATERIAL OF THE EXTERIOR WALLS OF THE DWELLING.</p> <p>RECORD OBSERVATION.</p>	<p>NATURAL WALLS</p> <p>NO WALLS 11</p> <p>TRUNKS 12</p> <p>DIRT 13</p> <p>RUDIMENTARY WALLS</p> <p>STONE WITH MUD 22</p> <p>UNCOVERED ADOBE 23</p> <p>PLYWOOD 24</p> <p>CARDBOARD 25</p> <p>REUSED WOOD 26</p> <p>FINISHED WALLS</p> <p>CEMENT/MONOLIT 31</p> <p>STONE WITH LIME/CEMENT 32</p> <p>BRICKS 33</p> <p>CEMENT BLOCKS 34</p> <p>COVERED ADOBE 35</p> <p>WOOD PLANKS 36</p> <p>OTHER _____ 96 (SPECIFY)</p>									
145	<p>I would like to check whether the salt used in your household is iodized. May I have a sample of the salt used to cook meals in your household?</p> <p>TEST SALT FOR IODINE.</p>	<p>0 PPM (NO IODINE) 1</p> <p>BELOW 15 PPM 2</p> <p>15 PPM AND ABOVE 3</p> <p>NO SALT IN HOUSEHOLD 4</p> <p>SALT NOT TESTED _____ 6 (SPECIFY REASON)</p>									
146	RECORD THE TIME.	<p>HOURS <table border="1" data-bbox="1206 981 1345 1032"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table></p> <p>MINUTES <table border="1" data-bbox="1206 1037 1345 1088"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table></p>									

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT INTERVIEW:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

EDITOR'S OBSERVATIONS

2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY
 WOMAN'S QUESTIONNAIRE

STATISTICAL AGENCY UNDER PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
 MINISTRY OF HEALTH AND SOCIAL PROTECTION OF POPULATION

IDENTIFICATION																
PLACE NAME _____																
NAME OF HOUSEHOLD HEAD _____																
CLUSTER NUMBER	<table border="1" style="width:100%; height: 100%; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>															
HOUSEHOLD NUMBER																
NAME AND LINE NUMBER OF WOMAN _____																
CHECK Q53 IN THE HOUSEHOLD QUESTIONNAIRE: WAS THIS WOMEN CHOSEN FOR DV MODULE? (1=YES, 2=NO) .. <table border="1" style="width: 20px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 10px; height: 10px;"></td><td style="width: 10px; height: 10px;"></td></tr> </table> 																
INTERVIEWER VISITS																
	1	2	3	FINAL VISIT												
DATE	_____	_____	_____	DAY <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr></table>												
				MONTH <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr></table>												
INTERVIEWER'S NAME	_____	_____	_____	YEAR <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr></table>												
RESULT*	_____	_____	_____	INT. NO. <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr></table>												
NEXT VISIT: DATE	_____	_____		RESULT* <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr></table>												
TIME	_____	_____		TOTAL NUMBER OF VISITS <table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"><tr><td style="width: 20px; height: 10px;"></td></tr></table>												
<p>*RESULT CODES: 1 COMPLETED 4 REFUSED 2 NOT AT HOME 5 PARTLY COMPLETED 7 OTHER _____ 3 POSTPONED 6 INCAPACITATED SPECIFY _____</p>																
LANGUAGE OF QUESTIONNAIRE**	<table border="1" style="width: 20px; height: 20px; border-collapse: collapse;"><tr><td style="width: 10px; height: 10px; text-align: center;">0</td><td style="width: 10px; height: 10px; text-align: center;">0</td></tr></table>	0	0	LANGUAGE OF INTERVIEW**	<table border="1" style="width: 20px; height: 20px; border-collapse: collapse;"><tr><td style="width: 10px; height: 10px;"></td><td style="width: 10px; height: 10px;"></td></tr></table>			NATIVE LANGUAGE OF RESPONDENT**	<table border="1" style="width: 20px; height: 20px; border-collapse: collapse;"><tr><td style="width: 10px; height: 10px;"></td><td style="width: 10px; height: 10px;"></td></tr></table>							
0	0															
				TRANSLATOR USED (YES = 1, NO = 2) <table border="1" style="width: 20px; height: 20px; border-collapse: collapse;"><tr><td style="width: 10px; height: 10px;"></td></tr></table>												
LANGUAGE OF QUESTIONNAIRE**	ENGLISH		**LANGUAGE CODES													
			00 ENGLISH	02 TAJIK												
			01 RUSSIAN	03 OTHER												
SUPERVISOR			OFFICE EDITOR	KEYED BY												
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 25px; height: 10px;"></td><td style="width: 25px; height: 10px;"></td><td style="width: 25px; height: 10px;"></td><td style="width: 25px; height: 10px;"></td></tr> </table>							<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr> </table>			<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 15px; height: 10px;"></td><td style="width: 15px; height: 10px;"></td></tr> </table>						
NAME			NUMBER	NUMBER												

INTRODUCTION AND CONSENT

Hello. My name is _____. I am working with Statistical Agency under President of the Republic of Tajikistan. We are conducting a survey about health and other topics all over Tajikistan. The information we collect will help the government to plan health services. Your household was selected for the survey. The questions usually take about 30 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. You don't have to be in the survey, 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 person listed on the card that has already been given to your household.

Do you have any questions?
May I begin the interview now?

SIGNATURE OF INTERVIEWER _____ DATE _____



SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																				
101	RECORD THE TIME.	HOURS MINUTES	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																				
101A	<p>During the interview I would like to measure your blood pressure. This will be done three times during the interview. This is a harmless procedure. It is used to find out if a person has high blood pressure. If it is not treated, high blood pressure may eventually cause serious damage to the heart and blood vessels in the brain.</p> <p>The results of this blood pressure measurement will be given to you after the interview together with an explanation of the meaning of your blood pressure numbers. If your blood pressure is high, we will suggest that you consult a health facility or doctor since we cannot provide any further testing or treatment during the survey.</p> <p>Do you have any questions about the blood pressure measurement so far? If you have any questions about the procedure at any time, please ask me.</p> <p>You can say yes or not to having the blood pressure measurement now. You can also decide at anytime not to participate in the blood pressure measures.</p> <p>Would you allow me to proceed to take your blood pressure measurement at this time?</p> <p>CIRCLE THE CODE AND SIGN YOUR NAME.</p> <p style="text-align: center;"> AGREED 1 ← (SIGN) REFUSED 2 THEN SKIP TO 102 ← </p>																						
101B	<p>Before taking your blood pressure, I would like to ask a few questions about things that may affect these measurements.</p> <p>Have you done any of the following within the past 30 minutes:</p> <p>a) Eaten anything? b) Had coffee, tea, cola or other drink that has caffeine? c) Smoked any tobacco product? d) Conducted any physical activity or excersises that made you breathe much harder or somewhat harder than normal?</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> <td style="text-align: center;">DON'T NOW</td> </tr> <tr> <td>a) EATEN</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>b) CAFFEINATED DRINK ..</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>c) SMOKED</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>d) EXERCISES</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </table>		YES	NO	DON'T NOW	a) EATEN	1	2	8	b) CAFFEINATED DRINK ..	1	2	8	c) SMOKED	1	2	8	d) EXERCISES	1	2	8	
	YES	NO	DON'T NOW																				
a) EATEN	1	2	8																				
b) CAFFEINATED DRINK ..	1	2	8																				
c) SMOKED	1	2	8																				
d) EXERCISES	1	2	8																				

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101C	<p>Now I begin the process of measuring your blood pressure.</p> <p>BEFORE TAKING THE FIRST BLOOD PRESSURE READING, MEASURE THE CIRCUMFERENCE OF THE RESPONDENT'S ARM MIDWAY BETWEEN THE ELBOW AND THE SHOULDER.</p> <p>RECORD THE MEASUREMENT IN CENTIMETERS.</p>	<p>ARM CIRCUMFERENCE (IN CENTIMETERS)</p> <div style="border: 1px solid black; width: 80px; height: 25px; margin-left: 100px;"></div>	
101D	<p>USE THE ARM CIRCUMFERENCE MEASUREMENT TO SELECT THE APPROPRIATE BLOOD PRESSURE MONITOR MODEL AND CUFF SIZE. CIRCLE THE CODE FOR THE MODEL AND CUFF SIZE.</p>	<p>MODEL 767 SMALL: 16 CM – 23 CM 1 MEDIUM: 24 CM – 35 CM 2 LARGE: 36 CM – 41 CM 3 MODEL 789 EXTRA LARGE: 42 CM – 60 CM 4</p>	
101E	<p>TAKE THE FIRST BLOOD PRESSURE READING.</p> <p>RECORD THE SYSTOLIC AND DIASTOLIC PRESSURE. THEN PROCEED TO Q102.</p> <p>IF YOU ARE UNABLE TO MEASURE THE RESPONDENT'S BLOOD PRESSURE, RECORD THE REASON.</p>	<p>BLOOD PRESSURE MEASURED</p> <p>SYSTOLIC <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div></p> <p>DIASTOLIC <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div></p> <p>TECHNICAL PROBLEMS '995 OTHER '996</p> <p>_____ '996 SPECIFY</p>	
102	<p>How long have you been living continuously in (NAME OF CURRENT CITY, TOWN OR VILLAGE OF RESIDENCE)?</p> <p>IF LESS THAN ONE YEAR, RECORD '00' YEARS.</p>	<p>YEARS <div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div></p> <p>ALWAYS 95 VISITOR 96</p>	<p>→ 105</p>
103	<p>Just before you moved here, did you live in a city, in a town, or in a rural area?</p>	<p>CITY 1 TOWN 2 RURAL AREA 3</p>	
104	<p>Before you moved here, which region or oblast did you live in?</p>	<p>DUSHANBE 01 GBAO 02 SUGHD 03 DRS 04 KHATLON 05 OUTSIDE OF TAJIKISTAN 96</p>	
105	<p>In what month and year were you born?</p>	<p>MONTH <div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div></p> <p>DON'T KNOW MONTH 98</p> <p>YEAR <div style="border: 1px solid black; width: 120px; height: 20px; display: inline-block;"></div></p> <p>DON'T KNOW YEAR9998</p>	
106	<p>How old were you at your last birthday?</p> <p>COMPARE AND CORRECT 105 AND/OR 106 IF INCONSISTENT.</p>	<p>AGE IN COMPLETED YEARS <div style="border: 1px solid black; width: 80px; height: 20px; display: inline-block;"></div></p>	
107	<p>Have you ever attended school?</p>	<p>YES 1 NO 2</p>	<p>→ 111</p>

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
108	What is the highest level of school you attended: general education school, professional primary (uchiliche), professional middle (technikum, college), higher, or postgraduate?	GENERAL EDUCATION SCHOOL 1 PROFESSIONAL PRIMARY 2 PROFESSIONAL MIDDLE 3 HIGHER 4 POST-GRADUATE 5	
109	What is the highest [CLASS/YEAR/COURSE] you completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/YEAR/COURSE <input type="text"/> <input type="text"/>	
109A	What is the total number of years of schooling you had? Please provide total number of completed years of education, including in general school plus in any other educational insitution. IF COMPLETED LESS THAN ONE YEAR, RECORD '00'.	TOTAL YEARS <input type="text"/> <input type="text"/>	
109B	CHECK 108: CODE '1', '2' OR '3' <input type="checkbox"/> CIRCLED ↓	CODE '4' OR '5' <input type="checkbox"/> CIRCLED → 110	
109C	Do you have an attestat for completing general school?	YES 1 NO 2	
109D	CHECK 108: PROFESSIONAL PRIMARY CODE '2' OR PROFESSIONAL MIDDLE CODE '3' CIRCLED? YES, CODE '2' OR '3' <input type="checkbox"/> CIRCLED ↓	OTHER <input type="checkbox"/> → 110	
109E	How many classes you completed in general school before you were enrolled in uchilische, college or technikum?	CLASS <input type="text"/> <input type="text"/>	
110	CHECK 108: GENERAL SCHOOL <input type="checkbox"/> ↓	HIGHER <input type="checkbox"/> → 113	
111	Now I would like you to read this sentence to me. SHOW CARD TO RESPONDENT. IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me?	CANNOT READ AT ALL 1 ABLE TO READ ONLY PART OF THE SENTENCE 2 ABLE TO READ WHOLE SENTENCE 3 NO CARD WITH REQUIRED LANGUAGE 4 (SPECIFY LANGUAGE) BLIND/VISUALLY IMPAIRED 5	
112	CHECK 111: CODE '2', '3' OR '4' <input type="checkbox"/> CIRCLED ↓	CODE '1' OR '5' <input type="checkbox"/> CIRCLED → 114	
113	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 1 LESS THAN ONCE A WEEK 2 NOT AT ALL 3	
114	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 1 LESS THAN ONCE A WEEK 2 NOT AT ALL 3	
115	Do you watch television at least once a week, less than once a week or not at all?	AT LEAST ONCE A WEEK 1 LESS THAN ONCE A WEEK 2 NOT AT ALL 3	

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
116	Do you own a mobile telephone?	YES 1 NO 2	→ 118
117	Do you use your mobile phone for any financial transactions?	YES 1 NO 2	
118	Do you have an account in a bank or other financial institution that you yourself use?	YES 1 NO 2	
119	Have you ever used the internet?	YES 1 NO 2	→ 122
120	In the last 12 months, have you used the internet? IF NECESSARY, PROBE FOR USE FROM ANY LOCATION, WITH ANY DEVICE.	YES 1 NO 2	→ 122
121	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 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4	
122	In the past 3 years, have you worked abroad for three or more months at a time?	YES 1 NO 2	
124	In the last 12 months, how many times have you been away from home for one or more nights?	NUMBER OF TIMES <input type="text"/> <input type="text"/> NONE 00	→ 201
125	In the last 12 months, have you been away from home for more than one month at a time?	YES 1 NO 2	

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 ever given birth?	YES 1 NO 2	→ 206								
202	Do you have any sons or daughters to whom you have given birth who are now living with you?	YES 1 NO 2	→ 204								
203	a) How many sons live with you? b) And how many daughters live with you? IF NONE, RECORD '00'.	a) SONS AT HOME <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> b) DAUGHTERS AT HOME <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
204	Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	YES 1 NO 2	→ 206								
205	a) How many sons are alive but do not live with you? b) And how many daughters are alive but do not live with you? IF NONE, RECORD '00'.	a) SONS ELSEWHERE <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> b) DAUGHTERS ELSEWHERE <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
206	Have you ever given birth to a boy or girl who was born alive but later died? IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?	YES 1 NO 2	→ 208								
207	a) How many boys have died? b) And how many girls have died? IF NONE, RECORD '00'.	a) BOYS DEAD <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> b) GIRLS DEAD <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
208	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL. IF NONE, RECORD '00'.	TOTAL LIVE BIRTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>									
209	CHECK 208: Just to make sure that I have this right: you have had in TOTAL ____ births during your life. Is that correct? <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>YES</p> <input type="checkbox"/> ↓ </div> <div style="text-align: center;"> <p>NO <input type="checkbox"/></p> <p>PROBE AND CORRECT 201-208 AS NECESSARY.</p> ← </div> </div>										

SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
209A	<p>Women sometimes have pregnancies which do not result in a live born child. That is, a pregnancy can be ended by a stillbirth, a miscarriage, or an induced abortion. I will now ask you about each of them separately.</p> <p>How many stillbirths have you had, including an early fetal death (5-6 months pregnancy) or a late fetal death (7 or more months pregnancy)?</p> <p>IF NONE, RECORD '00'.</p>	<p>TOTAL STILLBIRTHS <input type="text"/> <input type="text"/></p>	
209B	<p>How many miscarriages have you had, including due to an ectopic pregnancy?</p> <p>IF NONE, RECORD '00'.</p>	<p>TOTAL MISCARRIAGES <input type="text"/> <input type="text"/></p>	
209C	<p>In total how many the induced abortions have you had?</p> <p>PROBE: Please include all of the induced abortions you had in your lifetime conducted at a health facility by any method at any stage of the pregnancy, including mini-abortions and vacuum-aspirations, or by using medicines or herbs conducted at home or somewhere else by yourself or with the help of a medical specialist or anybody else.</p> <p>IF NONE, RECORD '00'.</p>	<p>TOTAL ABORTIONS <input type="text"/> <input type="text"/></p>	
209D	<p>SUM ANSWERS TO 208, 209A, 209B, AND 209C, AND ENTER TOTAL.</p> <p>IF NONE, RECORD '00'.</p>	<p>TOTAL LIVE BIRTHS, STILLBIRTHS, MISCARRIAGES AND ABORTIONS <input type="text"/> <input type="text"/></p>	
210	<p>CHECK 209D:</p> <p>ONE OR MORE PREGNANCIES <input type="checkbox"/></p> <p>NO PREGNANCIES <input type="checkbox"/></p>	<p>.....</p>	<p>→ 226</p>

SECTION 2. REPRODUCTION

211 Now I would like to talk about each of your pregnancies, including those which ended in a live birth, a stillbirth, a miscarriage, and an induced abortion. Starting with the first pregnancy, please tell me the following information. RECORD ALL THE PREGNANCIES IN 212. RECORD TWINS AND TRIPLETS ON SEPARATE ROWS. IF THERE ARE MORE THAN 10 PREGNANCIES, USE AN ADDITIONAL QUESTIONNAIRE, STARTING WITH THE SECOND ROW.																											
212	Did your (first/next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion?	213	Was this a single or multiple pregnancy?	214	On what day, month, and year (this child was born/ did this pregnancy end)?	215	Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?	215A	CHECK 212 RECORD SAME RESPONSE	216	What name was given to this child? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD	217	Is (NAME) a boy or a girl?	218	Is (NAME) still alive?	219	IF ALIVE: How old was (NAME) at last birthday? RECORD AGE IN COMP-LETED YEARS.	220	IF ALIVE Is (NAME) living with you?	221	IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.	221A	IF DEAD: How old was (NAME) when (he/she) died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME) have (his/her) first birthday? THEN ASK: Exactly how many months old was (NAME) when (he/she) died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	221B	IF DEAD: Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW	221C	IF ABORTION: What was the main reason you decided to have this abortion? 1 = HER HEALTH DEFECTS 2 = BIRTH SELECTION 3 = SEX 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER
01	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY MONTH YEAR	YES (ADD PRGN) NO (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2 (SKIP TO 221A)	AGE IN YEARS	YES 1 NO 2	HOUSEHOLD LINE NUMBER (NEXT PREGNANCY)	DAYS 1 MONTHS 2 YEARS 3	Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW	What was the main reason you decided to have this abortion? 1 = HER HEALTH DEFECTS 2 = BIRTH SELECTION 3 = SEX 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER															
02	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY MONTH YEAR	YES (ADD PRGN) NO (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2 (SKIP TO 221A)	AGE IN YEARS	YES 1 NO 2	HOUSEHOLD LINE NUMBER (NEXT PREGNANCY)	DAYS 1 MONTHS 2 YEARS 3	Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW	What was the main reason you decided to have this abortion? 1 = HER HEALTH DEFECTS 2 = BIRTH SELECTION 3 = SEX 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER															
03	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY MONTH YEAR	YES (ADD PRGN) NO (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2 (SKIP TO 221A)	AGE IN YEARS	YES 1 NO 2	HOUSEHOLD LINE NUMBER (NEXT PREGNANCY)	DAYS 1 MONTHS 2 YEARS 3	Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW	What was the main reason you decided to have this abortion? 1 = HER HEALTH DEFECTS 2 = BIRTH SELECTION 3 = SEX 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER															

212	Did your (first/ next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion?											221C IF ABORTION: What was the main reason you decided to have this abortion? 1 = HER HEALTH 2 = BIRTH DEFECTS 3 = SEX SELECTION 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER
213	Was this a single or multiple pregnancy?											221B IF DEAD: Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW
214	On what day, month, and year (this child was born/ did this pregnancy end)?											221A IF DEAD: How old was (NAME) when (he/she) died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME) have (his/her) first birthday? THEN ASK: Exactly how many months old was (NAME) when (he/she) died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.
215	Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?											221 IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.
216	What name was given to this child?											220 IF ALIVE Is (NAME) living with you?
217	Is (NAME) a boy or a girl?											219 IF ALIVE: How old was (NAME) at last birthday? RECORD AGE IN COMP-LETED YEARS.
218	Is (NAME) still alive?											218 Is (NAME) still alive? RECORD AGE IN YEARS.
219	How old was (NAME) at last birthday?											217 Is (NAME) a boy or a girl? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
220	Is (NAME) living with you?											216 What name was given to this child? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
221	IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.											215 Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?
221C	IF ABORTION: What was the main reason you decided to have this abortion? 1 = HER HEALTH 2 = BIRTH DEFECTS 3 = SEX SELECTION 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER											214 On what day, month, and year (this child was born/ did this pregnancy end)?
221B	IF DEAD: Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW											213 Was this a single or multiple pregnancy?
221A	IF DEAD: How old was (NAME) when (he/she) died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME) have (his/her) first birthday? THEN ASK: Exactly how many months old was (NAME) when (he/she) died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.											212 Did your (first/ next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion?
												211 IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.
												210 IF ALIVE: How old was (NAME) at last birthday? RECORD AGE IN COMP-LETED YEARS.
												209 IF ALIVE: Is (NAME) living with you?
												208 Is (NAME) still alive? RECORD AGE IN YEARS.
												207 Is (NAME) a boy or a girl? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
												206 What name was given to this child? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
												205 Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?
												204 On what day, month, and year (this child was born/ did this pregnancy end)?
												203 Was this a single or multiple pregnancy?
												202 Did your (first/ next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion?
04	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214) ←											201 IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.
05	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214) ←											200 IF ALIVE: Is (NAME) living with you?
06	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214) ←											199 IF ALIVE: How old was (NAME) at last birthday? RECORD AGE IN COMP-LETED YEARS.
												198 Is (NAME) still alive? RECORD AGE IN YEARS.
												197 Is (NAME) a boy or a girl? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
												196 What name was given to this child? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD
												195 Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?
												194 On what day, month, and year (this child was born/ did this pregnancy end)?
												193 Was this a single or multiple pregnancy?
												192 Did your (first/ next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion?

212	Did your (first/next/etc.) pregnancy end in a live birth, a stillbirth, a miscarriage, or an abortion? PREGNANCY HISTORY NUMBER.	Was this a single or multiple pregnancy?	213 SING 1 MULT 2	On what day, month, and year (this child was born/ did this pregnancy end)?	214 DAY [] [] MONTH [] [] YEAR [] [] [] []	Were there any other pregnancies that ended between this one and the pregnancy we were just talking about, including any child who may have died after birth?	215 YES 1 (ADD PRGN) NO 2 (NEXT PRGN)	215A CHECK 212 RECORD SAME RESPONSE	216 What name was given to this child? RECORD NAME. WRITE 'BABY 1', 'BABY 2', ETC. IF NO NAME WAS GIVEN TO THE CHILD	217 Is (NAME) a boy or a girl?	218 Is (NAME) still alive?	219 How old was (NAME) at last birthday?	220 Is (NAME) living with you?	221 IF ALIVE: RECORD HOUSEHOLD LINE NUMBER OF CHILD. RECORD '00' IF CHILD NOT LISTED IN HOUSEHOLD.	221A IF DEAD: How old was (NAME) when (he/she) died? IF '12 MONTHS' OR '1 YR', ASK: Did (NAME) have (his/her) first birthday? THEN ASK: Exactly how many months old was (NAME) when (he/she) died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	221B IF DEAD: Does (NAME) have a death certificate? IF NO, PROBE: Has (NAME)'s death ever been registered in ZAGS? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW	221C IF ABORTION: What was the main reason you decided to have this abortion? 1 = HER HEALTH 2 = BIRTH DEFECTS 3 = SEX SELECTION 4 = POVERTY 5 = UNWANTED CHILD 6 = UNMARRIED 7 = OTHER 8 = DON'T REMEMBER																
07	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY [] [] MONTH [] [] YEAR [] [] [] []	YES 1 (ADD PRGN) NO 2 (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 (NEXT PRG.) ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []			
08	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY [] [] MONTH [] [] YEAR [] [] [] []	YES 1 (ADD PRGN) NO 2 (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 (NEXT PRG.) ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []
09	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY [] [] MONTH [] [] YEAR [] [] [] []	YES 1 (ADD PRGN) NO 2 (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 (NEXT PRG.) ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []
10	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 ABORTION... 4 (GO TO 214)	SING 1 MULT 2	DAY [] [] MONTH [] [] YEAR [] [] [] []	YES 1 (ADD PRGN) NO 2 (NEXT PRGN)	LIVE BIRTH... 1 STILLBIRTH... 2 MISCARRIAGE 3 (NEXT PRG.) ABORTION... 4 (GO TO 221C)	BOY 1 GIRL 2	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []	YES 1 NO 2	HOUSEHOLD LINE NUMBER [] [] (NEXT PREGNANCY)	DAYS 1 [] [] MONTHS 2 [] [] YEARS 3 [] []

SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
222	Have you had any pregnancies that ended since (NAME OF LAST LIVE BIRTH)/the stillbirth/the miscarriage/the abortion?	YES 1 (RECORD PREGNANCY(S) THAT ENDED IN TABLE) ← NO 2	
223	<p>RECORD AND COMPARE NUMBER OF PREGNANCIES RECORDED IN PREGNANCY HISTORY WITH EARLIER RESPONSES</p> <p>COMPARE 209D WITH NUMBER OF LIVE BIRTHS, STILLBIRTHS, MISCARRIES AND INDICED ABORTIONS IN PREGNANCY HISTORY</p> <p style="text-align: center;"> NUMBERS ARE SAME <input type="checkbox"/> ↓ NUMBERS ARE DIFFERENT <input type="checkbox"/> ← (PROBE AND RECONCILE) </p> <p>COMPARE 208 WITH NUMBER OF LIVE BIRTHS IN PREGNANCY HISTORY</p> <p style="text-align: center;"> NUMBERS ARE SAME <input type="checkbox"/> ↓ NUMBERS ARE DIFFERENT <input type="checkbox"/> ← (PROBE AND RECONCILE) </p> <p>COMPARE 209A WITH NUMBER OF STILLBIRTHS IN PREGNANCY HISTORY</p> <p style="text-align: center;"> NUMBERS ARE SAME <input type="checkbox"/> ↓ NUMBERS ARE DIFFERENT <input type="checkbox"/> ← (PROBE AND RECONCILE) </p> <p>COMPARE 209B WITH NUMBER OF MISCARRIAGES IN PREGNANCY HISTORY</p> <p style="text-align: center;"> NUMBERS ARE SAME <input type="checkbox"/> ↓ NUMBERS ARE DIFFERENT <input type="checkbox"/> ← (PROBE AND RECONCILE) </p> <p>COMPARE 209C WITH NUMBER OF ABORTIONS IN PREGNANCY HISTORY</p> <p style="text-align: center;"> NUMBERS ARE SAME <input type="checkbox"/> ↓ NUMBERS ARE DIFFERENT <input type="checkbox"/> ← (PROBE AND RECONCILE) </p>		
224	CHECK 214: ENTER THE NUMBER OF LIVE BIRTHS IN 2012-2017	NUMBER OF LIVE BIRTHS <input type="text"/> NONE 0	
225	<p>CHECK 212 AND 214</p> <p>C FOR EACH BIRTH IN 2012-2017, ENTER 'B' IN THE MONTH OF BIRTH IN THE CALENDAR. WRITE THE NAME OF THE CHILD TO THE LEFT OF THE 'B' CODE. FOR EACH BIRTH, ASK THE NUMBER OF COMPLETED MONTHS THE PREGNANCY LASTED AND RECORD 'P' IN EACH OF THE PRECEDING MONTHS ACCORDING TO THE DURATION OF PREGNANCY. (NOTE: THE NUMBER OF 'P's MUST BE ONE LESS THAN THE NUMBER OF MONTHS THAT THE PREGNANCY LASTED.)</p> <p>FOR EACH PREGNANCY IN 2012-2017 THAT DID NOT END IN A LIVE BIRTH (STILLBIRTH, MISCARRIAGE OR ABORTION), ENTER 'T' IN THE CALENDAR IN THE MONTH THAT THE PREGNANCY ENDED AND 'P' FOR THE REMAINING NUMBER OF COMPLETED MONTHS OF PREGNANCY. NOTE: THE NUMBER OF 'P's MUST BE ONE LESS THAN THE NUMBER OF MONTHS THAT THE PREGNANCY LASTED.</p>		

SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
226	Are you pregnant now?	YES 1 NO 2 UNSURE 8	→ 239								
227	How many months pregnant are you? RECORD NUMBER OF COMPLETED MONTHS. C ENTER 'P's IN THE CALENDAR, BEGINNING WITH THE MONTH OF INTERVIEW AND FOR THE TOTAL NUMBER OF COMPLETED MONTHS.	MONTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>									
228	When you got pregnant, did you want to get pregnant at that time?	YES 1 NO 2	→ 239								
229	CHECK 208: TOTAL NUMBER OF LIVE BIRTHS ONE OR MORE <input type="checkbox"/> NONE <input type="checkbox"/> a) Did you want to have a baby later on or did you not want any more children? b) Did you want to have a baby later on or did you not want any children?	LATER 1 NO MORE/NONE 2									
239	When did your last menstrual period start? _____ (DATE, IF GIVEN)	DAYS AGO 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> WEEKS AGO 2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MONTHS AGO 3 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> YEARS AGO 4 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> IN MENOPAUSE/ HAS HAD HYSTERECTOMY 994 BEFORE LAST BIRTH 995 NEVER MENSTRUATED 996									
240	From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant?	YES 1 NO 2 DON'T KNOW 8	→ 242								
241	Is this time just before her period begins, during her period, right after her period has ended, or halfway between two periods?	JUST BEFORE HER PERIOD BEGINS 1 DURING HER PERIOD 2 RIGHT AFTER HER PERIOD HAS ENDED 3 HALFWAY BETWEEN TWO PERIODS 4 OTHER _____ 6 (SPECIFY) DON'T KNOW 8									
242	After the birth of a child, can a woman become pregnant before her menstrual period has returned?	YES 1 NO 2 DON'T KNOW 8									

SECTION 3. CONTRACEPTION

301	Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy. Have you ever heard of (METHOD)?	
01	Female Sterilization. PROBE: Women can have an operation to avoid having any more children.	YES 1 NO 2
02	Male Sterilization. PROBE: Men can have an operation to avoid having any more children.	YES 1 NO 2
03	IUD. 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 years.	YES 1 NO 2
04	Injectables. PROBE: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.	YES 1 NO 2
05	Implants. 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.	YES 1 NO 2
06	Pill. PROBE: Women can take a pill every day to avoid becoming pregnant.	YES 1 NO 2
07	Condom. PROBE: Men can put a rubber sheath on their penis before sexual intercourse.	YES 1 NO 2
08	Female Condom. PROBE: Women can place a sheath in their vagina before sexual intercourse.	YES 1 NO 2
09	Emergency Contraception. PROBE: As an emergency measure, within five days after they have unprotected sexual intercourse, women can take special pills to prevent pregnancy.	YES 1 NO 2
11	Lactational Amenorrhea Method (LAM). PROBE: Up to six months after childbirth, before the menstrual period has returned, women use a method requiring frequent breastfeeding day and night.	YES 1 NO 2
12	Rhythm (or the Calendar) Method. PROBE: To avoid pregnancy, women do not have sexual intercourse on the days of the month they think they can get pregnant.	YES 1 NO 2
13	Withdrawal. PROBE: Men can be careful and pull out before climax.	YES 1 NO 2
14	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	YES, MODERN METHOD _____ A (SPECIFY) YES, TRADITIONAL METHOD _____ B (SPECIFY) NO Y















SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
302	CHECK 226: NOT PREGNANT <input type="checkbox"/> OR UNSURE ↓	PREGNANT <input type="checkbox"/> →	312
303	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	YES 1 NO 2	→ 312
304	Which method are you using? RECORD ALL MENTIONED. IF MORE THAN ONE METHOD MENTIONED, FOLLOW SKIP INSTRUCTION FOR HIGHEST METHOD IN LIST.	FEMALE STERILIZATION A MALE STERILIZATION B IUD C INJECTABLES D IMPLANTS E PILL F CONDOM G FEMALE CONDOM H EMERGENCY CONTRACEPTION I LACTATIONAL AMENORRHEA METHOD K RHYTHM/CALENDAR METHOD L WITHDRAWAL M OTHER MODERN METHOD X OTHER TRADITIONAL METHOD Y	→ 307 → 309 → 309 → 309 → 309
305	What is the brand name of the pills you are using? IF DON'T KNOW THE BRAND, ASK TO SEE THE PACKAGE.	MICROGYNON 01 RIGEVIDON 02 MICROLUT 03 OTHER _____ 96 (SPECIFY) DON'T KNOW 98	→ 309

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP						
307	<p>In what facility did the sterilization take place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p align="center">(NAME OF PLACE)</p>	<p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL 11</p> <p>MATERNITY HOME 12</p> <p>HEALTH CENTER URBAN/ HEALTH CENTER RURAL/FORMERLY POLYCLINIC 13</p> <p>REPRODUCTIVE HEALTH CENTER 14</p> <p>HEALTH HOUSE 15</p> <p>INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER 17</p> <p>IMMUNOPROPHYLAXIS CENTER 18</p> <p>AIDS CENTER 19</p> <p>HEALTHY LIFESTYLE CENTER 20</p> <p>FAMILY MEDICINE CENTER 21</p> <p>DISPENSARY 22</p> <p>OTHER PUBLIC SECTOR</p> <p>_____ 26</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/CLINIC 31</p> <p>PRIVATE DOCTOR'S OFFICE 32</p> <p>PHARMACY 33</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____ 36</p> <p align="center">(SPECIFY)</p> <p>OTHER _____ 96</p> <p align="center">(SPECIFY)</p> <p>DON'T KNOW 98</p>							
308	<p>In what month and year was the sterilization performed?</p>	<p>MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>							<p align="right">} → 310</p>
309	<p>Since what month and year have you been using (CURRENT METHOD) without stopping?</p> <p>PROBE: For how long have you been using (CURRENT METHOD) now without stopping?</p>	<p>MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>							
310	<p>CHECK 308 AND 309, AND 214: ANY BIRTH OR PREGNANCY TERMINATION AFTER MONTH AND YEAR OF START OF USE OF CONTRACEPTION IN 308 OR 309</p> <p>NO <input type="checkbox"/></p> <p align="center">↓</p>	<p align="right">YES <input type="checkbox"/></p> <p align="center">←</p> <p align="center">GO BACK TO 308 OR 309, PROBE AND RECORD MONTH AND YEAR AT START OF CONTINUOUS USE OF CURRENT METHOD (MUST BE AFTER LAST BIRTH OR PREGNANCY TERMINATION).</p>							

SECTION 3. CONTRACEPTION (CAPI OPTION)

311	<p>CHECK 308 AND 309:</p> <p>YEAR IS 2012-2017 </p> <p>C ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND IN EACH MONTH BACK TO THE DATE STARTED USING.</p> <p>THEN CONTINUE </p>	<p>YEAR IS 2011 OR EARLIER </p> <p>C ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND EACH MONTH BACK TO JANUARY 2012 .</p> <p>THEN </p> <p>(SKIP TO 324) </p>		
312	<p>I would like to ask you some questions about the times you or your partner may have used a method to avoid getting pregnant during the last few years.</p> <p>C USE CALENDAR TO PROBE FOR EARLIER PERIODS OF USE AND NONUSE, STARTING WITH MOST RECENT USE, BACK TO JANUARY 2012. USE NAMES OF CHILDREN, DATES OF BIRTH, AND PERIODS OF PREGNANCY AS REFERENCE POINTS.</p>			
		COLUMN 1	COLUMN 2	COLUMN 3
312A	MONTH AND YEAR OF START OF INTERVAL OF USE OR NON-USE.	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>
312B	Between (EVENT) in (MONTH/YEAR) and (EVENT) in (MONTH/YEAR), did you or your partner use any method of contraception?	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 312I) </p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 312I) </p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 312I) </p>
312C	Which method was that?	METHOD CODE .. <input type="text"/>	METHOD CODE .. <input type="text"/>	METHOD CODE .. <input type="text"/>
312D	How many months after (EVENT) in (MONTH/YEAR) did you start to use (METHOD)? CIRCLE '95' IF RESPONDENT GIVES THE DATE OF STARTING TO USE THE METHOD.	<p>IMMEDIATELY 00</p> <p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312F) </p> <p>DATE GIVEN 95</p>	<p>IMMEDIATELY 00</p> <p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312F) </p> <p>DATE GIVEN 95</p>	<p>IMMEDIATELY 00</p> <p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312F) </p> <p>DATE GIVEN 95</p>
312E	RECORD MONTH AND YEAR RESPONDENT STARTED USING METHOD.	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>
312F	For how many months did you use (METHOD)? CIRCLE '95' IF RESPONDENT GIVES THE DATE OF TERMINATION OF USE.	<p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312H) </p> <p>DATE GIVEN 95</p>	<p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312H) </p> <p>DATE GIVEN 95</p>	<p>MONTHS .. <input type="text"/> <input type="text"/></p> <p>(SKIP TO 312H) </p> <p>DATE GIVEN 95</p>
312G	RECORD MONTH AND YEAR RESPONDENT STOPPED USING METHOD.	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>YEAR</p>
312H	Why did you stop using (METHOD)?	REASON STOPPED <input type="text"/>	REASON STOPPED <input type="text"/>	REASON STOPPED <input type="text"/>
312I	<p>GO BACK TO 312A IN NEXT COLUMN; OR, IF NO MORE GAPS, GO TO 313.</p>			

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
313	CHECK THE CALENDAR FOR USE OF ANY CONTRACEPTIVE METHOD IN ANY MONTH NO METHOD USED <input type="checkbox"/>	ANY METHOD USED <input type="checkbox"/>	→ 315
314	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	YES 1 NO 2	→ 326
315	CHECK 304: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	NO CODE CIRCLED 00 FEMALE STERILIZATION 01 MALE STERILIZATION 02 IUD 03 INJECTABLES 04 IMPLANTS 05 PILL 06 CONDOM 07 FEMALE CONDOM 08 EMERGENCY CONTRACEPTION 09 LACTATIONAL AMENORRHEA METHOD 11 RHYTHM/CALENDAR METHOD 12 WITHDRAWAL 13 OTHER MODERN METHOD 95 OTHER TRADITIONAL METHOD 96	→ 326 → 319 → 327 → 323
316	You first started using (CURRENT METHOD) in (DATE FROM 309). Where did you get it at that time? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE)	PUBLIC SECTOR GOVERNMENT HOSPITAL 11 MATERNITY HOME 12 HEALTH CENTER URBAN/HEALTH CENTER RURAL/FORMERLY PLYCLINIC 13 REPRODUCTIVE HEALTH CENTER 14 HEALTH HOUSE 15 INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS CENTER 17 IMMUNOPROPHYLAXIS CENTER 18 AIDS CENTER 19 HEALTHY LIFESTYLE CENTER 20 FAMILY MEDICINE CENTER 21 DISPENSARY 22 OTHER PUBLIC SECTOR 26 _____ (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/CLINIC 31 PRIVATE DOCTOR'S OFFICE 32 PHARMACY 33 OTHER PRIVATE MEDICAL SECTOR 36 _____ (SPECIFY) OTHER SOURCE SHOP/MARKET 41 FRIEND/RELATIVE 43 OTHER 96 _____ (SPECIFY)	
317	CHECK 304: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	IUD 03 INJECTABLES 04 IMPLANTS 05 PILL 06 CONDOM 07 FEMALE CONDOM 08 EMERGENCY CONTRACEPTION 09 OTHER MODERN METHOD 95 OTHER TRADITIONAL METHOD 96	→ 323 → 322 → 323

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
318	At that time, were you told about side effects or problems you might have with the method?	YES 1 NO 2	→ 321 → 320
319	When you got sterilized, were you told about side effects or problems you might have with the method?	YES 1 NO 2	→ 321
320	Were you ever told by a health or family planning worker about side effects or problems you might have with the method?	YES 1 NO 2	→ 322
321	Were you told what to do if you experienced side effects or problems?	YES 1 NO 2	
322	<p>CHECK 318 AND 319:</p> <p align="center"> <input type="checkbox"/> ANY 'YES' ↓ </p> <p>a) At that time, were you told about other methods of family planning that you could use?</p> <p align="center"> OTHER <input type="checkbox"/> ↓ </p> <p>b) When you obtained (CURRENT METHOD FROM 315) from (SOURCE OF METHOD FROM 307 OR 316), were you told about other methods of family planning that you could use?</p>	YES 1 NO 2	→ 324
323	Were you ever told by a health or family planning worker about other methods of family planning that you could use?	YES 1 NO 2	
324	<p>CHECK 304:</p> <p>CIRCLE METHOD CODE:</p> <p>IF MORE THAN ONE METHOD CODE CIRCLED IN 304, CIRCLE CODE FOR HIGHEST METHOD IN LIST.</p>	FEMALE STERILIZATION 01 MALE STERILIZATION 02 IUD 03 INJECTABLES 04 IMPLANTS 05 PILL 06 CONDOM 07 FEMALE CONDOM 08 EMERGENCY CONTRACEPTION 09 LACTATIONAL AMENORRHEA METHOD 11 RHYTHM/CALENDAR METHOD 12 WITHDRAWAL 13 OTHER MODERN METHOD 95 OTHER TRADITIONAL METHOD 96	→ 327 → 327 → 327

SECTION 4. PREGNANCY AND POSTNATAL CARE

401	<p>CHECK 224:</p> <p style="text-align: center;">ONE OR MORE BIRTHS IN 2012-2017 <input type="checkbox"/></p> <p style="text-align: center;">NO BIRTHS IN 2012-2017 <input type="checkbox"/> → 648</p>	
402	<p>CHECK 214. RECORD THE PREGNANCY HISTORY NUMBER IN 403 AND THE NAME AND SURVIVAL STATUS IN 404 FOR EACH LIVE BIRTH IN 2012-2017. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST LIVE BIRTH.</p> <p>IF THERE ARE MORE THAN 2 BIRTHS, USE LAST COLUMN OF ADDITIONAL QUESTIONNAIRE(S).</p> <p>Now I would like to ask some questions about your children born in the last five years. (We will talk about each separately.)</p>	
403	<p style="text-align: center;">LAST LIVE BIRTH</p> <p>PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/></p>	<p style="text-align: center;">NEXT-TO-LAST LIVE BIRTH</p> <p>PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/></p>
404	<p>FROM 216 AND 218:</p> <p>NAME _____</p> <p>LIVING <input type="checkbox"/> DEAD <input type="checkbox"/></p>	<p>NAME _____</p> <p>LIVING <input type="checkbox"/> DEAD <input type="checkbox"/></p>
405	<p>When you got pregnant with (NAME), did you want to get pregnant at that time?</p> <p>YES 1</p> <p style="text-align: right;">(SKIP TO 408) ←</p> <p>NO 2</p>	<p>When you got pregnant with (NAME), did you want to get pregnant at that time?</p> <p>YES 1</p> <p style="text-align: right;">(SKIP TO 426) ←</p> <p>NO 2</p>
406	<p>CHECK 208:</p> <p style="text-align: center;">ONLY ONE LIVE <input type="checkbox"/></p> <p>a) Did you want to have a baby later on, or did you not want any children?</p> <p style="text-align: center;">MORE THAN ONE LIVE BIRTH <input type="checkbox"/></p> <p>b) Did you want to have a baby later on, or did you not want any more children?</p> <p>LATER 1</p> <p>NO MORE/NONE 2</p> <p style="text-align: right;">(SKIP TO 408) ←</p>	<p>CHECK 208:</p> <p style="text-align: center;">ONLY ONE LIVE <input type="checkbox"/></p> <p>a) Did you want to have a baby later on, or did you not want any children?</p> <p style="text-align: center;">MORE THAN ONE LIVE BIRTH <input type="checkbox"/></p> <p>b) Did you want to have a baby later on, or did you not want any more children?</p> <p>LATER 1</p> <p>NO MORE/NONE 2</p> <p style="text-align: right;">(SKIP TO 426) ←</p>
407	<p>How much longer did you want to wait?</p> <p>MONTHS 1 <input type="text"/> <input type="text"/></p> <p>YEARS 2 <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 998</p>	<p>How much longer did you want to wait?</p> <p>MONTHS 1 <input type="text"/> <input type="text"/></p> <p>YEARS 2 <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 998</p>
408	<p>Did you see anyone for antenatal care for this pregnancy?</p> <p>YES 1</p> <p>NO 2</p> <p style="text-align: right;">(SKIP TO 420A) ←</p>	
409	<p>Whom did you see?</p> <p>Anyone else?</p> <p>PROBE TO IDENTIFY EACH TYPE OF PERSON AND RECORD ALL MENTIONED.</p> <p>HEALTH PERSONNEL</p> <p>FAMILY DOCTOR A</p> <p>OB-GY B</p> <p>OTHER DOCTOR C</p> <p>NURSE/MALE NURSE D</p> <p>MIDWIFE E</p> <p>OTHER PERSON</p> <p>TRADITIONAL BIRTH ATTENDANT F</p> <p>OTHER _____ X</p> <p style="text-align: center;">(SPECIFY)</p>	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____												
410	<p>Where did you receive antenatal care for this pregnancy?</p> <p>Anywhere else?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p align="center">(NAME OF PLACE)</p>	<p>HOME</p> <p>YOUR HOME A</p> <p>OTHER HOME B</p> <p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL ... C</p> <p>MATERNITY HOME D</p> <p>HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC E</p> <p>REPRODUCTIVE HEALTH CENTER F</p> <p>HEALTH HOUSE G</p> <p>FAMILY MEDICINE CNTR ... H</p> <p>OTHER PUBLIC SECTOR _____ I</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC J</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____ K</p> <p align="center">(SPECIFY)</p> <p>OTHER _____ X</p> <p align="center">(SPECIFY)</p>													
411	<p>How many months pregnant were you when you first received antenatal care for this pregnancy?</p>	<p>MONTHS <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p>													
412	<p>How many times did you receive antenatal care during this pregnancy?</p>	<p>NUMBER OF TIMES <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p>													
413	<p>As part of your antenatal care during this pregnancy, were any of the following done at least once:</p> <p>a) Was your blood pressure measured?</p> <p>b) Did you give a urine sample?</p> <p>c) Did you give a blood sample?</p>	<table border="0"> <tr> <td></td> <td align="center">YES</td> <td align="center">NO</td> </tr> <tr> <td>a) BP</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>b) URINE</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>c) BLOOD</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		YES	NO	a) BP	1	2	b) URINE	1	2	c) BLOOD	1	2	
	YES	NO													
a) BP	1	2													
b) URINE	1	2													
c) BLOOD	1	2													
420A	<p>Immediately before this pregnancy, did you take the folic acid tablets to prevent some birth defects?</p> <p>SHOW TABLETS.</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>													
420B	<p>During the first 3 months of this pregnancy, did you take the folic acid tablets to prevent some birth defects?</p> <p>SHOW TABLETS.</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>													

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____
420	During this pregnancy, were you given or did you buy any iron tablets? SHOW TABLETS/SYRUP.	YES 1 NO 2 (SKIP TO 422) ← DON'T KNOW 8	
421	During the whole pregnancy, for how many days did you take the tablets? IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER OF DAYS.	DAYS <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 998	
422	During this pregnancy, did you take any drug for intestinal worms?	YES 1 NO 2 DON'T KNOW 8	
422A	What are the danger signs and complications of pregnancy and childbirth that would indicate that the woman needs immediate medical care or treatment? Anything else? RECORD ALL MENTIONED	SEVERE ABDOMINAL PAIN ... A VAGINAL BLEEDING B FEVER C EDEMA D SEVERE HEADACHE E BLURRED VISION F NAUSEA OR VOMITING G POOR FETAL MOVEMENT H FAST OR DIFFICULT BREATHING I CONVULSIONS/FITS J LOSS OF CONSCIOUSNESS .. K WEAKNESS/ TOO WEAK TO GET OUT OF BED L STRONG LABOR PAIN M OTHER _____ X (SPECIFY) DON'T KNOW Z	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH	NEXT-TO-LAST LIVE BIRTH
		NAME _____	NAME _____
426	When (NAME) was born, was (NAME) very large, larger than average, average, smaller than average, or very small?	VERY LARGE 1 LARGER THAN AVERAGE 2 AVERAGE 3 SMALLER THAN AVERAGE 4 VERY SMALL 5 DON'T KNOW 8	VERY LARGE 1 LARGER THAN AVERAGE 2 AVERAGE 3 SMALLER THAN AVERAGE 4 VERY SMALL 5 DON'T KNOW 8
427	Was (NAME) weighed at birth?	YES 1 NO 2 (SKIP TO 429) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 429) ← DON'T KNOW 8
428	How much did (NAME) weigh? RECORD WEIGHT IN KILOGRAMS FROM HEALTH CARD, IF AVAILABLE.	KG FROM CARD 1 <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> KG FROM RECALL 2 <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 99998	KG FROM CARD 1 <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> KG FROM RECALL 2 <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 99998
429	Who assisted with the delivery of (NAME)? Anyone else? PROBE FOR THE TYPE(S) OF PERSON(S) AND RECORD ALL MENTIONED. IF RESPONDENT SAYS NO ONE ASSISTED, PROBE TO DETERMINE WHETHER ANY ADULTS WERE PRESENT AT THE DELIVERY.	HEALTH PERSONNEL FAMILY DOCTOR A OB-GY B OTHER DOCTOR C NURSE/MALE NURSE D MIDWIFE E OTHER PERSON TRADITIONAL BIRTH ATTENDANT F RELATIVE/FRIEND G OTHER _____ X (SPECIFY) NO ONE ASSISTED Y	HEALTH PERSONNEL FAMILY DOCTOR A OB-GY B OTHER DOCTOR C NURSE/MALE NURSE D MIDWIFE E OTHER PERSON TRADITIONAL BIRTH ATTENDANT F RELATIVE/FRIEND G OTHER _____ X (SPECIFY) NO ONE ASSISTED Y

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____						
430	<p>Where did you give birth to (NAME)?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____ (NAME OF PLACE)</p>	<p>HOME</p> <p>YOUR HOME 11 (SKIP TO 434) ←</p> <p>OTHER HOME 12</p> <p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL 21 MATERNITY HOME 22 HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23 HEALTH HOUSE 24 FAMILY MEDICINE CNTR .. 25 OTHER PUBLIC SECTOR</p> <p>_____ 26 (SPECIFY)</p> <p>PRIVATE MED. SECTOR</p> <p>PVT. HOSPITAL/ CLINIC 31 OTHER PRIVATE MED. SECTOR</p> <p>_____ 36 (SPECIFY)</p> <p>OTHER _____ 96 (SPECIFY) (SKIP TO 434) ←</p>	<p>HOME</p> <p>YOUR HOME 11 (SKIP TO 434) ←</p> <p>OTHER HOME 12</p> <p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL 21 MATERNITY HOME 22 HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23 HEALTH HOUSE 24 FAMILY MEDICINE CNTR .. 25 OTHER PUBLIC SECTOR</p> <p>_____ 26 (SPECIFY)</p> <p>PRIVATE MED. SECTOR</p> <p>PVT. HOSPITAL/ CLINIC 31 OTHER PRIVATE MED. SECTOR</p> <p>_____ 36 (SPECIFY)</p> <p>OTHER _____ 96 (SPECIFY) (SKIP TO 434) ←</p>						
431	<p>How long after (NAME) was delivered did you stay there?</p> <p>IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS 1 <table border="1" data-bbox="911 1144 1050 1205"><tr><td></td><td></td></tr></table></p> <p>DAYS 2 <table border="1" data-bbox="911 1205 1050 1265"><tr><td></td><td></td></tr></table></p> <p>WEEKS 3 <table border="1" data-bbox="911 1265 1050 1326"><tr><td></td><td></td></tr></table></p> <p>DON'T KNOW 998</p>							
432	<p>Was (NAME) delivered by caesarean, that is, did they cut your belly open to take the baby out?</p>	<p>YES 1 NO 2 (SKIP TO 434) ←</p>	<p>YES 1 NO 2 (SKIP TO 434) ←</p>						
433	<p>When was the decision made to have the caesarean section? Was it before or after your labor pains started?</p>	<p>BEFORE 1 AFTER 2</p>	<p>BEFORE 1 AFTER 2</p>						
434	<p>Immediately after the birth, was (NAME) put on your abdomen?</p>	<p>YES 1 NO 2 (SKIP TO 434B) ←</p> <p>DON'T KNOW 8</p>	<p>YES 1 NO 2 (SKIP TO 459) ←</p> <p>DON'T KNOW 8</p>						
434A	<p>Was (NAME)'s bare skin touching your bare skin?</p>	<p>YES 1 NO 2 DON'T KNOW 8</p>	<p>YES 1 NO 2 DON'T KNOW 8</p>						
434B	<p>CHECK 430: PLACE OF DELIVERY</p>	<p>CODE 11, 12, OR 96 <input type="checkbox"/> OTHER <input type="checkbox"/> CIRCLED</p> <p>(SKIP TO 449) ←</p>							

