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1993

National Family Health Survey

(MCH and Family Planning)

Arunachal Pradesh

1993

Summary Report

International Institute for Population Sciences
Bombay

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BEST AVAILABLE

Additional information on the National Family Health Survey may be obtained from the International Institute for Population Sciences, Govandi Station Road, Deonar, Bombay - 400 088 (Telephone 5564883, 5563254, 5563255, 5563256; Fax 5563257; E-mail iips.nfhs@access.net.in)

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The National Family Health Survey (NFHS) is a nationally representative survey of ever-married women age 13-49. The NFHS covered the population of 24 states and the National Capital Territory of Delhi (the erstwhile Union Territory of Delhi) to provide a source of demographic and health data for interstate comparisons. The primary objective of the NFHS was to provide national-level and state-level data on fertility, nuptiality, family size preferences, knowledge and practice of family planning, the potential demand for contraception, the level of unwanted fertility, utilization of antenatal services, breastfeeding and food supplementation practices, child nutrition and health, vaccinations, and infant and child mortality.

In Arunachal Pradesh, a total of 961 households were covered, and the interviewers collected information from 882 ever-married women age 13-49 (130 in urban areas and 752 in rural areas). The fieldwork was conducted between May and June, 1993. The survey was carried out as a collaborative project of the Ministry of Health and Family Welfare, Government of India, New Delhi; the International Institute for Population Sciences, Bombay; MODE Research Private Limited, Calcutta; the East-West Centre/Macro International, USA; and the United States Agency for International Development (USAID), New Delhi. Funding for the survey was provided by USAID.

- Arunachal Pradesh, with its population of 864, 558 in 1991, is one of the smallest states of India. The state consists primarily of tribal population and 76 percent of household heads belong to scheduled tribes. Thirty-seven percent of the household heads are Hindu and 15 percent are Christian. Almost half of the household heads practice “other” religions including Animism.
- Twelve percent of the surveyed population live in urban areas. The age structure of the population indicates the prevailing high fertility in the state; 43 percent of the population are under age 15. Persons age 65 or older constitute 3 percent of the population. The sex ratio of the *de jure* population is 973 females per 1,000 males, which is higher than the sex ratio of 944 observed for the country as a whole.
- In the survey households, 58 percent of all females age 6 and above are illiterate, and only 6 percent have a secondary education or higher. On the other hand, 62 percent of males age 6 and above are literate. However, 71 percent of children age 6-14 (77 percent of males and 65 percent of females) attend school. Sixty-eight percent of households get piped water for drinking, 63 percent of households have electricity, 74 percent have a sanitation facility, and 81 percent live in *kachcha* houses.

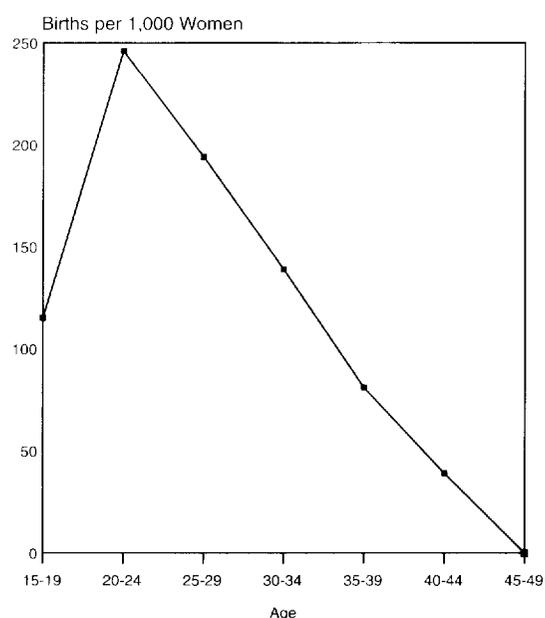
Fertility Levels and Trends

- The fertility rate in Arunachal Pradesh has declined only slightly, and the fertility rate is above the national rate. Women in their forties have had an average of almost five children, and women who are currently in their childbearing years can be expected to have over 4 children, on average, during their lifetime if current fertility levels prevail. The NFHS total fertility rate (TFR) for women in the age group 15-49 for the state as a whole for 1990-92 was 4.3 children per woman, 25 percent above the national rate. The NFHS estimates a crude birth rate of 34.6 per 1,000 population for the period 1990-92.

Arunachal Pradesh has a total fertility rate of 4.3 children per woman, 25 percent above the national average.

