

# *Monitoring the Situation of Children and Women*

## Findings from the Multiple Indicator Cluster Survey 3 Syrian Arab Republic, 2006

### PRELIMINARY REPORT

April 2007



**Central Bureau of Statistics**



**United Nations Children's  
Fund**



**Pan-Arab project for Family  
Health Unit**

**Summary Table of Findings  
MICS and MDG Indicators, Syria, 2006**

TOPIC	MICS3 INDICATOR NUMBER	MDG INDICATOR NUMBER	INDICATOR	VALUE	UNIT
Child mortality	1	13	U5MR	22	1000
	2	14	IMR	18	1000
Nutrition	6	4	Underweight prevalence	9.7	%
			Underweight, severe	1.8	%
	7		Stunting prevalence	22.4	%
			Stunting severe	10.1	%
	8		Wasting prevalence	8.6	%
			Wasting severe	2.3	%
	15		Exclusive breastfeeding rate 0-3 months	35.3	%
16	Continued breastfeeding rate 12-15 months	63.9	%		
17	Timely complementary feeding rate 6-9 months	36.5	%		
Child Health	25		Tuberculosis immunization coverage,	99.9	%
	26		Polio1 immunization coverage,	99.3	%
	27		DPT1 immunization coverage,	99.4	%
	28	15	Measles immunization coverage	92.4	%
	31		Fully immunized children	87.3	%
	22		Antibiotic treatment of children with suspected pneumonia	71.0	%
	24	29	Gas fuel use	98.1	%
Environment	11	30	Use of improved drinking water sources	88.3	%
	12	31	Use of improved sanitation facilities	97.3	%
Reproductive health	21	19c	Contraceptive prevalence	58.3	%
	4	17	Deliveries attended by skilled personnel	93.0	%
Education	55	6	Net primary school attendance rate	96.7	%
	61	9	Gender parity index (Primary)	1.00	%
Child protection	62		Birth registration	95.2	%
	67		Marriage before age 15	3.4	%
		Marriage before age 18	17.7	%	
	68		Young women aged 15-19 currently married	9.7	%
HIV/AIDS sexual Behaviors Orphaned and Vulnerable Children	82	19b	Comprehensive knowledge about HIV prevention	32	%

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## **ACKNOWLEDGEMENTS**

Within the framework of cooperation between the Central Bureau of Statistics (CBS) and the United Nations Children's Fund (UNICEF), and the Pan-Arab Project for Family Health of the League of Arab States, the CBS, in cooperation with the State Planning Commission and the Ministry of Health, conducted a Multiple Cluster Indicator Survey (MICS) in 2006.

The survey aimed to provide data with updated indicators which reflect children's health, social and educational status, and assess the progress made towards the achievement of the Millennium Development Goals and national goals on survival, protection and development of children during the new millennium. The survey also aimed to measure the changes that had occurred in the situation of children since the performance of the MICS on child health in the mid-1990.

This would make it possible to diagnose the situation of children, to conduct comparative analytical studies, and to prepare appropriate programmes for upholding their status in various fields.

The Central Bureau of Statistics wishes to seize the opportunity of the issuance of the preliminary report of the survey to extend sincere thanks and appreciation to the UNICEF, the Pan-Arab Project for Family Health of the League of Arab States, and to all local parties for their support and contributions. Besides, we hope the results thereof will meet the needs of all the parties concerned, so that such parties can depend on these findings and use them in drawing up the policies and programmes pertinent to children.

**Dr. Ibrahim Ali**  
**Director**  
**Central Bureau of Statistics**

## I. BACKGROUND

### INTRODUCTION:

This preliminary report is based on the Multiple Indicator Cluster Survey conducted in the Syrian Arab Republic in 2006, in cooperation between the Central Bureau of Statistics and the United Nations Children's Fund (UNICEF), in coordination with the State Planning Commission and the Ministry of Health.

The survey was based, in large part, on monitoring progress towards the goals and targets emanating from recent international agreements: the Millennium Declaration, adopted by all 191 United Nations Member States in September 2000, and the Plan of Action of A World Fit for Children, adopted by 189 Member States at the United Nations Special Session on Children in May 2002. Both of these commitments build upon promises made by the international community at the 1990 World Summit for Children. This is in addition to the decisions issued by the League of Arab States and other related institutions and organizations with regard to the Arab framework for Arab child rights, the Cairo declaration towards an "Arab World Fit for Children", and the second Arab plan for childhood (2004-2015) adopted by the Arab summits.

In signing these international agreements, governments committed themselves to improving conditions for their children and to monitoring progress towards that end. UNICEF was assigned a supporting role in this task (see Table 1.1).

**Table 1.1**  
**A Commitment to Action: National and International Reporting Responsibilities**

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

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

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

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

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

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

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

The eight main goals which the Millennium Declaration focused on have always constituted key priorities in the economic and social development plans in Syria. The successive, five-year plans have aimed to enhance the citizens' prosperity and increase their income, and to insure the best means to expand education in both urban and rural areas, for males and females alike. Such plans also paid special attention to the sectors of health, the environment, the empowerment of women, and others.

The MICS3 will form an important source of the data necessary for monitoring progress towards the goals of the millennium.

This preliminary report presents selected results on some of the principal topics covered in the survey and on a subset of indicators<sup>1</sup>. The results in this report are preliminary and are subject to change, although major changes are not expected. The main report is expected to be published at the end of May, 2007.

## **SURVEY OBJECTIVES**

The primary objectives of the 2006 Multiple Indicator Cluster Survey of the Syrian Arab Republic are as follows:

1. To provide up-to-date information for assessing the situation of children and women in the Syrian Arab Republic.
2. To furnish data needed for monitoring progress towards the goals established by the Millennium Development Goals and the goals of A World Fit for Children (WFFC) as a basis for future action;
3. To contribute to the improvement of data and monitoring systems in the Syrian Arab Republic, and to strengthen technical expertise in the design implementation, and analysis of such systems.

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<sup>1 1</sup> For more information on the definitions, numerators, denominators and algorithms of Multiple Indicator Cluster Surveys (MICS) and Millennium Development Goals (MDG) indicators covered in the survey: see Chapter 1, Appendix 1 and Appendix 7 of the MICS Manual – *Multiple Indicator Cluster Survey Manual 2005: Monitoring the Situation of Children and Women*, also available at [www.childinfo.org](http://www.childinfo.org)

## II. SAMPLE DESIGN AND METHODOLOGY

### SAMPLE DESIGN

The sample for the Multiple Indicator Cluster Survey of the Syrian Arab Republic was designed to estimate a number of indicators on the situation of women and children at the national, and governorate levels, for urban and rural areas.

The framework of the Overall Census of Inhabitants and Dwellings, 2004, was used as the sampling domain. The sample was selected in two stages in each area. In the first stage, the clusters were drawn as census areas in proportion to size with a total of 1000 clusters. In the second stage, the counting units were drawn (households) in a regular arbitrary manner.

The sample was stratified as per areas, and the sample was a self-weighted sampling design.

### QUESTIONNAIRES

Three questionnaires were used in the survey. In addition to a household questionnaire which was used to collect information on all household members, the household, and the dwelling, questionnaires were administered in each household to women aged 15-49 — mothers or caretakers of under -5 children were identified in each household.

The questionnaires included the following modules:

#### **Household Questionnaires**

- Household Listing
- Education
- Water and Sanitation
- Household Characteristics
- Child Labor

#### **Questionnaires for Individual Women**

- Child Mortality
- Tetanus Toxoid
- Maternal and Newborn Health
- Marriage
- Contraception
- HIV/AIDS

#### **Questionnaires for Children under Five**

- Birth Registration and Early Learning
- Vitamin A
- Breastfeeding
- Care of Illness
- Immunization
- Anthropometry

The questionnaires are based on the MICS3 model questionnaire and were pre-tested during February, 2006. Based on the results of the pre-test, modifications were made to the wording of the questionnaires.



## **FIELDWORK AND DATA PROCESSING**

Members of the fieldwork staff were trained for ten days in early April, 2006. In total, 35 teams collected the data, each comprising 4 interviewers, a team leader, and a supervisor for each governorate.

Fieldwork began on April 19<sup>th</sup>, 2006 and lasted until the end of May, 2006.

The data were entered on microcomputers using the CSPro software. In order to ensure quality control, all questionnaires were double entered and internal consistency checks were performed.

Procedures and standard programs developed under the global MICS3 project and adapted to the questionnaires used in the Syrian Arab Republic.

Data processing began simultaneously with data collection in May 2006 and finished in July 2006. Data were analyzed using the SPSS software program and the model syntax and tabulation plans developed for this purpose.

## **SAMPLE COVERAGE**

Out of 20.022 households selected for sampling, 19.870 were actually found, while the dwellings of the remaining households were either not occupied, or else the households themselves were out. 19.019 households were successfully interviewed for a household response rate of 95.7 percent. In the interviewed households 25.563 women aged 15-49 were identified. Out of these 25.026 women were interviewed, for a response rate of 97.9 percent. The number of children under - five listed in the household questionnaire totaled 11.104. Out of these, 11.017 children were interviewed, which corresponds to a response rate of 99.2%.

The overall response rate for the women's questionnaires was 93.7 percent, while the one for the children under-five was 95 percent, as Table HH.1 shows.

### III. RESULTS

#### CHILD MORTALITY

One of the overarching goals of the MDGs and the World Fit for Children is to reduce infant and under-five mortality. MICS3 estimates the rate of child mortality using indirect method based on the data of the average number of live birth and average number of those surviving disaggregated by women's age at the time of the survey.