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH 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 1 NO 2 (SKIP TO 438) ←							
436	How long after delivery did the first check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS 1 <table border="1" data-bbox="914 495 1051 546"><tr><td></td><td></td></tr></table> DAYS 2 <table border="1" data-bbox="914 551 1051 602"><tr><td></td><td></td></tr></table> WEEKS 3 <table border="1" data-bbox="914 607 1051 658"><tr><td></td><td></td></tr></table> DON'T KNOW 998							
437	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	HEALTH PERSONNEL FAMILY DOCTOR 11 OB-GY 12 OTHER DOCTOR 13 NURSE/MALE NURSE 14 MIDWIFE 15 OTHER PERSON TRADITIONAL BIRTH ATTENDANT 21 OTHER _____ 96 (SPECIFY)							
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?	YES 1 NO 2 (SKIP TO 441) ← DON'T KNOW 8							
439	How long after delivery was (NAME)'s health first checked? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS 1 <table border="1" data-bbox="914 1359 1051 1411"><tr><td></td><td></td></tr></table> DAYS 2 <table border="1" data-bbox="914 1415 1051 1467"><tr><td></td><td></td></tr></table> WEEKS 3 <table border="1" data-bbox="914 1471 1051 1523"><tr><td></td><td></td></tr></table> DON'T KNOW 998							
440	Who checked on (NAME)'s health at that time? PROBE FOR MOST QUALIFIED PERSON.	HEALTH PERSONNEL FAMILY DOCTOR 11 OB-GY 12 OTHER DOCTOR 13 NURSE/MALE NURSE 14 MIDWIFE 15 OTHER PERSON TRADITIONAL BIRTH ATTENDANT 21 OTHER _____ 96 (SPECIFY)							

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH 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 1 NO 2 (SKIP TO 445) ←							
442	How long after delivery did that check take place? IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS 1 <table border="1" data-bbox="912 414 1053 470"><tr><td> </td><td> </td></tr></table> DAYS 2 <table border="1" data-bbox="912 470 1053 526"><tr><td> </td><td> </td></tr></table> WEEKS 3 <table border="1" data-bbox="912 526 1053 582"><tr><td> </td><td> </td></tr></table> DON'T KNOW 998							
443	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	HEALTH PERSONNEL FAMILY DOCTOR 11 OB-GY 12 OTHER DOCTOR 13 NURSE/MALE NURSE 14 MIDWIFE 15 OTHER PERSON TRADITIONAL BIRTH ATTENDANT 21 OTHER _____ 96 (SPECIFY)							
444	Where did the check take place? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE)	HOME YOUR HOME 11 OTHER HOME 12 PUBLIC SECTOR GOVERNMENT HOSPITAL .. 21 MATERNITY HOME 22 HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23 HEALTH HOUSE 24 FAMILY MEDICINE CNTR .. 25 INTEGRATED CHILDHOOD ILLNESS CENTER 27 OTHER PUBLIC SECTOR _____ 26 (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/ CLINIC 31 OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY) OTHER _____ 96 (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 two months after you left (FACILITY IN 430)?	YES 1 NO 2 (SKIP TO 457) ← DON'T KNOW 8							

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____
446	<p>How many hours, days or weeks after the birth of (NAME) did that check take place?</p> <p>IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS 1</p> <p>DAYS 2</p> <p>WEEKS 3</p> <p>DON'T KNOW 998</p>	
447	<p>Who checked on (NAME)'s health at that time?</p> <p>PROBE FOR MOST QUALIFIED PERSON.</p>	<p>HEALTH PERSONNEL</p> <p>FAMILY DOCTOR 11</p> <p>OB-GY 12</p> <p>OTHER DOCTOR 13</p> <p>NURSE/MALE NURSE 14</p> <p>MIDWIFE 15</p> <p>OTHER PERSON</p> <p>TRADITIONAL BIRTH ATTENDANT 21</p> <p>OTHER _____ 96 (SPECIFY)</p>	
448	<p>Where did this check of (NAME) take place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____ (NAME OF PLACE)</p>	<p>HOME</p> <p>YOUR HOME 11</p> <p>ANOTHER HOME 12</p> <p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL .. 21</p> <p>MATERNITY HOME 22</p> <p>HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23</p> <p>HEALTH HOUSE 24</p> <p>FAMILY MEDICINE CNTR .. 25</p> <p>INTEGRATED CHILDHOOD ILLNESS CENTER 27</p> <p>OTHER PUBLIC SECTOR _____ 26 (SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC 31</p> <p>OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY)</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>(SKIP TO 457) ←</p>	
449	<p>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 after you gave birth to (NAME)?</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 453) ←</p>	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____						
450	<p>How long after delivery did the first check take place?</p> <p>IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS 1 <table border="1" data-bbox="914 271 1051 322"><tr><td> </td><td> </td></tr></table></p> <p>DAYS 2 <table border="1" data-bbox="914 327 1051 378"><tr><td> </td><td> </td></tr></table></p> <p>WEEKS 3 <table border="1" data-bbox="914 383 1051 434"><tr><td> </td><td> </td></tr></table></p> <p>DON'T KNOW 998</p>							
451	<p>Who checked on your health at that time?</p> <p>PROBE FOR MOST QUALIFIED PERSON.</p>	<p>HEALTH PERSONNEL</p> <p>FAMILY DOCTOR 11</p> <p>OB-GY 12</p> <p>OTHER DOCTOR 13</p> <p>NURSE/MALE NURSE 14</p> <p>MIDWIFE 15</p> <p>OTHER PERSON</p> <p>TRADITIONAL BIRTH ATTENDANT 21</p> <p>OTHER _____ 96 (SPECIFY)</p>							
452	<p>Where did this first check take place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p>(NAME OF PLACE)</p>	<p>HOME</p> <p>YOUR HOME 11</p> <p>OTHER HOME 12</p> <p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL .. 21</p> <p>MATERNITY HOME 22</p> <p>HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23</p> <p>HEALTH HOUSE 24</p> <p>FAMILY MEDICINE CNTR .. 25</p> <p>INTEGRATED CHILDHOOD ILLNESS CENTER 27</p> <p>OTHER PUBLIC SECTOR</p> <p>_____ 26 (SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC 31</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____ 36 (SPECIFY)</p> <p>OTHER _____ 96 (SPECIFY)</p>							
453	<p>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. In the two months after (NAME) was born, did any health care provider or a traditional birth attendant check on (NAME)'s health?</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 457) ←</p> <p>DON'T KNOW 8</p>							

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____
454	<p>How many hours, days or weeks after the birth of (NAME) did the first check take place?</p> <p>IF LESS THAN ONE DAY, RECORD HOURS; IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS AFTER BIRTH 1</p> <p>DAYS AFTER BIRTH 2</p> <p>WEEKS AFTER BIRTH 3</p> <p>DON'T KNOW 998</p>	
455	<p>Who checked on (NAME)'s health at that time?</p> <p>PROBE FOR MOST QUALIFIED PERSON.</p>	<p>HEALTH PERSONNEL</p> <p>FAMILY DOCTOR 11</p> <p>OB-GY 12</p> <p>OTHER DOCTOR 13</p> <p>NURSE/MALE NURSE 14</p> <p>MIDWIFE 15</p> <p>OTHER PERSON</p> <p>TRADITIONAL BIRTH ATTENDANT 21</p> <p>OTHER _____ 96 (SPECIFY)</p>	
456	<p>Where did this first check of (NAME) take place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____ (NAME OF PLACE)</p>	<p>HOME</p> <p>YOUR HOME 11</p> <p>OTHER HOME 12</p> <p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL .. 21</p> <p>MATERNITY HOME 22</p> <p>HEALTH CENTER URBAN/ H.C. RURAL/POLYCLINIC .. 23</p> <p>HEALTH HOUSE 24</p> <p>FAMILY MEDICINE CNTR .. 25</p> <p>INTEGRATED CHILDHOOD ILLNESS CENTER 27</p> <p>OTHER PUBLIC SECTOR _____ 26 (SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC 31</p> <p>OTHER PRIVATE MEDICAL SECTOR _____ 36 (SPECIFY)</p> <p>OTHER _____ 96 (SPECIFY)</p>	

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____																								
457	During the first two days after (NAME)'s birth, did any health care provider do the following: a) Examine the cord? b) Measure (NAME)'s temperature? c) Counsel you on danger signs for newborns? d) Counsel you on breastfeeding? e) Observe (NAME) breastfeeding?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> <td style="text-align: center;">DK</td> </tr> <tr> <td>a) CORD</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>b) TEMP.</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>c) SIGNS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>d) COUNSEL BREAST-FEED</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>e) OBSERVE BREAST-FEED</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </table>		YES	NO	DK	a) CORD	1	2	8	b) TEMP.	1	2	8	c) SIGNS	1	2	8	d) COUNSEL BREAST-FEED	1	2	8	e) OBSERVE BREAST-FEED	1	2	8	
	YES	NO	DK																								
a) CORD	1	2	8																								
b) TEMP.	1	2	8																								
c) SIGNS	1	2	8																								
d) COUNSEL BREAST-FEED	1	2	8																								
e) OBSERVE BREAST-FEED	1	2	8																								
458	Has your menstrual period returned since the birth of (NAME)?	YES 1 (SKIP TO 460) ← NO 2 (SKIP TO 461) ←																									
459	Did your period return between the birth of (NAME) and your next pregnancy?		YES 1 NO 2 (SKIP TO 463) ←																								
460	For how many months after the birth of (NAME) did you not have a period?	MONTHS <input type="text"/> <input type="text"/> DON'T KNOW 98	MONTHS <input type="text"/> <input type="text"/> DON'T KNOW 98																								
461	CHECK 226: IS RESPONDENT PREGNANT?	NOT PREGNANT <input type="checkbox"/> PREGNANT OR UNSURE <input type="checkbox"/> (SKIP TO 463) ←																									
462	Have you had sexual intercourse since the birth of (NAME)?	YES 1 NO 2 (SKIP TO 464) ←																									
463	For how many months after the birth of (NAME) did you not have sexual intercourse?	MONTHS <input type="text"/> <input type="text"/> DON'T KNOW 98	MONTHS <input type="text"/> <input type="text"/> DON'T KNOW 98																								
464	Did you ever breastfeed (NAME)?	YES 1 (SKIP TO 466) ← NO 2	YES 1 NO 2																								
465	CHECK 404: IS CHILD LIVING?	LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (SKIP TO 470) ← (SKIP TO 471) ←																									
466	How long after birth did you first put (NAME) to the breast? IF LESS THAN 1 HOUR, RECORD '00' HOURS; IF LESS THAN 24 HOURS, RECORD HOURS; OTHERWISE, RECORD DAYS.	IMMEDIATELY 000 HOURS 1 <input type="text"/> <input type="text"/> DAYS 2 <input type="text"/> <input type="text"/>																									
467	In the first three days after delivery, was (NAME) given anything to drink other than breast milk?	YES 1 NO 2																									

SECTION 4. PREGNANCY AND POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	LAST LIVE BIRTH NAME _____	NEXT-TO-LAST LIVE BIRTH NAME _____
468	CHECK 404: IS CHILD LIVING?	LIVING <input type="checkbox"/> ↓ DEAD <input type="checkbox"/> (SKIP TO 471) ←	LIVING <input type="checkbox"/> ↓ DEAD <input type="checkbox"/> (SKIP TO 471) ←
469	Are you still breastfeeding (NAME)?	YES 1 NO 2	
470	Did (NAME) drink anything from a bottle with a nipple yesterday or last night?	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
471		GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 501A.	GO BACK TO 405 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 501A.

SECTION 5A. CHILD IMMUNIZATION (LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501A	CHECK 214 IN THE PREGNANCY HISTORY: ANY LIVE BIRTHS IN 2014-2017? ONE OR MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/>	NO LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> → 601	
502A	RECORD THE NAME AND PREGNANCY HISTORY NUMBER FROM 216 AND 212 OF THE LAST CHILD BORN IN 2014-2017. NAME OF LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>	
503A	CHECK 218 FOR CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/> → 501B	
504A	Do you have a card or other document where (NAME)'s vaccinations are written down?	YES, HAS ONLY A CARD 1 → 507A YES, HAS ONLY AN OTHER DOCUMENT 2 → 507A YES, HAS CARD AND OTHER DOCUMENT 3 NO, NO CARD AND NO OTHER DOCUMENT 4	
505A	Did you ever have a vaccination card for (NAME)?	YES 1 NO 2	
506A	CHECK 504A: CODE '2' CIRCLED <input type="checkbox"/>	CODE '4' CIRCLED <input type="checkbox"/> → 511A	
507A	May I see the card or other document where (NAME)'s vaccinations are written down?	YES, ONLY CARD/FORM 63 SEEN 1 YES, ONLY OTHER DOCUMENT SEEN 2 YES, CARD/FORM 63 AND OTHER DOCUMENT SEEN 3 NO CARD/FORM 63 AND NO OTHER DOCUMENT... 4 → 511A	

SECTION 5A. CHILD IMMUNIZATION (LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																								
	NAME OF LAST BIRTH _____ PREGNANCY HISTORY NUMBER .. <table border="1" style="display: inline-table; width: 40px; height: 20px; vertical-align: middle;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>																																																										
508A	<p>COPY DATES FROM THE CARD. WRITE '44' IN 'DAY' COLUMN IF CARD SHOWS THAT A DOSE WAS GIVEN, BUT NO DATE IS RECORDED.</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width:15%;">Vaccine</th> <th style="width:15%;">Day</th> <th style="width:15%;">Month</th> <th style="width:15%;">Year</th> </tr> </thead> <tbody> <tr> <td>TB</td> <td>BCG (given at birth)</td> <td></td> <td></td> </tr> <tr> <td rowspan="5">Polio</td> <td>Polio 0 (given at birth)</td> <td></td> <td></td> </tr> <tr> <td>Polio 1</td> <td></td> <td></td> </tr> <tr> <td>Polio 2</td> <td></td> <td></td> </tr> <tr> <td>Polio 3</td> <td></td> <td></td> </tr> <tr> <td>Polio 4</td> <td></td> <td></td> </tr> <tr> <td>Hepatitis</td> <td>HepB (given at birth)</td> <td></td> <td></td> </tr> <tr> <td rowspan="4">Pentavalent/ Diphtheria, pertussis, and tetanus</td> <td>Penta 1</td> <td></td> <td></td> </tr> <tr> <td>Penta 2</td> <td></td> <td></td> </tr> <tr> <td>Penta 3</td> <td></td> <td></td> </tr> <tr> <td>DPT 4</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">Rotavirus</td> <td>Rota 1</td> <td></td> <td></td> </tr> <tr> <td>Rota 2</td> <td></td> <td></td> </tr> <tr> <td>Measles and Rubella</td> <td>MR 1</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Vitamin A (last dose)</td> <td></td> <td></td> </tr> </tbody> </table>			Vaccine	Day	Month	Year	TB	BCG (given at birth)			Polio	Polio 0 (given at birth)			Polio 1			Polio 2			Polio 3			Polio 4			Hepatitis	HepB (given at birth)			Pentavalent/ Diphtheria, pertussis, and tetanus	Penta 1			Penta 2			Penta 3			DPT 4			Rotavirus	Rota 1			Rota 2			Measles and Rubella	MR 1				Vitamin A (last dose)		
Vaccine	Day	Month	Year																																																								
TB	BCG (given at birth)																																																										
Polio	Polio 0 (given at birth)																																																										
	Polio 1																																																										
	Polio 2																																																										
	Polio 3																																																										
	Polio 4																																																										
Hepatitis	HepB (given at birth)																																																										
Pentavalent/ Diphtheria, pertussis, and tetanus	Penta 1																																																										
	Penta 2																																																										
	Penta 3																																																										
	DPT 4																																																										
Rotavirus	Rota 1																																																										
	Rota 2																																																										
Measles and Rubella	MR 1																																																										
	Vitamin A (last dose)																																																										
508AA	<p>ASK THE RESPONDENT FOR PERMISSION TO TAKE A PHOTO OF THE DATES OF IMMUNIZATION FROM THE LAST BORN CHILD'S VACCINATION RECORD, WHICH IS STORED IN THE MEDICAL FACILITY.</p>	<p>Will you allow us to make a photograph of the vaccination card for further checks in the case of inaccuracies?</p>																																																									
508AAA	<p>CIRCLE THE CODE AND SIGN YOUR NAME</p> <p style="text-align: right;">GRANTED 1</p> <p style="text-align: center;">_____ ←</p> <p style="text-align: center;">(SIGN)</p> <p style="text-align: right;">REFUSED 2</p> <p style="text-align: right;">SKIP TO QUESTION 509A ←</p>																																																										
508AAAA	<p>PHOTOGRAPH ALL DOCUMENTS</p> <p>RECORD ALL DOCUMENTS THAT WERE PHOTOGRAPHED</p>	<p>PHOTOGRAPH TAKE OF FORM 112 A</p> <p>PHOTOGRAPH TAKE OF FORM 63 B</p> <p>PHOTOGRAPH TAKE OF ANOTHER FORM D</p> <p>NO PHOTOGRAPHS TAKEN X</p>																																																									

SECTION 5A. CHILD IMMUNIZATION (LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LAST BIRTH _____	PREGNANCY HISTORY NUMBER .. <input type="text"/> <input type="text"/>	
509A	CHECK 508A: 'OPV-0 (BIRTH DOSE)' TO 'DPT4' ALL RECORDED? NO <input type="checkbox"/> ↓	YES <input type="checkbox"/> → 525A	
510A	In addition to what is recorded on (this document/these documents), did (NAME) receive any other vaccinations, including vaccinations received in campaigns or immunization days or child health days? RECORD 'YES' ONLY IF THE RESPONDENT MENTIONS AT LEAST ONE OF THE VACCINATIONS IN 508A THAT ARE NOT RECORDED AS HAVING BEEN GIVEN.	YES 1 (PROBE FOR VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 508A THEN WRITE '00' IN THE CORRESPONDING DAY COLUMN FOR ALL VACCINATIONS NOT GIVEN) (THEN SKIP TO 525A) NO 2 DON'T KNOW 8 (WRITE '00' IN THE CORRESPONDING DAY COLUMN FOR ALL VACCINATIONS NOT GIVEN) (THEN SKIP TO 525A)	
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 1 NO 2 DON'T KNOW 8	→ 525A
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 1 NO 2 DON'T KNOW 8	
513A	Within 24 hours after birth, did (NAME) receive a Hepatitis B vaccination, that is, an injection in the thigh to prevent Hepatitis B?	YES 1 NO 2 DON'T KNOW 8	
514A	Has (NAME) ever received oral polio vaccine OPV, that is, about two drops in the mouth to prevent polio?	YES 1 NO 2 DON'T KNOW 8	→ 517A
515A	Did (NAME) receive the first oral polio vaccine OPV in the first two weeks after birth or later?	FIRST TWO WEEKS 1 LATER 2	
516A	How many times did (NAME) receive the oral polio vaccine OPV?	NUMBER OF TIMES <input type="text"/>	

SECTION 5A. CHILD IMMUNIZATION (LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF LAST BIRTH _____	PREGNANCY HISTORY NUMBER .. <input type="text"/> <input type="text"/>	
517A	Has (NAME) ever received a pentavalent vaccination, that is, an injection given in the thigh left side usually at the same time as polio drops?	YES 1 NO 2 DON'T KNOW 8	→ 521A
518A	How many times did (NAME) receive the pentavalent vaccine?	NUMBER OF TIMES <input type="text"/>	
521A	Has (NAME) ever received a rotavirus vaccination ROTARIX, that is, a sweet liquid in the mouth to prevent diarrhea?	YES 1 NO 2 DON'T KNOW 8	→ 523A
522A	How many times did (NAME) receive the rotavirus vaccine?	NUMBER OF TIMES <input type="text"/>	
523A	Has (NAME) ever received a MR vaccination, that is, an injection in the left arm to prevent measles and rubella?	YES 1 NO 2 DON'T KNOW 8	
525A	In the last 7 days was (NAME) given:	YES NO DK	
	a) Sprinkles?	a) SPRINKLES 1 2 8	
	b) BP-100 cookies?	b) BP-100 1 2 8	
	c) Super Cereal Plus?	c) SUPER CEREAL PLUS 1 2 8	
526A	CONTINUE WITH 501B.		

SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501B	CHECK 214 IN THE PREGNANCY HISTORY: ANY MORE LIVE BIRTHS IN 2014-2017? MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> NO MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/>		→ 601
502B	RECORD THE NAME AND PREGNANCY HISTORY NUMBER FROM 216 AND 212 OF THE NEXT-TO-LAST CHILD BORN IN 2014-2017. NAME OF NEXT-TO-LAST LIVE BIRTH _____ PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>		
503B	CHECK 218 FOR CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/>	→ 526B
504B	Do you have a card or other document where (NAME)'s vaccinations are written down?	YES, HAS ONLY A CARD 1 YES, HAS ONLY AN OTHER DOCUMENT 2 YES, HAS CARD AND OTHER DOCUMENT 3 NO, NO CARD AND NO OTHER DOCUMENT .. 4	→ 507B → 507B
505B	Did you ever have a vaccination card for (NAME)?	YES 1 NO 2	
506B	CHECK 504B: CODE '2' CIRCLED <input type="checkbox"/>	CODE '4' CIRCLED <input type="checkbox"/>	→ 511B
507B	May I see the card or other document where (NAME)'s vaccinations are written down?	YES, ONLY CARD/FORM 63 SEEN 1 YES, ONLY OTHER DOCUMENT SEEN 2 YES, CARD/FORM 63 AND OTHER DOCUMENT SEEN 3 NO CARD/FORM 63 AND NO OTHER DOCUMENT SEEN 4	→ 511B

SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP		
	NAME OF NEXT-TO-LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER .. <table border="1" style="display: inline-table; width: 40px; height: 20px; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			

508B

COPY DATES FROM THE CARD.
WRITE '44' IN 'DAY' COLUMN IF CARD SHOWS THAT A DOSE WAS GIVEN, BUT NO DATE IS RECORDED.

