

*Monitoring the Situation of  
Children and Women*



Multiple Indicator Cluster Survey,  
Palestinian Refugee Camps, Lebanon  
2006

FINAL REPORT  
May 2007

The Palestinian Central Bureau of Statistics  
and Natural Resources



*UNITED NATIONS  
CHILDREN'S FUND*



Pan-Arab Project for Family Health  
League of Arab States



# Monitoring the Situation of Women and Children

## Multiple Indicator Cluster Survey, Palestinian Refugee Camps, Lebanon

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**The Palestinian Central Bureau of Statistics and Natural  
Resources**

**UNICEF**  
**United Nations Children's Fund**

**Pan-Arab Project for Family Health**  
**League of the Arab States**

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## Summary Table of Findings

Multiple Indicator Cluster Surveys (MICS), Palestinian refugee camps and groups, Lebanon, 2006

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value
<b>CHILD MORTALITY</b>				
Child mortality	1	13	Under-five mortality rate	31 per thousand
	2	14	Infant mortality rate	26 per thousand
<b>NUTRITION</b>				
Nutritional status	6	4	Underweight prevalence	4.6 percent
	7		Stunting prevalence	19.8 percent
	8		Wasting prevalence	4.6 percent
Breastfeeding	45		Timely initiation of breastfeeding	63.1 percent
	15		Exclusive breastfeeding rate 0-5 months	18 Percent
	16		Continued breastfeeding rate at 12-15 months	48 Percent
	17		Timely complementary feeding rate 6-9 months	52.8 percent
	18		Children aged 6-11 months who received breast milk and minimum recommended complementary feeding	29.2 percent
Salt iodization	41		Percent of households using salt containing >15 PPM of iodine	99.9 percent
Vitamin A	42		Percent of children aged 6-59 months who received Vitamin A supplementation in last 6 months prior to survey	19,8 percent
	43		Percent of women aged 15-49 who received vitamin A supplementation within 8 months of giving birth	35.3 percent
Low birth weight	9		Percent of live birth weighing less than 2500 grams at birth	8.7 percent
	10		Percent of live births weighed at birth	98.0 percent
<b>CHILD HEALTH</b>				
Immunization	25		Tuberculosis immunization	97.3 percent
	26		Polio immunization 1	98.8 percent
			Polio immunization 2	98.5 percent
			Polio immunization 3	97.8 percent

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value
	27		DPT immunization 1	98.5 percent
			DPT immunization 2	98.3 percent
			DPT immunization 3	97.3 percent
	28	15	Measles immunization coverage	97.5 percent
	31		Fully immunized children	93.1 percent
Tetanus toxoid	32		Percent of women who gave birth within the last two years prior to survey who were immunized against tetanus	34.6 percent
Care of illness	33		Use of oral rehydration therapy (ORT) for children with diarrhoea	79.6 percent
	34		Home management of diarrhoea	11.1 percent
	35		Received ORT or increased fluids, and continued feeding	28.9 percent
	23		Percent of children who had respiratory infection and received treatment at a healthcare centre	44.5 percent
	22		Percent of children who had respiratory infection and were treated using antibiotics	67.2 percent
Solid fuel use	24	29	Percent of households using solid fuel	0.1 percent
<b>ENVIRONMENT</b>				
Water and Sanitation	11	30	Percent of households using improved drinking water sources	91.2 percent
	13		Water treatment at home	5.5 percent
	12	31	Use of improved sanitation facilities	99.9 percent
<b>REPRODUCTIVE HEALTH</b>				
Contraception	21	19c	Percent of married women who use a contraceptive	68.3 percent
Maternal and newborn health	20		Percent of women who received antenatal care from a skilled person	90.5 percent
	44		Content of antenatal care	
			Blood test taken	95.3 percent
			Blood pressure measured	96.5 percent

Topic	MICS Indicator Number	MDG Indicator Number	Indicator	Value
			Urine specimen taken	94.7 percent
			Weight measured	98.5 percent
	4	17	Percent of women who had skilled attendant at their delivery	99.3 percent
	5		Percent of women who gave birth at a health institution	97.7 percent
Maternal mortality	3	16	Maternal mortality ratio	51 per 100,000
<b>CHILD DEVELOPMENT</b>				
Child development	46		Percent of children whose family members engage in one or more of the activities that support learning and prepare for school	64.5 percent
	47		Percent of children whose par engage in one or more of the activities that support learning and prepare for school	6.0 percent
	48		Percent of children who are supported to learn by means of children's books	21.4 percent
	49		Percent of children who are supported to learn by means of non-children's books	17.5 percent
	50		Percent of children who have 3 toys or more	31.0 percent
	51		Percent of children who were left in the care of children	18.3 percent

<b>Topic</b>	<b>MICS Indicator Number</b>	<b>MDG Indicator Number</b>	<b>Indicator</b>	<b>Value</b>
<b>EDUCATION</b>				
Education	52		Percent of children aged 3-4 years who attend pre-school	61.6 percent
	53		Percent of children attending grade 1 who attended kindergarten	92.3 percent
	54		Net intake rate in primary education	73.5 percent
	55	6	Net primary school attendance rate	94.7 percent
	56		Net secondary school attendance rate	63.4 percent
	57	7	Children reaching grade five	97.5 percent
	58		Transition rate to secondary school	73.9 percent
	59	7b	Primary completion rate	37.4 percent
	61	9	Gender parity index primary school	1.00 (ratio)
Literacy	60	8	Adult literacy rate	88.0 percent
<b>CHILD PROTECTION</b>				
Birth registration	62		Birth registration	98.4 percent
Child labour	71		Child labour	1.5 percent
	72		Labourer students	67.6 percent
	73		Student labourers	1.1 percent
Early marriage	67		Percent of women who were first married below the age of 18	32.6 percent
		68	Young women aged 15-19 currently married	4.7 percent