By using the "UN life tabulation model" the infant mortality rate is established as 18 per 1000 live birth, 21/1.000 for males and 14/1.000 for females. In urban areas the rate is 16/1.000 and in rural 20/1.000.

The under five mortality for U5 the rate is 22 per 1.000, 26/1.000 for males and 17/1.000 for females. The rate is 19/1.000 for urban areas and 24/1.000 for rural.

It should be noted that using the indirect method in estimating child mortality provides data for the three years prior to the survey. This data corresponds with the mortality rates estimates from the PAPFAM Family Health Survey in 2002 and the population Census in 2004.

#### NUTRITIONAL STATUS

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

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

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

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

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

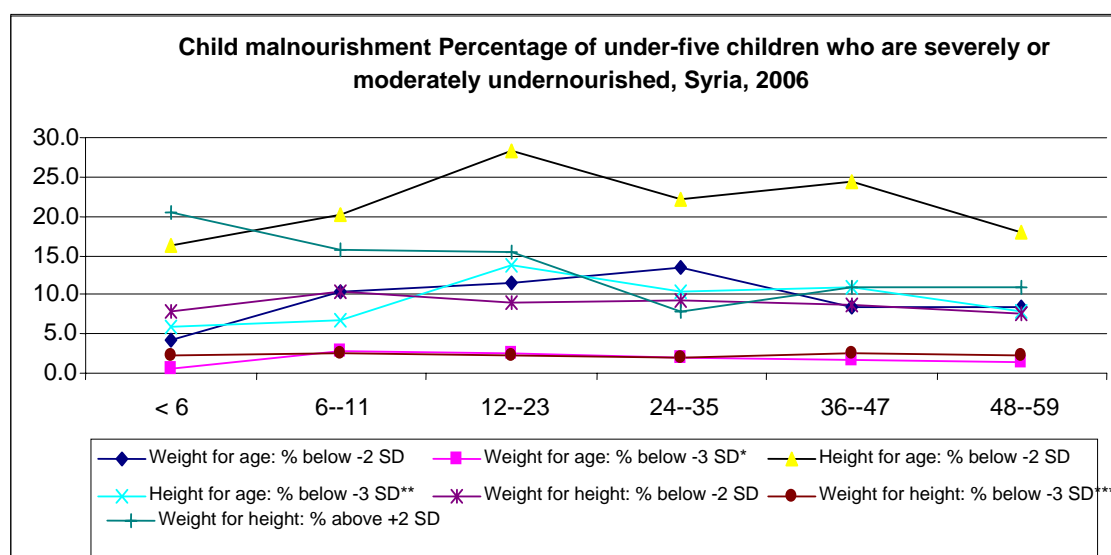
Table NU.1 shows percentages of children classified into each of these categories, based on the anthropometric measurements that were taken during fieldwork. Additionally, the table includes the percentage of children who are overweight, which takes into account those children whose weight for height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

Almost one in ten children under age five in the Syrian Arab Republic are moderately underweight, 9.7 percent, and 1.8 percent are severely underweight for their age (NU.1). Around 2.3 percent are severely wasted and 10 percent of children are severely stunted for their age.

There are visible disparities, showing that the prevalence of underweight and wasted children is more prevalent in the governorate of Deir-Ezzor, while stunting is more common in Raqqa. Moreover, children with mothers having secondary or higher education level are the least likely to be underweight and stunted. Boys also appear to be more likely to be underweight and stunted, than girls.

The age pattern shows that a higher percentage of children aged 12-23 months are undernourished according to all three indices in comparison to children who are younger and older. This pattern is expected and is related to the age at which many children cease to be breastfed and are exposed to contamination in water, food, and environment (See Figure 1).

**Figure 1**



## **BREASTFEEDING**

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

In Table NU.3, breastfeeding status is based on the reports of mothers/caretakers of children's consumption of food and fluids in the 24 hours prior to the interview. *Exclusively breastfed* refers to infants who received only breast milk and vitamins, mineral supplements, or medicine.

The table shows exclusive breastfeeding of infants during the first six months of life (separately for 0-3 months and 0-5 months), as well as complementary feeding of children 6-9 months and continued breastfeeding of children at 12-15 and 20-23 months of age.

Approximately 29 percent of children aged less than six months are being exclusively breastfed. At age 6-9 months, 36.5 percent of children are receiving breast milk and solid or soft foods. By age 12-15 months 63.9 percent of children are still being breastfed, and by age 20-23 months, 16.3 percent are still breastfed.

The rates differ between urban and rural areas with higher breastfeeding rates among the rural populations. There are also differences between the governorates with the highest percentage of infants breastfed for less than six months of age is in Lattakia 45.7 percent, while the lowest is in Sweida 6.2 percent. Noteworthy is that the rate of exclusive breast feeding tends to decline as the mother/caretaker's education level rises. The rate is also higher among poor households compared to richer ones.

## **IMMUNIZATION COVERAGE**

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

Mothers were asked to provide vaccination cards for children under the age of five. Interviewers copied vaccination information from the cards onto the MICS3 questionnaire.

The percentage of children aged 12 to 23 months who received each of the vaccinations is shown in Table CH.1. The denominator for the table is comprised of children aged 12-23 months so that only children who are old enough to be fully vaccinated are counted. In the top panel, the numerator includes all children who were vaccinated at any time before the survey according to the vaccination card or the mother's report.

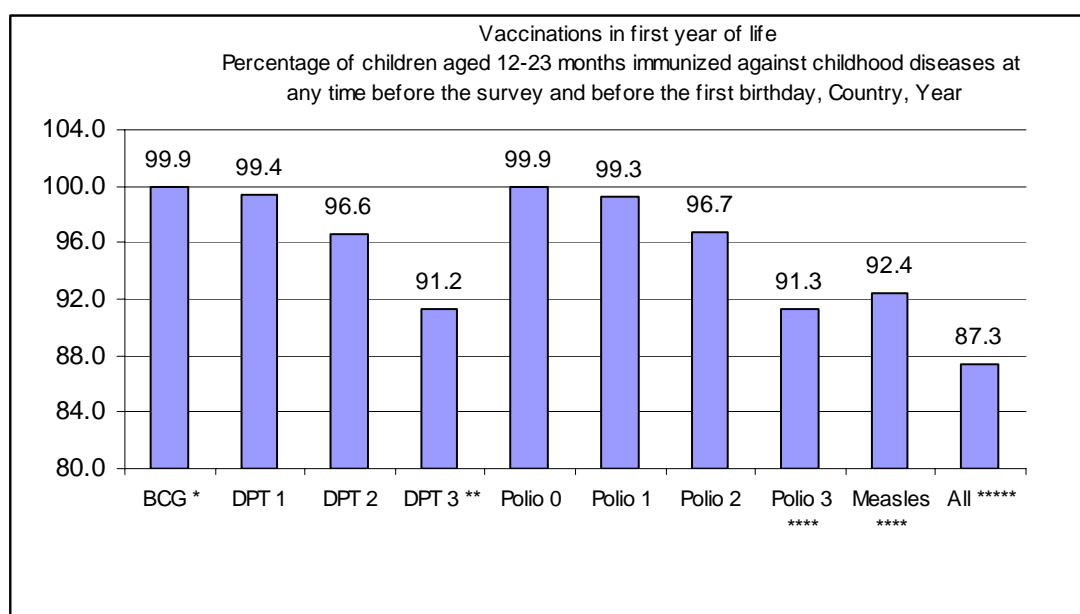
In the bottom panel, only those who were vaccinated before their first birthday are included. For children without vaccination cards, the proportion of vaccinations given

before the first birthday is assumed to be the same as for children with vaccination cards.

Approximately 99.9 percent of children aged 12-23 months received a BCG vaccination by the age of 12 months and the first dose of DPT was given to 99.4 percent. The percentage for subsequent doses of DPT is 96.6 percent for the second dose, and 91.2 percent for the third dose (see Figure 2).

Similarly 99.3 percent of children received Polio 1 by age 12 months declining to 96.7 percent by the second dose. The coverage for measles vaccine is 92.4 percent.

**Figure 2**



### ANTIBIOTIC TREATMENT OF CHILDREN WITH SUSPECTED PNEUMONIA

Pneumonia is the leading cause of death in children and the use of antibiotics in under-5s with suspected pneumonia is a key intervention. Children with suspected pneumonia are those who had an illness with a cough accompanied by rapid or difficult breathing and whose symptoms were due to a problem in the chest and a blocked nose. This question was limited to children who had suspected pneumonia within the previous two weeks and whether or not they had received an antibiotic within the previous two weeks.

Table CH.7 presents the use of antibiotics for the treatment of suspected pneumonia in under-5s by sex, age, region, residence, and socioeconomic factors. The table shows that 71 percent of under-5 children with suspected pneumonia had received antibiotic treatment during the two weeks prior to the survey.

The percentage was considerably higher in Quneitra, 100 percent, while the lowest percentage was in Rural Damascus; only 52 percent. The table also shows that the percentage of antibiotic treatment of children with suspected pneumonia is high for

rich households and for children whose mothers/caretakers have received secondary school education or higher. The percentage also rises as a child gets older.

## **SOLID FUEL USE**

Cooking with solid fuels (biomass and coal) leads to high levels of indoor pollution and is a major cause of ill health in the world, particularly among children under-five, in the form of acute respiratory illness.

The survey findings show that 98.1 percent of households use gas for cooking. Almost the same percentage applies to both urban and rural areas, while 1.4 percent of households use electricity. There is a slight difference between the urban and rural households; 1.7 percent and 1.1 percent respectively using electricity. There is no difference between rich and poor households (Table CH.8).