Vaccine	Day	Month	Year
TB	BCG (given at birth)		
Polio	Polio 0 (given at birth)		
	Polio 1		
	Polio 2		
	Polio 3		
	Polio 4		
Hepatitis	HepB (given at birth)		
Pentavalent/ Diphtheria, pertussis, and tetanus	Penta 1		
	Penta 2		
	Penta 3		
	DPT 4		
Rotavirus	Rota 1		
	Rota 2		
Measles and Rubella	MR 1		
	Vitamin A (last dose)		

508BB	ASK THE RESPONDENT FOR PERMISSION TO TAKE A PHOTO OF THE DATES OF IMMUNIZATION FROM THE NEXT-TO-LAST BORN CHILD'S VACCINATION RECORD, STORED AT THE MEDICAL FACILITY.	Will you allow us to make a photograph of the vaccination card for further checks in the case of inaccuracies?
-------	---	--

508BBB	CIRCLE THE CODE AND SIGN YOUR NAME	GRANTED 1 _____ ← (SIGN) REFUSED 2 SKIP TO QUESTION 509B ←
--------	------------------------------------	--

508BBBB	PHOTOGRAPH ALL DOCUMENTS RECORD ALL DOCUMENTS THAT WERE PHOTOGRAPHED	PHOTOGRAPH TAKE OF FORM 112 A PHOTOGRAPH TAKE OF FORM 63 B PHOTOGRAPH TAKE OF ANOTHER I..... D NO PHOTOGRAPHS TAKEN X
---------	---	--

SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF NEXT-TO-LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER .. <input type="text"/> <input type="text"/>	
509B	CHECK 508B: 'OPV(0) (BIRTH DOSE)' TO 'DPT4' ALL RECORDED? NO <input type="checkbox"/> ↓	YES <input type="checkbox"/> →	525B
510B	In addition to what is recorded on (this document/these documents), did (NAME) receive any other vaccinations, including vaccinations received in campaigns or immunization days or child health days? RECORD 'YES' ONLY IF THE RESPONDENT MENTIONS AT LEAST ONE OF THE VACCINATIONS IN 508B THAT ARE NOT RECORDED AS HAVING BEEN GIVEN.	YES 1 (PROBE FOR VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 508B THEN WRITE '00' IN THE CORRESPONDING DAY COLUMN FOR ALL VACCINATIONS NOT GIVEN) (THEN SKIP TO 525B) NO 2 DON'T KNOW 8 (WRITE '00' IN THE CORRESPONDING DAY COLUMN FOR ALL VACCINATIONS NOT GIVEN) (THEN SKIP TO 525B)	
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 1 NO 2 DON'T KNOW 8	525B
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 1 NO 2 DON'T KNOW 8	
513B	Within 24 hours after birth, did (NAME) receive a Hepatitis B vaccination, that is, an injection in the thigh to prevent Hepatitis B?	YES 1 NO 2 DON'T KNOW 8	
514B	Has (NAME) ever received oral polio vaccine OPV, that is, about two drops in the mouth to prevent polio?	YES 1 NO 2 DON'T KNOW 8	517B
515B	Did (NAME) receive the first oral polio vaccine OPV in the first two weeks after birth or later?	FIRST TWO WEEKS 1 LATER 2	
516B	How many times did (NAME) receive the oral polio vaccine OPV?	NUMBER OF TIMES <input type="text"/>	

SECTION 5B. CHILD IMMUNIZATION (NEXT-TO-LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME OF NEXT-TO-LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER .. <input type="text"/> <input type="text"/>	
517B	Has (NAME) ever received a pentavalent vaccination, that is, an injection given in the thigh left side usually at the same time as polio drops?	YES 1 NO 2 DON'T KNOW 8	→ 521B
518B	How many times did (NAME) receive the pentavalent vaccine?	NUMBER OF TIMES <input type="text"/>	
521B	Has (NAME) ever received a rotavirus vaccination ROTARIX, that is, a sweet liquid in the mouth to prevent diarrhea?	YES 1 NO 2 DON'T KNOW 8	→ 523B
522B	How many times did (NAME) receive the rotavirus vaccine?	NUMBER OF TIMES <input type="text"/>	
523B	Has (NAME) ever received a MR vaccination, that is, an injection in the left arm to prevent measles and rubella?	YES 1 NO 2 DON'T KNOW 8	
525B	In the last 7 days was (NAME) given:	YES NO DK	
	a) Sprinkles?	a) SPRINKLES 1 2 8	
	b) BP-100 cookies?	b) BP-100 1 2 8	
	c) Super Cereal Plus?	c) SUPER CEREAL PLUS 1 2 8	
526B	CHECK 214 IN PREGNANCY HISTORY: ANY MORE LIVE BIRTHS IN 2014-2017? MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> (GO TO 502B IN AN ADDITIONAL QUESTIONNAIRE)	NO MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> →	601

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

601	CHECK 224: ONE OR MORE BIRTHS IN 2012-2017 <input type="checkbox"/> NO BIRTHS IN 2012-2017 <input type="checkbox"/> → 648		
602	CHECK 214: RECORD THE PREGNANCY HISTORY NUMBER IN 603 AND THE NAME AND SURVIVAL STATUS IN 604 FOR EACH LIVE BIRTH IN 2012-2017. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST LIVE BIRTH. IF THERE ARE MORE THAN 2 BIRTHS, USE LAST COLUMN OF ADDITIONAL QUESTIONNAIRE(S). Now I would like to ask some questions about your children born in the last five years. (We will talk about each separately.)		
603	PREGNANCY HISTORY NUMBER FROM 212 IN PREGNANCY HISTORY.	LAST LIVE BIRTH PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/> NEXT-TO-LAST LIVE BIRTH PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>	
604	FROM 216 AND 218:	NAME _____ LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> ↓ (SKIP TO 646) ←	NAME _____ LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> ↓ (SKIP TO 646) ←
605	In the last six months, was (NAME) given a vitamin A dose like (this/any of these)? SHOW COMMON TYPES OF AMPULES/CAPSULES/SYRUPS.	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 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 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
607	Was (NAME) given any drug for intestinal worms in the last six months?	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
608	Has (NAME) had diarrhea in the last 2 weeks?	YES 1 NO 2 (SKIP TO 618) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 618) ← DON'T KNOW 8

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	LAST BIRTH NAME _____	NEXT-TO-LAST BIRTH NAME _____
609	<p>CHECK 469: CURRENTLY BREASTFEEDING?</p> <p>YES <input type="checkbox"/> ↓</p> <p>NO/ NOT ASKED <input type="checkbox"/> ↓</p> <p>a) Now I would like to know how much (NAME) was given to drink during the diarrhea including breastmilk. Was (NAME) given less than usual to drink, about the same amount, or more than usual to drink?</p> <p>IF LESS, PROBE: Was (NAME) given much less than usual to drink or somewhat less?</p> <p>b) Now I would like to know how much (NAME) was given to drink during the diarrhea. Was (NAME) given less than usual to drink, about the same amount, or more than usual to drink?</p> <p>IF LESS, PROBE: Was (NAME) given much less than usual to drink or somewhat less?</p>	<p>MUCH LESS 1</p> <p>SOMEWHAT LESS 2</p> <p>ABOUT THE SAME 3</p> <p>MORE 4</p> <p>NOTHING TO DRINK 5</p> <p>DON'T KNOW 8</p>	<p>MUCH LESS 1</p> <p>SOMEWHAT LESS 2</p> <p>ABOUT THE SAME 3</p> <p>MORE 4</p> <p>NOTHING TO DRINK 5</p> <p>DON'T KNOW 8</p>
610	<p>When (NAME) had diarrhea, was (NAME) given less than usual to eat, about the same amount, more than usual, or nothing to eat?</p> <p>IF LESS, PROBE: Was (NAME) given much less than usual to eat or somewhat less?</p>	<p>MUCH LESS 1</p> <p>SOMEWHAT LESS 2</p> <p>ABOUT THE SAME 3</p> <p>MORE 4</p> <p>STOPPED FOOD 5</p> <p>NEVER GAVE FOOD 6</p> <p>DON'T KNOW 8</p>	<p>MUCH LESS 1</p> <p>SOMEWHAT LESS 2</p> <p>ABOUT THE SAME 3</p> <p>MORE 4</p> <p>STOPPED FOOD 5</p> <p>NEVER GAVE FOOD 6</p> <p>DON'T KNOW 8</p>
611	<p>Did you seek advice or treatment for the diarrhea from any source?</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 615) ←</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 615) ←</p>

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	LAST BIRTH NAME _____	NEXT-TO-LAST BIRTH NAME _____
612	<p>Where did you seek advice or treatment?</p> <p>Anywhere else?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE(S).</p> <p>_____</p> <p align="center">(NAME OF PLACE(S))</p>	<p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL . . . A</p> <p>MATERNITY HOME B</p> <p>HEALTH CENTER URBAN/ HEALTH CENTER RURAL/ FORMER POLYCLINIC . . . C</p> <p>REPRODUCTIVE HEALTH CENTER D</p> <p>HEALTH HOUSE E</p> <p>INTEGRATED CHILDHOOD ILLNESS CENTER F</p> <p>IMMUNOPROPHYLAXIS CENTER G</p> <p>AIDS CENTER H</p> <p>HEALTHY LIFESTYLE CENTER I</p> <p>FAMILY MEDICINE CENTER J</p> <p>DISPENSARY K</p> <p>OTHER PUBLIC SECTOR _____ L</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC M</p> <p>PRIVATE DOCTOR N</p> <p>PHARMACY O</p> <p>OTHER PRIVATE MEDICAL SECTOR _____ P</p> <p align="center">(SPECIFY)</p> <p>OTHER SOURCE</p> <p>SHOP Q</p> <p>TRADITIONAL PRACTITIONER R</p> <p>MARKET S</p> <p>OTHER _____ X</p> <p align="center">(SPECIFY)</p>	<p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL . . . A</p> <p>MATERNITY HOME B</p> <p>HEALTH CENTER URBAN/ HEALTH CENTER RURAL/ FORMER POLYCLINIC . . . C</p> <p>REPRODUCTIVE HEALTH CENTER D</p> <p>HEALTH HOUSE E</p> <p>INTEGRATED CHILDHOOD ILLNESS CENTER F</p> <p>IMMUNOPROPHYLAXIS CENTER G</p> <p>AIDS CENTER H</p> <p>HEALTHY LIFESTYLE CENTER I</p> <p>FAMILY MEDICINE CENTER J</p> <p>DISPENSARY K</p> <p>OTHER PUBLIC SECTOR _____ L</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/ CLINIC M</p> <p>PRIVATE DOCTOR N</p> <p>PHARMACY O</p> <p>OTHER PRIVATE MEDICAL SECTOR _____ P</p> <p align="center">(SPECIFY)</p> <p>OTHER SOURCE</p> <p>SHOP Q</p> <p>TRADITIONAL PRACTITIONER R</p> <p>MARKET S</p> <p>OTHER _____ X</p> <p align="center">(SPECIFY)</p>
613	CHECK 612:	<p>TWO OR MORE CODES CIRCLED <input type="checkbox"/></p> <p>ONLY ONE CODE CIRCLED <input type="checkbox"/></p> <p align="center">(SKIP TO 615) ←</p>	<p>TWO OR MORE CODES CIRCLED <input type="checkbox"/></p> <p>ONLY ONE CODE CIRCLED <input type="checkbox"/></p> <p align="center">(SKIP TO 615) ←</p>
614	<p>Where did you first seek advice or treatment?</p> <p>USE LETTER CODE FROM 612.</p>	FIRST PLACE <input type="checkbox"/>	FIRST PLACE <input type="checkbox"/>

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	LAST BIRTH			NEXT-TO-LAST BIRTH		
		NAME _____			NAME _____		
615	<p>Was (NAME) given any of the following at any time since (NAME) started having the diarrhea:</p> <p>a) A fluid made from a special packet called Rehydron?</p> <p>c) A homemade fluid?</p> <p>d) Zinc tablets?</p>		<p>YES NO DK</p> <p>a) FLUID FROM ORS PACKET ... 1 2 8</p> <p>c) HOMEMADE FLUID 1 2 8</p> <p>d) ZINC 1 2 8</p>		<p>YES NO DK</p> <p>a) FLUID FROM ORS PACKET .. 1 2 8</p> <p>c) HOMEMADE FLUID 1 2 8</p> <p>d) ZINC 1 2 8</p>		
616	<p>CHECK 615:</p> <p>ANY 'YES' <input type="checkbox"/> ↓</p> <p>a) Was anything else given to treat the diarrhea?</p> <p>b) Was anything given to treat the diarrhea?</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 618) ←</p> <p>DON'T KNOW 8</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 618) ←</p> <p>DON'T KNOW 8</p>		
617	<p>CHECK 615:</p> <p>ANY 'YES' <input type="checkbox"/> ↓</p> <p>a) What else was given to treat the diarrhea?</p> <p>Anything else?</p> <p>b) What was given to treat the diarrhea?</p> <p>Anything else?</p> <p>RECORD ALL TREATMENTS GIVEN.</p>		<p>PILL OR SYRUP</p> <p>ANTIBIOTIC A</p> <p>ANTIMOTILITY B</p> <p>OTHER (NOT ANTIBIOTIC OR ANTIMOTILITY) C</p> <p>UNKNOWN PILL OR SYRUP D</p> <p>INJECTION</p> <p>ANTIBIOTIC E</p> <p>NON-ANTIBIOTIC F</p> <p>UNKNOWN INJECTION G</p> <p>(IV) INTRAVENOUS H</p> <p>HOME REMEDY/ HERBAL MEDICINE I</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>		<p>PILL OR SYRUP</p> <p>ANTIBIOTIC A</p> <p>ANTIMOTILITY B</p> <p>OTHER (NOT ANTIBIOTIC OR ANTIMOTILITY) C</p> <p>UNKNOWN PILL OR SYRUP D</p> <p>INJECTION</p> <p>ANTIBIOTIC E</p> <p>NON-ANTIBIOTIC F</p> <p>UNKNOWN INJECTION G</p> <p>(IV) INTRAVENOUS H</p> <p>HOME REMEDY/ HERBAL MEDICINE I</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>		
618	<p>Has (NAME) been ill with a fever at any time in the last 2 weeks?</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 620) ←</p> <p>DON'T KNOW 8</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 620) ←</p> <p>DON'T KNOW 8</p>		
619	<p>At any time during the illness, did (NAME) have blood taken from (NAME)'s finger or heel for testing?</p>		<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>		<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>		
620	<p>Has (NAME) had an illness with a cough at any time in the last 2 weeks?</p>		<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>		<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>		
621	<p>Has (NAME) had fast, short, rapid breaths or difficulty breathing at any time in the last 2 weeks?</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 623) ←</p> <p>DON'T KNOW 8</p>		<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 623) ←</p> <p>DON'T KNOW 8</p>		

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	LAST BIRTH NAME _____	NEXT-TO-LAST BIRTH NAME _____
622	Was the fast or difficult breathing due to a problem in the chest or to a blocked or runny nose?	CHEST ONLY 1 NOSE ONLY 2 BOTH 3 OTHER 6 (SPECIFY) DON'T KNOW 8 (SKIP TO 624) ←	CHEST ONLY 1 NOSE ONLY 2 BOTH 3 OTHER 6 (SPECIFY) DON'T KNOW 8 (SKIP TO 624) ←
623	CHECK 618: HAD FEVER?	YES <input type="checkbox"/> NO OR DK <input type="checkbox"/> ↓ (SKIP TO 646) ←	YES <input type="checkbox"/> NO OR DK <input type="checkbox"/> ↓ (SKIP TO 646) ←
624	Did you seek advice or treatment for the illness from any source?	YES 1 NO 2 (SKIP TO 629) ←	YES 1 NO 2 (SKIP TO 629) ←
625	Where did you seek advice or treatment? Anywhere else? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE(S). _____ (NAME OF PLACE(S))	<p>PUBLIC SECTOR</p> GOVERNMENT HOSPITAL .. A MATERNITY HOME B HEALTH CENTER URBAN/ HEALTH CENTER RURAL/ FORMER POLYCLINIC .. C REPRODUCTIVE HEALTH CENTER D HEALTH HOUSE E INTEGRATED CHILDHOOD ILLNESS CENTER F IMMUNOPROPHYLAXIS CENTER G AIDS CENTER H HEALTHY LIFESTYLE CENTER I FAMILY MEDICINE CENTER J DISPENSARY K OTHER PUBLIC SECTOR _____ L (SPECIFY) <p>PRIVATE MEDICAL SECTOR</p> PRIVATE HOSPITAL/ CLINIC M PRIVATE DOCTOR N PHARMACY O OTHER PRIVATE MEDICAL SECTOR _____ P (SPECIFY) <p>OTHER SOURCE</p> SHOP Q TRADITIONAL PRACTITIONER R MARKET S OTHER X (SPECIFY)	<p>PUBLIC SECTOR</p> GOVERNMENT HOSPITAL .. A MATERNITY HOME B HEALTH CENTER URBAN/ HEALTH CENTER RURAL/ FORMER POLYCLINIC .. C REPRODUCTIVE HEALTH CENTER D HEALTH HOUSE E INTEGRATED CHILDHOOD ILLNESS CENTER F IMMUNOPROPHYLAXIS CENTER G AIDS CENTER H HEALTHY LIFESTYLE CENTER I FAMILY MEDICINE CENTER J DISPENSARY K OTHER PUBLIC SECTOR _____ L (SPECIFY) <p>PRIVATE MEDICAL SECTOR</p> PRIVATE HOSPITAL/ CLINIC M PRIVATE DOCTOR N PHARMACY O OTHER PRIVATE MEDICAL SECTOR _____ P (SPECIFY) <p>OTHER SOURCE</p> SHOP Q TRADITIONAL PRACTITIONER R MARKET S OTHER X (SPECIFY)

SECTION 6. CHILD HEALTH AND CHILD AND MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	LAST BIRTH NAME _____	NEXT-TO-LAST BIRTH NAME _____
626	CHECK 625:	TWO OR MORE CODES CIRCLED <input type="checkbox"/> ONLY ONE CODE CIRCLED <input type="checkbox"/> (SKIP TO 628) ←	TWO OR MORE CODES CIRCLED <input type="checkbox"/> ONLY ONE CODE CIRCLED <input type="checkbox"/> (SKIP TO 628) ←
627	Where did you first seek advice or treatment? USE LETTER CODE FROM 625.	FIRST PLACE <input type="checkbox"/>	FIRST PLACE <input type="checkbox"/>
628	How many days after the illness began did you first seek advice or treatment for (NAME)? IF THE SAME DAY RECORD '00'.	DAYS <input type="text"/>	DAYS <input type="text"/>
629	At any time during the illness, did (NAME) take any drugs for the illness?	YES 1 NO 2 (SKIP TO 646) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 646) ← DON'T KNOW 8
630	What drugs did (NAME) take? Any other drugs? RECORD ALL MENTIONED.	ANTIBIOTIC DRUGS PILL/SYRUP J INJECTION/IV K OTHER DRUGS ASPIRIN L PARACETAMOL M MURAFEN N SALBUTAMOL O OTHER _____ X (SPECIFY) DON'T KNOW Z	ANTIBIOTIC DRUGS PILL/SYRUP J INJECTION/IV K OTHER DRUGS ASPIRIN L PARACETAMOL M MURAFEN N SALBUTAMOL O OTHER _____ X (SPECIFY) DON'T KNOW Z
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	<p>CHECK 615(a), ALL COLUMNS:</p> <p align="center"> NO CHILD RECEIVED FLUID FROM ORS PACKET (REHYDRON) <input type="checkbox"/> </p>	<p align="center"> ANY CHILD RECEIVED FLUID FROM ORS PACKET (REHYDRON) <input type="checkbox"/> </p>	<p align="center">→ 648A</p>
648	<p>Have you ever heard of a special product called Rehydron you can get for the treatment of diarrhea?</p>	<p>YES 1 NO 2</p>	
648A	<p>Sometimes children have severe illnesses and should be taken immediately to a health facility. What types of symptoms would cause you to take your child to a health facility or medical worker right away?</p> <p>Anything else?</p> <p align="center">RECORD ALL MENTIONED</p>	<p>LOOKS UNWELL OR</p> <p>NOT PLAYING NORMALLY A</p> <p>NOT EATING OR DRINKING/ REFUSE FROM BREASTFEEDING B</p> <p>LETHARGIC OR DIFFICULT TO WAKE C</p> <p>HIGH FEVER D</p> <p>FAST OR RAPID BREATHING E</p> <p>VOMITS EVERY F</p> <p>CONVULSIONS G</p> <p>DIARRHEA H</p> <p>WEAKNESS I</p> <p>CRYING TOO MUCH J</p> <p>CHILD BECOMES SICKER K</p> <p>BLOOD IN STOOL L</p> <p>OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW Z</p>	
649	<p>CHECK 214 AND 220, ALL ROWS: NUMBER OF CHILDREN BORN IN 2015-2017 LIVING WITH THE RESPONDENT</p> <p align="center"> ONE OR MORE <input type="checkbox"/> </p> <p align="center"> NONE <input type="checkbox"/> </p> <p>_____</p> <p align="center">(NAME OF YOUNGEST CHILD LIVING WITH HER)</p>		<p align="center">→ 655</p>

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP	
650	<p>Now I would like to ask you about liquids or foods that (NAME FROM 649) had yesterday during the day or at night. I am interested in whether your child had the item I mention even if it was combined with other foods. Did (NAME FROM 649) drink or eat:</p>		YES	NO	DK	
	a) Plain water?	a) 1	2	8		
	b) Juice or juice drinks?	b) 1	2	8		
	c) Clear broth?	c) 1	2	8		
	<p>d) Milk such as tinned, powdered, or fresh animal milk? IF YES: How many times did (NAME) drink milk? IF 7 OR MORE TIMES, RECORD '7'.</p>	<p>d) 1</p> <p>NUMBER OF TIMES DRANK <input type="text"/></p>	2	8		
	<p>e) Infant formula? IF YES: How many times did (NAME) drink infant formula? IF 7 OR MORE TIMES, RECORD '7'.</p>	<p>e) 1</p> <p>NUMBER OF TIMES DRANK <input type="text"/></p>	2	8		
	f) Any other liquids?	f) 1	2	8		
	<p>g) Yogurt (churgot, kefir and similar)? IF YES: How many times did (NAME) eat yogurt? IF 7 OR MORE TIMES, RECORD '7'.</p>	<p>g) 1</p> <p>NUMBER OF TIMES ATE <input type="text"/></p>	2	8		
	<p>h) Any commercially fortified food (e.g Nestle, Agusha, Winnie, Gerber, Gercules, Oats, Nutrilac 2-3)?</p>	h) 1	2	8		
	<p>i) Bread, rice, noodles, porridge, or other foods made from grains?</p>	i) 1	2	8		
	<p>j) Sweet red bell pepper, pumpkin or carrots that are yellow or orange inside?</p>	j) 1	2	8		
	<p>k) Potatoes or any other foods made from roots (shalgam)?</p>	k) 1	2	8		
	<p>l) Any dark green, leafy vegetables such as spinach, dark green lettus, beet leaves?</p>	l) 1	2	8		
	<p>m) Ripe persimmons, or ripe fresh apricots, dried apricots or dried peaches?</p>	m) 1	2	8		
	n) Any other fruits or vegetables?	n) 1	2	8		
	o) Liver, kidney, heart, or other organ meats?	o) 1	2	8		
	<p>p) Any meat, such as beef, lamb, goat, pork, turkey, chicken, or duck?</p>	p) 1	2	8		
	q) Eggs?	q) 1	2	8		

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	r) Fresh, canned or dried fish, caviar, squid, shrimp or any other seafood?	r) 1 2 8	
	s) Any foods made from beans, peas, lentils, or nuts?	s) 1 2 8	
	t) Cheese or other food made from milk?	t) 1 2 8	
	u) Any other solid, semi-solid, or soft food?	u) 1 2 8	
651	CHECK 650 (CATEGORIES 'g' THROUGH 'u'): NOT A SINGLE 'YES' <input type="checkbox"/>	AT LEAST ONE 'YES' <input type="checkbox"/>	→ 653

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
652	Did (NAME FROM 649) eat any solid, semi-solid, or soft foods yesterday during the day or at night? IF 'YES' PROBE: What kind of solid, semi-solid or soft foods did (NAME) eat?	YES 1 (GO BACK TO 650 TO RECORD FOOD EATEN YESTERDAY) (THEN CONTINUE TO 653) NO 2	→ 654
653	How many times did (NAME FROM 649) eat solid, semi-solid, or soft foods yesterday during the day or at night? IF 7 OR MORE TIMES, RECORD '7'.	NUMBER OF TIMES <input type="text"/> DON'T KNOW 8	
654	The last time (NAME FROM 649) passed stools, what was done to dispose of the stools?	CHILD USED TOILET OR LATRINE 01 PUT/RINSED INTO TOILET OR LATRINE 02 PUT/RINSED INTO DRAIN OR DITCH 03 THROWN INTO GARBAGE 04 BURIED 05 LEFT IN THE OPEN 06 OTHER _____ 96 (SPECIFY)	
655	CHECK 101A: AGREED TO MEASUREMENT <input type="checkbox"/>	REFUSED MEASUREMENT <input type="checkbox"/>	→ 659
656	RECORD THE TIME.	HOURS <input type="text"/> <input type="text"/> MINUTES <input type="text"/> <input type="text"/>	
657	May I measure your blood pressure at this time? CIRCLE THE CODE AND SIGN YOUR NAME.	AGREED 1 _____ (SIGN) REFUSED 2 THEN SKIP TO 659	
658	TAKE THE SECOND BLOOD PRESSURE READING. RECORD THE SYSTOLIC AND DIASTOLIC PRESSURE. THEN PROCEED TO 659. IF YOU ARE UNABLE TO MEASURE THE RESPONDENT'S BLOOD PRESSURE, RECORD THE REASON.	BLOOD PRESSURE MEASURED SYSTOLIC <input type="text"/> <input type="text"/> <input type="text"/> DIASTOLIC <input type="text"/> <input type="text"/> <input type="text"/> TECHNICAL PROBLEMS '995 OTHER _____ '996 SPECIFY	

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP	
659	<p>Now I would like to ask you about liquids or foods that you ate yesterday during the day or at night at home or outside the home. I am interested in whether you had the item even if it was combined with other foods. For example, if you ate a millet porridge made with a mixed vegetable sauce, you should reply yes to any food I ask about that was an ingredient in the porridge or sauce. Please do not include any food used in a small amount for seasoning or condiments (like chilies, spices, herbs, or fish powder), I will ask you about those foods separately.</p> <p>Yesterday during the day or night did you drink/eat any [ASK QUESTIONS a to t]?</p>		YES	NO	DK	
	a) Food made of grains, such as bread, non, rice, popcorn, noodles, porridge, atalla, garsus, or other foods made from grains such as corn, wheat, barley, buckwheat?	a) 1	2	8		
	b) Potatoes, potato chips, or any other foods made from roots (shalgam)?	b) 1	2	8		
	c) Any foods made from beans or peas (fresh or dried seed), lentils or bean/pea products, including hummus, tofu?	c) 1	2	8		
	d) Any tree nut such as walnuts, almonds, cashew, groundnut/peanut or seeds such as pumpkin seeds, sunflower seeds or nut/seed 'butters' or pastes?	d) 1	2	8		
	e) Milk, cheese, yogurt, churgot, chakka, cottage cheese, kefir or other food made from milk, but not including butter, ice cream or sour cream?	e) 1	2	8		
	f) Liver, kidney, heart, or other organ meats or blood-based foods, including wild game?	f) 1	2	8		
	g) Any meat, such as beef, lamb, goat, pork, rabbit, wild game meat, chicken, turkey, duck or other bird?	g) 1	2	8		
	h) Fresh, canned or dried fish, caviar, squid, shrimp, crabs or any other seafood?	h) 1	2	8		
	i) Eggs from chicken, pigeon, duck, quail, grouse or other bird?	i) 1	2	8		
	j) Any dark green, leafy vegetables (spinach, dark green lettuce, beet leaves)?	j) 1	2	8		
	k) Sweet red bell pepper, pumpkin or carrots that are yellow or orange inside?	k) 1	2	8		
	l) Ripe persimmons, or ripe fresh apricots, dried apricots or dried peaches or other fruits that are dark yellow or orange inside?	l) 1	2	8		
	m) Any other vegetables like flat beans, beets, turnips, green beans, tomatoes, cauliflower, cabbage, eggplant and others?	m) 1	2	8		

SECTION 6. CHILD HEALTH AND NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP	
	n) Any other fruits like bananas, apples, plum, mandarins, lemons, pomegranate, any berries?	n)	1	2	8	
	o) Any oil, fats, or butter, or foods made with any of these?	o)	1	2	8	
	p) Any savoury and fried snacks, such as chips, fried dough, other fried snacks?	p)	1	2	8	
	q) Any sweets such as sugary foods such as chocolates, candies, cookies/sweet biscuits and cakes, sweet pastries or ice cream?	q)	1	2	8	
	r) Any sugar-sweetened beverages, like fruit juices and juice drinks, soft drinks/fizzy drinks, chocolate drinks, yogurt drinks, sweet tea or coffee with sugar?	r)	1	2	8	
	s) Condiments for flavor, such as chilies, spices, herbs, or fennel grain, coriander, cumin, ginger, turmeric, garlic, cardamom?	s)	1	2	8	
	t) Any other beverages or foods, such as tea or coffee if not sweetened, clear broth, alcohol, pickles, olives and similar?	t)	1	2	8	
	SPECIFY AND RECORD OTHER BEVERAGES AND FOODS THAT RESPONDENT MENTIONED BUT NOT IN THE LIST ABOVE	<hr/> <hr/>				