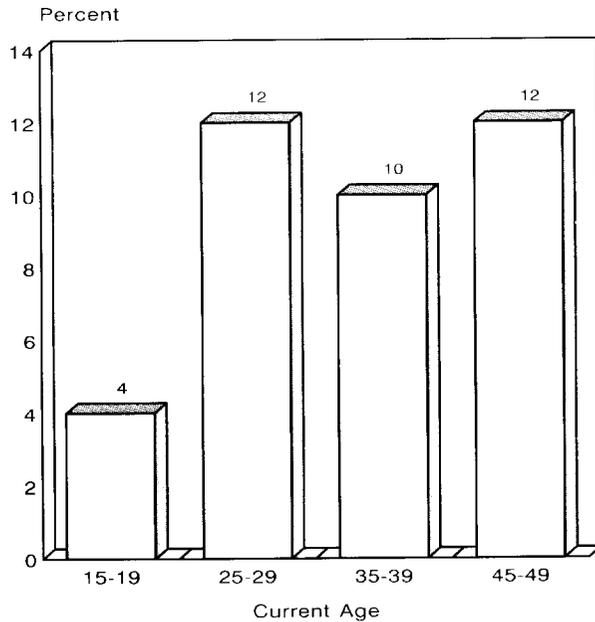
- Fertility peaks in the 20-24 age group, reflecting a pattern of early marriage and childbearing. Fertility rates decline sharply after age 35, reaching very low levels for women in their forties. Fertility is highly concentrated in the 15-34 age group, with 82 percent of total fertility due to births to women in the age group 15-34. Current fertility in Arunachal Pradesh is characterized by a fair amount of early childbearing; 14 percent of TFR is accounted for by births to women in the age group 15-19.

Figure 1
Age-Specific Fertility Rates



Note: Rates are for the three years before the survey (1990-92)

Figure 2
Percentage of Women Married before Age 15, by
Current Age



- The median interval between births is 30 months. Nine percent of births occur within 18 months of the previous birth and 29 percent of all births occur within 24 months. These are high-risk births with a relatively low probability of survival.

Marriage

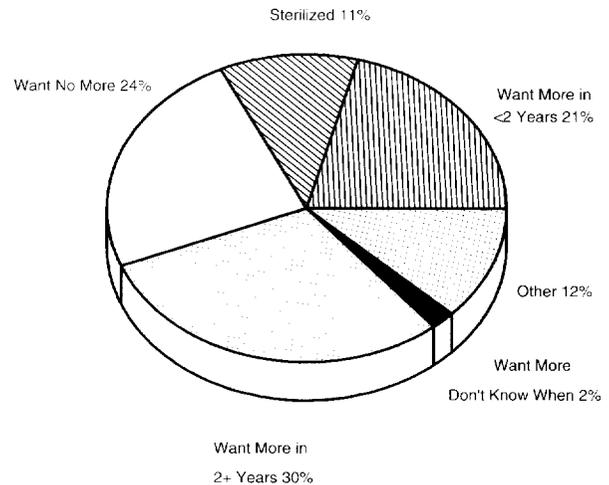
- Marriage is nearly universal in Arunachal Pradesh and usually takes place at a young age. At age 15-19, 29 percent of women are married, and at age 20-24, 77 percent of women are married.
- Marriage at very young ages is declining over time. The proportion marrying before age 15 declined from 12 percent in the 45-49 age cohort to 4 percent in the 15-19 age cohort. The median age at marriage is 18 years for women age 20-49. The single mean age at marriage is 25 years for men and 20 years for women.
- The median age at first marriage increases with the level of education of women in all age groups. For example, it increases from 17 years for women age 25-29 who are illiterate to 22 years for those having completed high school.
- It is noteworthy that more than 14 years after the amendment of the Child Marriage Restraint Act, which stipulated a minimum age at marriage of 18 years for females and 21 years for males, only 4 percent of ever-married women know the minimum age at marriage for males and 19 percent know the minimum age for females. Forty-four percent of women age 20-24 married before the legal minimum age for females of 18.

Forty-four percent of women age 20-24 married before age 18.

Fertility Preferences

- Twenty-four percent of women say they do not want any more children, and 11 percent of women (or their husbands) are sterilized, so that they cannot have any more children. These two groups together constitute 35 percent of all currently married women in Arunachal Pradesh. Most women (53 percent) say that they want another child sometime in the future, and 57 percent of these women (30 percent of all women) say they would like to wait at least 2 years before having the next child. Overall, 65 percent of women want to either space their next birth or stop having children altogether.
- The desire for more children declines as the number of children increases. Eighty-three percent of women with one living child say they want more children. The proportion who want another child drops to 64 percent for women with two living children and 51 percent for those with three living children.
- The desire for spacing children is very strong for women who have fewer than three children. Twenty-four percent of women with no children say that they would like to wait at least two years before having their first child, and this percentage increases to 52 percent of women with one living child and is 43 percent for women with 2 living children. Since 48 percent of all women have fewer than three living children, the strong expressed desire for

Figure 3
Fertility Preference Among Currently Married Women Age 13-49



spacing children among these women cannot be ignored.

The desire for spacing children is very strong for women who have fewer than three children.

- Among women who want an additional child, far more express a preference that the next child be a son than a daughter. Sixty-three percent say they want a son, 15 percent express a desire for a daughter, and 23 percent say that the sex of the child does not matter (12 percent) or that it is up to God (11 percent).
- The ideal number of children is quite large in Arunachal Pradesh, an average of five children among currently married women giving numeric response to the question on ideal family size. Only 14 percent of women consider 2-child family as ideal, and 61 percent consider four or more children as ideal. The average ideal family in Arunachal Pradesh consists of 3 sons and 2 daughters.