## **WATER AND SANITATION**

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

The distribution of the population by source of drinking water is shown in Table EN.1. The population using improved drinking water sources is those who use any of the following types of supply: piped water, public tap, borehole/tubewell, protected well, protected spring or rainwater. Overall, 88.3 percent of the population has access to improved sources of drinking water, 93.5 percent living in urban areas and 81.2 percent in rural areas.

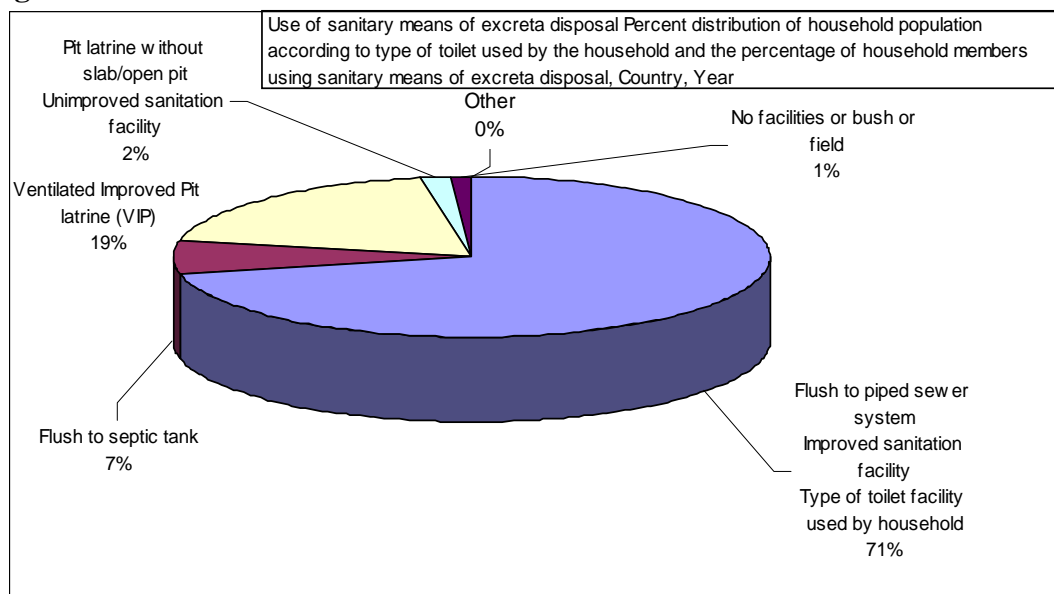
The source of drinking water for the population varies by governorate (Table EN.1).

The public network is the main source of drinking water, with the highest percentages in the governorates of Damascus, Dara'a, Sweida, and Qunaitra, and the lowest is in Rural Damascus. Despite that the majority of households in rural Damascus (94.1 %) are connected to the public network, 43.4% of the household get their main source of drinking water from mobile tanks. This is because the water from the network contains calcium. There is a considerable difference between the richer and poorer household, 99,3 and 69,5 respectively.

Inadequate disposal of human excreta is associated with a range of diseases including diarrhoeal diseases and polio. *Improved sanitation facilities* include: flush toilets connected to sewage systems, or septic tanks. They also include ventilated pit latrines with slabs.

The findings of the survey show that 97.3 percent of the household population lives in dwellings with improved sewage facilities (Table EN.5). 99.7 percent of these live in urban areas, while 94.2 percent live in rural areas (Figure. 3).

**Figure 3**



## CONTRACEPTION

The findings of the survey show that 58.3 percent of married women have reported use of contraceptives.

The highest percentage of women using contraceptives is in Sweida, 74.9 percent, next comes Damascus with 70.8 percent, while the lowest is reported in Quneitra where it declines to 37 percent.

The usage of contraception is lower for young married women; with a rate of 21.6 percent among 15-19 years. Meanwhile, around 40.4 percent of women aged 20-24 use contraception and the percentage continuous to rise for older women (Table RH.1).

Women's education level is strongly associated with contraceptive prevalence. The percentage of women using contraceptives rises from 45.2 percent among uneducated women to 57.5 percent among those with primary education and to 65 percent among those with secondary or higher education. The percentage is also higher among richest households, 68.3, in relation to poorest ones 41.8.

## ASSISTANCE AT DELIVERY

The provision of delivery assistance by skilled attendants can greatly improve outcomes for mothers and infants by the use of technically appropriate procedures, and accurate and speedy diagnosis and treatment of complications. Skilled assistance at delivery is defined as assistance provided by a doctor, nurse, or auxiliary midwife.

About 93 percent of births occurring in the year prior to the MICS were delivered by skilled personnel (Table RH.5). This percentage is highest in the governorate of

Tartous, 100 percent. In Hassake only 80.3 percent of deliveries were attended by skilled attendants.

The more educated a woman is, the more likely she is to have delivered with the assistance of a skilled person. The percentage of assistance at delivery also rises among richest households, 98.9, in relation to poorest ones 77.6.

## **PRIMARY SCHOOL ATTENDANCE**

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

Overall, 96.7 percent of children of primary school age in the Syrian Arab Republic are attending primary school (Table ED.3). In urban areas 97.3 percent of children attend, while in rural areas 96.1 percent attend.

The highest percentage of primary school attendance is among rich households, 98.5 percent, while the lowest is found among poorer ones with 92.9 percent.

Table ED.7 provides the ratio of girls to boys attending primary school. The table shows that gender parity for primary school is close to 1.00 indicating no difference in the attendance of girls and boys. The parity, however, rises to 1.05 percent for secondary school attendance.

## **BIRTH REGISTRATION**

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

The births of 95.2 percent of children born in the five years prior to the survey in the Syrian Arab Republic have been registered (Table CP.1). There is no significance variation in birth registration across sex but there are differences according to the mother's age and educational status. The percentage rises among mothers of higher educational levels and among richest households 98.6, in comparison with poorer ones, 91.6 (Table CP.1).

Among those whose births are not registered 4.8 percent, the cost, travel distance, and lack of knowledge are the reasons for not registration their children.



## **EARLY MARRIGES**

Child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty. Women married at younger ages are more likely to dropout of school, experience higher levels of fertility, domestic violence, and maternal mortality.

The percentage of women married at various ages is provided in Table (CP.5). The findings indicate that 3.4 percent of women are married before the age 15 years old. The percentage varies at governorate level with the highest level in Daraa, 5.2 percent, and the lowest in Tartous, 1.1 percent. The percentage declines with higher educational levels.

## **KNOWLEDGE OF HIV/AIDS TRANSMISSION**

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

Table HA.3 provides the percentage of women aged 15-49 who know two ways of HIV transmission.

The table shows that around 32 percent of women report knowing two ways of HIV transmission. The level of knowledge in urban areas is around 34.6 percent and in rural areas 28.9 percent. There are also differences between the governorates. Tartous has the highest level of knowledge with 57.6 percent, while the lowest level is in Deir-Ezzor, 8.3 percent. The level of knowledge of HIV transmission methods also rises with women's higher educational levels.

## CONCLUSION

The following points are highlighted in view of the results presented:

- Worth noticing is that the percentage of severely underweighted and stunted children decreases by the increase of the mother's educational level. Also, the severe underweight, stunting and wasting is higher among males compared to females and among the age group 12-23 months compared to other age groups.
- Breastfeeding is more spread in rural areas, and among poor families compared to the richer ones.
- The percentage of children vaccinations increases among children of 12-23 months old.
- The percentage of utilizing improved drinking water and safe sanitary disposal are higher in urban areas compared to rural ones.
- The education level of the mother is strongly correlated with the percentage of prevalence of family planning methods.
- The percentage of deliveries assisted by skilled personnel increases by the rise of the woman's educational level and wealth index level.

**Table HH.1: Results of household and individual interviews  
Numbers of households, women and children under 5 by results of the household, women's and under-five's  
interviews, and household, women's and under-five's response rates, Syria, 2006**

	Urban_Rural		Governorates														Total
	Urban	Rural	Damascus	Aleppo	Rural-Dam	Homs	Hama	Lattakia	Idleb	Hassake	Deir Ezzor	Tartous	Raqqa	Daraa	Sweida	Quneitra	
Sampled households	11,317	8,705	2,100	4,560	2,780	1,720	1,445	1,139	1,280	1,140	860	878	780	840	400	100	20,022
Occupied households	11,202	8,668	2,078	4,552	2,714	1,710	1,426	1,132	1,272	1,139	857	878	778	835	399	100	19,870
Interviewed households	10,717	8,302	1,970	4,522	2,571	1,630	1,395	1,064	1,174	1,002	826	871	737	782	378	97	19,019
Household response rate	95.7	95.8	94.8	99.3	94.7	95.3	97.8	94.0	92.3	88.0	96.4	99.2	94.7	93.7	94.7	97.0	95.7
Eligible women	13,764	11,799	2,259	5,531	3,644	2,199	1,946	1,368	1,551	1,635	1,232	1,220	1,075	1,261	495	147	25,563
Interviewed women	13,467	11,559	2,211	5,492	3,370	2,171	1,921	1,366	1,509	1,594	1,219	1,219	1,069	1,246	492	147	25,026
Women response rate	97.8	98.0	97.9	99.3	92.5	98.7	98.7	99.9	97.3	97.5	98.9	99.9	99.4	98.8	99.4	100.0	97.9
Women's overall response rate	93.6	93.8	92.8	98.6	87.6	94.1	96.6	93.9	89.8	85.8	95.4	99.1	94.2	92.5	94.2	97.0	93.7
Eligible children under 5	5,526	5,578	596	2,293	1,638	1,036	842	440	930	678	630	448	494	812	180	87	11,104
Mother/Caretaker Interviewed	5,483	5,534	591	2,284	1,598	1,032	838	440	927	668	626	447	491	808	180	87	11,017
Child response rate	99.2	99.2	99.2	99.6	97.6	99.6	99.5	100.0	99.7	98.5	99.4	99.8	99.4	99.5	100.0	100.0	99.2
Children's overall response rate	94.9	95.0	94.0	99.0	92.4	95.0	97.4	94.0	92.0	86.7	95.8	99.0	94.2	93.2	94.7	97.0	95.0