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	Are you currently married or living together with a man as if married?	YES, CURRENTLY MARRIED 1 YES, LIVING WITH A MAN 2 NO, NOT IN UNION 3	<input type="checkbox"/> → 704
702	Have you ever been married or lived together with a man as if married?	YES, FORMERLY MARRIED 1 YES, LIVED WITH A MAN 2 NO 3	<input type="checkbox"/> → 712
703	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED 1 DIVORCED 2 SEPARATED 3	<input type="checkbox"/> → 709
704	Is your (husband/partner) living with you now or is he staying elsewhere?	LIVING WITH HER 1 STAYING ELSEWHERE 2	
705	RECORD THE HUSBAND'S/PARTNER'S NAME AND LINE NUMBER FROM THE HOUSEHOLD QUESTIONNAIRE. IF HE IS NOT LISTED IN THE HOUSEHOLD, RECORD '00'.	NAME _____ LINE NO. <input type="text"/> <input type="text"/>	
706	Does your (husband/partner) have other wives or does he live with other women as if married?	YES 1 NO 2 DON'T KNOW 8	<input type="checkbox"/> → 709
707	Including yourself, in total, how many wives or live-in partners does he have?	TOTAL NUMBER OF WIVES AND LIVE-IN PARTNERS <input type="text"/> <input type="text"/> DON'T KNOW 98	
708	Are you the first, second, ... wife?	RANK <input type="text"/> <input type="text"/>	
709	Have you been married or lived with a man only once or more than once?	ONLY ONCE 1 MORE THAN ONCE 2	
710	CHECK 709: <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>MARRIED/ LIVED WITH A MAN ONLY ONCE ↓</p> <p><input type="checkbox"/></p> </div> <div style="border-left: 1px dashed black; width: 1px; height: 100%;"></div> <div style="text-align: center;"> <p>MARRIED/ LIVED WITH A MAN MORE THAN ONCE ↓</p> <p><input type="checkbox"/></p> </div> </div> <p>a) In what month and year did you start living with your (husband/partner)?</p> <p>b) Now I would like to ask about your first (husband/partner). In what month and year did you start living with him?</p>	MONTH <input type="text"/> <input type="text"/> DON'T KNOW MONTH 98 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW YEAR 9998	<input type="checkbox"/> → 712
711	How old were you when you first started living with him?	AGE <input type="text"/> <input type="text"/>	

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
712	CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.		
713	<p>Now I would like to ask some questions about sexual activity in order to gain a better understanding of some important life issues. Let me assure you again that your answers are completely confidential and will not be told to anyone. If we should come to any question that you don't want to answer, just let me know and we will go to the next question. How old were you when you had sexual intercourse for the very first time?</p>	<p>NEVER HAD SEXUAL INTERCOURSE 00 → 731</p> <p>AGE IN YEARS <input type="text"/> <input type="text"/></p>	
714	<p>I would like to ask you about your recent sexual activity. When was the last time you had sexual intercourse?</p> <p>IF LESS THAN 12 MONTHS, ANSWER MUST BE RECORDED IN DAYS, WEEKS OR MONTHS. IF 12 MONTHS (ONE YEAR) OR MORE, ANSWER MUST BE RECORDED IN YEARS.</p>	<p>DAYS AGO 1 <input type="text"/> <input type="text"/></p> <p>WEEKS AGO 2 <input type="text"/> <input type="text"/></p> <p>MONTHS AGO 3 <input type="text"/> <input type="text"/></p> <p>YEARS AGO 4 <input type="text"/> <input type="text"/></p>	<p>→ 716</p> <p>→ 727</p>

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

		LAST SEXUAL PARTNER	SECOND-TO-LAST SEXUAL PARTNER	THIRD-TO-LAST SEXUAL PARTNER
715	When was the last time you had sexual intercourse with this person?		DAYS AGO .. 1 <input type="text"/> <input type="text"/> WEEKS AGO .. 2 <input type="text"/> <input type="text"/> MONTHS AGO .. 3 <input type="text"/> <input type="text"/>	DAYS AGO .. 1 <input type="text"/> <input type="text"/> WEEKS AGO .. 2 <input type="text"/> <input type="text"/> MONTHS AGO .. 3 <input type="text"/> <input type="text"/>
716	The last time you had sexual intercourse with this person, was a condom used?	YES 1 NO 2 (SKIP TO 718) ←	YES 1 NO 2 (SKIP TO 718) ←	YES 1 NO 2 (SKIP TO 718) ←
717	Was a condom used every time you had sexual intercourse with this person in the last 12 months?	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2
718	What was your relationship to this person with whom you had sexual intercourse? IF BOYFRIEND: Were you living together as if married? IF YES, RECORD '2'. IF NO, RECORD '3':	HUSBAND 1 LIVE-IN PARTNER 2 BOYFRIEND NOT LIVING WITH RESPONDENT 3 CASUAL ACQUAINTANCE .. 4 CLIENT/SEX WORKER .. 5 OTHER 6 (SPECIFY)	HUSBAND 1 LIVE-IN PARTNER 2 BOYFRIEND NOT LIVING WITH RESPONDENT 3 CASUAL ACQUAINTANCE .. 4 CLIENT/SEX WORKER .. 5 OTHER 6 (SPECIFY)	HUSBAND 1 LIVE-IN PARTNER 2 BOYFRIEND NOT LIVING WITH RESPONDENT 3 CASUAL ACQUAINTANCE .. 4 CLIENT/SEX WORKER .. 5 OTHER 6 (SPECIFY)
719	How long ago did you first have sexual intercourse with this person?	DAYS AGO .. 1 <input type="text"/> <input type="text"/> WEEKS AGO .. 2 <input type="text"/> <input type="text"/> MONTHS AGO .. 3 <input type="text"/> <input type="text"/> YEARS AGO .. 4 <input type="text"/> <input type="text"/>	DAYS AGO .. 1 <input type="text"/> <input type="text"/> WEEKS AGO .. 2 <input type="text"/> <input type="text"/> MONTHS AGO .. 3 <input type="text"/> <input type="text"/> YEARS AGO .. 4 <input type="text"/> <input type="text"/>	DAYS AGO .. 1 <input type="text"/> <input type="text"/> WEEKS AGO .. 2 <input type="text"/> <input type="text"/> MONTHS AGO .. 3 <input type="text"/> <input type="text"/> YEARS AGO .. 4 <input type="text"/> <input type="text"/>
720	How many times during the last 12 months did you have sexual intercourse with this person? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF TIMES IS 95 OR MORE, RECORD '95'.	NUMBER OF TIMES <input type="text"/> <input type="text"/>	NUMBER OF TIMES <input type="text"/> <input type="text"/>	NUMBER OF TIMES <input type="text"/> <input type="text"/>
721	How old is this person?	AGE OF PARTNER <input type="text"/> <input type="text"/> DON'T KNOW 98	AGE OF PARTNER <input type="text"/> <input type="text"/> DON'T KNOW 98	AGE OF PARTNER <input type="text"/> <input type="text"/> DON'T KNOW 98
722	Apart from this person, have you had sexual intercourse with any other person in the last 12 months?	YES 1 (GO BACK TO 715 IN NEXT COLUMN) ← NO 2 (SKIP TO 724) ←	YES 1 (GO BACK TO 715 IN NEXT COLUMN) ← NO 2 (SKIP TO 724) ←	
723	In total, with how many different people have you had sexual intercourse in the last 12 months? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS 95 OR MORE, RECORD '95'.			NUMBER OF PARTNERS LAST 12 MONTHS .. <input type="text"/> <input type="text"/> DON'T KNOW 98

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
724	CHECK 106: AGE 15-24 <input type="checkbox"/> ↓	AGE 25-49 <input type="checkbox"/> → 727	
725	CHECK 701: NOT IN A UNION <input type="checkbox"/> ↓	CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/> → 727	
726	In the past 12 months have you had sex or been sexually involved with anyone because he gave you or told you he would give you gifts, cash, or anything else?	YES 1 NO 2	
727	In total, with how many different people have you had sexual intercourse in your lifetime? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS 95 OR MORE, RECORD '95'.	NUMBER OF PARTNERS IN LIFETIME <input type="text"/> <input type="text"/> DON'T KNOW 98	
728	CHECK 716, MOST RECENT PARTNER (FIRST COLUMN): YES, CONDOM USED <input type="checkbox"/> ↓	NO, CONDOM NOT USED <input type="checkbox"/> → 731 NOT ASKED <input type="checkbox"/> → 731	

SECTION 7. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP												
730	<p>From where did you obtain the condom the last time?</p> <p>PROBE TO IDENTIFY TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <hr/> <p align="center">(NAME OF PLACE)</p>	<p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL 11</p> <p>MATERNITY HOME 12</p> <p>HEALTH CENTER (URBAN/RURAL)/</p> <p> FORMER POLYCLINIC 13</p> <p>REPRODUCTIVE HEALTH CENTER 14</p> <p>HEALTH HOUSE 15</p> <p>INTEGRATED MANAGEMENT OF CHILD-</p> <p> HOOD ILLNESS CENTER(IMCI) 17</p> <p>IMMUNOPROPHYLAXIS CENTER 18</p> <p>AIDS CENTER 19</p> <p>HEALTHY LIFESTYLE CENTER 20</p> <p>FAMILY MEDICINE CENTER 21</p> <p>DISPENSARY 22</p> <p>OTHER PUBLIC</p> <p> SECTOR</p> <p align="right">_____ 26</p> <p align="center">(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/CLINIC 31</p> <p>PRIVATE DOCTOR'S OFFICE 32</p> <p>PHARMACY 33</p> <p>OTHER PRIVATE MEDICAL</p> <p> SECTOR</p> <p align="right">_____ 36</p> <p align="center">(SPECIFY)</p> <p>OTHER SOURCE</p> <p>SHOP/MARKET 41</p> <p>FRIEND/RELATIVE 43</p> <p>OTHER _____ 96</p> <p align="center">(SPECIFY)</p> <p>DOESN'T KNOW 98</p>													
731	<p>PRESENCE OF OTHERS DURING THIS SECTION.</p>	<table border="0"> <tr> <td></td> <td align="right">YES</td> <td align="right">NO</td> </tr> <tr> <td>CHILDREN <10</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>MALE ADULTS</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>FEMALE ADULTS</td> <td align="right">1</td> <td align="right">2</td> </tr> </table>		YES	NO	CHILDREN <10	1	2	MALE ADULTS	1	2	FEMALE ADULTS	1	2	
	YES	NO													
CHILDREN <10	1	2													
MALE ADULTS	1	2													
FEMALE ADULTS	1	2													

SECTION 8. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
810	<p>CHECK 804:</p> <p>WANTS TO HAVE <input type="checkbox"/> A/ANOTHER CHILD ↓</p> <p>WANTS NO MORE/ <input type="checkbox"/> NONE ↓</p> <p>a) You have said that you do not want (a/another) child soon. Can you tell me why you are not using a method to prevent pregnancy?</p> <p>b) You have said that you do not want any (more) children. Can you tell me why you are not using a method to prevent pregnancy?</p> <p>Any other reason? Any other reason?</p> <p>RECORD ALL REASONS MENTIONED.</p>	<p>NOT MARRIED A</p> <p>FERTILITY-RELATED REASONS</p> <p>NOT HAVING SEX B</p> <p>INFREQUENT SEX C</p> <p>MENOPAUSAL/HYSTERECTOMY D</p> <p>CAN'T GET PREGNANT E</p> <p>NOT MENSTRUATED SINCE LAST BIRTH F</p> <p>BREASTFEEDING G</p> <p>UP TO GOD/FATALISTIC H</p> <p>OPPOSITION TO USE</p> <p>RESPONDENT OPPOSED I</p> <p>HUSBAND/PARTNER OPPOSED J</p> <p>OTHERS OPPOSED K</p> <p>RELIGIOUS PROHIBITION L</p> <p>LACK OF KNOWLEDGE</p> <p>KNOWS NO METHOD M</p> <p>KNOWS NO SOURCE N</p> <p>METHOD-RELATED REASONS</p> <p>SIDE EFFECTS/HEALTH CONCERNS O</p> <p>LACK OF ACCESS/TOO FAR P</p> <p>COSTS TOO MUCH Q</p> <p>PREFERRED METHOD NOT AVAILABLE R</p> <p>NO METHOD AVAILABLE S</p> <p>INCONVENIENT TO USE T</p> <p>INTERFERES WITH BODY'S NORMAL PROCESSES U</p> <p>OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW Z</p>	
811	<p>CHECK 303: USING A CONTRACEPTIVE METHOD?</p> <p>NOT <input type="checkbox"/> ASKED ↓</p> <p>NO, NOT <input type="checkbox"/> CURRENTLY USING ↓</p> <p>YES, <input type="checkbox"/> CURRENTLY USING →</p>		813
812	<p>Do you think you will use a contraceptive method to delay or avoid pregnancy at any time in the future?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
813	<p>CHECK 218:</p> <p>HAS LIVING <input type="checkbox"/> CHILDREN ↓</p> <p>NO LIVING <input type="checkbox"/> CHILDREN ↓</p> <p>a) If you could go back to the time 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?</p> <p>b) If you could choose exactly the number of children to have in your whole life, how many would that be?</p> <p>PROBE FOR A NUMERIC RESPONSE.</p>	<p>NONE 00 → 815</p> <p>NUMBER <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 → 815 (SPECIFY)</p>	
814	<p>How many of these children would you like to be boys, how many would you like to be girls and for how many would it not matter if it's a boy or a girl?</p>	<p>BOYS GIRLS EITHER</p> <p>NUMBER .. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 (SPECIFY)</p>	

SECTION 8. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP															
815	In the last few months have you: a) Heard about family planning on the radio? b) Seen anything about family planning on the television? c) Read about family planning in a newspaper or magazine? d) Received a voice or text message about family planning on a mobile phone?	<table border="0"> <tr> <td></td> <td align="right">YES</td> <td align="right">NO</td> </tr> <tr> <td>a) RADIO</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>b) TELEVISION</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>c) NEWSPAPER OR MAGAZINE</td> <td align="right">1</td> <td align="right">2</td> </tr> <tr> <td>d) MOBILE PHONE</td> <td align="right">1</td> <td align="right">2</td> </tr> </table>		YES	NO	a) RADIO	1	2	b) TELEVISION	1	2	c) NEWSPAPER OR MAGAZINE	1	2	d) MOBILE PHONE	1	2	
	YES	NO																
a) RADIO	1	2																
b) TELEVISION	1	2																
c) NEWSPAPER OR MAGAZINE	1	2																
d) MOBILE PHONE	1	2																
816	Did any staff member from Caravan of Health or the program on methods of contraception talk to you about about family planning?	<table border="0"> <tr> <td>YES</td> <td align="right">1</td> </tr> <tr> <td>NO</td> <td align="right">2</td> </tr> <tr> <td>DON'T KNOW</td> <td align="right">8</td> </tr> </table>	YES	1	NO	2	DON'T KNOW	8										
YES	1																	
NO	2																	
DON'T KNOW	8																	
817	CHECK 701: <table border="0"> <tr> <td align="center"> YES, <input type="checkbox"/> CURRENTLY MARRIED ↓ </td> <td align="center"> YES, <input type="checkbox"/> LIVING WITH A MAN ↓ </td> <td align="center"> NO, <input type="checkbox"/> NOT IN A UNION </td> <td align="right">→ 901</td> </tr> </table>	YES, <input type="checkbox"/> CURRENTLY MARRIED ↓	YES, <input type="checkbox"/> LIVING WITH A MAN ↓	NO, <input type="checkbox"/> NOT IN A UNION	→ 901													
YES, <input type="checkbox"/> CURRENTLY MARRIED ↓	YES, <input type="checkbox"/> LIVING WITH A MAN ↓	NO, <input type="checkbox"/> NOT IN A UNION	→ 901															
818	CHECK 303: USING A CONTRACEPTIVE METHOD? <table border="0"> <tr> <td align="center"> CURRENTLY <input type="checkbox"/> USING ↓ </td> <td align="center"> NOT CURRENTLY <input type="checkbox"/> USING </td> <td align="right">→ 820</td> </tr> <tr> <td></td> <td align="center"> NOT ASKED <input type="checkbox"/> </td> <td align="right">→ 822</td> </tr> </table>	CURRENTLY <input type="checkbox"/> USING ↓	NOT CURRENTLY <input type="checkbox"/> USING	→ 820		NOT ASKED <input type="checkbox"/>	→ 822											
CURRENTLY <input type="checkbox"/> USING ↓	NOT CURRENTLY <input type="checkbox"/> USING	→ 820																
	NOT ASKED <input type="checkbox"/>	→ 822																
819	Would you say that using contraception is mainly your decision, mainly your (husband's/partner's) decision, or did you both decide together?	<table border="0"> <tr> <td>MAINLY RESPONDENT</td> <td align="right">1</td> </tr> <tr> <td>MAINLY HUSBAND/PARTNER</td> <td align="right">2</td> </tr> <tr> <td>JOINT DECISION</td> <td align="right">3</td> </tr> <tr> <td>OTHER _____</td> <td align="right">6</td> </tr> <tr> <td align="center">(SPECIFY)</td> <td></td> </tr> </table>	MAINLY RESPONDENT	1	MAINLY HUSBAND/PARTNER	2	JOINT DECISION	3	OTHER _____	6	(SPECIFY)		→ 821					
MAINLY RESPONDENT	1																	
MAINLY HUSBAND/PARTNER	2																	
JOINT DECISION	3																	
OTHER _____	6																	
(SPECIFY)																		
820	Would you say that not using contraception is mainly your decision, mainly your (husband's/partner's) decision, or did you both decide together?	<table border="0"> <tr> <td>MAINLY RESPONDENT</td> <td align="right">1</td> </tr> <tr> <td>MAINLY HUSBAND/PARTNER</td> <td align="right">2</td> </tr> <tr> <td>JOINT DECISION</td> <td align="right">3</td> </tr> <tr> <td>OTHER _____</td> <td align="right">6</td> </tr> <tr> <td align="center">(SPECIFY)</td> <td></td> </tr> </table>	MAINLY RESPONDENT	1	MAINLY HUSBAND/PARTNER	2	JOINT DECISION	3	OTHER _____	6	(SPECIFY)							
MAINLY RESPONDENT	1																	
MAINLY HUSBAND/PARTNER	2																	
JOINT DECISION	3																	
OTHER _____	6																	
(SPECIFY)																		
821	CHECK 304: <table border="0"> <tr> <td align="center"> NEITHER ARE <input type="checkbox"/> STERILIZED ↓ </td> <td align="center"> HE OR SHE ARE <input type="checkbox"/> STERILIZED </td> <td align="right">→ 901</td> </tr> </table>	NEITHER ARE <input type="checkbox"/> STERILIZED ↓	HE OR SHE ARE <input type="checkbox"/> STERILIZED	→ 901														
NEITHER ARE <input type="checkbox"/> STERILIZED ↓	HE OR SHE ARE <input type="checkbox"/> STERILIZED	→ 901																
822	Does your (husband/partner) want the same number of children that you want, or does he want more or fewer than you want?	<table border="0"> <tr> <td>SAME NUMBER</td> <td align="right">1</td> </tr> <tr> <td>MORE CHILDREN</td> <td align="right">2</td> </tr> <tr> <td>FEWER CHILDREN</td> <td align="right">3</td> </tr> <tr> <td>DON'T KNOW</td> <td align="right">8</td> </tr> </table>	SAME NUMBER	1	MORE CHILDREN	2	FEWER CHILDREN	3	DON'T KNOW	8								
SAME NUMBER	1																	
MORE CHILDREN	2																	
FEWER CHILDREN	3																	
DON'T KNOW	8																	

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
901	CHECK 701: CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/>	NOT IN <input type="checkbox"/> UNION	→ 909
902	How old was your (husband/partner) on his last birthday?	AGE IN COMPLETED YEARS <input type="text"/> <input type="text"/>	
903	Did your (husband/partner) ever attend school?	YES 1 NO 2	→ 906
904	What was the highest level of school he attended: general education school, professional primary(uchiliche), professional middle(technikum, college), higher or post-graduate?	GENERAL EDUCATION SCHOOL 1 PROFESSIONAL PRIMARY 2 PROFESSIONAL MIDDLE 3 HIGHER 4 POST-GRADUATE 5 DON'T KNOW 8	→ 906
905	What was the highest class/year/course he completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/YEAR/COURSE <input type="text"/> <input type="text"/> DON'T KNOW 98	
906	Has your (husband/partner) done any work in the last 7 days?	YES 1 NO 2 DON'T KNOW 8	→ 908
907	Has your (husband/partner) done any work in the last 12 months?	YES 1 NO 2 DON'T KNOW 8	<input type="checkbox"/> → 908A
908	What is your (husband's/partner's) occupation? That is, what kind of work does he mainly do?	_____ _____ _____	<input type="text"/> <input type="text"/>
908A	In the past 3 years, has your (husband/partner) worked abroad for three or more months at a time?	YES 1 NO 2	
909	Aside from your own housework, have you done any work in the last seven days?	YES 1 NO 2	→ 913
910	As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business. In the last seven days, have you done any of these things or any other work?	YES 1 NO 2	→ 913
911	Although you did not work in the last seven days, do you have any job or business from which you were absent for leave, illness, vacation, maternity leave, or any other such reason?	YES 1 NO 2	→ 913
912	Have you done any work in the last 12 months?	YES 1 NO 2	→ 917
913	What is your occupation? That is, what kind of work do you mainly do?	_____ _____ _____	<input type="text"/> <input type="text"/>

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
914	Do you do this work for a member of your family, for someone else, or are you self-employed?	FOR FAMILY MEMBER 1 FOR SOMEONE ELSE 2 SELF-EMPLOYED 3	
915	Do you usually work throughout the year, or do you work seasonally, or only once in a while?	THROUGHOUT THE YEAR 1 SEASONALLY/PART OF THE YEAR 2 ONCE IN A WHILE 3	
916	Are you paid in cash or kind for this work or are you not paid at all?	CASH ONLY 1 CASH AND KIND 2 IN KIND ONLY 3 NOT PAID 4	
917	CHECK 701: CURRENTLY MARRIED/LIVING WITH A MAN <input type="checkbox"/> ↓ NOT IN UNION <input type="checkbox"/> → 925		
918	CHECK 916: CODE '1' OR '2' CIRCLED <input type="checkbox"/> ↓ OTHER <input type="checkbox"/> → 921		
919	Who usually decides how the money you earn will be used: you, your (husband/partner), or you and your (husband/partner) jointly?	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY 3 OTHER _____ 6 (SPECIFY)	
920	Would you say that the money that you earn is more than what your (husband/partner) earns, less than what he earns, or about the same?	MORE THAN HIM 1 LESS THAN HIM 2 ABOUT THE SAME 3 HUSBAND/PARTNER HAS NO EARNINGS 4 DON'T KNOW 8	→ 922
921	Who usually decides how your (husband's/partner's) earnings will be used: you, your (husband/partner), or you and your (husband/partner) jointly?	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY 3 HUSBAND/PARTNER HAS NO EARNINGS 4 OTHER _____ 6 (SPECIFY)	
922	Who usually makes decisions about health care for yourself: you, your (husband/partner), you and your (husband/partner) jointly, or someone else?	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY 3 SOMEONE ELSE 4 OTHER 6	
923	Who usually makes decisions about making major household purchases?	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY 3 SOMEONE ELSE 4 OTHER 6	

SECTION 9. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																								
924	Who usually makes decisions about visits to your family or relatives?	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY 3 SOMEONE ELSE 4 OTHER 6																									
925	Do you own this or any other house either alone or jointly with someone else?	ALONE ONLY 1 JOINTLY ONLY 2 BOTH ALONE AND JOINTLY 3 DOES NOT OWN 4	→ 931																								
926	Do you have a title deed for any house you own?	YES 1 NO 2 DON'T KNOW 8	→ 931																								
927	Is your name on the title deed?	YES 1 NO 2 DON'T KNOW 8																									
931	PRESENCE OF OTHERS AT THIS POINT (PRESENT AND LISTENING, PRESENT BUT NOT LISTENING, OR NOT PRESENT)	<table border="1"> <thead> <tr> <th></th> <th>PRES./ LISTEN.</th> <th>PRES./ NOT LISTEN.</th> <th>NOT PRES.</th> </tr> </thead> <tbody> <tr> <td>CHILDREN < 10</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>HUSBAND</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>OTHER MALES</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>OTHER FEMALES</td> <td>1</td> <td>2</td> <td>3</td> </tr> </tbody> </table>		PRES./ LISTEN.	PRES./ NOT LISTEN.	NOT PRES.	CHILDREN < 10	1	2	3	HUSBAND	1	2	3	OTHER MALES	1	2	3	OTHER FEMALES	1	2	3					
	PRES./ LISTEN.	PRES./ NOT LISTEN.	NOT PRES.																								
CHILDREN < 10	1	2	3																								
HUSBAND	1	2	3																								
OTHER MALES	1	2	3																								
OTHER FEMALES	1	2	3																								
932	In your opinion, is a husband justified in hitting or beating his wife in the following situations: a) If she goes out without telling him? b) If she neglects the children? c) If she argues with him? d) If she refuses to have sex with him? e) If she burns the food?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>a) GOES OUT</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>b) NEGLECTS CHILDREN</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>c) ARGUES</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>d) REFUSES SEX</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>e) BURNS FOOD</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	a) GOES OUT	1	2	8	b) NEGLECTS CHILDREN	1	2	8	c) ARGUES	1	2	8	d) REFUSES SEX	1	2	8	e) BURNS FOOD	1	2	8	
	YES	NO	DK																								
a) GOES OUT	1	2	8																								
b) NEGLECTS CHILDREN	1	2	8																								
c) ARGUES	1	2	8																								
d) REFUSES SEX	1	2	8																								
e) BURNS FOOD	1	2	8																								