The ideal family size for married women is 4.7 children.

- The mean ideal number of children is smaller in urban (3.6) than rural (4.9) areas. The increase in the level of education of ever-married women reduces the ideal number of children considerably from 5 for illiterate women to 3 for those who had completed at least a high school education.

Knowledge of Family Planning Methods

- Awareness of contraceptive methods is fairly widespread among women in Arunachal Pradesh. Seventy-eight percent of currently married women know at least one method of contraception, and 70 percent know where to obtain a modern method. Knowledge about female sterilization is much higher than about any other methods. Seventy-five percent of women know about female sterilization, followed by pills (55 percent) and IUDs (53 percent). Male sterilization and condoms are known to 48 and 40 percent of currently married women, respectively. Overall, 27 percent of women know at least one traditional method of family planning.

Female sterilization is more widely known than other methods of family planning, as in most Indian states.

- The knowledge of modern contraceptive methods is higher among younger women age 15-24 than among older women, and much higher among urban (94 percent) than rural (75 percent) women. Contraceptive knowledge increases with the level of education. Whereas 70 percent of illiterate women know any modern method of contraception, 98 percent of women who have completed at least high school know any modern method.

Figure 4
Knowledge and Use of Family Planning
(Currently Married Women Age 13-49)

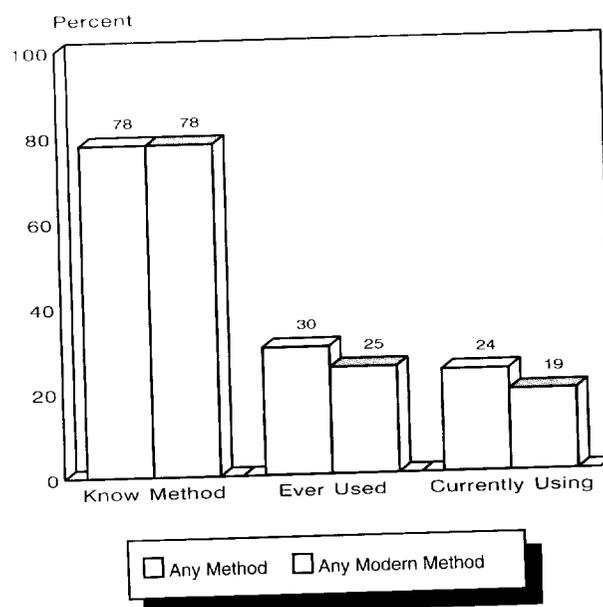
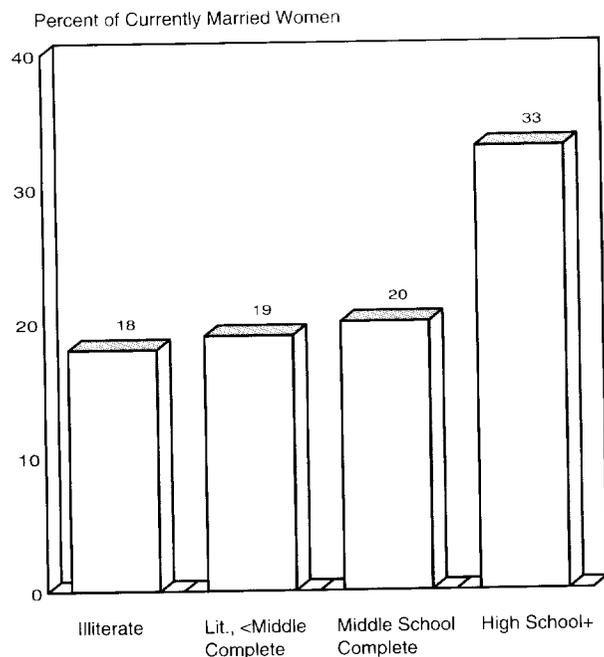


Figure 5
Current Use of Modern Contraceptive Methods
by Education



Contraceptive Use

- In Arunachal Pradesh, 30 percent of currently married women have ever used any contraception. Any modern method has been used by 25 percent and any traditional method by 9 percent. The rate of current use of family planning among currently married women is only 24 percent, most of whom use modern methods. Female sterilization is the most popular contraceptive method as in most Indian states but in Arunachal Pradesh it is used by only 10 percent of women. The IUD is used by 5 percent, the pill by 3 percent and the condom by 1 percent of currently married women.

Only 24 percent of married women currently use family planning.

- Current use of contraception is 40 percent in urban areas and 21 percent in rural areas. Except for injections (the use of which is negligible in the state), current use of every single modern method of family planning is higher in urban areas than in rural areas.
- A strong positive relationship exists between education and the level of current use of contraceptives. Differentials in current use by education are most evident between illiterate women (20 percent) and women who have completed at least high school (47 percent). The use of contraception is positively related to the number of living children a woman has, and increases from 4 percent of women with no living children to 25-26 percent of women with 2 or 3 living children, and further to 35 percent of women with 4 or more children.