<b>Topic</b>	<b>MICS Indicator Number</b>	<b>MDG Indicator Number</b>	<b>Indicator</b>	<b>Value</b>
<i>HIV/AIDS, AND ORPHANED</i>				
HIV/AIDS knowledge and attitudes	82	19b	Comprehensive knowledge about HIV prevention among young people	19.8 percent
	89		Women who know three ways how HIV can be transmitted from mother to child	45.1 percent
	86		Women who do not approve discriminating attitude towards people with HIV/AIDS	19.7 percent
	87		Women who know where to be tested for HIV	26.6 percent
Support to orphaned	75		Percent of children with at least one dead parent	3.8 percent
	78		Children's living with only one of their parents	0.1 percent

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## **Foreword**

Humans are the target of any developmental process. The Multiple Indicator Cluster Survey, that was conducted by the Central Bureau of Statistics and Natural Resources (PCBS) in collaboration with UNICEF Lebanon Office and the Relief and Works Agency for Palestine Refugees (UNRWA), is a step in the right direction.

This report is the fruit of the cooperation of the implementing and participating agencies with the sponsoring agencies; namely the UNICEF and the Pan-Arab Project for Family Health (PAPFAM). This survey provides detailed data for the health, environmental, educational and demographical aspects of the Palestinian refugee camps in Lebanon. The results of this survey are aimed at helping policy designers and decision makers to set and proper plans and programs for women and children. They are also meant to be a reference for researchers who conduct studies on health, reproductive health and child protection issues.

The Central Bureau of Statistics and Natural Resources (PCBS) seizes this opportunity of issuing the Multiple Indicator Cluster Survey in Palestinian Refugee Camps in Lebanon report to acknowledge the efforts of the United Nations Children's Fund (UNICEF) and the Pan-Arab Project for Family Health in providing substantial technical support to the Central Bureau of Statistics and Natural Resources (PCBS) that enabled it to issue this report. We extend our thanks to all the Palestinian institutions that participated in the survey. We appreciate the contributions of each interviewer, supervisor, and administrator to the completion of the survey.

**Yossef Al-Mady**  
**Technical manager, Central Bureau of Statistics**  
**and Natural Resources**

# I. Introduction

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## 1-1 Background

This report includes the results of the Multiple Indicator Cluster Survey III of Palestinian Refugee Camps and Gatherings in Lebanon, conducted in 2006 by the Palestinian Central Bureau of Statistics and Natural Resources (PCBS) in collaboration with UNICEF Lebanon Country Office, the Pan-Arab Project for Family Health (PAPFAM), and Palestinian NGO's. The survey mainly focused on monitoring the progress towards targets set by international agreements such as 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 these commitments build upon promises made by the international community at the 1990 World Summit for Children.

The League of Arab States, together with interested organizations and institutions, also passed other resolutions setting framework of Arab child rights, the Cairo Declaration towards "An Arab World Fit for Children" and the Second Arab Plan of Action on the Child (2004-2015) that were adopted by Arab Summits.

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

### **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 committed themselves to monitoring progress towards the goals and objectives:

"We will monitor regularly at the national level and, where appropriate, at the regional level and assess progress towards the goals and targets of the present Plan of Action at the national, regional and global levels. Accordingly, we will strengthen our national statistical capacity to collect, analyse and disaggregate data, including by sex, age and other relevant factors that may lead to disparities, and support a wide range of child-focused research. 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 national and subnational levels of progress in order to more effectively address obstacles 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."

It is worthwhile to mention that the Lebanese government and the United Nations Relief and Works Agency (UNRWA) are the main providers of health services offered to Palestinian refugee mothers and children in Lebanon. Both the Lebanese Ministry of Health and UNRWA have continued to monitor health indicators emanating from the 2001 MICS II Survey of Palestinian refugee camps in Lebanon in order to increase, according to those indicators, their support to the health, education and environment of Palestinian.

This final report introduces the results of topics covered by the survey and some secondary indicators.<sup>1</sup>

## **1-2 Survey Objectives**

The 2006 Multiple Indicator Cluster Survey in Palestinian Refugee Camps and Gatherings in Lebanon has as its primary objectives:

1. To provide up-to-date information for assessing the situation of children and women in Palestinian Refugee Camps and Gatherings in Lebanon;
2. To provide data needed for monitoring progress towards goals established in the Millennium Declaration, the goals of A World Fit For Children, and other internationally agreed upon goals, as a basis for future action;
3. To contribute to the improvement of data and monitoring systems in Palestinian Refugee Camps and Gatherings in Lebanon;
4. To strengthen technical expertise in the design, implementation, and analysis of such systems.