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			
1001	Now I would like to talk about something else. Have you ever heard of HIV or AIDS?	YES	1	→ 1042	
		NO	2		
1002	HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex partner who has no other sex partners?	YES	1		
		NO	2		
		DON'T KNOW	8		
1003	Can people get HIV from mosquito bites?	YES	1		
		NO	2		
		DON'T KNOW	8		
1004	Can people reduce their chance of getting HIV by using a condom every time they have sex?	YES	1		
		NO	2		
		DON'T KNOW	8		
1005	Can people get HIV by sharing food with a person who has HIV?	YES	1		
		NO	2		
		DON'T KNOW	8		
1006	Can people get HIV through saliva by kissing a person who has HIV?	YES	1		
		NO	2		
		DON'T KNOW	8		
1006A	Can people get HIV by shaking hands with a person who has HIV?	YES	1		
		NO	2		
		DON'T KNOW	8		
1007	Is it possible for a healthy-looking person to have HIV?	YES	1		
		NO	2		
		DON'T KNOW	8		
1008	Can HIV be transmitted from a mother to her baby: a) During pregnancy? b) During delivery? c) By breastfeeding?		YES	NO	DK
		a) DURING PREGNANCY ..	1	2	8
		b) DURING DELIVERY	1	2	8
		c) BREASTFEEDING	1	2	8
1009	CHECK 1008: AT LEAST ONE 'YES' <input type="checkbox"/> ↓ OTHER <input type="checkbox"/> →				→ 1011
1010	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	1		
		NO	2		
		DON'T KNOW	8		
1011	CHECK 208 AND 214: LAST LIVE BIRTH IN 2015-2017 <input type="checkbox"/> ↓ NO LIVE BIRTHS <input type="checkbox"/> → 1027 LAST LIVE BIRTH IN 2014 OR EARLIER <input type="checkbox"/> → 1027				
1012	CHECK 408 FOR LAST LIVE BIRTH: HAD ANTENATAL CARE <input type="checkbox"/> ↓ NO ANTENATAL CARE <input type="checkbox"/> → 1020				
1013	CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.				
1014	During any of the antenatal visits for your last birth were you given any information about: a) Babies getting HIV from their mother? b) Things that you can do to prevent getting HIV? c) Getting tested for HIV?		YES	NO	DK
		a) HIV FROM MOTHER ..	1	2	8
		b) THINGS TO DO	1	2	8
		c) TESTED FOR HIV	1	2	8

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	
1015	Were you offered a test for HIV as part of your antenatal care?	YES 1 NO 2	
1016	I don't want to know the results, but were you tested for HIV as part of your antenatal care?	YES 1 NO 2	→ 1020
1017	<p>Where was the test done?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p>(NAME OF PLACE)</p>	<p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL 11</p> <p>MATERNITY HOME 12</p> <p>HEALTH CENTER (URBAN/RURAL)/ FORMERLY POLYCLINIC 13</p> <p>REPRODUCTIVE HEALTH CENTER 14</p> <p>HEALTH HOUSE 15</p> <p>INTEGRATED MANAGEMENT OF CHILD- HOOD ILLNESS CENTER(IMCI) 17</p> <p>IMMUNIPROPHYLAXIS CENTER 18</p> <p>AIDS CENTER 19</p> <p>HEALTHY LIFESTYLE CENTER 20</p> <p>FAMILY MEDICINE CENTER 21</p> <p>DISPENSARY 22</p> <p>TRUST POSTS/NEEDLE EXCHANGE/ FRIENDLY CABINET 23</p> <p>MOBILE CLINIC 24</p> <p>OTHER PUBLIC SECTOR _____ 26</p> <p>(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/CLINIC 31</p> <p>PRIVATE DOCTOR'S OFFICE 32</p> <p>PHARMACY 33</p> <p>NGO 34</p> <p>OTHER PRIVATE MEDICAL SECTOR _____ 36</p> <p>(SPECIFY)</p> <p>OTHER SOURCE</p> <p>HOME 41</p> <p>WORKPLACE 42</p> <p>CORRECTIONAL FACILITY 43</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p>	
1018	I don't want to know the results, but did you get the results of the test?	YES 1 NO 2	→ 1020
1019	All women are supposed to receive counseling after being tested. After you were tested, did you receive counseling?	YES 1 NO 2 DON'T KNOW 8	
1020	<p>CHECK 430 FOR LAST LIVE BIRTH:</p> <p>ANY CODE <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>'21-36' CIRCLED ↓</p>		→ 1024
1021	Between the time you went for delivery but before the baby was born, were you offered an HIV test?	YES 1 NO 2	
1022	I don't want to know the results, but were you tested for HIV at that time?	YES 1 NO 2	→ 1024
1023	I don't want to know the results, but did you get the results of the test?	YES 1 NO 2	→ 1025
1024	<p>CHECK 1016:</p> <p>YES <input type="checkbox"/> NO OR NOT ASKED <input type="checkbox"/></p> <p>↓</p>		→ 1027
1025	Have you been tested for HIV since that time you were tested during your pregnancy?	YES 1 NO 2	→ 1028

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	
1026	How many months ago was your most recent HIV test?	MONTHS AGO <input type="text"/> <input type="text"/> TWO OR MORE YEARS 95	→ 1033
1027	I don't want to know the results, but have you ever been tested for HIV?	YES 1 NO 2	→ 1031
1028	How many months ago was your most recent HIV test?	MONTHS AGO <input type="text"/> <input type="text"/> TWO OR MORE YEARS 95	
1029	I don't want to know the results, but did you get the results of the test?	YES 1 NO 2	
1030	Where was the test done? PROBE TO IDENTIFY THE TYPE OF SOURCE. IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE)	PUBLIC SECTOR GOVT. HOSPITAL 11 MATERNITY HOME 12 HEALTH CENTER (URBAN/RURAL/ FORMERLY POLYCLINIC 13 REPRODUCTIVE HEALTH CENTER 14 HEALTH HOUSE 15 INTEGRATED MANAGEMENT OF CHILD- HOOD ILLNESS CENTER(IMCI) 17 IMMUNIPROPHYLAXIS CENTER 18 AIDS CENTER 19 HEALTHY LIFESTYLE CENTER 20 FAMILY MEDICINE CENTER 21 DISPENSARY 22 TRUST POSTS/NEEDLE EXCHANGE/ FRIENDLY CABINET 23 MOBILE CLINIC 24 OTHER PUBLIC SECTOR 26 _____ (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/CLINIC 31 PRIVATE DOCTOR'S OFFICE 32 PHARMACY 33 NGO 34 OTHER PRIVATE MEDICAL SECTOR 36 _____ (SPECIFY) OTHER SOURCE HOME 41 WORKPLACE 42 CORRECTIONAL FACILITY 43 OTHER 96 _____ (SPECIFY)	→ 1033
1031	Do you know of a place where people can go to get an HIV test?	YES 1 NO 2	→ 1033

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	
1032	<p>Where is that?</p> <p>Any other place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p>(NAME OF PLACE)</p>	<p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL A</p> <p>MATERNITY HOME B</p> <p>HEALTH CENTER (URBAN/RURAL)/ FORMERLY PLYCLINIC C</p> <p>REPRODUCTIVE HEALTH CENTER D</p> <p>HEALTH HOUSE E</p> <p>INTEGRATED MANAGEMENT OF CHILD- HOOD ILLNESS CENTER(IMCI) F</p> <p>IMMUNOPROPHYLAXIS CENTER G</p> <p>AIDS CENTER H</p> <p>HEALTHY LIFESTYLE CENTER I</p> <p>FAMILY MEDICINE CENTER J</p> <p>DISPENSARY K</p> <p>TRUST POSTS/NEEDLE EXCHANGE/ FRIENDLY CABINET L</p> <p>MOBILE CLINIC M</p> <p>OTHER PUBLIC SECTOR</p> <p>_____ N</p> <p>(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/CLINIC J</p> <p>PRIVATE DOCTOR'S OFFICE P</p> <p>PHARMACY Q</p> <p>NGO R</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____ S</p> <p>(SPECIFY)</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>	
1033	<p>Have you heard of test kits people can use to test themselves for HIV?</p>	<p>YES 1</p> <p>NO 2</p>	→ 1035
1034	<p>Have you ever tested yourself for HIV using a self-test kit?</p>	<p>YES 1</p> <p>NO 2</p>	
1035	<p>Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1036	<p>Do you think children living with HIV should be allowed to attend school with children who do not have HIV?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1037	<p>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?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1038	<p>Do people talk badly about people living with HIV, or who are thought to be living with HIV?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1039	<p>Do people living with HIV, or thought to be living with HIV, lose the respect of other people?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1040	<p>Do you agree or disagree with the following statement: I would be ashamed if someone in my family had HIV.</p>	<p>AGREE 1</p> <p>DISAGREE 2</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	
1041	<p>Do you fear that you could get HIV if you come into contact with the saliva of a person living with HIV?</p>	<p>YES 1</p> <p>NO 2</p> <p>SAYS SHE HAS HIV 3</p> <p>DON'T KNOW/NOT SURE/DEPENDS 8</p>	

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	
1042	<p>CHECK 1001:</p> <p>HEARD ABOUT HIV OR AIDS <input type="checkbox"/></p> <p>NOT HEARD ABOUT HIV OR AIDS <input type="checkbox"/></p> <p>a) Apart from HIV, have you heard about other infections that can be transmitted through sexual contact?</p> <p>b) Have you heard about infections that can be transmitted through sexual contact?</p>	<p>YES 1</p> <p>NO 2</p>	
1043	<p>CHECK 713:</p> <p>HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/></p> <p>NEVER HAD SEXUAL INTERCOURSE <input type="checkbox"/></p>		→ 1051
1044	<p>CHECK 1042: HEARD ABOUT OTHER SEXUALLY TRANSMITTED INFECTIONS?</p> <p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p>		→ 1046
1045	<p>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?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
1046	<p>Sometimes women experience a bad-smelling abnormal genital discharge. During the last 12 months, have you had a bad-smelling abnormal genital discharge?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
1047	<p>Sometimes women have a genital sore or ulcer. During the last 12 months, have you had a genital sore or ulcer?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
1048	<p>CHECK 1045, 1046, AND 1047:</p> <p>HAS HAD AN INFECTION (ANY 'YES') <input type="checkbox"/></p> <p>HAS NOT HAD AN INFECTION OR DOES NOT KNOW <input type="checkbox"/></p>		→ 1051
1049	<p>The last time you had (PROBLEM FROM 1045/1046/1047), did you seek any kind of advice or treatment?</p>	<p>YES 1</p> <p>NO 2</p>	→ 1051

SECTION 10. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES
1050	<p>Where did you go?</p> <p>Any other place?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE.</p> <p>IF UNABLE TO DETERMINE IF PUBLIC OR PRIVATE SECTOR, WRITE THE NAME OF THE PLACE.</p> <p>_____</p> <p>(NAME OF PLACE)</p>	<p>PUBLIC SECTOR</p> <p>GOVT. HOSPITAL A</p> <p>MATERNITY HOME B</p> <p>HEALTH CENTER (URBAN/RURAL)</p> <p>FORMERLY PLYCLINIC C</p> <p>REPRODUCTIVE HEALTH CENTER D</p> <p>HEALTH HOUSE E</p> <p>INTEGRATED MANAGEMENT OF CHILD- HOOD ILLNESS CENTER(IMCI) F</p> <p>IMMUNOPROPHYLAXIS CENTER G</p> <p>AIDS CENTER H</p> <p>HEALTHY LIFESTYLE CENTER I</p> <p>FAMILY MEDICINE CENTER J</p> <p>DISPENSARY K</p> <p>TRUST POSTS/NEEDLE EXCHANGE/ FRIENDLY CABINET L</p> <p>MOBILE CLINIC M</p> <p>OTHER PUBLIC SECTOR</p> <p>_____ N</p> <p>(SPECIFY)</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL/CLINIC O</p> <p>PRIVATE DOCTOR'S OFFICE P</p> <p>PHARMACY Q</p> <p>NGO R</p> <p>OTHER PRIVATE MEDICAL SECTOR</p> <p>_____ S</p> <p>(SPECIFY)</p> <p>OTHER SOURCE</p> <p>SHOP T</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>
1051	<p>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?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>
1052	<p>Is a wife justified in refusing to have sex with her husband when she knows he has sex with other women?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>
1053	<p>CHECK 701:</p> <p>CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/></p> <p>NOT IN UNION <input type="checkbox"/> → 1101</p>	
1054	<p>Can you say no to your (husband/partner) if you do not want to have sexual intercourse?</p>	<p>YES 1</p> <p>NO 2</p> <p>DEPENDS/NOT SURE 8</p>
1055	<p>Could you ask your (husband/partner) to use a condom if you wanted him to?</p>	<p>YES 1</p> <p>NO 2</p> <p>DEPENDS/NOT SURE 8</p>

SECTION 11. OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP															
1101	<p>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?</p> <p>IF YES: How many injections have you had?</p> <p>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.</p>	<p>NUMBER OF INJECTIONS <input type="text"/> <input type="text"/></p> <p>NONE 00</p>	→ 1104															
1102	<p>Among these injections, how many were administered by a doctor, a nurse, a pharmacist, a dentist, or any other health worker?</p> <p>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.</p>	<p>NUMBER OF INJECTIONS <input type="text"/> <input type="text"/></p> <p>NONE 00</p>	→ 1104															
1103	<p>The last time you got an injection from a health worker, did he/she take the syringe and needle from a new, unopened package?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>																
1104	<p>Do you currently smoke cigarettes every day, some days, or not at all?</p>	<p>EVERY DAY 1</p> <p>SOME DAYS 2</p> <p>NOT AT ALL 3</p>	→ 1106															
1105	<p>On average, how many cigarettes do you currently smoke each day?</p>	<p>NUMBER OF CIGARETTES <input type="text"/> <input type="text"/></p>																
1106	<p>Do you currently smoke or use any other type of tobacco every day, some days, or not at all?</p>	<p>EVERY DAY 1</p> <p>SOME DAYS 2</p> <p>NOT AT ALL 3</p>	→ 1108															
1107	<p>What other type of tobacco do you currently smoke or use?</p> <p>RECORD ALL MENTIONED.</p>	<p>PIPES FULL OF TOBACCO B</p> <p>CIGARS, CHERROOTS, OR CIGARILLOS C</p> <p>WATER PIPE D</p> <p>NAZ SNUFF BY MOUTH E</p> <p>NAZ SNUFF BY NOSE F</p> <p>CHEWING TOBACCO G</p> <p>OTHER _____ X</p> <p align="center">(SPECIFY)</p>																
1108	<p>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:</p> <p>a) Getting permission to go to the doctor?</p> <p>b) Getting money needed for advice or treatment?</p> <p>c) The distance to the health facility?</p> <p>d) Not wanting to go alone?</p>	<table border="0"> <thead> <tr> <th></th> <th align="center">BIG PROBLEM</th> <th align="center">NOT A BIG PROBLEM</th> </tr> </thead> <tbody> <tr> <td>a) PERMISSION TO GO</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>b) GETTING MONEY</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>c) DISTANCE</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>d) GO ALONE</td> <td align="center">1</td> <td align="center">2</td> </tr> </tbody> </table>		BIG PROBLEM	NOT A BIG PROBLEM	a) PERMISSION TO GO	1	2	b) GETTING MONEY	1	2	c) DISTANCE	1	2	d) GO ALONE	1	2	
	BIG PROBLEM	NOT A BIG PROBLEM																
a) PERMISSION TO GO	1	2																
b) GETTING MONEY	1	2																
c) DISTANCE	1	2																
d) GO ALONE	1	2																

SECTION 11. OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
1119	Have you ever had your blood sugar measured by a doctor or other health worker?	YES 1 NO 2									
1120	Have you ever been told by a doctor or other health worker that you have high blood sugar or diabetes?	YES 1 NO 2									
1121	These next questions are about blood pressure. Except for this time, have you ever had your blood pressure measured by a doctor or other health worker?	YES 1 NO 2 DON'T KNOW 8									
1122	Have you ever been told by a doctor or other health worker that you have high blood pressure or hypertension?	YES 1 NO 2	→ 1126								
1123	In the past 12 months, have you been told by a doctor or other health worker that you have high blood pressure or hypertension?	YES 1 NO 2									
1124	Has a doctor or other health worker prescribed medication to control your blood pressure?	YES 1 NO 2									
1125	Are you taking medication to control your blood pressure?	YES 1 NO 2									
1126	CHECK 101A: <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> AGREED TO BE MEASURED </div> <div style="text-align: center;"> <input type="checkbox"/> OTHER <div style="display: flex; align-items: center; margin-left: 20px;"> → </div> </div> </div>		→ 1201								
1127	RECORD THE TIME.	HOURS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MINUTES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>									
1128	May I measure your blood pressure at this time? CIRCLE THE CODE AND SIGN YOUR NAME.	AGREED 1 <div style="display: flex; align-items: center; margin: 5px 0;"> <div style="border-bottom: 1px solid black; width: 100px; margin-right: 5px;"></div> ← (SIGN) </div> REFUSED 2 THEN SKIP TO 1201 ←									
1129	TAKE THE THIRD BLOOD PRESSURE READING. RECORD THE SYSTOLIC AND DIASTOLIC PRESSURE. THEN PROCEED TO Q1201. IF YOU ARE UNABLE TO MEASURE THE RESPONDENT'S BLOOD PRESSURE, RECORD THE REASON.	BLOOD PRESSURE MEASURED SYSTOLIC <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> DIASTOLIC <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> TECHNICAL PROBLEMS '995 OTHER '996 <div style="text-align: center; margin-top: 5px;"> _____ SPECIFY </div>									

SECTION 12. AVERAGING BLOOD PRESSURE MEASURES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP						
1201	<p>CHECK Q658 AND Q1129.</p> <p>SYSTOLIC AND DIASTOLIC BLOOD PRESSURE RECORDED IN BOTH Q658 AND Q1129 <input type="checkbox"/></p>	<p>SYSTOLIC AND DIASTOLIC BLOOD PRESSURE MEASURES NOT RECORDED IN BOTH Q658 AND Q1129 <input type="checkbox"/></p>	→ 1207						
1202	RECORD AND CALCULATE THE AVERAGE OF THE SYSTOLIC AND DIASTOLIC BLOOD PRESSURE FROM Q658 AND Q1129.								
1203	<p>BLOOD PRESSURE MEASUREMENTS FROM Q658</p> <p align="center">SYSTOLIC</p> <table border="1" data-bbox="531 521 761 584"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				<p align="center">DIASTOLIC</p> <table border="1" data-bbox="978 521 1208 584"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				
1204	<p>BLOOD PRESSURE MEASUREMENTS FROM Q1129</p> <p align="center">SYSTOLIC</p> <table border="1" data-bbox="531 638 761 701"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				<p align="center">DIASTOLIC</p> <table border="1" data-bbox="978 638 1208 701"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				
1205	<p>RECORD THE SUM OF THE SYSTOLIC AND DIASTOLIC MEASURES</p> <p align="center">SUM SYSTOLIC</p> <table border="1" data-bbox="531 786 761 848"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				<p align="center">SUM DIASTOLIC</p> <table border="1" data-bbox="978 786 1208 848"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				
1206	<p>CALCULATE THE AVERAGE SYSTOLIC AND DIASTOLIC PRESSURES BY DIVIDING THE SUM IN Q1205 BY 2</p> <p align="center">AVERAGE SYSTOLIC</p> <table border="1" data-bbox="531 965 761 1028"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				<p align="center">AVERAGE DIASTOLIC</p> <table border="1" data-bbox="978 965 1208 1028"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				→ 1211
1207	<p>CHECK Q1129:</p> <p>SYSTOLIC AND DIASTOLIC BLOOD PRESSURE NOT RECORDED IN Q1129 <input type="checkbox"/></p>	<p>BOTH SYSTOLIC AND DIASTOLIC BLOOD PRESSURE RECORDED IN Q1129 <input type="checkbox"/></p>	→ 1210						
1208	<p>SYSTOLIC AND DIASTOLIC BLOOD PRESSURE NOT RECORDED IN Q658 <input type="checkbox"/></p>	<p>BOTH SYSTOLIC AND DIASTOLIC BLOOD PRESSURE RECORDED IN Q658 <input type="checkbox"/></p>	→ 1210						
1209	<p>SYSTOLIC AND DIASTOLIC BLOOD PRESSURE RECORDED IN Q101E <input type="checkbox"/></p>	<p>BOTH SYSTOLIC AND DIASTOLIC BLOOD PRESSURE NOT RECORDED IN Q101E <input type="checkbox"/></p>	→ 1213						
1210	<p>RECORD THE SYSTOLIC AND DIASTOLIC PRESSURE.</p> <p align="center">SYSTOLIC</p> <table border="1" data-bbox="582 1668 812 1731"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				<p align="center">DIASTOLIC</p> <table border="1" data-bbox="1029 1668 1259 1731"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																							
1211	<p>USE THE TABLE BELOW TO DETERMINE THE CORRECT CODE TO RECORD ON THE BLOOD PRESSURE REPORT AND REFERRAL FORM.</p> <p>CIRCLE THE ROW IN WHICH THE VALUE FOR THE SYSTOLIC BLOOD PRESSURE FROM Q1206 OR Q1210 IS FOUND.</p> <p>THEN CIRCLE THE COLUMN IN WHICH THE VALUE FOR THE DIASTOLIC BLOOD FROM Q1206 OR Q1210 IS FOUND.</p> <p>THE VALUE WHERE THE ROW AND COLUMN YOU HAVE CIRCLED INTERSECT IN THE TABLE WILL BE USED IN COMPLETING Q1212.</p> <table border="1" data-bbox="261 495 1329 869"> <thead> <tr> <th rowspan="2">AVERAGE SYSTOLIC PRESSURE</th> <th colspan="6">AVERAGE DIASTOLIC PRESSURE</th> </tr> <tr> <th><84</th> <th>85-89</th> <th>90-99</th> <th>100- 109</th> <th>110- 119</th> <th>>=120</th> </tr> </thead> <tbody> <tr> <td><129</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>130-139</td> <td>2</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>140-159</td> <td>3</td> <td>3</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>160-179</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>180-209</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> <td>6</td> </tr> <tr> <td>>=210</td> <td>6</td> <td>6</td> <td>6</td> <td>6</td> <td>6</td> <td>6</td> </tr> </tbody> </table>	AVERAGE SYSTOLIC PRESSURE	AVERAGE DIASTOLIC PRESSURE						<84	85-89	90-99	100- 109	110- 119	>=120	<129	1	2	3	4	5	6	130-139	2	2	3	4	5	6	140-159	3	3	3	4	5	6	160-179	4	4	4	4	5	6	180-209	5	5	5	5	5	6	>=210	6	6	6	6	6	6		
AVERAGE SYSTOLIC PRESSURE	AVERAGE DIASTOLIC PRESSURE																																																									
	<84	85-89	90-99	100- 109	110- 119	>=120																																																				
<129	1	2	3	4	5	6																																																				
130-139	2	2	3	4	5	6																																																				
140-159	3	3	3	4	5	6																																																				
160-179	4	4	4	4	5	6																																																				
180-209	5	5	5	5	5	6																																																				
>=210	6	6	6	6	6	6																																																				
1212	<p>RECORD THE NUMBER YOU CIRCLED IN Q1211 IN THE CHART BELOW. THEN USE THE INSTRUCTIONS TO THE RIGHT OF THAT NUMBER TO COMPLETE A BLOOD PRESSURE REPORT AND REFERRAL FORM FOR THE RESPONDENT. GIVE THE FORM TO THE RESPONDENT AND ANSWER ANY QUESTIONS HE/SHE MAY HAVE.</p> <table border="1" data-bbox="236 1025 1305 1541"> <thead> <tr> <th></th> <th>RESPONDENT'S BLOOD PRESSURE CATEGORY</th> <th>CONSULT HEALTH PROVIDER TO CHECK BLOOD PRESSURE WITHIN:</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>NORMAL</td> <td>24 MONTHS</td> </tr> <tr> <td>2</td> <td>AT THE HIGH END OF THE NORMAL RANGE</td> <td>12 MONTHS</td> </tr> <tr> <td>3</td> <td>ABOVE NORMAL RANGE</td> <td>2 MONTHS</td> </tr> <tr> <td>4</td> <td>MODERATELY HIGH</td> <td>1 MONTH</td> </tr> <tr> <td>5</td> <td>VERY HIGH</td> <td>TODAY</td> </tr> <tr> <td>6</td> <td>EXTREMELY HIGH</td> <td>TODAY</td> </tr> </tbody> </table>		RESPONDENT'S BLOOD PRESSURE CATEGORY	CONSULT HEALTH PROVIDER TO CHECK BLOOD PRESSURE WITHIN:	1	NORMAL	24 MONTHS	2	AT THE HIGH END OF THE NORMAL RANGE	12 MONTHS	3	ABOVE NORMAL RANGE	2 MONTHS	4	MODERATELY HIGH	1 MONTH	5	VERY HIGH	TODAY	6	EXTREMELY HIGH	TODAY																																				
	RESPONDENT'S BLOOD PRESSURE CATEGORY	CONSULT HEALTH PROVIDER TO CHECK BLOOD PRESSURE WITHIN:																																																								
1	NORMAL	24 MONTHS																																																								
2	AT THE HIGH END OF THE NORMAL RANGE	12 MONTHS																																																								
3	ABOVE NORMAL RANGE	2 MONTHS																																																								
4	MODERATELY HIGH	1 MONTH																																																								
5	VERY HIGH	TODAY																																																								
6	EXTREMELY HIGH	TODAY																																																								
1213	CHECK THAT THE RESPONDENT HAS RECEIVED A REPORTING FORM ON BLOOD PRESSURE	RECEIVED 1 NOT RECEIVED 2																																																								