- The public sector (predominantly government/municipal hospitals and Primary Health Centres) supplies 86 percent of all users of modern methods, and the private medical sector (including private hospitals or clinics, private doctors and pharmacies/drugstores) supplies 13 percent of users. Only 1 percent of users obtain their methods from other sources.

Attitudes Toward Family Planning

- Fifty-two percent of currently married, nonsterilized women who know of a contraceptive method say that both they and their husbands approve of family planning use. Fifty-three percent of women have discussed family planning with their husbands during the past year.
- Only 23 percent of currently married nonusers say that they will use family planning in the future and another 17 percent are not sure about their intentions. Sixty percent of nonusers say that they do not intend to use family planning in the future. Intentions to use family planning in the future are low for all current nonusers, regardless of their number of children. Almost two-thirds of the nonusers who do not intend to use family planning in the future say they do not intend to use because they want more children. This reason was given by 82 percent of women under age 30 and 48 percent of women age 30 and over.
- Among currently married women who are not using contraception, but who intend to use in the future, 39 percent prefer modern spacing methods (mostly the pill) and 45 percent prefer female sterilization.

Figure 6
Sources of Family Planning Among Current Users of Modern Contraceptive Methods

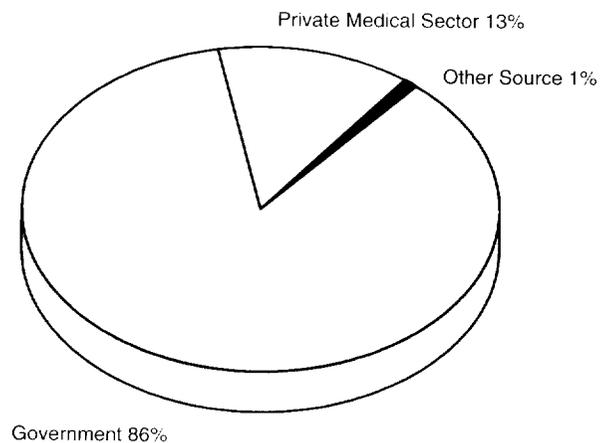
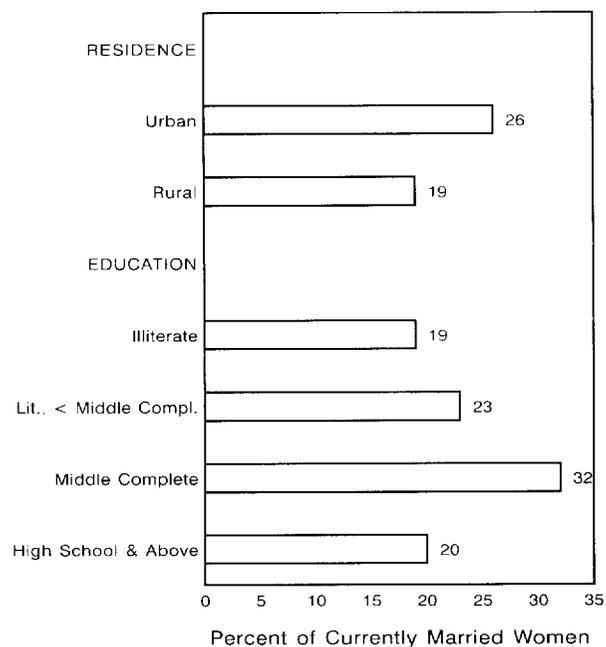


Figure 7
Unmet Need for Family Planning by Selected Characteristics



Exposure to Family Planning Messages

- The effort to disseminate family planning information through the electronic mass media has succeeded in reaching only 30 percent of ever-married women in Arunachal Pradesh. Forty-nine percent of women find media messages on family planning acceptable. However, only 42 percent of households own a radio and 19 percent own a television, making it difficult to greatly expand the use of the electronic media for dissemination of family planning messages in Arunachal Pradesh.

Need for Family Planning Services

- Twenty percent of currently married women in Arunachal Pradesh have an unmet need for family planning, that is, they are not using contraception even though they do not want any more children or want to wait at least two years before having their next child. The unmet need for spacing is greater than the unmet need for limiting, 13 percent compared with 7 percent. If all of the women with an unmet need were to use family planning, the contraceptive prevalence rate would increase from 24 percent to 44 percent of married women.

Twenty percent of married women have an unmet need for family planning.