**Table CM.1: Child mortality**  
**Infant and under-five mortality rates by background and demographic characteristics [BASED ON NORTH], Syria, 2006**

		Infant Mortality Rate*	Under-five Mortality Rate**
Sex	Male	21	26
	Female	14	17
Area	Urban	16	19
	Rural	20	24
Total	Total	18	22

\* MICS indicator 2; MDG indicator 14, \*\* MICS indicator 1; MDG indicator 13

**Table NU.1: Child malnourishment**  
**Percentage of under-five children who are severely or moderately undernourished, Syria 2006**

		Weight for age: % below -2 SD	Weight for age: % below -3 SD*	Height for age: % below -2 SD	Height for age: % below -3 SD**	Weight for height: % below -2 SD	Weight for height: % below -3 SD***	Weight for height: % above +2 SD	Number of children
Sex	Male	10.7	2.1	23.6	11.0	9.5	2.8	11.8	5,042
	Female	8.6	1.6	21.1	9.1	7.6	1.7	13.1	4,536
Governorates	Damascus	12.0	3.2	23.7	11.6	12.0	4.4	19.3	476
	Aleppo	10.2	1.3	36.0	19.7	8.0	2.5	16.0	1,909
	Rural-Dam	12.4	2.4	20.6	7.9	11.3	2.6	11.5	1,430
	Homs	10.2	1.7	24.0	9.3	7.5	1.4	15.9	875
	Hama	10.1	2.5	17.5	7.2	13.5	3.7	10.5	753
	Lattakia	4.9	0.5	9.7	2.3	10.0	0.8	10.7	391
	Idleb	3.8	0.5	16.5	5.0	1.4	0.3	5.4	878
	Hassake	11.0	2.8	17.1	7.1	10.8	3.5	15.8	538
	Deir Ezzor	17.9	5.2	29.4	15.1	16.1	5.4	13.3	496
	Tartous	3.7	0.9	9.5	2.5	5.8	0.7	12.0	432
	Raqqa	22.7	3.7	35.4	19.5	12.2	3.7	9.5	401
	Daraa	3.8	0.3	11.5	3.3	3.3	0.3	8.4	738
	Sweida	0.6	0.0	4.0	1.1	0.0	0.0	4.5	177
Quneitra	1.2	0.0	15.5	6.0	2.4	1.2	8.3	84	
Urban_Rural	Urban	9.4	1.6	21.9	10.0	8.5	2.4	12.9	4,728
	Rural	10.0	2.1	22.9	10.2	8.8	2.2	11.9	4,850
Age	< 6 months	4.1	0.5	16.4	5.7	7.6	2.1	20.5	959
	6-11 months	10.4	2.9	20.2	6.8	10.4	2.6	15.5	734
	12-23 months	11.2	2.5	28.3	13.7	9.1	2.4	15.3	1,731
	24-35 months	13.4	2.0	22.3	11.0	9.1	2.0	7.8	2,154
	36-47 months	8.4	1.6	24.4	11.1	8.6	2.5	11.3	2,314
	48-59 months	8.3	1.4	18.1	7.8	7.6	2.3	10.8	1,686
Mother's education	None	13.8	3.6	29.1	15.1	11.8	3.6	12.9	1,613
	Primary	10.2	1.9	25.2	11.3	8.1	2.3	13.0	3,630
	Secondary	8.1	1.1	18.1	7.1	7.7	1.7	11.3	3,499
	Higher institutions	6.8	2.0	17.4	8.5	9.4	2.4	13.3	541
	University+	6.1	0.3	11.5	6.4	7.8	1.7	13.2	295
Wealth index quintiles	Poorest	12.7	3.3	29.5	14.6	10.4	3.0	13.4	1,961
	Second	10.2	1.7	21.1	8.8	8.1	2.2	11.4	2,244
	Middle	9.9	1.7	20.9	8.9	8.6	2.4	11.6	2,092
	Fourth	7.2	1.1	20.2	7.8	7.2	1.5	13.5	1,704
	Richest	7.9	1.2	19.9	10.3	8.8	2.0	12.4	1,577
Total		9.7	1.8	22.4	10.1	8.6	2.3	12.4	9,578

\* MICS indicator 6; MDG indicator \*\* MICS indicator 7, \*\*\* MICS indicator 8

**Table NU.3: Breastfeeding**  
**Percent of living children according to breastfeeding status at each age group, Syria 2006**

		Children 0-3 months		Children 0-5 months		Children 6-9 months		Children 12-15 months		Children 20-23 months	
		Percent excl. breast-fed	Number of children	Percent excl. breast-fed *	Number of children	Percent receiving breast-milk and solid/mus hy food **	Number of children	Percent breast-fed***	Number of children	Percent breast-fed ***	Number of children
Sex	Male	33.0	348	27.2	621	35.2	327	64.1	457	18.3	263
	Female	37.6	327	30.4	542	38.1	265	63.7	410	14.0	222
Governorates	Damascus	21.4	42	21.4	70	31.6	38	69.2	52	18.8	32
	Aleppo	36.5	148	36.3	251	17.8	90	75.0	204	22.5	40
	Rural-Dam	34.3	99	22.9	170	52.8	89	48.5	101	9.1	99
	Homs	40.8	76	33.3	120	45.0	60	59.0	83	25.5	55
	Hama	33.3	36	21.9	64	44.1	59	72.6	62	13.3	45
	Lattakia	46.4	28	45.7	46	25.0	24	41.4	29	10.7	28
	Idleb	39.6	48	22.9	109	33.3	42	66.2	71	14.8	27
	Hassake	27.5	40	23.2	69	17.1	35	65.3	49	20.0	30
	Deir Ezzor	35.6	45	30.3	76	38.5	39	64.5	62	42.4	33
	Tartous	42.1	19	26.7	30	45.0	20	38.5	39	3.2	31
	Raqqa	26.7	30	26.5	49	16.7	24	69.1	55	14.3	7
	Daraa	40.4	52	29.4	85	43.1	51	65.9	44	10.3	39
	Sweida	11.1	9	6.2	16	70.6	17	70.0	10	0.0	14
Quneitra	33.3	3	37.5	8	0.0	4	33.3	6	40.0	5	
Urban_Rural	Urban	31.3	371	27.6	609	36.1	277	62.4	436	15.4	247
	Rural	40.1	304	30.0	554	36.8	315	65.4	431	17.2	238
Mother's education	None	38.0	100	31.4	188	22.5	89	76.4	161	37.7	53
	Primary	34.4	273	29.3	478	36.6	216	65.0	340	18.3	164
	Secondary	36.3	245	27.9	408	40.5	227	55.9	295	9.3	205
	Higher institutions	32.5	40	25.0	60	37.1	35	69.8	43	19.4	36
	University+	23.5	17	20.7	29	48.0	25	53.6	28	11.1	27
Wealth index quintiles	Poorest	41.7	139	35.5	248	28.6	119	73.2	194	27.8	79
	Second	38.3	128	28.6	248	39.1	151	63.3	207	13.2	121
	Middle	36.7	169	29.6	280	41.7	139	57.9	178	11.1	117
	Fourth	30.6	124	23.8	202	35.0	100	62.7	150	12.6	87
	Richest	27.0	115	23.8	185	36.1	83	60.9	138	21.0	81
Total		35.3	675	28.7	1,163	36.5	592	63.9	867	16.3	485

**Table CH.1: Vaccinations in first year of life**  
**Percentage of children aged 12-23 months immunized against childhood diseases at any time before the survey and before the first birthday, Syria 2006**

	BCG *	DPT 1	DPT 2	DPT 3 **	Polio 0	Polio 1	Polio 2	Polio 3 ****	Measles ****	All *****	None	Number of children aged 12-23 months
Vaccination card	99.9	99.4	96.6	91.2	99.9	99.3	96.7	91.3	92.4	87.8	0.0	1,152
Mother's report	0.0	0.0	0.2	0.3	0.0	0.1	0.2	0.3	0.1	0.0	0.0	1,152
Either	99.9	99.4	96.8	91.6	99.9	99.4	96.9	91.7	92.4	87.8	0.0	1,152
Vaccinated by 12 months of age	99.7	98.6	95.6	89.0	99.7	98.6	95.8	88.9	85.2	79.0	0.1	1,152

**Table CH.7: Antibiotic treatment of pneumonia**  
**Percentage of children aged 0-59 months with suspected pneumonia who received antibiotic treatment,**  
**Syria, 2006**

		% of children aged 0-59 months with suspected pneumonia who received antibiotics in the last two weeks *	Number of children aged 0-59 months with suspected pneumonia in the two weeks prior to the survey
Sex	Male	70.2	329
	Female	72.0	261
Governorates	Damascus	72.2	36
	Aleppo	79.8	99
	Rural-Dam	52.0	127
	Homs	66.7	63
	Hama	71.4	42
	Lattakia	78.8	33
	Idleb	71.8	39
	Hassake	91.3	46
	Deir Ezzor	86.4	22
	Tartous	85.0	20
	Raqqa	77.8	18
	Daraa	63.6	33
	Sweida	72.7	11
	Quneitra	100.0	1
Urban_Rural	Urban	75.3	328
	Rural	65.6	262
Age	0-11 months	68.8	125
	12-23 months	67.4	138
	24-35 months	72.2	126
	36-47 months	75.8	128
	48-59 months	71.2	73
Mother's education	None	70.9	86
	Primary	66.8	217
	Secondary	72.2	230
	Higher institutions	86.1	36
	University+	76.2	21
Wealth index quintiles	Poorest	71.6	95
	Second	64.5	141
	Middle	63.6	143
	Fourth	79.4	102
	Richest	80.7	109
Total		71.0	590