SECTION 13. DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																								
1300	<p>CHECK COVER PAGE: WOMAN SELECTED FOR DV MODULE?</p> <p>WOMAN SELECTED FOR THIS SECTION <input type="checkbox"/></p>	<p>WOMAN <input type="checkbox"/> → 1401A</p> <p>NOT SELECTED</p>																									
1301	<p>CHECK FOR PRESENCE OF OTHERS: DO NOT CONTINUE UNTIL PRIVACY IS ENSURED.</p> <p>PRIVACY OBTAINED 1 ↓</p>	<p>PRIVACY NOT POSSIBLE 2 → 1332</p>																									
1301A	<p>READ TO THE RESPONDENT: 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 Tajikistan. 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.</p>																										
1302	<p>CHECK 701 AND 702:</p> <p>CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/></p>	<p>FORMERLY MARRIED/ LIVED WITH A MAN (READ IN PAST TENSE AND USE 'LAST' WITH 'HUSBAND/PARTNER') <input type="checkbox"/></p> <p>NEVER MARRIED/ NEVER LIVED WITH A MAN <input type="checkbox"/> → 1316</p>																									
1303	<p>First, I am going to ask you about some situations which happen to some women. Please tell me if these apply to your relationship with your (last) (husband/partner)?</p> <p>a) He (is/was) jealous or angry if you (talk/talked) to other men? b) He frequently (accuses/accused) you of being unfaithful? c) He (does/did) not permit you to meet your female friends? d) He (tries/tried) to limit your contact with your family? e) He (insists/insisted) on knowing where you (are/were) at all times?</p>	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>JEALOUS</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>ACCUSES</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>NOT MEET FRIENDS ..</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>NO FAMILY</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>WHERE YOU ARE</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	JEALOUS	1	2	8	ACCUSES	1	2	8	NOT MEET FRIENDS ..	1	2	8	NO FAMILY	1	2	8	WHERE YOU ARE	1	2	8	
	YES	NO	DK																								
JEALOUS	1	2	8																								
ACCUSES	1	2	8																								
NOT MEET FRIENDS ..	1	2	8																								
NO FAMILY	1	2	8																								
WHERE YOU ARE	1	2	8																								
1304	<p>Now I need to ask some more questions about your relationship with your (last) (husband/partner).</p> <p>A. Did your (last) (husband/partner) ever:</p> <table border="1"> <thead> <tr> <th></th> <th>EVER</th> <th></th> <th>OFTEN</th> <th>SOME-TIMES</th> <th>NOT IN LAST 12 MONTHS</th> </tr> </thead> <tbody> <tr> <td>a) say or do something to humiliate you in front of others?</td> <td>YES 1 NO 2 ↓</td> <td>→</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>b) threaten to hurt or harm you or someone you care about?</td> <td>YES 1 NO 2 ↓</td> <td>→</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>c) insult you or make you feel bad about yourself?</td> <td>YES 1 NO 2 ↓</td> <td>→</td> <td>1</td> <td>2</td> <td>3</td> </tr> </tbody> </table>		EVER		OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS	a) say or do something to humiliate you in front of others?	YES 1 NO 2 ↓	→	1	2	3	b) threaten to hurt or harm you or someone you care about?	YES 1 NO 2 ↓	→	1	2	3	c) insult you or make you feel bad about yourself?	YES 1 NO 2 ↓	→	1	2	3	<p>B. How often did this happen during the last 12 months: often, only sometimes, or not at all?</p>	
	EVER		OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS																						
a) say or do something to humiliate you in front of others?	YES 1 NO 2 ↓	→	1	2	3																						
b) threaten to hurt or harm you or someone you care about?	YES 1 NO 2 ↓	→	1	2	3																						
c) insult you or make you feel bad about yourself?	YES 1 NO 2 ↓	→	1	2	3																						
1305	<p>A. Did your (last) (husband/partner) ever do any of the following things to you:</p>	<p>B. How often did this happen during the last 12 months: often, only sometimes, or not at all?</p>																									

SECTION 13. DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
		EVER	OFTEN	SOME-TIMES	NOT IN LAST 12 MONTHS	
	a) push you, shake you, or throw something at you?	YES 1 NO 2	→ 1	2	3	
	b) slap you?	YES 1 NO 2	→ 1	2	3	
	c) twist your arm or pull your hair?	YES 1 NO 2	→ 1	2	3	
	d) punch you with his fist or with something that could hurt you?	YES 1 NO 2	→ 1	2	3	
	e) kick you, drag you, or beat you up?	YES 1 NO 2	→ 1	2	3	
	f) try to choke you or burn you on purpose?	YES 1 NO 2	→ 1	2	3	
	g) threaten or attack you with a knife, gun, or other weapon?	YES 1 NO 2	→ 1	2	3	
	h) physically force you to have sexual intercourse with him when you did not want to?	YES 1 NO 2	→ 1	2	3	
	i) physically force you to perform any other sexual acts you did not want to?	YES 1 NO 2	→ 1	2	3	
	j) force you with threats or in any other way to perform sexual acts you did not want to?	YES 1 NO 2	→ 1	2	3	
1306	CHECK 1305A (a-j): <div style="display: flex; justify-content: space-around;"> AT LEAST ONE <input type="checkbox"/> 'YES' NOT A SINGLE <input type="checkbox"/> 'YES' → 1309 </div>					
1307	How long after you first (got married/started living together) with your (last) (husband/partner) did (this/any of these things) first happen? IF LESS THAN ONE YEAR, RECORD '00'.			NUMBER OF YEARS <input type="text"/> <input type="text"/> BEFORE MARRIAGE/BEFORE LIVING TOGETHER 95		
1308	Did the following ever happen as a result of what your (last) (husband/partner) did to you: a) You had cuts, bruises, or aches? b) You had eye injuries, sprains, dislocations, or burns? c) You had deep wounds, broken bones, broken teeth, or any other serious injury?			YES 1 NO 2 YES 1 NO 2 YES 1 NO 2		

SECTION 13. DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1309	Have you ever hit, slapped, kicked, or done anything else to physically hurt your (last) (husband/partner) at times when he was not already beating or physically hurting you?	YES 1 NO 2	→ 1311
1310	In the last 12 months, how often have you done this to your (last) (husband/partner): often, only sometimes, or not at all?	OFTEN 1 SOMETIMES 2 NOT AT ALL 3	
1311	Does (did) your (last) (husband/partner) drink alcohol?	YES 1 NO 2	→ 1313
1312	How often does (did) he get drunk: often, only sometimes, or never?	OFTEN 1 SOMETIMES 2 NEVER 3	
1313	Are (Were) you afraid of your (last) (husband/partner): most of the time, sometimes, or never?	MOST OF THE TIME AFRAID 1 SOMETIMES AFRAID 2 NEVER AFRAID 3	
1314	CHECK 709: MARRIED MORE THAN ONCE <input type="checkbox"/> ↓ MARRIED ONLY ONCE <input type="checkbox"/>		→ 1316
1315	A. So far we have been talking about the behavior of your (current/last) (husband/partner). Now I want to ask you about the behavior of any previous (husband/partner). a) Did any previous (husband/partner) ever hit, slap, kick, or do anything else to hurt you physically? b) Did any previous (husband/partner) physically force you to have intercourse or perform any other sexual acts against your will? c) Did any previous (husband/partner) humiliate you in front of others, threaten to hurt you or someone you care about, or insult you or make you feel bad about	B. How long ago did this last happen? EVER 0 - 11 MONTHS AGO 12+ MONTHS AGO DON'T REMEMBER	
1316	CHECK 701 AND 702: EVER MARRIED/EVER LIVED WITH A MAN <input type="checkbox"/> ↓ NEVER MARRIED/NEVER LIVED WITH A MAN <input type="checkbox"/> ↓ a) From the time you were 15 years old has anyone other than (your/any) (husband/partner) hit you, slapped you, kicked you, or done anything else to hurt you physically? b) From the time you were 15 years old has anyone hit you, slapped you, kicked you, or done anything else to hurt you physically?	YES 1 NO 2 REFUSED TO ANSWER/ NO ANSWER 3	→ 1319

SECTION 13. DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1317	Who has hurt you in this way? Anyone else? RECORD ALL MENTIONED.	MOTHER/STEP-MOTHER A FATHER/STEP-FATHER B SISTER/BROTHER C DAUGHTER/SON D OTHER RELATIVE E CURRENT BOYFRIEND F FORMER BOYFRIEND G MOTHER-IN-LAW H FATHER-IN-LAW I OTHER IN-LAW J TEACHER K EMPLOYER/SOMEONE AT WORK .. L POLICE/SOLDIER M OTHER _____ X (SPECIFY)	
1318	In the last 12 months, how often has (this person/have these persons) physically hurt you: often, only sometimes, or not at all?	OFTEN 1 SOMETIMES 2 NOT AT ALL 3	
1319	CHECK 201, 210 AND 226: EVER BEEN PREGNANT <input type="checkbox"/> ('YES' ON 201 OR 210 OR 226) ↓	NEVER BEEN PREGNANT <input type="checkbox"/> → 1322	
1320	Has any one ever hit, slapped, kicked, or done anything else to hurt you physically while you were pregnant?	YES 1 NO 2 → 1322	
1321	Who has done any of these things to physically hurt you while you were pregnant? Anyone else? RECORD ALL MENTIONED.	CURRENT HUSBAND/PARTNER A MOTHER/STEP-MOTHER B FATHER/STEP-FATHER C SISTER/BROTHER D DAUGHTER/SON E OTHER RELATIVE F FORMER HUSBAND/PARTNER G CURRENT BOYFRIEND H FORMER BOYFRIEND I MOTHER-IN-LAW J FATHER-IN-LAW K OTHER IN-LAW L TEACHER M EMPLOYER/SOMEONE AT WORK .. N POLICE/SOLDIER O OTHER _____ X (SPECIFY)	
1322	CHECK 701 AND 702: EVER MARRIED/EVER LIVED WITH A MAN <input type="checkbox"/> ↓	NEVER MARRIED/NEVER LIVED WITH A MAN <input type="checkbox"/> → 1322B	
1322A	Now I want to ask you about things that may have been done to you by someone other than (your/any) (husband/partner). At any time in your life, as a child or as an adult, has anyone ever forced you in any way to have sexual intercourse or perform any other sexual acts when you did not want to?	YES 1 → 1323 NO 2 REFUSED TO ANSWER/ NO ANSWER 3 → 1324A	

SECTION 13. DOMESTIC VIOLENCE MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1322B	At any time in your life, as a child or as an adult, has anyone ever forced you in any way to have sexual intercourse or perform any other sexual acts when you did not want to?	YES 1 NO 2 REFUSED TO ANSWER/ NO ANSWER 3	<input type="checkbox"/> → 1326
1323	Who was the person who was forcing you the very first time this happened?	CURRENT HUSBAND/PARTNER 01 FORMER HUSBAND/PARTNER 02 CURRENT/FORMER BOYFRIEND .. 03 FATHER/STEP-FATHER 04 BROTHER/STEP-BROTHER 05 OTHER RELATIVE 06 IN-LAW 07 OWN FRIEND/ACQUAINTANCE 08 FAMILY FRIEND 09 TEACHER 10 EMPLOYER/SOMEONE AT WORK .. 11 POLICE/SOLDIER 12 PRIEST/RELIGIOUS LEADER 13 STRANGER 14 OTHER _____ 96 (SPECIFY)	
1324	CHECK 701 AND 702: EVER MARRIED/EVER <input type="checkbox"/> LIVED WITH A MAN ↓ a) In the last 12 months, has anyone other than (your/any) (husband/partner) physically forced you to have sexual intercourse when you did not want to? NEVER MARRIED/NEVER <input type="checkbox"/> LIVED WITH A MAN ↓ b) In the last 12 months has anyone physically forced you to have sexual intercourse when you did not want to?	YES 1 NO 2	<input type="checkbox"/> → 1325
1324A	CHECK 1305A (h-j) and 1315A(b) AT LEAST ONE <input type="checkbox"/> 'YES' ↓ NOT A <input type="checkbox"/> SINGLE 'YES' →		<input type="checkbox"/> → 1326
1325	CHECK 701 AND 702: EVER MARRIED/EVER <input type="checkbox"/> LIVED WITH A MAN ↓ a) How old were you the first time you were forced to have sexual intercourse or perform any other sexual acts by anyone, including (your/any) husband/partner? NEVER MARRIED/NEVER <input type="checkbox"/> LIVED WITH A MAN ↓ b) How old were you the first first time you were forced to have sexual intercourse or perform any other sexual acts?	AGE IN COMPLETED YEARS <input type="text"/> <input type="text"/> DON'T KNOW 98	

SECTION 14A. INFORMATION ABOUT THE HEALTH FACILITY WHERE IMMUNIZATION RECORDS ARE KEPT(LAST CHILD)

NO.	INFORMATION	LAST BIRTH	SKIP
1401A	CHECK 214, 508A AND 508B: ANY LIVE BIRTHS IN 2014-2017 YES <input type="checkbox"/>	NO <input type="checkbox"/>	1414
1402A	CHECK 212, 214, 216 AND 508A: RECORD THE NAME AND PREGNANCY HISTORY NUMBER OF THE LAST CHILD BORN IN 2014-2017 NAME OF LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER <input type="text"/>	
1403A	CHECK 218 FOR THE LAST CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/>	1401B
1403AA	CHECK 507A: CODE '1' (CARD/FORM 63) AND CODE '3' (CARD/FORM 63 AND OTHER DOCUMENT) CIRCLED NO <input type="checkbox"/>	YES <input type="checkbox"/>	1401B
1404A	ASK RESPONDENT FOR CONSENT TO COPY VACCINATION DATES FROM THE LAST CHILD'S HEALTH CARD AND IMMUNIZATION CARD (FORM 63) KEPT IN A HEALTH FACILITY	<p>As part of this survey, we would like to visit the health facility in which your children who were born in January 2014 or later got vaccinated. We would like to have your permission to copy the vaccination dates from your children's health records. With your permission, our team supervisor will visit the health facility and copy the vaccination dates from the health cards directly to the same questionnaire I am using right now for our interview. The information will be kept confidential and will not be shared with anyone other than members of our survey team. We hope you will allow access to the health cards because information about your children's vaccinations is very important. The information will complement the information that we obtained from you in this interview. Many dangerous childhood illnesses such as measles or tetanus can be prevented through timely and effective vaccination. The information from the cards will assist the government to develop programs to protect children from vaccine preventable diseases and reduce childhood mortality and morbidity in Tajikistan.</p> <p>Do you have any questions?</p> <p>Will you allow (NAME OF LAST CHILD) to have his/her vaccination records copied from (NAME OF CHILD)'s health card kept at the health facility?</p>	
1405A	CIRCLE THE CODE AND SIGN YOUR NAME.	<p>GRANTED 1</p> <p>_____ (INTERVIEWER'S SIGNATURE)</p> <p>REFUSED 2 THEN SKIP TO 1413A</p> <p>NOT PRESENT/ OTHER 3 THEN SKIP TO 1413A</p>	
1405AA	ASK RESPONDENT FOR CONSENT TO TAKE A PHOTO OF THE LAST CHILD'S VACCINATION RECORDS KEPT IN A HEALTH FACILITY	Will you allow us to photograph (his/her) vaccination records photographed for verification purposes later on in case of mistakes?	
1405AAA	CIRCLE THE CODE AND SIGN YOUR NAME.	<p>GRANTED 1</p> <p>_____ (INTERVIEWER'S SIGNATURE)</p> <p>REFUSED 2</p>	

SECTION 14A. INFORMATION ABOUT THE HEALTH FACILITY WHERE IMMUNIZATION RECORDS ARE KEPT(LAST CHILD).

NO.	INFORMATION	LAST LIVE BIRTH								
RECORD LAST CHILD'S FULL NAME, MOTHER'S FULL NAME, CHILD'S BIRTH DATE, CHILD'S HOME ADDRESS, NAME AND ADDRESS OF THE MEDICAL FACILITY WHERE CHILD'S VACCINATION RECORDS ARE KEPT (FORMS 063 AND 112), CHILD'S DOCTOR NAME AND UCHASTOK NUMBER.										
1406A	LAST CHILD'S FULL NAME	_____ CHILD'S FIRST NAME CHILD'S LAST NAME								
1407A	MOTHER'S FULL NAME	_____ MOTHER'S FIRST NAME MOTHER'S LAST NAME								
1408A	RECORD LAST CHILD'S DATE OF BIRTH FROM 214	DAY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> YEAR . . <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>								
1409A	LAST CHILD'S HOME ADDRESS	_____ (STREET NAME, HOUSE NUMBER AND FLAT NUMBER) _____ CITY, TOWN, VILLAGE, ZIP CODE								
1410A	NAME, ADDRESS AND TELEPHONE NUMBER OF MEDICAL FACILITY WHERE LAST CHILD'S VACCINATION RECORDS (FORMS # 063 AND #112) ARE KEPT	_____ (NAME OF MEDICAL FACILITY) _____ (STREET ADDRESS OF THE MEDICAL FACILITY) _____ TELEPHONE NUMBER								
1411A	LAST CHILD'S DOCTOR NAME	_____ DOCTOR'S FIRST NAME DOCTOR'S LAST NAME								
1412A	LAST CHILD'S HEALTH FACILITY UCHASTOK №	UCHASTOK NUMBER <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>								
1413A	CONTINUE WITH 1401B									

SECTION 14B. INFORMATION ABOUT THE HEALTH FACILITY WHERE IMMUNIZATION RECORDS ARE KEPT(NEXT- TO-LAST CHILD)

NO.	INFORMATION	NEXT TO LAST BIRTH	SKIP
1401B	CHECK 214, 508A AND 508B: ANY MORE LIVE BIRTHS IN 2014-2017? YES <input type="checkbox"/>	NO <input type="checkbox"/>	1414
1402B	CHECK 212, 214, 216 AND 508B: RECORD THE NAME AND PREGNANCY HISTORY NUMBER OF NEXT-TO-THE-LAST CHILD BORN IN 2014-2017 NAME OF NEXT TO LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>	
1403B	CHECK 218 FOR CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/>	1413B
1403BB	CHECK 507B: CODE '1' (CARD/FORM 63) AND CODE '3' (CARD/FORM 63 AND OTHER DOCUMENT) CIRCLED NO <input type="checkbox"/>	YES <input type="checkbox"/>	1401B
1404B	ASK RESPONDENT FOR CONSENT TO COPY VACCINATION DATES FROM THE NEXT-TO-LAST CHILD'S HEALTH CARD AND IMMUNIZATION CARD (FORM 63) KEPT IN A HEALTH FACILITY	<p>As part of this survey, we would like to visit the health facility in which your children who were born in January 2014 or later got vaccinated. We would like to have your permission to copy the vaccination dates from your children's health records. With your permission, our team supervisor will visit the health facility and copy the vaccination dates from the health cards directly to the same questionnaire I am using right now for our interview. The information will be kept confidential and will not be shared with anyone other than members of our survey team. We hope you will allow access to the health cards because information about your children's vaccinations is very important. The information will complement the information that we obtained from you in this interview. Many dangerous childhood illnesses such as measles or tetanus can be prevented through timely and effective vaccination. The information from the cards will assist the government to develop programs to protect children from vaccine preventable diseases and reduce childhood mortality and morbidity in Tajikistan.</p> <p>Do you have any questions?</p> <p>Will you allow (NAME OF THE NEXT TO LAST CHILD) to have his/her vaccination records copied from (NAME OF CHILD)'s health card kept at the health facility?</p>	
1405B	CIRCLE THE CODE AND SIGN YOUR NAME.	<p>GRANTED 1]</p> <p>_____ ←]</p> <p>(INTERVIEWER'S SIGNATURE)</p> <p>REFUSED 2]</p> <p>THEN SKIP TO 1413B ←]</p> <p>NOT PRESENT/ OTHER 3]</p> <p>THEN SKIP TO 1413B ←]</p>	
1405BB	ASK RESPONDENT FOR CONSENT TO TAKE A PHOTO OF NEXT TO THE LAST CHILD'S VACCINATION RECORDS KEPT IN A HEALTH FACILITY	Will you allow us to photograph (his/her) vaccination records photographed for verification purposes later on in case of mistakes?	
1405BBB	CIRCLE THE CODE AND SIGN YOUR NAME.	<p>GRANTED 1]</p> <p>_____ ←]</p> <p>(INTERVIEWER'S SIGNATURE)</p> <p>REFUSED 2]</p>	

SECTION 14B. INFORMATION ABOUT THE HEALTH FACILITY WHERE IMMUNIZATION RECORDS ARE KEPT(NEXT- TO-LAST CHILD)

NO.	INFORMATION	NEXT TO THE LAST LIVE BIRTH												
<p>RECORD NEXT-TO-LAST CHILD'S FULL NAME, MOTHER'S FULL NAME, CHILD'S BIRTH DATE, CHILD'S HOME ADDRESS, NAME AND ADDRESS OF THE MEDICAL FACILITY WHERE CHILD'S VACCINATION RECORDS ARE KEPT (FORMS 063 AND 112), CHILD'S DOCTOR NAME AND UCHASTOK NUMBER.</p>														
1406B	NEXT-TO-LAST CHILD'S FULL NAME	<p>_____</p> <p>CHILD'S FIRST NAME CHILD'S LAST NAME</p>												
1407B	MOTHER'S FULL NAME	<p>_____</p> <p>MOTHER'S FIRST NAME MOTHER'S LAST NAME</p>												
1408B	RECORD NEXT-TO-LAST CHILD'S DATE OF BIRTH FROM 214	<p>DAY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>YEAR . . <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>												
1409B	NEXT-TO-LAST CHILD'S HOME ADDRESS	<p>_____</p> <p>(STREET NAME, HOUSE NUMBER AND FLAT NUMBER)</p> <p>_____</p> <p>CITY, TOWN, VILLAGE, ZIP CODE</p>												
1410B	NAME, ADDRESS AND TELEPHONE NUMBER OF MEDICAL FACILITY WHERE NEXT-TO-LAST CHILD'S VACCINATION RECORDS (FORMS # 063 AND #112) ARE KEPT	<p>_____</p> <p>(NAME OF MEDICAL FACILITY)</p> <p>_____</p> <p>(STREET ADDRESS OF THE MEDICAL FACILITY)</p> <p>_____</p> <p>TELEPHONE NUMBER</p>												
1411B	NEXT-TO-LAST CHILD'S DOCTOR NAME	<p>_____</p> <p>DOCTOR'S FIRST NAME DOCTOR'S LAST NAME</p>												
1412B	NEXT-TO-LAST CHILD'S HEALTH FACILITY UCHASTOK NUMBER	<p>UCHASTOK NUMBER <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>												
1413B	<p>CHECK 214 IN PREGNANCY HISTORY: ANY MORE LIVE BIRTHS IN 2014-2017?</p> <p style="text-align: center;"> <input type="checkbox"/> NO MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> MORE LIVE BIRTHS IN 2014-2017 ↓ (GO TO 1401B IN AN ADDITIONAL QUESTIONNAIRE) ← </p>													
1414	RECORD THE TIME.	<p>HOURS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>MINUTES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>												
<p>AFTER COMPLETING ALL INTERVIEWS IN THIS HOUSEHOLD, THE TEAM SUPERVISOR MUST GO TO THE MEDICAL FACILITY AND RECORD DATES WHEN THE SPECIFIC VACCINES WERE GIVEN IN SECTION 15 FOR ALL LIVING LIVE BIRTHS IN 2014-2017</p>														

SECTION 15A. CHILD IMMUNIZATION FROM HEALTH FACILITY FORM 112 AND FORM 63 (LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1501A	CHECK 214 IN THE PREGNANCY HISTORY AND 1401A ONE OR MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/>	NO LIVE BIRTHS IN 2014-2017 <input type="checkbox"/> → END	
1502A	CHECK 212, 214, 216 AND 1402A RECORD THE NAME AND PREGNANCY HISTORY NUMBER OF THE LAST CHILD BORN IN 2014-2017 NAME OF LAST LIVE BIRTH _____ PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>		
1503A	CHECK 218 FOR CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/> → 1508A	
1504A	CHECK 1410A IS THERE AN ADDRESS RECORDED FOR THE HEALTH FACILITY WHERE LAST LIVE BIRTH'S IMMUNIZATION RECORDS ARE KEPT?	YES 1 NO 2 → 1508A	
1505A	WAS THIS HEALTH FACILITY VISITED?	YES 1 NO 2 → 1508A	
1506A	HAVE YOU LOCATED THE IMMUNIZATION RECORDS OF LAST LIVE BIRTH IN THE HEALTH FACILITY (FORM 112 AND FORM 63)?	YES SEEN 1 YES SEEN, NO RECORDS IN THE CARDS .. 2 → 1508A NO 3 → 1508A	

IMMUNIZATION RECORDS FROM HEALTH FACILITY CARD FORM 112 AND FORM 63

	NAME OF LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER ..	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>		

1507A	COPY DATA ABOUT EACH VACCINE FROM IMMUNIZATION RECORDS (MOH FORMS 112 AND 063) WRITE '44' IN 'DAY' COLUMN IF CARD SHOWS THAT A DOSE WAS GIVEN, BUT NO DATE IS RECORDED.									
	Vaccine	Day		Month		Year				
	TB	BCG (given at birth)								
	Polio	Polio 0 (given at birth)								
		Polio 1								
		Polio 2								
		Polio 3								
		Polio 4								
	Hepatitis	HepB (given at birth)								
	Pentavalent /Diphtheria, pertussis, and tetanus	Penta 1								
		Penta 2								
		Penta 3								
		DPT 4								
	Rotavirus	Rota 1								
		Rota 2								
	Measles and Rubella	MR 1								
		Vitamin A (last dose)								

1508A	CONTINUE WITH 1501B									
-------	---------------------	--	--	--	--	--	--	--	--	--

SECTION 15B. HEALTH FACILITY FORM 112 AND FORM 63 CHILD IMMUNIZATIONN (NEXT-TO-LAST LIVE BIRTH)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1501B	CHECK 214 IN THE PREGNANCY HISTORY AND 1401B: ANY MORE BIRTHS IN 2014-2017 MORE LIVE BIRTHS IN <input type="checkbox"/> 2014-2017 NO MORE LIVE <input type="checkbox"/> BIRTHS IN 2014-2017	→ END	
1502B	CHECK 212, 214, 216, AND 1402B: RECORD THE NAME AND PREGNANCY HISTORY NUMBER FROM 212 OF THE NEXT-TO-LAST CHILD BORN IN 2014-2017 NAME OF NEXT-TO-LAST LIVE _____ PREGNANCY HISTORY NUMBER <input type="text"/> <input type="text"/>		
1503B	CHECK 218 FOR CHILD: LIVING <input type="checkbox"/>	DEAD <input type="checkbox"/> → 1508B	
1504B	CHECK 1410B IS THERE AN ADDRESS RECORDED FOR THE HEALTH FACILITY WHERE NEXT TO THE LAST LIVE BIRTH'S IMMUNIZATION RECORDS ARE KEPT?	YES 1 NO 2	→ 1508B
1505B	WAS THIS HEALTH FACILITY VISITED?	YES 1 NO 2	→ 1508B
1506B	HAVE YOU LOCATED THE IMMUNIZATION RECORDS OF THE NEXT-TO-LAST LIVE BIRTH IN THE HEALTH FACILITY (FORM 112 AND FORM 63)?	YES SEEN 1 YES SEEN, NO RECORD IN THE CARDS 2 NO 3	→ 1508B → 1508B

SECTION 15B. HEALTH FACILITY FORM 112 AND FORM 63 CHILD IMMUNIZATION (NEXT-TO-LAST LIVE BIRTH)

	NAME OF NEXT-TO-LAST LIVE BIRTH _____	PREGNANCY HISTORY NUMBER ..	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>		

1507B	COPY DATA ABOUT EACH VACCINE FROM IMMUNIZATION RECORDS (MOH FORMS 112 AND 63) WRITE '44' IN 'DAY' COLUMN IF CARD SHOWS THAT A DOSE WAS GIVEN, BUT NO DATE IS RECORDED.							
	Vaccine	Day		Month		Year		
	TB	BCG (given at birth)						
	Polio	Polio 0 (given at birth)						
		Polio 1						
		Polio 2						
		Polio 3						
		Polio 4						
	Hepatitis	HepB (given at birth)						
	Pentavalent /Diphtheria, pertusis, and tetanus	Penta 1						
		Penta 2						
		Penta 3						
		DPT 4						
	Rotavirus	Rota 1						
		Rota 2						
	Measles and Rubella	MR 1						
		Vitamin A (last dose)						

1508B	CHECK 214 IN PREGNANCY HISTORY: ANY MORE LIVE BIRTHS IN 2014-2017							
	MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/>				NO MORE LIVE BIRTHS IN 2014-2017 <input type="checkbox"/>			
	(GO TO 1501B IN AN ADDITIONAL QUESTIONNAIRE) ←				→ END			

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT INTERVIEW:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

EDITOR'S OBSERVATIONS

INSTRUCTIONS:

ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 COLUMN 1 REQUIRES A CODE IN EVERY MONTH.