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<sup>1</sup> For more information on definitions, numerators, denominators, logarithms of MICS3, and MDGs indicators covered by the Survey, refer to chapter 1, annex 1 and annex 7 of MICS guide – MICS 2005: Monitoring The Situation of Women and Children, also available at [www.childinfo.org](http://www.childinfo.org)

## II. Sample and Survey Methodology

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### 2-1 Sample Design

The sample for the Multiple Indicator Cluster Survey (MICS) in Palestinian Refugee Camps and Gatherings in Lebanon was designed to provide estimates on a large number of indicators on the situation of children and women at the geographical area and camp/gathering level, for urban and rural areas, and for 12 camps and 12 gatherings in 5 geographical areas. With this design we could monitor a large number of women and children indicators at the geographical area and camp level for urban and rural areas.

The sample population (based on the Palestinian Refugee Camps and Gatherings in Lebanon Census of 1999) was divided into equal clusters each containing 20 households (totaling 1300 clusters). Sample clusters (310 clusters, i.e. 6200 households) were drawn with uniformity, random start and a sampling fraction of 0.25.

The distribution of sample households by geographical area, each according to its weight (weighted sample), was as follows:

**Table 2**  
**Distribution of Sample Households by Governorate**

<b>Area</b>	<b>Sample size (households)</b>
Tripoli	1200
Beirut	1420
Bekaa	440
Sidon	1840
Sur	1300
<b>Total</b>	<b>6200</b>

**Each area's sample was distributed on camps and gatherings of the same area, according to the weight of each camp or gathering.**

### 2-2 Questionnaires

Three sets of questionnaires were used in the survey: 1) a household questionnaire was used to collect information on all household members, the household, and the dwelling; 2) a women's questionnaire administered in each household to all women aged 15-49 years; 3) an under-5 questionnaire, administered to mothers or caretakers of all children under 5 living in the household. The questionnaires included the following modules:

Household Questionnaire:

- Household Listing



- Education
- Water and Sanitation Facilities
- Household Background Characteristics
- Child Labour
- Salt Iodization

Questionnaire for Individual Women:

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

Questionnaire 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. Changes in format were made to the UNICEF MICS3 model Arabic version questionnaires that were pre-tested during March 2006.

## **2- 3 Fieldwork and Data Processing**

Training for the fieldwork team members (interviewers, measurers and supervisors) was conducted centrally (in Beirut) for 10 days from 15 to 24 December 2006. The data were collected by 10 teams; each comprised of 4 interviewers, one measurer and a supervisor. Fieldwork began on April 25 2005 and was concluded on February 5, 2006.

Data were entered using the CSPro software. In order to ensure quality control, all questionnaires were entered simultaneously with ongoing fieldwork and internal consistency checks were performed. Procedures and standard programs developed under the global MICS3 project and adapted to the Palestinian Refugee Camps and Gatherings in Lebanon questionnaire were used throughout. Data entry and checking was completed on the first of June 2006. Data were analyzed using the Statistical Package for Social Sciences (SPSS) software program. Data processing began simultaneously with data collection in January 2006 and was completed on the first of April 2006.

### **III. Sample Coverage and the Characteristics of Households and Respondents**

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#### **3- 1 Sample Coverage**

The response rate of households, mothers and children was remarkably high. Of the 6200 households selected for the sample, only 33 households could not be interviewed thus making the household response rate 99.5 percent.

In the interviewed households, 4001 ever married women (age 15-49) were identified. Of these, 3955 were successfully interviewed, yielding a response rate of 98.9 percent. In addition, 2431 children under age five were listed in the household questionnaire. Questionnaires were completed for 2381 of these children, which corresponds to a response rate of 97.9 percent (Table HH.1).

#### **3- 2 Characteristics of Households**

Table HH.3 provides basic background information on the households. Within households, the sex of the household head, governorates, urban/rural status, and number of household members are shown in the table. These background characteristics are used in subsequent tables in this report; the figures in the table are also intended to show the numbers of observations by major categories of analysis in the report.

The table also shows the proportions of households where at least one child under 18 years, at least one child under 5 years, and at least one eligible woman aged 15-49 were found. Figure 1 shows that the Palestinian community in Lebanon is still youthful in spite of the fact that women fertility rate has decreased within the past 10 years.

#### **3-3 Characteristics of Respondents**

Tables HH.4 and HH.5 provide information on the background characteristics of female respondents 15-49 years of age and of children under age 5. In addition to providing useful information on the background characteristics of women and children, the tables are also intended to show the numbers of observations in each background category. These categories are used in the subsequent tabulations of this report.