\* MICS indicator 22



**Table CH.8: Solid fuel use**  
**Percent distribution of households according to type of cooking fuel, and percentage of households used solid fuels for cooking, Syria 2006**

		Type of fuel using for cooking			Total	Solid fuels for cooking *	Number of households
		Electricity	Liquid propane gas (LPG)	Other			
Governorates	Damascus	1.4	98.6	0.0	100.0	0.0	1,971
	Aleppo	0.6	99.2	0.3	100.0	0.3	4,523
	Rural-Dam	2.4	97.6	0.0	100.0	0.0	2,571
	Homs	1.9	97.7	0.4	100.0	0.4	1,630
	Hama	0.9	98.8	0.3	100.0	0.3	1,395
	Lattakia	1.1	98.8	0.1	100.0	0.0	1,064
	Idleb	0.7	99.3	0.0	100.0	0.0	1,174
	Hassake	1.2	97.9	0.9	100.0	0.1	1,002
	Deir Ezzor	5.6	89.6	4.9	100.0	2.1	826
	Tartous	0.7	98.9	0.4	100.0	0.3	871
	Raqqa	1.1	98.4	0.5	100.0	0.4	737
	Daraa	1.9	97.8	0.3	100.0	0.3	782
	Sweida	0.3	99.2	0.5	100.0	0.5	378
	Quneitra	2.1	97.9	0.0	100.0	0.0	97
Urban_Rural	Urban	1.7	98.2	0.1	100.0	0.0	10,722
	Rural	1.1	98.0	0.3	100.0	0.6	8,297
Education of household head	None	1.1	97.6	1.2	100.0	0.8	4,116
	Primary	1.0	98.6	0.4	100.0	0.2	6,186
	Secondary	1.7	98.2	0.2	100.0	0.1	6,072
	Higher Institutions	1.4	98.6	0.0	100.0	0.0	1,156
	University+	2.9	97.1	0.1	100.0	0.0	1,462
	Missing/DK	3.8	96.2	0.0	100.0	0.0	26
Wealth index quintiles	Poorest	1.4	96.4	2.2	100.0	1.4	3,520
	Second	1.6	98.2	0.2	100.0	0.0	3,622
	Middle	1.6	98.4	0.0	100.0	0.0	3,889
	Fourth	1.5	98.5	0.0	100.0	0.0	3,541
	Richest	1.1	98.9	0.0	100.0	0.0	4,447
Total		1.4	98.1	0.4	100.0	0.3	19,019

\* MICS indicator 24; MDG indicator 29

**Table EN.1: Use of improved water sources**  
**Percent distribution of household population according to main source of drinking water and percentage of household members using improved drinking water sources, Syria 2006**

		Main source of drinking water														Total	Improved source of drinking water	Number of household members
		Improved sources								Unimproved sources								
		Piped into dwelling	Piped into yard or plot	Public tap/standpipe	Tubewell/borehole	Protected well	Protected spring	Rainwater collection	Bottled water	Unprotected well	Unprotected spring	Tanker-truck	Cart with small tank/drum	Surface water	Other			
Governorates	Damascus	99.2	0.4	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	0.1	0.0	0.0	100.0	99.6	1,970
	Aleppo	75.3	1.0	0.1	4.4	9.7	0.3	0.0	0.1	0.3	0.0	8.6	0.1	0.0	0.1	100.0	90.8	4,522
	Rural-Dam	50.7	0.2	0.5	1.0	1.4	0.2	0.0	1.9	0.2	0.0	43.4	0.3	0.0	0.0	100.0	55.8	2,571
	Homs	87.5	1.2	0.0	5.4	2.4	0.0	0.0	0.6	0.2	0.0	1.4	0.0	0.0	1.4	100.0	97.0	1,630
	Hama	88.5	2.7	0.1	1.8	3.9	0.4	0.0	0.0	0.8	0.1	1.5	0.1	0.0	0.1	100.0	97.3	1,395
	Lattakia	87.2	0.8	0.0	6.1	3.5	0.1	0.0	0.1	0.0	1.4	0.6	0.0	0.0	0.2	100.0	97.8	1,064
	Idleb	83.1	2.5	2.0	0.5	5.0	0.5	0.2	0.3	0.9	0.1	4.9	0.1	0.0	0.0	100.0	94.1	1,174
	Hassake	53.1	3.6	0.1	2.6	7.9	0.3	0.0	0.3	2.2	0.5	28.4	0.9	0.0	0.1	100.0	67.9	1,002
	Deir Ezzor	78.9	8.5	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	11.5	0.4	0.5	0.0	100.0	87.7	826
	Tartous	95.2	0.2	0.0	0.1	2.5	1.7	0.0	0.1	0.1	0.0	0.0	0.0	0.0	0.0	100.0	99.9	871
	Raqqqa	79.5	11.7	0.1	0.3	0.5	0.3	0.0	0.0	0.0	0.0	7.2	0.3	0.0	0.1	100.0	92.4	737
	Daraa	97.8	0.3	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	0.0	0.0	0.0	100.0	98.7	782
	Sweida	97.9	1.6	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	100.0	99.7	378
	Quneitra	95.9	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.1	0.0	0.0	0.0	100.0	97.9	97
Urban_Rural	Urban	91.7	0.8	0.0	0.3	0.6	0.0	0.0	0.3	0.0	0.0	5.9	0.1	0.0	0.2	100.0	93.7	10,717
	Rural	63.0	3.2	0.6	5.0	8.4	0.6	0.0	0.4	0.7	0.3	17.2	0.3	0.0	0.2	100.0	81.2	8,302
Education of household head	None	70.7	3.2	0.4	3.4	6.4	0.4	0.1	0.3	0.6	0.1	13.9	0.2	0.1	0.3	100.0	84.8	4,117
	Primary	75.9	2.1	0.2	2.4	5.0	0.2	0.0	0.3	0.3	0.2	12.9	0.2	0.0	0.1	100.0	86.2	6,186
	Secondary	84.0	1.1	0.2	1.8	2.6	0.2	0.0	0.4	0.2	0.1	8.9	0.1	0.0	0.2	100.0	90.3	6,072
	Higher Institutions	86.8	1.0	0.3	2.2	2.2	0.4	0.0	0.3	0.5	0.1	6.3	0.0	0.0	0.0	100.0	93.1	1,156
	University+	90.2	1.0	0.3	1.0	1.0	0.1	0.0	0.7	0.1	0.1	5.3	0.1	0.0	0.1	100.0	94.3	1,462
Missing/DK	92.3	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	100.0	96.2	26	
Wealth index quintiles	Poorest	36.6	7.3	0.9	7.7	17.2	0.9	0.1	0.3	1.6	0.3	26.0	0.5	0.1	0.5	100.0	70.9	3,522
	Second	76.3	1.6	0.3	3.4	3.6	0.3	0.0	0.4	0.1	0.3	13.3	0.1	0.0	0.3	100.0	85.8	3,623
	Middle	84.3	0.6	0.1	1.1	0.8	0.1	0.0	0.6	0.1	0.1	12.0	0.1	0.0	0.1	100.0	87.6	3,889
	Fourth	93.8	0.5	0.2	0.1	0.1	0.0	0.0	0.4	0.1	0.0	4.8	0.0	0.0	0.0	100.0	95.0	3,540
	Richest	99.0	0.0	0.0	0.1	0.0	0.0	0.0	0.2	0.0	0.0	0.7	0.0	0.0	0.0	100.0	99.3	4,445
Total		79.1	1.9	0.3	2.3	4.0	0.3	0.0	0.4	0.3	0.1	10.9	0.1	0.0	0.2	100.0	88.3	19,019

\* MICS indicator 11; MDG indicator 30

**Table EN.5: Use of sanitary means of excreta disposal**  
**Percent distribution of household population according to type of toilet used by the household and the percentage of household members using sanitary means of excreta disposal, Syria 2006**