Infant and Child Mortality

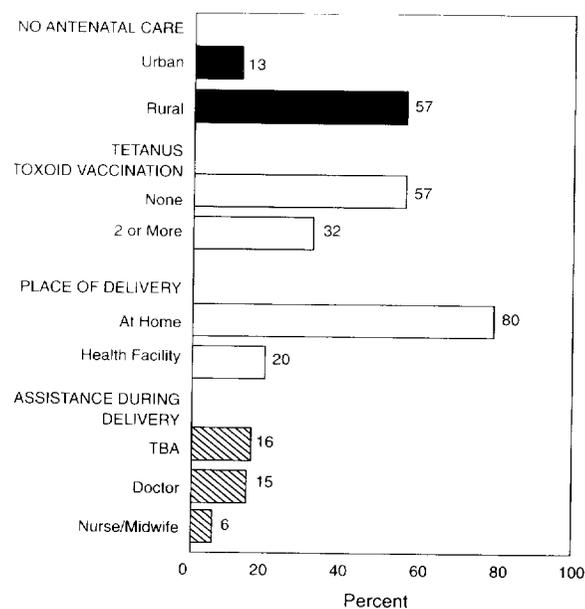
- In Arunachal Pradesh, the infant mortality rate is 40 per 1,000 live births during 1988-92 (0-4 years prior to the survey). The child mortality rate, which is the probability of dying between the first and fifth birthday, is 33 per 1,000. In Arunachal Pradesh, 1 in every 14 children dies before reaching age five.

One in every fourteen children dies before reaching age five.

Antenatal Care and Assistance at Delivery

- Utilization of both antenatal care and delivery services is poor in Arunachal Pradesh. A sizeable proportion of women receive no antenatal care. During the four years preceding the survey, mothers received antenatal care for only 49 percent of births. Women received two tetanus toxoid injections for only 32 percent of births and iron/folic acid tablets for 45 percent of births.
- There are substantial differences in antenatal care by residence and by education. Mothers received antenatal care for 87 percent of births in urban areas and 43 percent of births in rural areas. The proportion receiving antenatal care ranges from 33 percent for births to illiterate mothers to 100 percent for births to mothers with at least a high school education.

Figure 8
Antenatal Care, Place of Delivery, and Assistance During Delivery



- Only one-fifth of births during the four years preceding the survey were delivered in health facilities, and 80 percent were delivered at home. Overall, only 21 percent of deliveries were attended by doctors or nurse/midwives and another 16 percent were attended by a Traditional Birth Attendant. Fifty-seven percent were attended only by friends, relatives or neighbours.

Eighty percent of babies are delivered at home and only 21 percent of deliveries are assisted by a doctor or a nurse/midwife.

Breastfeeding and Supplementation

- Breastfeeding is nearly universal in Arunachal Pradesh, with 97 percent of all children born in the four years preceding the survey having been breastfed. On average, children are breastfed for about 28 months.
- It is recommended that the first breast milk should be given to children because it contains colostrum, which provides natural immunity and important nutrients to children. Whereas in most states, the majority of women squeeze the first milk from the breast, the practice is less evident in Arunachal Pradesh. Forty-four percent of mothers in Arunachal Pradesh squeezed the first breast milk from the breast before feeding their infants. However, 41 percent of last-born children were breastfed within one hour of birth and the majority (80 percent) were breastfed within one day of birth.

- Exclusive breastfeeding (which is recommended for all children through age 4-6 months), is quite common for very young children as 74 percent of children under four months are given only breast milk (i.e., are exclusively breastfed). The percentage of babies who are exclusively breastfed drops off rapidly after the first few months of life, to less than 6 percent of children age 16 months and over.
- At 6-9 months of age, infants need adequate and appropriate complementary solid foods in addition to breast milk in order to prevent undernutrition. In Arunachal Pradesh, only 36 percent of infants age 6-9 months receive solid or mushy food in addition to breast milk.

Only 36 percent of children are given solid/mushy food in addition to breast milk at the recommended age of 6-9 months.

- The use of feeding bottles with nipples exposes children to an increased risk of developing diarrhoea and other diseases, because it is often difficult to sterilize the nipples properly. The use of feeding bottles for children is not very common in Arunachal Pradesh. Only 11 percent of infants age 0-3 months use bottles and the rate decreases thereafter.

Vaccination of Children

- The Universal Immunization Programme (UIP) aims to vaccinate all children against