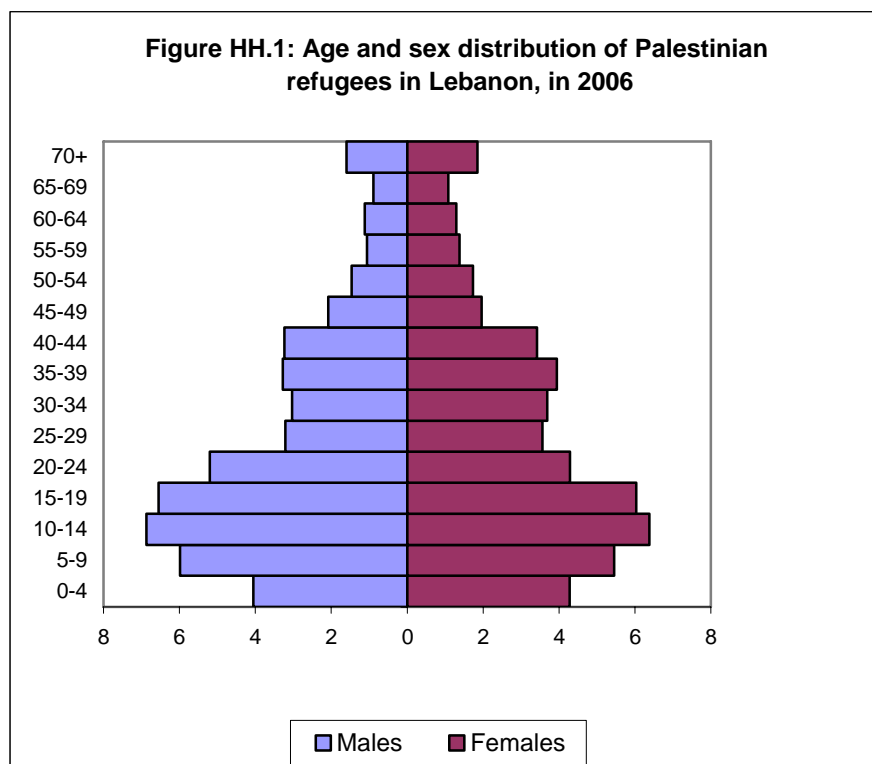
Table HH.4 provides background characteristics of female respondents 15-49 years of age. The table includes information on the distribution of women according to governorate, urban-rural areas, age, motherhood status, education<sup>2</sup>,

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<sup>2</sup> Unless otherwise stated, "education" refers to educational level attended by the respondent throughout this report when it is used as a background variable.

and wealth index quintiles<sup>3</sup>. The table shows that two thirds of women in the sample were urban women and the remaining third was composed of rural women. It also shows that one of each ten married women had never given birth.

Some background characteristics of children under 5 are presented in Table HH.5. These include distribution of children by several attributes: sex, governorate and area of residence, age in months, mother's or caretaker's education, and wealth. Figures in the table show that gender parity index for children under five was 94 and that 60 percent of children belonged to a medium wealth quintile household or below.



<sup>3</sup> Principal components analysis was performed by using information on the ownership of household goods and amenities (assets) to assign weights to each household asset, and obtain wealth scores for each household in the sample (The assets used in these calculations were as follows: connection of the home to the public electricity grid, family possession of radio, television, telephone, refrigerator and number of rooms, type of ground material of floor and walls, type of cooking fuel, source of drinking water, time required to bring drinking water, type of toilet sanitation system). Each household was then weighted by the number of household members, and the household population was divided into five groups of equal size, from the poorest quintile to the richest quintile, based on the wealth scores of households they were living in. The wealth index is assumed to capture the underlying long-term wealth through information on the household assets, and is intended to produce a ranking of households by wealth, from poorest to richest. The wealth index does not provide information on absolute poverty, current income or expenditure levels, and the wealth scores calculated are applicable for only the particular data set they are based on. Further information on the construction of the wealth index can be found in Rutstein and Johnson, 2004, and Filmer and Pritchett, 2001.

## IV. Child Mortality

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One of the overarching goals of the Millennium Development Goals (MDGs) and the World Fit for Children (WFFC) is to reduce infant and under-five mortality. MDGs call for the reduction in under-five mortality by two-thirds between 1990 and 2015. Monitoring progress towards this goal is an important but difficult objective. Measuring childhood mortality may seem easy, but attempts using direct questions, such as “Has anyone in this household died in the last year?” give inaccurate results. Using direct measures of child mortality from birth histories is time consuming, more expensive, and requires greater training on research and supervision. On the other hand, indirect methods of measuring child mortality produce robust estimates that are comparable with the ones obtained from other sources. Indirect methods minimize the pitfalls of memory lapses, inexact or misinterpreted definitions, and the pitfalls of poor interviewing technique.

The infant mortality rate is the probability of dying before the first birthday. The under-five mortality rate is the probability of dying before the fifth birthday. In MICS surveys, infant and under five mortality rates are calculated based on an indirect estimation technique known as the Brass method (United Nations, 1983; 1990a; 1990b). The data used in the estimation are: the mean number of children ever born for five year age groups of women from age 15 to 49, and the proportion of these children who are dead, also for the same five-year age groups of women. The technique converts these data into probabilities of dying by taking into account both the mortality risks to which children are exposed and their length of exposure to the risk of dying, assuming a particular model age pattern of mortality. Based on previous information on mortality in Palestinian Refugee Camps and Gatherings in Lebanon, the West model life table was selected as most appropriate.

Table CM.1 provides estimates of child mortality by various background characteristics. Table CM.1 shows that infant mortality rate is 26 per thousand. This means that among each 1000 live births that took place during the year, 26 infants died. Meanwhile, the probability of dying under-5 mortality rate (U5MR) is 31 per thousand. These estimates have been calculated by averaging mortality estimates obtained from women age 25-29 and 30-34, and refer to 2003. There is some difference between the probabilities of dying among males and females with an infant mortality rate of 30 per thousand in males and 21 per thousand in females. Infant mortality rate drops to 17 per thousand in Sur camps, whereas it rises to 31 per thousand in Tripoli camps. U5MR varies noticeably according to level of education and wealth. U5MR drops from 40 per thousand for poor households to 19 per thousand for rich households.

Differentials in under-5 mortality rates by background characteristics are shown in Figure CM.1.