		Type of toilet facility used by household						Total	Percentage of population using sanitary means of excreta disposal *	Number of households members
		Improved sanitation facility			Unimproved sanitation facility					
		Flush to piped sewer system	Flush to septic tank	Ventilated Improved Pit latrine (VIP)	Pit latrine without slab/open pit	No facilities or bush or field	Other			
Governorates	Damascus	99.1	0.7	0.0	0.0	0.2	0.0	100.0	99.8	1,970
	Aleppo	75.1	3.7	18.1	1.8	1.0	0.2	100.0	97.0	4,522
	Rural-Dam	96.5	0.9	2.1	0.3	0.1	0.0	100.0	99.5	2,571
	Homs	88.4	2.7	8.0	0.4	0.5	0.0	100.0	99.1	1,630
	Hama	61.9	9.6	26.7	1.6	0.1	0.1	100.0	98.1	1,395
	Lattakia	83.1	5.4	11.2	0.2	0.1	0.1	100.0	99.6	1,064
	Idleb	62.5	20.5	14.7	1.6	0.6	0.0	100.0	97.8	1,174
	Hassake	48.4	6.5	34.2	4.3	6.5	0.1	100.0	89.1	1,002
	Deir Ezzor	55.4	10.2	32.0	0.5	1.9	0.0	100.0	97.6	826
	Tartous	68.7	8.2	22.2	0.9	0.1	0.0	100.0	99.0	871
	Raqqa	36.5	1.8	46.3	12.1	3.3	0.1	100.0	84.5	737
	Daraa	51.9	17.6	27.9	1.4	0.9	0.3	100.0	97.4	782
	Sweida	46.8	29.1	20.1	2.6	1.1	0.3	100.0	96.0	378
	Quneitra	43.3	3.1	52.6	1.0	0.0	0.0	100.0	99.0	97
Urban_Rural	Urban	96.6	1.1	2.0	0.1	0.1	0.0	100.0	99.7	10,717
	Rural	46.2	12.7	35.4	3.5	2.1	0.2	100.0	94.2	8,302
Education of household head	None	60.3	9.3	24.8	3.2	2.2	0.2	100.0	94.3	4,117
	Primary	73.3	5.8	18.2	1.6	1.0	0.0	100.0	97.4	6,186
	Secondary	80.1	5.3	12.9	1.1	0.5	0.0	100.0	98.4	6,072
	Higher Institutions	81.1	5.1	12.6	0.7	0.3	0.1	100.0	98.9	1,156
	University+	91.9	2.7	5.0	0.3	0.1	0.1	100.0	99.6	1,462
	Missing/DK	92.3	3.8	3.8	0.0	0.0	0.0	100.0	100.0	26
Wealth index quintiles	Poorest	17.3	13.8	56.5	7.1	5.0	0.3	100.0	87.6	3,522
	Second	58.9	13.6	25.7	1.3	0.3	0.2	100.0	98.2	3,623
	Middle	90.4	4.1	5.3	0.2	0.0	0.0	100.0	99.8	3,889
	Fourth	98.5	0.7	0.7	0.0	0.0	0.1	100.0	99.9	3,540
	Richest	99.9	0.1	0.0	0.0	0.0	0.0	100.0	100.0	4,445
Total		74.6	6.1	16.6	1.6	1.0	0.1	100.0	97.3	19,019

\* MICS Indicator 12; MDG Indicator 31

**Table RH.1: Use of contraception**  
**Percentage of women aged 15-49 years married or in union who are using (or whose partner is using) a contraceptive method, syria 2006**

		Percent of women (currently married or in union) who are using:											Total	Any modern method	Any traditional method	Any method *	Number of women currently married or in union
		Not using any method	Female sterilization	Pill	IUD	Injections	Condom	Diaphragm/foam/jelly	LAM	Periodic abstinence	Withdrawal	Other					
Governorates	Damascus	29.2	0.1	14.1	40.3	0.7	2.6	0.0	2.8	8.1	1.4	0.5	100.0	58.0	12.9	70.8	1,181
	Aleppo	40.2	1.3	17.1	27.1	2.4	1.5	0.1	3.7	5.1	1.2	0.2	100.0	49.6	10.2	59.8	3,148
	Rural-Dam	35.6	1.5	13.3	26.1	0.2	2.1	0.2	3.5	12.2	4.2	1.0	100.0	43.5	20.9	64.4	2,071
	Homs	40.5	0.8	8.9	29.3	0.6	0.9	0.5	5.8	10.3	1.7	0.7	100.0	41.0	18.4	59.5	1,209
	Hama	43.8	1.5	9.1	27.5	0.3	0.5	0.1	2.7	12.9	0.7	0.9	100.0	39.0	17.2	56.2	964
	Lattakia	29.5	0.7	10.7	29.9	0.1	1.5	0.0	5.3	20.1	0.1	2.0	100.0	42.9	27.6	70.5	685
	Idleb	42.8	1.5	16.0	19.5	1.1	0.6	0.4	6.0	8.9	1.5	1.7	100.0	39.1	18.1	57.2	811
	Hassake	55.9	1.8	5.7	18.0	0.4	0.4	0.4	6.0	8.9	2.2	0.3	100.0	26.7	17.3	44.1	733
	Deir Ezzor	62.2	0.3	15.3	13.4	0.7	0.5	0.0	5.4	1.6	0.0	0.5	100.0	30.3	7.5	37.8	614
	Tartous	34.1	2.6	7.3	26.0	0.2	5.1	0.0	2.8	20.1	0.0	1.8	100.0	41.2	24.7	65.9	607
	Raqqa	66.3	0.6	13.8	10.3	0.2	0.2	0.4	2.9	4.0	1.1	0.2	100.0	25.4	8.2	33.7	523
	Daraa	56.9	1.0	13.0	18.5	0.7	2.0	0.0	2.4	3.6	0.4	1.0	100.0	35.6	7.4	43.1	713
	Sweida	25.1	1.1	8.6	28.7	1.4	3.9	0.7	6.8	13.3	9.0	1.4	100.0	44.4	30.5	74.9	279
Quneitra	63.0	0.0	6.2	18.5	1.2	6.2	0.0	1.2	3.7	0.0	0.0	100.0	32.1	4.9	37.0	81	
Urban_Rural	Urban	36.5	1.2	14.3	29.8	0.9	1.8	0.2	3.3	9.4	1.8	0.7	100.0	48.2	15.2	63.5	7,598
	Rural	48.2	1.2	11.0	20.6	1.0	1.3	0.2	5.0	9.0	1.5	0.8	100.0	35.4	16.4	51.8	6,019
Age	15-19	78.4	0.0	6.0	3.8	0.5	0.4	0.4	7.3	2.9	0.2	0.0	100.0	11.2	10.4	21.6	546
	20-24	59.6	0.0	11.3	13.8	0.3	0.7	0.3	6.7	5.9	1.3	0.2	100.0	26.3	14.1	40.4	1,811
	25-29	43.9	0.1	14.7	23.4	0.6	1.5	0.1	6.3	7.3	1.9	0.2	100.0	40.3	15.8	56.1	2,536
	30-34	35.6	0.5	15.3	30.4	0.9	2.1	0.2	4.5	9.3	0.9	0.4	100.0	49.4	15.0	64.4	2,533
	35-39	30.3	1.2	15.1	34.1	1.1	1.6	0.1	3.1	10.6	2.0	0.8	100.0	53.2	16.5	69.7	2,643
	40-44	31.1	2.8	11.7	32.3	1.9	1.7	0.3	1.4	12.9	2.5	1.4	100.0	50.7	18.1	68.9	2,139
	45-49	48.9	3.7	7.7	19.9	1.0	2.7	0.1	0.2	11.0	2.1	2.6	100.0	35.2	15.9	51.1	1,409
Number of living children	0	98.6	0.0	0.2	0.6	0.0	0.1	0.0	0.1	0.4	0.0	0.1	100.0	0.8	0.6	1.4	1,089
	1	66.5	0.0	9.4	4.9	0.2	1.1	0.2	6.8	9.2	1.5	0.2	100.0	15.8	17.6	33.5	1,315
	2	38.6	0.1	13.7	25.6	0.5	1.9	0.1	5.3	11.9	1.9	0.4	100.0	42.0	19.4	61.4	2,188
	3	31.1	0.9	13.6	34.1	0.7	2.0	0.1	4.6	10.8	1.7	0.4	100.0	51.4	17.5	68.9	2,313
	4+	32.3	2.0	15.1	31.1	1.5	1.7	0.3	3.5	9.2	2.0	1.3	100.0	51.8	16.0	67.7	6,712
Mother's education	None	54.8	2.1	12.5	17.1	1.7	0.7	0.2	3.0	5.7	1.2	0.9	100.0	34.3	10.9	45.2	2,649
	Primary	42.5	1.3	14.1	24.6	1.2	1.4	0.1	4.9	7.2	1.8	0.8	100.0	42.6	14.8	57.5	4,734
	Secondary	36.5	0.7	13.0	29.3	0.5	2.1	0.3	4.0	11.0	1.9	0.7	100.0	46.0	17.5	63.5	4,850
	Higher institutions	33.7	0.9	9.2	32.4	0.2	1.7	0.0	3.7	16.0	1.7	0.5	100.0	44.4	21.9	66.3	887
	University+	29.0	0.6	9.5	35.2	0.2	3.6	0.4	2.2	16.9	1.8	0.4	100.0	49.7	21.3	71.0	497
Wealth index quintiles	Poorest	58.2	0.9	11.0	14.8	1.2	1.1	0.3	5.5	5.2	1.3	0.5	100.0	29.4	12.4	41.8	2,372
	Second	47.2	1.2	12.4	20.1	1.0	1.6	0.2	5.0	8.6	1.7	0.9	100.0	36.6	16.3	52.8	2,674
	Middle	38.8	1.0	14.3	25.6	0.8	1.6	0.1	4.5	9.7	2.3	0.9	100.0	43.6	17.6	61.2	2,858
	Fourth	36.3	1.3	13.8	30.2	1.0	1.3	0.1	3.3	10.0	1.9	0.8	100.0	47.7	16.0	63.7	2,577
	Richest	31.7	1.4	12.6	35.2	0.8	2.2	0.2	2.3	11.6	1.3	0.7	100.0	52.5	15.9	68.3	3,136
Total		41.7	1.2	12.9	25.7	0.9	1.6	0.2	4.0	9.2	1.7	0.8	100.0	42.6	15.7	58.3	13,618

\* MICS indicator 21; MDG indicator 19C

**Table RH.5: Assistance during delivery**  
**Percent distribution of women aged 15-49 with a birth in two years preceding the survey by type of personnel assisting at delivery, syria 2006**