Figure 9
Vaccination Coverage Among Children Age 12-23 Months

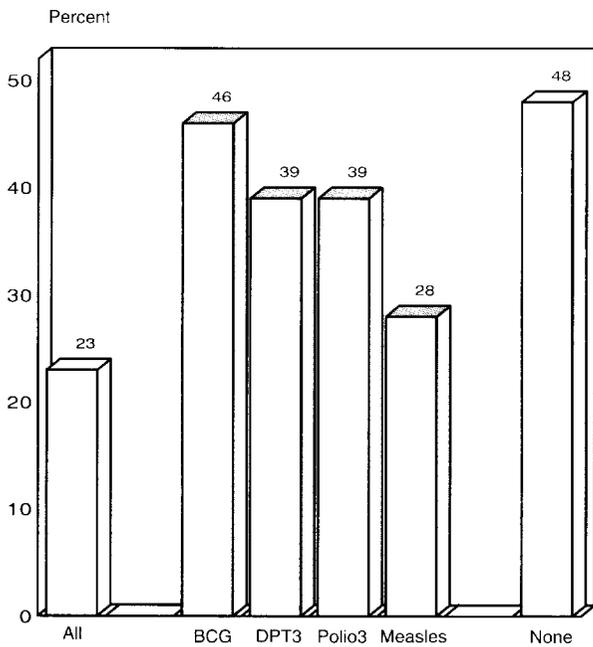
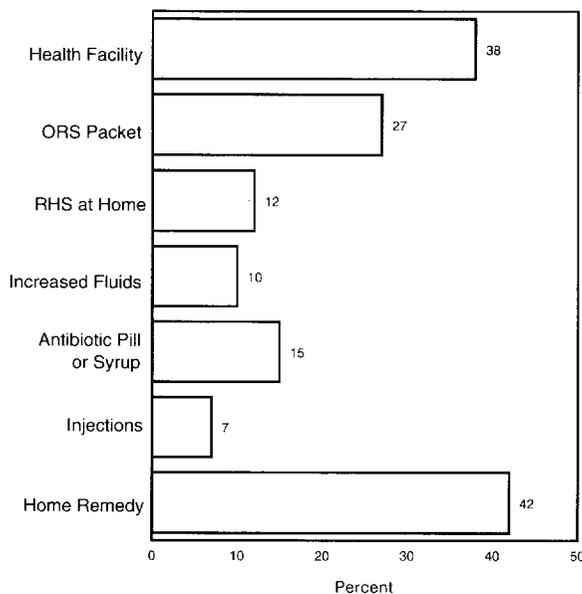


Figure 10
Treatment of Diarrhoea in the Two Weeks Preceding the Survey (Children Under 4)



six preventable diseases, namely tuberculosis, diphtheria, whooping cough (pertussis), tetanus, poliomyelitis and measles. The UIP has met with only limited success in Arunachal Pradesh. Among children age 12-23 months, only 23 percent are fully vaccinated against the six common childhood diseases, and 48 percent have not received any vaccinations. Forty-six percent have been vaccinated against tuberculosis (BCG), 39 percent have received all three doses of DPT and polio vaccines and 28 percent have been vaccinated against measles.

Only 23 percent of young children are fully vaccinated and 48 percent have not received any vaccination at all.

Child Morbidity and Treatment Patterns

- During the two weeks preceding the survey, 9 percent of children under age four had symptoms of acute respiratory infection (cough accompanied by fast breathing), 20 percent were sick with fever, and 18 percent had diarrhoea. For each medical condition, only 38-50 percent of children were taken to a health facility or provider for treatment.
- Knowledge and use of Oral Rehydration Salt (ORS) packets for the treatment of diarrhoea are not widespread. Overall, 56 percent of mothers are not familiar with ORS and 72 percent have never used it. Moreover, only one-third of young children with recent episodes of diarrhoea were treated with ORS or with a recommended home oral rehydration fluid.

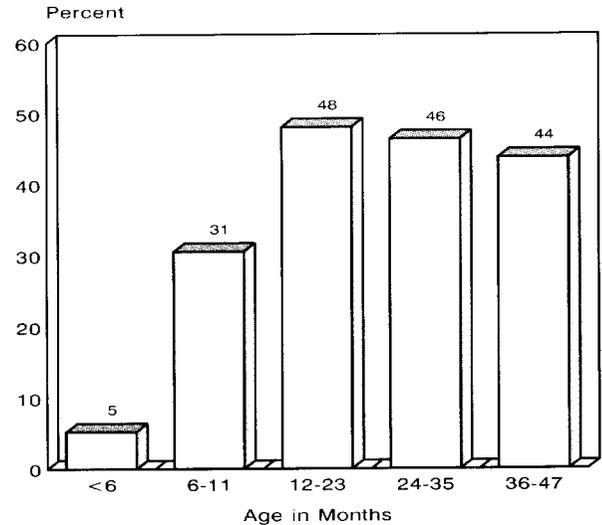
Nutritional Status of Children

- In the NFHS, both weight and height measurements were obtained for each child under four years of age in order to assess the nutritional status. Based on these measures, both chronic and acute undernutrition are high in Arunachal Pradesh. Two-fifths of all children under age four are underweight and more than half (54 percent) are stunted. Moreover, 15-28 percent of children are *severely* undernourished according to the weight-for-age and height-for-age measures. One in every nine children is excessively thin (wasted).

Two-fifths of all children are underweight and more than half are stunted.