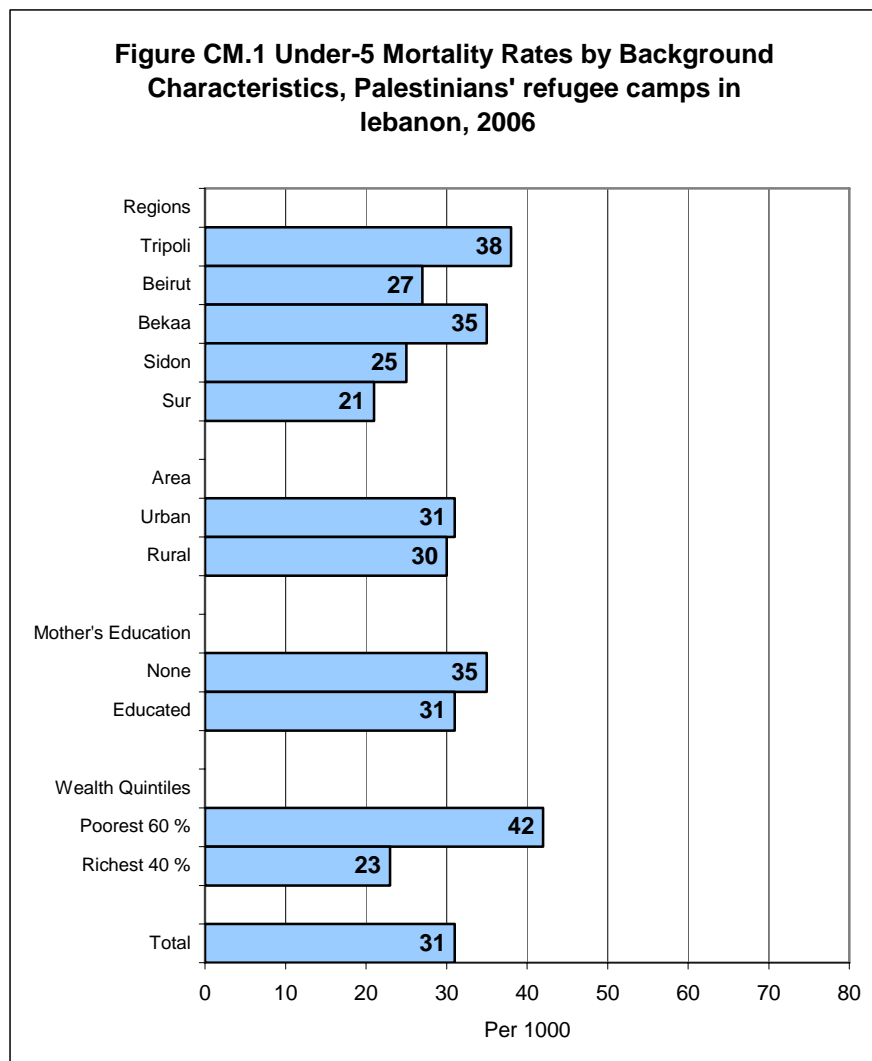
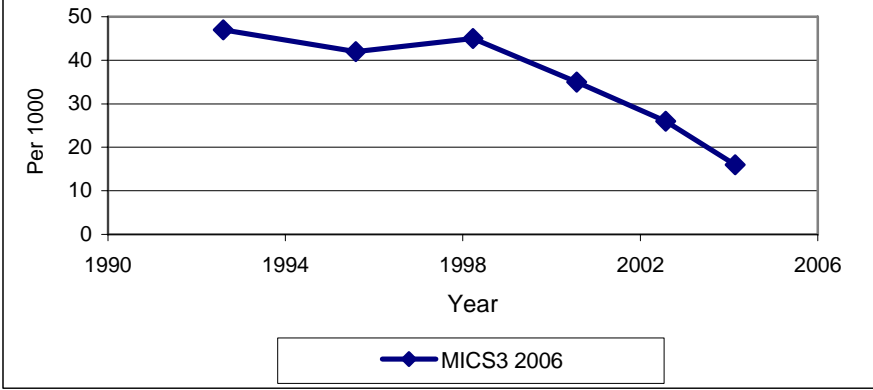


Figure CM.2 shows the series of U5MR estimates of the survey, based on responses of women in different age groups, and referring to various points in time, thus showing the trend in U5MR based on the survey. The MICS indicates a decline in mortality during the last 15 years as evidenced by U5MR estimate that declined from 50 per thousand in 1993 to 31 per thousand in 2006.

Figure CM.2: Under-five children mortality rate, Palestinian camps and gatherings, Lebanon, 2006



## V. Nutrition

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### 5-1 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.

Malnutrition is the reason behind more than half of all children deaths worldwide. Undernourished children are more likely to die from childhood illnesses, and for those who survive, have recurring sicknesses and slow growth. Three-quarters of the children who die from causes related to malnutrition were mildly or moderately malnourished - showing no outward sign of their vulnerability. The Millennium Development target is, therefore, to reduce by half the proportion of people who suffer from hunger between 1990 and 2015. The World Fit for Children goal is to reduce the prevalence of malnutrition among children under five years of age by at least one-third (between 2000 and 2010), with special attention to children under 2 years of age. A reduction in the prevalence of malnutrition will assist to reduce child mortality.