		Person assisting at delivery						Total	Any skilled personnel*	Delivered in health facility**	Number of women who gave birth in preceding two years
		Medical doctor	Nurse/midwife	Auxiliary midwife	Traditional birth attendant	Other	No attendant				
Governorates	Damascus	88.3	9.2	0.4	2.1	0.0	0.0	100.0	97.9	92.5	240
	Aleppo	41.8	47.5	1.8	7.9	0.8	0.1	100.0	91.2	53.6	734
	Rural-Dam	78.3	19.9	0.2	0.8	0.3	0.5	100.0	98.4	86.3	613
	Homs	67.0	27.9	1.1	2.9	0.8	0.3	100.0	96.0	69.7	373
	Hama	62.8	29.7	1.7	4.1	1.4	0.3	100.0	94.3	70.3	296
	Lattakia	84.6	13.4	0.0	0.0	0.0	2.0	100.0	98.0	87.2	149
	Idleb	46.7	41.4	1.9	5.0	0.6	4.4	100.0	90.0	61.1	319
	Hassake	49.4	26.8	4.1	16.9	1.6	1.2	100.0	80.3	58.9	243
	Deir Ezzor	42.4	36.2	6.6	14.0	0.8	0.0	100.0	85.2	56.4	257
	Tartous	92.6	6.7	0.6	0.0	0.0	0.0	100.0	100.0	93.9	163
	Raqqa	57.1	26.9	1.1	12.6	0.0	2.3	100.0	85.2	62.9	175
	Daraa	43.3	50.9	0.7	3.1	0.7	1.4	100.0	94.8	69.2	289
	Sweida	74.7	24.0	0.0	1.3	0.0	0.0	100.0	98.7	93.3	75
	Quneitra	80.6	12.9	0.0	6.5	0.0	0.0	100.0	93.5	90.3	31
Urban_Rural	Urban	66.8	29.6	1.3	1.5	0.2	0.7	100.0	97.6	75.3	1,987
	Rural	54.3	32.2	1.9	9.5	1.1	1.0	100.0	88.4	65.5	1,969
Age	15-19	67.2	28.7	1.2	1.2	0.8	0.8	100.0	97.2	78.5	247
	20-24	61.4	31.2	1.8	4.4	0.4	0.8	100.0	94.4	72.0	1,001
	25-29	59.0	33.6	1.6	5.0	0.3	0.5	100.0	94.2	68.5	1,114
	30-34	58.7	31.7	1.0	6.6	0.7	1.2	100.0	91.4	70.0	801
	35-39	63.5	26.5	1.8	6.2	1.3	0.7	100.0	91.8	71.3	551
	40-44	57.1	28.8	2.4	8.8	1.5	1.5	100.0	88.3	63.9	205
	45-49	55.3	15.8	0.0	26.3	0.0	2.6	100.0	71.1	60.5	38
Mother's education	None	42.4	31.7	3.3	19.4	2.1	1.1	100.0	77.3	51.9	609
	Primary	54.5	37.1	1.7	5.1	0.5	1.2	100.0	93.3	66.3	1,535
	Secondary	68.9	27.8	1.0	1.4	0.2	0.6	100.0	97.8	78.1	1,451
	Higher institutions	79.0	19.2	0.4	0.9	0.0	0.4	100.0	98.7	85.2	229
	University+	90.2	9.0	0.0	0.0	0.8	0.0	100.0	99.2	94.0	133
Wealth index quintiles	Poorest	42.4	32.5	2.7	18.7	1.9	1.7	100.0	77.6	55.3	815
	Second	57.9	35.1	2.1	3.6	0.6	0.7	100.0	95.1	71.2	972
	Middle	62.4	34.2	1.4	1.0	0.2	0.7	100.0	98.1	71.2	876
	Fourth	68.6	27.2	0.9	2.6	0.2	0.6	100.0	96.7	75.2	666
	Richest	77.2	21.4	0.3	0.6	0.0	0.5	100.0	98.9	82.6	626
Total		60.6	30.9	1.6	5.5	0.6	0.9	100.0	93.0	70.4	3,957

\* MICS indicator 4; MDG indicator 17

\*\* MICS indicator 5

**Table ED.3: Primary school net attendance ratio**  
**Percentage of children of primary school age attending primary school or secondary school (NAR), Syria**  
**2006**

		Male		Female		Total	
		Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio	Number of children
Governorates	Damascus	98.1	633	98.6	575	98.3	1,209
	Aleppo	96.1	2,122	95.2	1,817	95.7	3,939
	Rural-Dam	98.3	1,095	98.4	1,053	98.3	2,148
	Homs	98.7	685	98.3	664	98.5	1,349
	Hama	97.9	615	97.5	643	97.7	1,258
	Lattakia	98.3	348	99.7	312	98.9	660
	Idleb	96.9	588	97.7	533	97.3	1,121
	Hassake	95.0	561	94.8	485	94.9	1,046
	Deir Ezzor	91.8	526	90.6	470	91.3	996
	Tartous	98.5	265	99.0	286	98.7	551
	Raqqa	92.8	391	90.2	378	91.5	769
	Daraa	99.1	427	98.0	445	98.5	872
	Sweida	99.0	101	99.1	107	99.0	208
	Quneitra	97.6	42	98.4	62	98.1	104
Urban_Rural	Urban	97.2	4,272	97.3	3,955	97.3	8,227
	Rural	96.4	4,126	95.7	3,875	96.1	8,001
Age	6	98.7	1,038	98.3	923	98.5	1,961
	7	93.5	1,329	94.2	1,281	93.8	2,610
	8	97.1	1,541	97.3	1,405	97.2	2,946
	9	98.1	1,447	97.2	1,339	97.7	2,786
	10	97.4	1,653	96.5	1,565	97.0	3,218
	11	96.2	1,391	96.1	1,317	96.1	2,708
Mother's education	None	93.2	2,463	92.4	2,226	92.8	4,690
	Primary	97.4	2,756	97.4	2,651	97.4	5,407
	Secondary	99.1	2,553	98.9	2,335	99.0	4,888
	Higher institutions	98.8	410	99.0	400	98.9	810
	University+	99.5	212	98.1	216	98.8	428
	Missing/DK	100.0	4	100.0	1	100.0	5
Wealth index quintiles	Poorest	93.7	1,884	92.1	1,624	92.9	3,508
	Second	97.3	1,699	97.0	1,658	97.2	3,356
	Middle	97.1	1,704	97.7	1,608	97.4	3,312
	Fourth	98.0	1,511	97.7	1,363	97.9	2,875
	Richest	98.6	1,600	98.4	1,576	98.5	3,177
Total		96.8	8,398	96.5	7,829	96.7	16,228

\* MICS indicator 55; MDG indicator 6

**Table ED.7 : Education gender parity**  
**Ratio of girls to boys attending primary education and ratio of girls to boys attending secondary education,**  
**Syria 2006**

		Primary school net attendance ratio (NAR), girls	Primary school net attendance ratio (NAR), boys	Gender parity index (GPI) for primary school NAR*	Secondary school net attendance ratio (NAR), girls	Secondary school net attendance ratio (NAR), boys	Gender parity index (GPI) for secondary school NAR*
Sex	Male	.	96.8	.	.	50.6	.
	Female	96.5	.	.	53.1	.	.
Governorates	Damascus	98.6	98.1	1.01	67.2	54.7	1.23
	Aleppo	95.2	96.1	0.99	34.7	39.6	0.88
	Rural-Dam	98.4	98.3	1.00	61.8	47.1	1.31
	Homs	98.3	98.7	1.00	63.5	53.6	1.19
	Hama	97.5	97.9	1.00	60.2	57.8	1.04
	Lattakia	99.7	98.3	1.01	78.7	73.5	1.07
	Idleb	97.7	96.9	1.01	43.9	49.7	0.88
	Hassake	94.8	95.0	1.00	51.8	55.8	0.93
	Deir Ezzor	90.6	91.8	0.99	45.8	49.7	0.92
	Tartous	99.0	98.5	1.00	77.5	65.9	1.17
	Raqqa	90.2	92.8	0.97	35.0	45.9	0.76
	Daraa	98.0	99.1	0.99	58.8	56.3	1.04
	Sweida	99.1	99.0	1.00	84.7	70.8	1.20
	Quneitra	98.4	97.6	1.01	52.9	74.3	0.71
Urban_Rural	Urban	97.3	97.2	1.00	58.7	51.0	1.15
	Rural	95.7	96.4	0.99	47.3	50.3	0.94
Mother's education	None	92.4	93.2	0.99	37.0	40.3	0.92
	Primary	97.4	97.4	1.00	54.5	46.4	1.18
	Secondary	98.9	99.1	1.00	75.2	66.4	1.13
	Higher institutions	99.0	98.8	1.00	88.3	87.1	1.01
	University+	98.1	99.5	0.99	41.8	73.6	0.57
	Missing/DK	100.0	100.0	1.00	100.0	100.0	1.00
Wealth index quintiles	Poorest	92.1	93.7	0.98	31.4	39.8	0.79
	Second	97.0	97.3	1.00	49.5	49.4	1.00
	Middle	97.7	97.1	1.01	56.1	47.0	1.19
	Fourth	97.7	98.0	1.00	58.8	51.8	1.13
	Richest	98.4	98.6	1.00	70.6	65.0	1.09
Total		96.5	96.8	1.00	53.1	50.6	1.05

\* MICS Indicator 61; MDG Indicator 9

**Table CP.1: Birth registration**  
**Percent distribution of children aged 0-59 months by whether birth is registered and reasons for non-registration, Syria 2006**