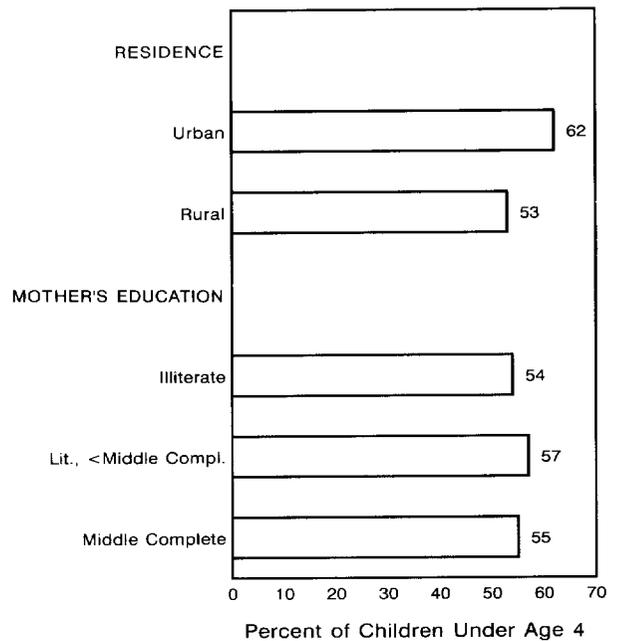
- Undernutrition varies substantially by the age of the child, being lowest in the first six months of life when the majority of children are fully breastfed. Urban children are slightly more likely to be stunted than the rural children. Variation by the sex of the child, length of previous birth interval, order of birth, and education of the mother is very modest.

Figure 11
Percentage of Children Under Age Four Who Are Underweight, by Age



Note: Percentage of children more than 2 standard deviations below the median of the International Reference Population

Figure 12
Chronic Undernutrition (Stunting) by Selected Characteristics



- Knowledge of the existence of Acquired Immune Deficiency Syndrome (AIDS) is limited to only 16 percent of ever-married women age 13-49. Most women hear about AIDS from the television (60 percent) and the radio (46 percent).
- Among women who have heard of AIDS, the percentage with misconceptions about different ways of getting AIDS ranges from 26 percent who think that it can be contracted from shaking hands with someone with AIDS to 57 percent who think that AIDS can be contracted from kissing someone with AIDS or from mosquito, flea and bedbug bites. Only 26 percent of women who have heard of AIDS erroneously think it is curable, and 17 percent think an AIDS vaccine exists. Forty-eight percent correctly think that AIDS can be avoided by using condoms during intercourse and 25 percent know that it can be prevented by practising safe sex.

Fertility and Family Planning

- The fertility level in Arunachal Pradesh is higher than the national average. According to the NFHS estimate, for the three-year period of 1990-92, the total fertility rate (TFR) in the state is 4.3 children per woman and the crude birth rate is 34.6 per 1,000 population. Only 24 percent of women practice family planning and sterilization is the most widely used method. More than half (60 percent) of current nonusers say they do not intend to use contraception at any time in the future. The lack of intentions to use family planning suggests that it will be difficult for the family planning programme to be successful without a strong Information, Education and Communication (IEC) component to motivate couples to use contraception. The accessibility and quality of service also need to be improved to overcome low motivation and to encourage continued use among contraceptive acceptors.
- Twenty percent of women have an unmet need for family planning. If all of the women who say they want to space or limit their births were to use family planning, the contraceptive prevalence rate would increase from 24 percent to 44 percent of married women.

Maternal and Child Health

- The maternal and child health care programme in Arunachal Pradesh has not been very effective. No antenatal care was given to women delivering 51 percent of live births during the four years preceding the survey. Women received at least two tetanus toxoid

injections for only 32 percent of live births. Most babies (80 percent) are delivered at home and more than half (57 percent) the deliveries were attended by only untrained persons. The percentage of children fully vaccinated is very low at 23 percent, and almost half of children have received no vaccinations at all. The family welfare programme could be improved by providing women and children with much more access to antenatal care, health services such as vaccinations and access to institutional medical care by trained health professionals. Women should be informed of the services available and encouraged to use them.

- Unlike the other northeastern states the rate of female illiteracy is high. Literacy campaigns among women age 15-49 are needed to give women the basic skills and knowledge necessary to understand the importance of health care and fully avail themselves of services provided.
- Knowledge of AIDS is present among only 16 percent of ever-married women. It is therefore, necessary to undertake efforts to increase the awareness of AIDS and accompanying health hazards with proper knowledge about preventing the onslaught of the disease.
- Arunachal Pradesh is faring well on most of the recommended infant feeding practices. Breastfeeding is nearly universal and of fairly longer duration. For most children, breastfeeding is initiated within 24 hours of birth, and the practice of squeezing the breast milk from the breast before breastfeeding the child is not common. It is important that infants should be exclusively breastfed until age 4-6 months, and nearly three-fourths of infants under age 4 months are given

exclusive breastfeeding in Arunachal Pradesh. However, inadequate nutrition is a problem in Arunachal Pradesh. Two-fifths of children under 4 years are underweight and more than half are stunted. Part of the reason for the high prevalence of undernutrition among children is the late introduction of solid/mushy food in the child's diet. Only 36 percent of children 6-9 months of age receive both breast milk and solid foods as recommended.