CODES FOR EACH COLUMN:

COLUMN 1: BIRTHS, PREGNANCIES, CONTRACEPTIVE USE

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 FEMALE STERILIZATION
- 2 MALE STERILIZATION
- 3 IUD
- 4 INJECTABLES
- 5 IMPLANTS
- 6 PILL
- 7 CONDOM
- 8 FEMALE CONDOM
- 9 EMERGENCY CONTRACEPTION

- K LACTATIONAL AMENORRHEA METHOD
- L RHYTHM/CALENDAR METHOD

- M WITHDRAWAL
- X OTHER MODERN METHOD
- Y OTHER TRADITIONAL METHOD

COLUMN 2: DISCONTINUATION OF CONTRACEPTIVE USE

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND/PARTNER DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 SIDE EFFECTS/HEALTH CONCERNS

- 6 LACK OF ACCESS/TOO FAR
- 7 COSTS TOO MUCH
- 8 INCONVENIENT TO USE
- F UP TO GOD/FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSAL
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER

- _____ (SPECIFY)

- Z DON'T KNOW

			COL. 1	COL. 2
	12	DEC	01	
	11	NOV	02	
	10	OCT	03	
2	09	SEP	04	2
0	08	AUG	05	0
1	07	JUL	06	1
7	06	JUN	07	7
	05	MAY	08	
	04	APR	09	
	03	MAR	10	
	02	FEB	11	
	01	JAN	12	
<hr/>				
	12	DEC	13	
	11	NOV	14	
	10	OCT	15	
2	09	SEP	16	2
0	08	AUG	17	0
1	07	JUL	18	1
6	06	JUN	19	6
	05	MAY	20	
	04	APR	21	
	03	MAR	22	
	02	FEB	23	
	01	JAN	24	
<hr/>				
	12	DEC	25	
	11	NOV	26	
	10	OCT	27	
2	09	SEP	28	2
0	08	AUG	29	0
1	07	JUL	30	1
5	06	JUN	31	5
	05	MAY	32	
	04	APR	33	
	03	MAR	34	
	02	FEB	35	
	01	JAN	36	
<hr/>				
	12	DEC	37	
	11	NOV	38	
	10	OCT	39	
2	09	SEP	40	2
0	08	AUG	41	0
1	07	JUL	42	1
4	06	JUN	43	4
	05	MAY	44	
	04	APR	45	
	03	MAR	46	
	02	FEB	47	
	01	JAN	48	
<hr/>				
	12	DEC	49	
	11	NOV	50	
	10	OCT	51	
2	09	SEP	52	2
0	08	AUG	53	0
1	07	JUL	54	1
3	06	JUN	55	3
	05	MAY	56	
	04	APR	57	
	03	MAR	58	
	02	FEB	59	
	01	JAN	60	
<hr/>				
	12	DEC	61	
	11	NOV	62	
	10	OCT	63	
2	09	SEP	64	2
0	08	AUG	65	0
1	07	JUL	66	1
2	06	JUN	67	2
	05	MAY	68	
	04	APR	69	
	03	MAR	70	
	02	FEB	71	
	01	JAN	72	

2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY
 BIOMARKER QUESTIONNAIRE

STATISTICAL AGENCY UNDER PRESIDENT OF THE REPUBLIC OF TAJIKISTAN
 MINISTRY OF HEALTH AND SOCIAL PROTECTION OF POPULATION

IDENTIFICATION												
PLACE NAME _____												
NAME OF HOUSEHOLD HEAD _____												
CLUSTER NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>								
HOUSEHOLD NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>								
BIOMARKER VISITS												
	1	2	3	FINAL VISIT								
DATE	_____	_____	_____	DAY <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
MEDWORKER'S NAME	_____	_____	_____	MONTH <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
				YEAR <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
				MED-WORKER NUMBER <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
TIME	_____	_____										
NOTES: _____ _____ _____ _____				TOTAL ELIGIBLE WOMEN <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
				TOTAL ELIGIBLE CHILDREN <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
LANGUAGE OF QUESTIONNAIRE**	<table border="1" style="width: 20px; height: 20px;"><tr><td>0</td></tr></table>	0	LANGUAGE OF INTERVIEW**	<table border="1" style="width: 20px; height: 20px;"><tr><td> </td></tr></table>		NATIVE LANGUAGE OF RESPONDENT**	<table border="1" style="width: 20px; height: 20px;"><tr><td> </td></tr></table>					
0												
	<table border="1" style="width: 20px; height: 20px;"><tr><td>0</td></tr></table>	0		<table border="1" style="width: 20px; height: 20px;"><tr><td> </td></tr></table>			<table border="1" style="width: 20px; height: 20px;"><tr><td> </td></tr></table>					
0												
LANGUAGE OF QUESTIONNAIRE**	ENGLISH											
	**LANGUAGE CODES:											
	00 ENGLISH	01 RUSSIAN	02 TAJIK	03 OTHER								
				TRANSLATOR (YES = 1, NO = 2) <table border="1" style="width: 20px; height: 20px; float: right;"></table>								
SUPERVISOR		INTERVIEWER		OFFICE EDITOR								
NAME _____		NAME _____		NUMBER <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
NUMBER <table border="1" style="width: 40px; height: 20px; float: right;"></table>		NUMBER <table border="1" style="width: 40px; height: 20px; float: right;"></table>		KEYED BY								
				NUMBER <table border="1" style="width: 40px; height: 20px; float: right;"></table>								

WEIGHT, HEIGHT AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-5

101	CHECK COLUMN 11 IN HOUSEHOLD QUESTIONNAIRE. RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN 0-5 YEARS IN QUESTION 102; IF MORE THAN SIX CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S).			
		CHILD 1	CHILD 2	CHILD 3
102	CHECK HOUSEHOLD QUESTIONNAIRE: LINE NUMBER FROM COLUMN 11. NAME FROM COLUMN 2.	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____
103	IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: What is (NAME)'s date of birth?	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
104	CHECK 103: CHILD BORN IN 2012-2017?	YES 1 NO 2 (SKIP TO 114) ←	YES 1 NO 2 (SKIP TO 114) ←	YES 1 NO 2 (SKIP TO 114) ←
105	WEIGHT IN KILOGRAMS.	KG. ... <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996	KG. ... <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996	KG. ... <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996
106	HEIGHT IN CENTIMETERS.	CM. ... <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←	CM. ... <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←	CM. ... <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←
107	MEASURED LYING DOWN OR STANDING UP?	LYING DOWN 1 STANDING UP 2	LYING DOWN 1 STANDING UP 2	LYING DOWN 1 STANDING UP 2
108	MEASURER: ENTER YOUR MEDWORKER NUMBER.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER

WEIGHT, HEIGHT AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-5

101	CHECK COLUMN 11 IN HOUSEHOLD QUESTIONNAIRE. RECORD THE LINE NUMBER AND NAME FOR ALL ELIGIBLE CHILDREN 0-5 YEARS IN QUESTION 102; IF MORE THAN SIX CHILDREN, USE ADDITIONAL QUESTIONNAIRE(S).			
		CHILD 1	CHILD 2	CHILD 3
102	CHECK HOUSEHOLD QUESTIONNAIRE: LINE NUMBER FROM COLUMN 11. NAME FROM COLUMN 2.	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____
109	CHECK 103: CHILD AGE 0-5 MONTHS, I.E., WAS CHILD BORN IN MONTH OF INTERVIEW OR 5 PREVIOUS MONTHS?	0-5 MONTHS 1 } (SKIP TO 114) ← OLDER 2	0-5 MONTHS 1 } (SKIP TO 114) ← OLDER 2	0-5 MONTHS 1 } (SKIP TO 114) ← OLDER 2
110	LINE NUMBER OF PARENT/OTHER ADULT RESPONSIBLE FOR THE CHILD FROM COLUMN 1 OF HOUSEHOLD SCHEDULE. NAME OF PARENT/ADULT GUARDIAN	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____
111	<p>ASK CONSENT FOR ANEMIA TEST FROM PARENT/OTHER ADULT GUARDIAN.</p> <p>As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. We ask that all children born in 2012 or later take part in anemia testing in this survey and give a few drops of blood from a finger or heel. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test.</p> <p>The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team.</p> <p>Do you have any questions? You can say yes or no. It is up to you to decide. Will you allow (NAME OF CHILD) to participate in the anemia test?</p>			
112	CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED 1 } _____ (SIGN) ← REFUSED 2 } NOT PRESENT/OTHER . 3 } (SKIP TO 114) ←	GRANTED 1 } _____ (SIGN) ← REFUSED 2 } NOT PRESENT/OTHER . 3 } (SKIP TO 114) ←	GRANTED 1 } _____ (SIGN) ← REFUSED 2 } NOT PRESENT/OTHER . 3 } (SKIP TO 114) ←
113	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANEMIA PAMPHLET.	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996
114	GO BACK TO 103 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF THE NEXT PAGE; IF NO MORE CHILDREN, GO TO 201.			

WEIGHT, HEIGHT AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-5

		CHILD 4	CHILD 5	CHILD 6
102	CHECK HOUSEHOLD QUESTIONNAIRE: LINE NUMBER FROM COLUMN 11. NAME FROM COLUMN 2.	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____
103	IF MOTHER INTERVIEWED: COPY CHILD'S DATE OF BIRTH (DAY, MONTH, AND YEAR) FROM PREGNANCY HISTORY. IF MOTHER NOT INTERVIEWED ASK: What is (NAME)'s date of birth?	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DAY <input type="text"/> <input type="text"/> MONTH <input type="text"/> <input type="text"/> YEAR ... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
104	CHECK 103: CHILD BORN IN 2012-2017?	YES 1 NO 2 (SKIP TO 114) ←	YES 1 NO 2 (SKIP TO 114) ←	YES 1 NO 2 (SKIP TO 114) ←
105	WEIGHT IN KILOGRAMS.	KG. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996	KG. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996	KG. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996
106	HEIGHT IN CENTIMETERS.	CM. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←	CM. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←	CM. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NOT PRESENT9994 REFUSED 9995 OTHER 9996 (SKIP TO 108) ←
107	MEASURED LYING DOWN OR STANDING UP?	LYING DOWN 1 STANDING UP 2	LYING DOWN 1 STANDING UP 2	LYING DOWN 1 STANDING UP 2
108	MEASURER: ENTER YOUR MEDWORKER NUMBER.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER

WEIGHT, HEIGHT AND HEMOGLOBIN MEASUREMENT FOR CHILDREN AGE 0-5

		CHILD 4	CHILD 5	CHILD 6
102	CHECK HOUSEHOLD QUESTIONNAIRE: LINE NUMBER FROM COLUMN 11. NAME FROM COLUMN 2.	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____
109	CHECK 103: CHILD AGE 0-5 MONTHS, I.E., WAS CHILD BORN IN MONTH OF INTERVIEW OR 5 PREVIOUS MONTHS?	0-5 MONTHS 1] (SKIP TO 114) ← OLDER 2	0-5 MONTHS 1] (SKIP TO 114) ← OLDER 2	0-5 MONTHS 1] (SKIP TO 114) ← OLDER 2
110	LINE NUMBER OF PARENT/OTHER ADULT RESPONSIBLE FOR THE CHILD FROM COLUMN 1 OF HOUSEHOLD SCHEDULE. NAME OF PARENT/ADULT GUARDIAN	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> (RECORD '00' IF NOT LISTED) NAME _____
111	ASK CONSENT FOR ANEMIA TEST FROM PARENT/OTHER ADULT GUARDIAN.	<p>As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia. We ask that all children born in 2012 or later take part in anemia testing in this survey and give a few drops of blood from a finger or heel. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test.</p> <p>The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team.</p> <p>Do you have any questions? You can say yes or no. It is up to you to decide. Will you allow (NAME OF CHILD) to participate in the anemia test?</p>		
112	CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED 1] _____ ← (SIGN) REFUSED 2] NOT PRESENT/OTHER . 3] (SKIP TO 114) ←	GRANTED 1] _____ ← (SIGN) REFUSED 2] NOT PRESENT/OTHER . 3] (SKIP TO 114) ←	GRANTED 1] _____ ← (SIGN) REFUSED 2] NOT PRESENT/OTHER . 3] (SKIP TO 114) ←
113	RECORD HEMOGLOBIN LEVEL HERE AND IN THE ANEMIA PAMPHLET.	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT994 REFUSED995 OTHER996
114	GO BACK TO 103 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF AN ADDITIONAL QUESTIONNAIRE; IF NO MORE CHILDREN, GO TO 201.			

WEIGHT, HEIGHT, AND HEMOGLOBIN MEASUREMENT FOR WOMEN AGE 15-49

201	CHECK COLUMN 9 IN HOUSEHOLD QUESTIONNAIRE. RECORD THE LINE NUMBER, NAME, AGE, AND MARITAL STATUS FOR ALL ELIGIBLE WOMEN IN 202, 203, AND 204. IF THERE ARE MORE THAN THREE WOMEN, USE ADDITIONAL QUESTIONNAIRE(S).			
		WOMAN 1	WOMAN 2	WOMAN 3
202	CHECK HOUSEHOLD QUESTIONNAIRE: LINE NUMBER FROM COLUMN 9. NAME FROM COLUMN 2.	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____	LINE NUMBER <input type="text"/> <input type="text"/> NAME _____
203	CHECK HOUSEHOLD QUESTIONNAIRE COLUMN 7 (AGE):	15-17 YEARS 1 18-49 YEARS 2	15-17 YEARS 1 18-49 YEARS 2	15-17 YEARS 1 18-49 YEARS 2
204	CHECK HOUSEHOLD QUESTIONNAIRE COLUMN 8 (MARITAL STATUS):	CODE 4 (NEVER IN UNION) . 1 OTHER 2	CODE 4 (NEVER IN UNION) . 1 OTHER 2	CODE 4 (NEVER IN UNION) . 1 OTHER 2
205	WEIGHT IN KILOGRAMS.	KG. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT 99994 REFUSED 99995 OTHER 99996	KG. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT 99994 REFUSED 99995 OTHER 99996	KG. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> NOT PRESENT 99994 REFUSED 99995 OTHER 99996
206	HEIGHT IN CENTIMETERS.	CM. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 9994 REFUSED 9995 OTHER 9996	CM. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 9994 REFUSED 9995 OTHER 9996	CM. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 9994 REFUSED 9995 OTHER 9996
207	MEASURER: ENTER YOUR MEDWORKER NUMBER.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> MEDWORKER NUMBER
208	CHECK 203: AGE	15-17 YEARS 1 18-49 YEARS 2 (SKIP TO 210) ←	15-17 YEARS 1 18-49 YEARS 2 (SKIP TO 210) ←	15-17 YEARS 1 18-49 YEARS 2 (SKIP TO 210) ←
209	CHECK 204: MARITAL STATUS	CODE 4 (NEVER IN UNION) . 1 (SKIP TO 216) ← OTHER 2	CODE 4 (NEVER IN UNION) . 1 (SKIP TO 216) ← OTHER 2	CODE 4 (NEVER IN UNION) . 1 (SKIP TO 216) ← OTHER 2

		WOMAN 1	WOMAN 2	WOMAN 3
	NAME FROM COLUMN 2.	NAME _____	NAME _____	NAME _____

ADULT RESPONDENT CONSENT FOR ANEMIA TEST

ADULT RESPONDENT CONSENT	210	ASK CONSENT FOR ANEMIA TEST.	<p>As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia.</p> <p>For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team.</p> <p>Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?</p>		
	211	CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED 1 RESPONDENT REFUSED ... 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 RESPONDENT REFUSED ... 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 RESPONDENT REFUSED ... 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)
	211A	CHECK 226 IN WOMAN'S QUESTIONNAIRE OR ASK: Are you pregnant?	YES 1 NO 2 DON'T KNOW 8 (SKIP TO 229)	YES 1 NO 2 DON'T KNOW 8 (SKIP TO 229)	YES 1 NO 2 DON'T KNOW 8 (SKIP TO 229)
	216	RECORD LINE NUMBER OF PARENT/OTHER ADULT RESPONSIBLE FOR ADOLESCENT.	LINE NUMBER OF PARENT OR OTHER RESPONSIBLE ADULT [][] (RECORD '00' IF NOT LISTED)	LINE NUMBER OF PARENT OR OTHER RESPONSIBLE ADULT [][] (RECORD '00' IF NOT LISTED)	LINE NUMBER OF PARENT OR OTHER RESPONSIBLE ADULT [][] (RECORD '00' IF NOT LISTED)
		NAME OF PARENT/ADULT GUARDIAN	NAME _____	NAME _____	NAME _____

	WOMAN 1	WOMAN 2	WOMAN 3
NAME FROM COLUMN 2.	NAME _____	NAME _____	NAME _____

PARENTAL/RESPONSIBLE ADULT CONSENT FOR ANEMIA TEST

P A R E N T R E S P O N S I B L E A D U L T C O N S E N T	217	ASK CONSENT FOR ANEMIA TEST FROM PARENT/ADULT GUARDIAN.	<p>As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia.</p> <p>For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after each test. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF MINOR) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team.</p> <p>Do you have any questions? You can say yes or no. It is up to you to decide. Will you allow (NAME OF MINOR) to take the anemia test?</p>		
	218	CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED 1 PARENT/OTHER RESPONSIBLE ADULT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 PARENT/OTHER RESPONSIBLE ADULT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 PARENT/OTHER RESPONSIBLE ADULT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)

MINOR RESPONDENT CONSENT FOR ANEMIA TEST

M I N O R R E S P O N D E N T C O N S E N T	219	ASK CONSENT FOR ANEMIA TEST FROM RESPONDENT.	<p>As part of this survey, we are asking people all over the country to take an anemia test. Anemia is a serious health problem that usually results from poor nutrition, infection, or chronic disease. This survey will assist the government to develop programs to prevent and treat anemia.</p> <p>For the anemia testing, we will need a few drops of blood from a finger. The equipment used to take the blood is clean and completely safe. It has never been used before and will be thrown away after we take your blood. The blood will be tested for anemia immediately, and the result will be told to you and (NAME OF PARENT/RESPONSIBLE ADULT) right away. The result will be kept strictly confidential and will not be shared with anyone other than members of our survey team.</p> <p>Do you have any questions? You can say yes or no. It is up to you to decide. Will you take the anemia test?</p>		
	220	CIRCLE THE CODE AND SIGN YOUR NAME.	GRANTED 1 MINOR RESPONDENT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 MINOR RESPONDENT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)	GRANTED 1 MINOR RESPONDENT REFUSED 2 _____ (SIGN) (IF REFUSED, SKIP TO 231) NOT PRESENT/OTHER 3 (SKIP TO 231)
220A	CHECK 226 IN WOMAN'S QUESTIONNAIRE OR ASK: Are you pregnant?	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	

WEIGHT, HEIGHT, HEMOGLOBIN MEASUREMENT AND HIV TESTING FOR WOMEN AGE 15-49

















		WOMAN 1	WOMAN 2	WOMAN 3
	NAME FROM COLUMN 2.	NAME _____	NAME _____	NAME _____
229	PREPARE EQUIPMENT AND SUPPLIES ONLY FOR THE TEST(S) FOR WHICH CONSENT HAS BEEN OBTAINED AND PROCEED WITH THE TEST(S).			
231	RECORD HEMOGLOBIN LEVEL HERE AND IN ANEMIA PAMPHLET.	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 994 REFUSED 995 OTHER 996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 994 REFUSED 995 OTHER 996	G/DL <input type="text"/> <input type="text"/> . <input type="text"/> NOT PRESENT 994 REFUSED 995 OTHER 996
233	GO BACK TO 202 IN NEXT COLUMN OF THIS QUESTIONNAIRE OR IN THE FIRST COLUMN OF AN ADDITIONAL QUESTIONNAIRE; IF NO MORE WOMEN, END OF INTERVIEW.			

2017 TAJIKISTAN DEMOGRAPHIC AND HEALTH SURVEY
FIELDWORKER QUESTIONNAIRETAJIKISTAN
AGENCY ON STATISTICS UNDER PRESIDENT OF THE REPUBLIC OF TAJIKISTANLANGUAGE OF QUESTIONNAIRE **ENGLISH**

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
100	What is your name?	NAME _____	
101	RECORD FIELDWORKER NUMBER	NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
INSTRUCTIONS Information on all Tajikistan DHS field workers is collected as part of the Tajikistan DHS survey. Please fill out the questions below. The information you provide will be part of the survey data file; however, your name will be removed and will not be part of the data file. Thank you for providing the information needed.			
102	In what oblast do you live?	DUSHANBE 01 GBAO 02 SUGHD 03 DRS 04 KHATLON 05	
103	Do you live in a city, town, or rural area?	CITY 1 TOWN 2 RURAL 3	
104	How old are you? RECORD AGE IN COMPLETED YEARS.	AGE <input type="text"/> <input type="text"/>	
105	Are you male or female?	MALE 1 FEMALE 2	
106	What is your current marital status?	CURRENTLY MARRIED 1 LIVING WITH A MAN/WOMAN 2 WIDOWED 3 DIVORCED 4 SEPARATED 5 NEVER MARRIED OR LIVED WITH A MAN/WOMAN 6	
107	How many living children do you have? INCLUDE ONLY CHILDREN WHO ARE YOUR BIOLOGICAL CHILDREN.	LIVING CHILDREN <input type="text"/> <input type="text"/>	
108	Have you ever had a child who died?	YES 1 NO 2	
109	What is the highest level of school you attended: general education school, professional primary (PTU), professional middle (tehnikum), higher, or postgraduate?	GENERAL EDUCATION SCHOOL 1 PROFESSIONAL PRIMARY 2 PROFESSIONAL MIDDLE 3 HIGHER 4 POSTGRADUATE 5	
110	What is the highest [CLASS/COURSE/YEAR] you completed at that level? IF COMPLETED LESS THAN ONE YEAR AT THAT LEVEL, RECORD '00'.	CLASS/COURSE/YEAR <input type="text"/> <input type="text"/>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
113	What languages can you speak? RECORD ALL LANGUAGES YOU CAN SPEAK.	TAJIK A RUSSIAN B UZBEK C TATAR D KAZAKH E KYRGYZ F OTHER _____ X (SPECIFY)	
114	What is your mother tongue/native language (language spoken at home growing up)?	TAJIK 01 RUSSIAN 02 UZBEK 03 TATAR 04 KAZAKH 05 KYRGYZ 06 OTHER _____ 96 (SPECIFY)	
115	Have you ever worked on a DHS survey prior to this one?	YES 1 NO 2	
116	Have you ever worked on any other survey prior to this one (not a DHS)?	YES 1 NO 2	
117	Were you already working for [STATISTICAL AGENCY or MINISTRY OF HEALTH] at the time you were employed to work on this DHS?	YES, STATISTICAL AGENCY 1 YES, MINISTRY OF HEALTH 2 NO 3	→ 119
118	Are you a permanent or temporary employee of [STATISTICAL AGENCY or MINISTRY OF HEALTH]?	PERMANENT 1 TEMPORARY 2	
119	If you have comments, please write them here.		

ADDITIONAL DHS PROGRAM RESOURCES

The DHS Program Website – Download free DHS reports, standard documentation, key indicator data, and training tools, and view announcements.	DHSprogram.com		
STATcompiler – Build custom tables, graphs, and maps with data from 90 countries and thousands of indicators.	Statcompiler.com		
DHS Program Mobile App – Access key DHS indicators for 90 countries on your mobile device (Apple, Android, or Windows).	Search DHS Program in your iTunes or Google Play store		
DHS Program User Forum – Post questions about DHS data, and search our archive of FAQs.	userforum.DHSprogram.com		
Tutorial Videos – Watch interviews with experts and learn DHS basics, such as sampling and weighting, downloading datasets, and how to read DHS tables.	www.youtube.com/DHSProgram		
Datasets – Download DHS datasets for analysis.	DHSprogram.com/Data		
Spatial Data Repository – Download geographically-linked health and demographic data for mapping in a geographic information system (GIS).	spatialdata.DHSprogram.com		
Social Media – Follow The DHS Program and join the conversation. Stay up to date through:			
 Facebook www.facebook.com/DHSprogram		 LinkedIn www.linkedin.com/company/dhs-program	
 YouTube www.youtube.com/DHSprogram		 Blog Blog.DHSprogram.com	
 Twitter www.twitter.com/DHSprogram	