		Birth is registered *	Don't know if birth is registered	Number of children aged 0-59 months	Birth is not registered because:							Total	Number of children aged 0-59 months without birth registration	
					Costs too much	Must travel too far	Didn't know child should be registered	Late, didn't want to pay fine	Doesn't know where to register	Other	Don't know			Missing
Sex	Male	95.4	0.6	5,804	8.1	14.5	2.6	2.1	1.7	41.3	29.4	0.4	100.0	235
	Female	95.1	0.6	5,213	7.9	7.5	1.3	3.9	0.4	50.4	28.5	0.0	100.0	228
Governorates	Damascus	99.0	0.0	591	0.0	16.7	0.0	0.0	0.0	66.7	16.7	0.0	100.0	6
	Aleppo	95.0	0.7	2,284	9.1	11.1	1.0	4.0	1.0	32.3	41.4	0.0	100.0	99
	Rural-Dam	97.1	0.1	1,598	4.4	26.7	0.0	0.0	0.0	53.3	15.6	0.0	100.0	45
	Homs	94.1	0.4	1,032	0.0	14.0	0.0	0.0	0.0	75.4	10.5	0.0	100.0	57
	Hama	97.0	0.0	838	0.0	0.0	20.0	0.0	0.0	44.0	36.0	0.0	100.0	25
	Lattakia	99.3	0.0	440	0.0	0.0	0.0	0.0	0.0	33.3	66.7	0.0	100.0	3
	Idleb	94.3	1.0	927	0.0	0.0	2.3	9.1	0.0	52.3	34.1	2.3	100.0	44
	Hassake	86.2	1.3	668	12.0	7.2	0.0	6.0	1.2	51.8	21.7	0.0	100.0	83
	Deir Ezzor	94.1	2.1	626	20.8	20.8	0.0	0.0	0.0	25.0	33.3	0.0	100.0	24
	Tartous	99.1	0.0	447	0.0	0.0	0.0	0.0	0.0	25.0	75.0	0.0	100.0	4
	Raqqa	96.5	0.8	491	15.4	46.2	7.7	0.0	7.7	23.1	0.0	0.0	100.0	13
	Daraa	92.2	1.0	808	16.4	1.8	1.8	1.8	3.6	30.9	43.6	0.0	100.0	55
	Sweida	97.8	0.0	180	0.0	25.0	0.0	0.0	0.0	75.0	0.0	0.0	100.0	4
Quneitra	98.9	0.0	87	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0	1	
Urban_Rural	Urban	95.8	0.6	5,486	8.1	12.7	1.0	2.5	1.0	45.2	29.4	0.0	100.0	197
	Rural	94.6	0.6	5,531	7.9	9.8	2.6	3.4	1.1	46.2	28.6	0.4	100.0	266
Age	0-11 months	87.2	1.0	2,030	4.6	11.3	0.4	0.8	0.8	52.5	29.4	0.0	100.0	238
	12-23 months	95.8	0.8	2,083	13.9	9.7	2.8	5.6	1.4	34.7	30.6	1.4	100.0	72
	24-35 months	96.7	0.5	2,410	9.1	9.1	3.0	6.1	1.5	47.0	24.2	0.0	100.0	66
	36-47 months	97.5	0.3	2,609	14.0	14.0	3.5	5.3	1.8	29.8	31.6	0.0	100.0	57
	48-59 months	98.1	0.3	1,885	6.7	10.0	6.7	3.3	0.0	46.7	26.7	0.0	100.0	30
Mother's education	None	92.1	1.2	1,947	17.1	14.0	3.9	3.9	1.5	28.7	31.0	0.0	100.0	129
	Primary	94.0	0.6	4,164	5.7	6.2	1.3	4.0	0.9	50.2	31.3	0.4	100.0	227
	Secondary	97.2	0.3	3,961	2.0	19.2	1.0	0.0	1.0	55.6	21.2	0.0	100.0	99
	Higher institutions	99.2	0.2	608	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0	4
	University+	97.9	0.9	337	0.0	0.0	0.0	0.0	0.0	50.0	50.0	0.0	100.0	4
Wealth index quintiles	Poorest	91.6	0.9	2,342	12.1	12.1	4.0	4.6	0.6	42.0	24.7	0.0	100.0	174
	Second	94.3	0.6	2,536	6.2	10.8	0.8	2.3	2.3	46.2	30.8	0.8	100.0	130
	Middle	96.3	0.5	2,396	1.3	7.7	1.3	0.0	0.0	52.6	37.2	0.0	100.0	78
	Fourth	96.3	0.6	1,927	11.7	15.0	0.0	5.0	0.0	48.3	20.0	0.0	100.0	60
	Richest	98.6	0.3	1,816	0.0	4.8	0.0	0.0	4.8	42.9	47.6	0.0	100.0	21
Total		95.2	0.6	11,017	8.0	11.0	1.9	3.0	1.1	45.8	28.9	0.2	100.0	463

\* MICS Indicator 62



**Table CP.5: Early marriage and polygyny**  
**Percentage of women aged 15-49 in marriage or union before their 15th birthday, percentage of women aged 20-49 in**  
**marriage or union before their 18th birthday,**  
**percentage of women aged 15-19 currently married or in union, syria 2006**

		Percentage married before age 15 *	Number of women aged 15-49 years	Percentage married before age 18 *	Number of women aged 20-49 years	Percentage of women 15-19 years married**	Number of women aged 15-19 years	Number of women aged 15-49 currently married
Governorates	Damascus	3.1	2,213	15.3	1,776	11.2	437	1,181
	Aleppo	4.2	5,494	18.2	4,217	10.7	1,276	3,148
	Rural-Dam	4.8	3,370	24.9	2,664	14.9	706	2,071
	Homs	3.0	2,171	19.7	1,706	10.1	465	1,209
	Hama	3.5	1,920	18.2	1,455	8.2	465	964
	Lattakia	1.6	1,366	10.8	1,122	3.7	244	685
	Idleb	3.7	1,508	20.2	1,131	9.8	377	811
	Hassake	1.6	1,593	9.5	1,234	4.4	360	733
	Deir Ezzor	2.5	1,219	14.0	881	7.4	338	614
	Tartous	1.1	1,218	10.1	981	2.1	237	607
	Raqqa	3.4	1,069	13.9	783	3.8	286	523
	Daraa	5.2	1,246	26.2	912	18.0	334	713
	Sweida	2.2	492	16.6	415	5.2	77	279
Quneitra	2.0	147	23.2	112	11.4	35	81	
Urban_Rural	Urban	4.0	13,482	18.6	10,572	11.0	2,910	7,598
	Rural	2.7	11,544	16.7	8,818	8.3	2,726	6,019
Age	15-19	1.8	5,637	.	0	9.7	5,637	546
	20-24	2.5	4,944	13.3	4,944	.	0	1,811
	25-29	3.6	4,088	17.2	4,088	.	0	2,536
	30-34	3.9	3,250	18.8	3,250	.	0	2,533
	35-39	4.7	3,070	20.0	3,070	.	0	2,643
	40-44	5.6	2,430	20.9	2,430	.	0	2,139
	45-49	5.0	1,607	21.4	1,607	.	0	1,409
Mother's education	None	5.9	3,555	19.7	3,300	12.6	255	2,649
	Primary	5.3	8,102	23.4	6,428	15.7	1,673	4,734
	Secondary	2.1	10,177	18.3	6,728	7.3	3,448	4,850
	Higher institutions	0.5	1,674	2.3	1,576	2.0	98	887
	University+	0.0	1,519	1.3	1,357	0.0	162	497
Wealth index quintiles	Poorest	2.8	4,617	14.6	3,516	7.3	1,102	2,372
	Second	3.1	4,909	17.9	3,771	11.5	1,138	2,674
	Middle	3.9	5,186	19.7	3,952	12.6	1,234	2,858
	Fourth	4.0	4,521	20.3	3,547	10.7	974	2,577
	Richest	3.4	5,791	16.3	4,604	6.3	1,188	3,136
Total		3.4	25,026	17.7	19,389	9.7	5,637	13,618

\* MICS Indicator 67

\*\* MICS Indicator 68

\*\*\* MICS Indicator 70

**Table HA.3: Comprehensive knowledge of HIV/AIDS transmission**  
**Percentage of women aged 15-49 years who have comprehensive knowledge of**  
**HIV/AIDS transmission, syria 2006**

		Knows 2 ways to prevent HIV transmission	Number of women
Governorates	Damascus	28.3	2,213
	Aleppo	35.4	5,494
	Rural-Dam	34.4	3,370
	Homs	41.4	2,171
	Hama	35.9	1,920
	Lattakia	39.8	1,366
	Idleb	18.0	1,508
	Hassake	20.6	1,593
	Deir Ezzor	8.3	1,219
	Tartous	57.6	1,218
	Raqqa	19.2	1,069
	Daraa	27.9	1,246
	Sweida	30.7	492
	Quneitra	21.8	147
Urban_Rural	Urban	34.6	13,482
	Rural	28.9	11,544
Age	15-19	25.6	5,637
	20-24	33.1	4,944
	15-24	29.1	10,581
	25-29	36.1	4,088
	30-34	36.2	3,250
	35-39	33.6	3,070
	40-44	32.3	2,430
	45-49	28.1	1,607
Mother's education	None	11.5	3,555
	Primary	25.7	8,102
	Secondary	38.2	10,177
	Higher institutions	49.1	1,674
	University+	52.6	1,519
Wealth index quintiles	Poorest	19.0	4,617
	Second	27.6	4,909
	Middle	31.5	5,186
	Fourth	36.1	4,521
	Richest	43.2	5,791
Total		32.0	25,026

\* MICS Indicator 82; MDG Indicator 19b