Achievement of Programme Objectives

- The major national objectives of the Child Survival and Safe Motherhood (CSSM) programme adopted in the Eighth Five Year Plan (1992-97) are to achieve an infant mortality rate of 50 per 1,000 live births (the infant mortality rate in Arunachal Pradesh during 1988-92 was 40 per 1,000 live births); an under-five mortality rate of 70 (under-five mortality in Arunachal Pradesh during 1988-92 was 72); a crude death rate of 9 per 1,000 population (the crude death rate in Arunachal Pradesh was 8 per 1,000 population during 1991-92); and a crude birth rate of 27 per 1,000 (the crude birth rate in Arunachal Pradesh was 35 during 1990-92). The national targets for service coverage include 100 percent coverage of antenatal care (women in Arunachal Pradesh received antenatal care for only 49 percent of their pregnancies in 1988-92); 100 percent of deliveries by trained attendants (only 21 percent of deliveries were attended by a doctor or a nurse/midwife in 1988-92), and a couple protection rate of 75 percent among couples in the reproductive ages (the contraceptive prevalence rate in Arunachal Pradesh was only 24 percent in 1992-93).
- The state is doing poorly in the provision and utilization of health care services, including antenatal and delivery care and immunization service, as well as the family planning services. Considerable efforts are needed to provide maternal and child health services as well as family planning services for improving the quality of life of people of Arunachal Pradesh.

1991 Population Data

Office of the Registrar General and Census Commissioner

Total population (thousands)	865
Percent urban	12.8
Percent scheduled caste	0.5
Percent scheduled tribe	63.7
Decadal population growth rate (1981-91)	36.8

National Family Health Survey, 1993

Sample Population

Ever-married women age 13-49	882
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Background Characteristics of Women Interviewed

Percent urban	14.7
Percent illiterate	69.5
Percent attended secondary school or higher	7.3
Percent Hindu	34.9
Percent Christian	17.9
Percent working	44.9

Marriage and Other Fertility Determinants

Percent of women age 15-49 currently married	72.0
Percent of women age 15-49 ever married	76.0
Singulate mean age at marriage for females (in years)	20.0
Singulate mean age at marriage for males (in years)	24.9
Percent of women married to first cousin ¹	2.9
Median age at marriage among women age 25-49	18.2
Median months of breastfeeding ²	27.8
Median months of postpartum amenorrhoea ²	9.3
Median months of postpartum abstinence ²	1.8

Fertility

Total fertility rate ³	4.3
Mean number of children ever born to women age 40-49	4.9

Desire for Children

Percent of currently married women who:	
Want no more children or are sterilized	34.7
Want to delay their next birth at least 2 years	30.3
Mean ideal number of children ⁴	4.7
Percent of births in the last 4 years which were:	
Unwanted	5.7
Mistimed	9.3

Knowledge and Use of Family Planning

Percent of currently married women:	
Knowing any method	77.7
Knowing a modern method	77.7
Knowing a source for a modern method	69.7
Ever used any method	29.5
Currently using any method	23.6

Percent of currently married women using:	
Oral	3.2
IUD	4.6
Injectors	0.1
Condoms	0.7
Female sterilization	10.3
Male sterilization	0.4
Periodic abstinence	3.8
Withdrawal	0.5
Other method	0.0

Mortality and Health

Infant mortality rate ⁵	40.0
Under-five mortality rate ⁵	72.0
Percent of births ⁶ whose mothers:	
Received antenatal care from a doctor	47.6
or other health professional	47.6
Received 2 or more tetanus toxoid injections	31.9
Percent of births ⁶ whose mothers were assisted at delivery by:	
Doctor	15.2
Nurse/midwife	6.1
Traditional birth attendant	16.2
Percent of children 0-3 months who are breastfeeding	100.0
Percent of children 12-15 months who are breastfeeding	98.0
Percent of children 12-23 months who received ⁷ :	
BCG	46.3
DPT (three doses)	38.8
Polio (three doses)	38.8
Measles	27.5
All vaccinations	22.5
Percent of children under 4 years ⁸ who:	
Had diarrhoea in the 2 weeks preceding the survey	17.6
Had a cough accompanied by rapid breathing	8.7
in the 2 weeks preceding the survey	8.7
Had a fever in the 2 weeks preceding the survey	20.1
Are acutely undernourished (underweight) ⁹	39.7
Are chronically undernourished (stunted) ⁹	53.9
Are acutely undernourished (wasted) ⁹	11.2

¹ Based on ever-married women

² Current status estimate based on births during the 36 months preceding the survey (48 months for breastfeeding)

³ Based on births to women age 15-49 during the 3 years preceding the survey

⁴ Based on ever-married women age 13-49, excluding women giving non-numeric responses

⁵ For the 5 years preceding the survey (1988-92)

⁶ For births in the period 1-47 months preceding the survey

⁷ Based on information from vaccination cards and mothers' reports

⁸ Children born 1-47 months preceding the survey

⁹ Underweight assessed by weight-for-age, stunting assessed by height-for-age, wasting assessed by weight-for-height; undernourished children are those more than 2 standard deviations below the median of the International Reference Population, recommended by the World Health Organization.