In a well-nourished population, there is a reference distribution of height and weight for children under age five. Under-nourishment in a population can be gauged by comparing children to a reference population. The reference population used in this report is the reference of the World Health Organization (WHO), the Centre of Disease Control (CDC), and the National Centre for Health Surveys (NCHS). It is the same reference recommended for use by UNICEF and the World Health Organization at the time the survey was implemented. Each of the three nutritional status indicators can be expressed in standard deviation units (z-scores) from the median of the 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

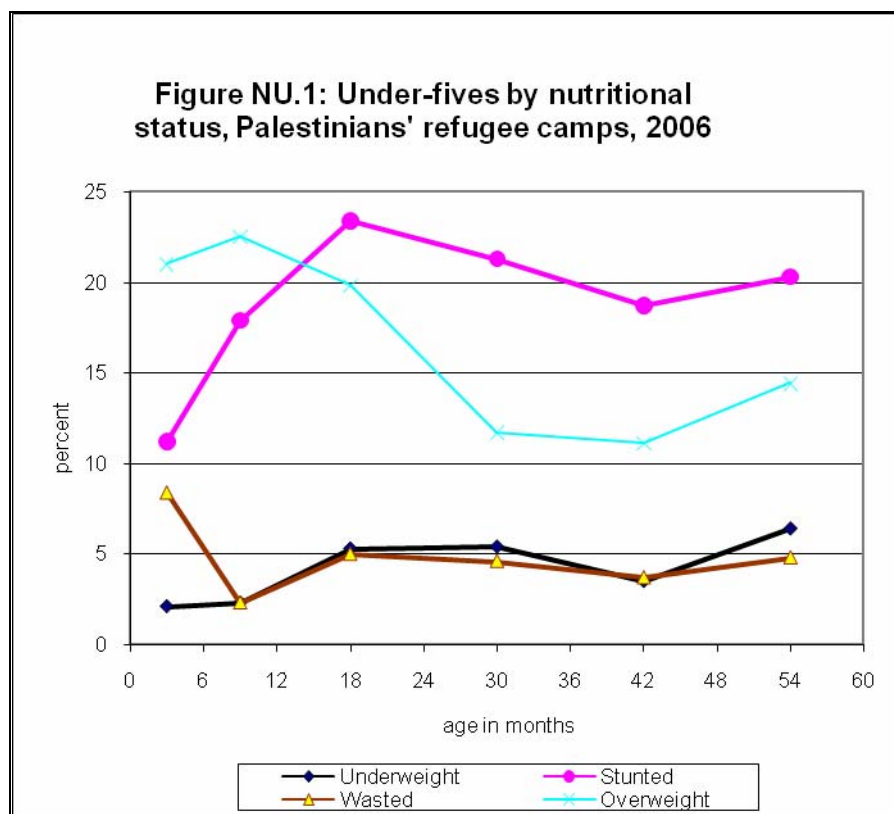
the median are *severely wasted*. Wasting is usually the result of a recent nutritional deficiency. The indicator may exhibit significant seasonal shifts associated with changes in the availability of food or disease prevalence.

In MICS, weights and heights of all children under 5 years of age were measured using anthropometric equipment recommended by UNICEF (UNICEF, 2006). Findings in this section are based on the results of these height and weight measurements.

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

In Table NU.1, children who were not weighed and measured (approximately 21 percent of children) and those whose measurements are outside a plausible range are excluded. In addition, a small number of children whose birth dates are not known are excluded.

Almost 5 of each one hundred of under-five children in Palestinian refugee camps and gatherings in Lebanon are moderately underweight (4.6 percent) and 1.1 percent are classified as severely underweight (Table NU.1). More than one fifth of children (19.8 percent) are moderately stunted or too short for their age and 4.6 percent are moderately wasted or too thin for their height. 15.3 percent of children were overweight.





The survey results have shown that children in Beirut camps are more likely to be underweight and stunted than other children. The results have also demonstrated that boys are more likely to be underweight, stunted, and wasted 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 (Figure NU.1). This observation is related to the age at which many children are weaned and begin to be exposed to contamination in water, food, and environment.

## 5-2 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 are obliged to stop breastfeeding too soon and switch to infant formula, which can contribute to growth delay and 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 continue to be breastfed with safe, appropriate and adequate complementary feeding for up to 2 years of age and beyond.

WHO/UNICEF have the following feeding recommendations:

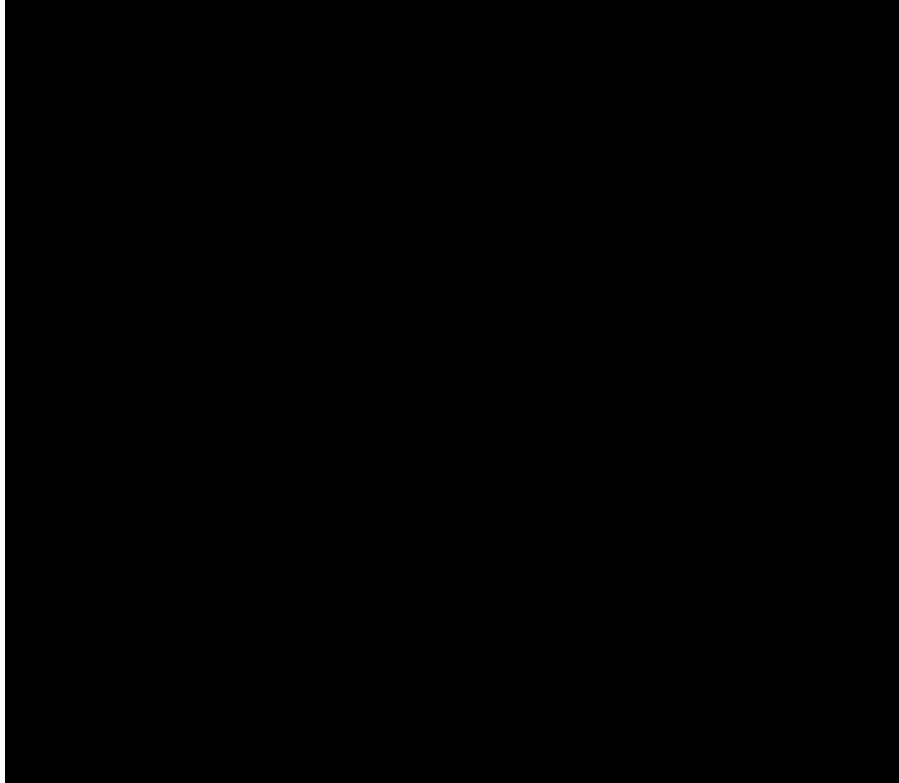
- Exclusive breastfeeding for first six months
- Continued breastfeeding for two years or more
- Safe, appropriate and adequate complementary foods beginning at 6 months
- Frequency of complementary feeding: 2 times per day for 6-8 month olds; 3 times per day for 9-11 month olds

It is also recommended that breastfeeding be initiated within one hour of birth.

The indicators of recommended child feeding practices are as follows:

- Exclusive breastfeeding rate (< 6 months & < 4 months)
- Timely complementary feeding rate (6-9 months)
- Continued breastfeeding rate (12-15 & 20-23 months)
- Timely initiation of breastfeeding (within 1 hour of birth)
- Frequency of complementary feeding (6-11 months)
- Adequately fed infants (0-11 months)

Table NU.2 provides the proportion of women who started breastfeeding their infants within one hour of birth, and women who started breastfeeding within one day of birth (which includes those who started within one hour). We observe that 63 percent of mothers breastfed their infants within one hour of birth while approximately 64 percent of mothers breastfed their infants during their first day of life. Ratios in urban areas are higher than rural areas. They are also higher in Beirut camps than they are in Sur camps.

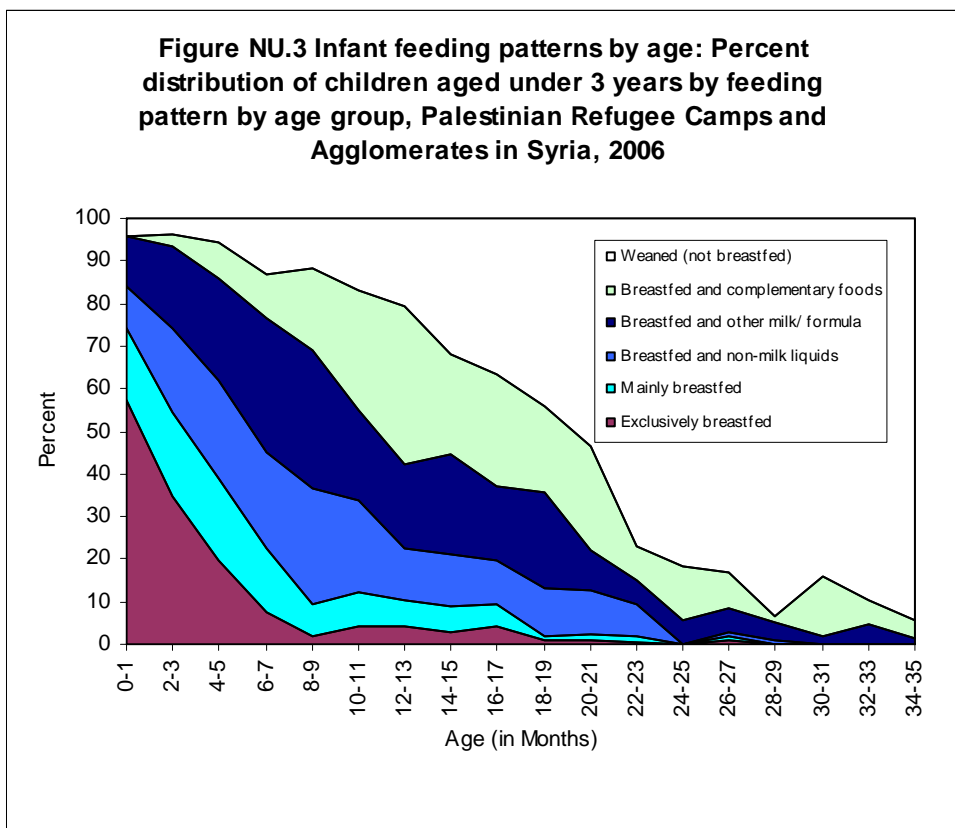


In Table NU.3, breastfeeding status is based on the reports of mothers/caretakers of children's consumption of food and fluids in the 24 hours prior to the interview. *Exclusively breastfed* refers to infants who received only breast milk (and vitamins, mineral supplements, or medicine). The table shows 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 aged 6-9 months and continued breastfeeding of children at 12-15 and 20-23 months of age.

Approximately 18 percent of children aged less than six months are exclusively breastfed. This percent is considerably lower than recommended. At age 6-9 months, 52.8 percent of children are receiving breast milk and solid or semi-solid foods. By age 12-15 months, 48 percent of the children are still being breastfed and by age 20-23 months, more than one fifth of the children are still breastfed. Breastfeeding ratios were higher for mothers with secondary or higher education compared to mothers with primary or lower education. Breastfeeding ratios were higher for mothers in poorer households compared to mothers in richer households.

Figure NU.3 shows the detailed pattern of breastfeeding by the child's age in months (Figure is based on results shown in Table NU.3). Even at the earliest ages, the majority of children are receiving liquids or foods other than breast milk by the end of the sixth month. The adequacy of infant feeding in children under

12 months is provided in Table NU.4. where different criteria of adequate feeding are used depending on the age of the child. For infants aged 0-5 months, exclusive breastfeeding is considered as adequate feeding. Infants aged 6-8 months are considered to be adequately fed if they are receiving breast milk and complementary food at least two times per day, while infants aged 9-11 months are considered to be adequately fed if they are receiving breast milk and eating complementary food at least three times a day. The table shows that 39.8 percent of children aged 6-8 months are adequately fed compared to 18.9 percent for children aged 9-11 months. As a result of these feeding patterns, 29 percent of children aged 6-11 months are being adequately fed. The ratio goes up to 31.4 percent for boys and drops to 26.5 percent in boys. Ratios are higher in rural camps than in urban camps. In Tripoli and Bekaa camps, ratios are higher than in other camps. Adequate feeding among all infants (aged 0-11) drops to 24 percent.

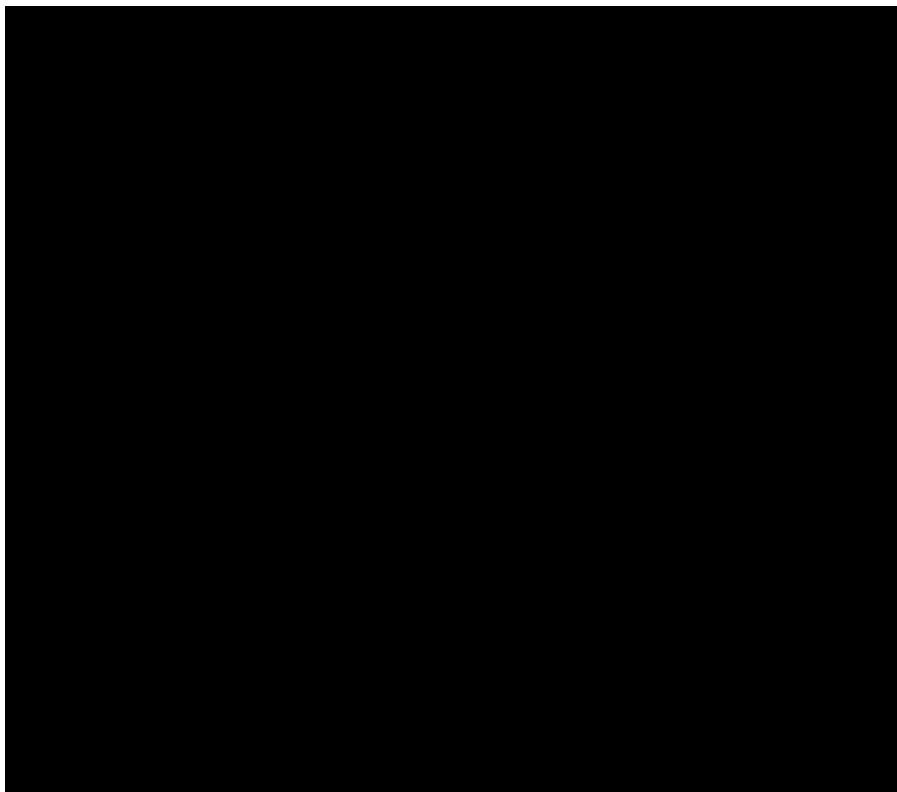


### 5-3 Salt Iodization

Iodine Deficiency Disorders (IDD) is the world's leading cause of preventable mental retardation and impaired psychomotor development in children. In its most extreme form, iodine deficiency causes cretinism which is a form of stunting, body figure distortion and mental retardation caused by a malfunctioning thyroid gland. Iodine deficiency also increases the risks of stillbirth and miscarriage in pregnant women. Iodine deficiency is most commonly and visibly associated with goiter. IDD takes its greatest toll in impaired mental growth and development, contributing to poor school

performance, reduced intellectual ability, and impaired work performance. The international goal is to achieve sustainable elimination of iodine deficiency by 2005. The indicator is the percentage of households consuming adequately iodized salt ( $\geq 15$  parts per million).

In about 98.9 percent of households, salt used for cooking was tested for iodine content by using salt test kits and testing for the presence of potassium iodide or potassium iodate content or both. Table NU.5 shows that adequately iodized salt was used in 99.9 percent of interviewed households without any considerable variation by governorate, area of residence (rural/ urban), or wealth index.



#### **5-4 Vitamin A Supplements**

Vitamin A is essential for eye health and proper functioning of the immune system. It is found in foods such as milk, liver, eggs, red and orange fruits, red palm oil and green leafy vegetables, although the amount of vitamin A readily available to the body from these sources varies widely. In developing areas of the world, where vitamin A is largely consumed in the form of fruits and vegetables, daily per capita intake is often insufficient to meet dietary requirements. Vitamin A requirements increase as children grow and during periods of illness, as well as during common childhood infections. As a result, vitamin A deficiency is quite prevalent in the developing world and particularly in countries with the highest burden of under-five deaths.

The 1990 World Summit for Children set the goal of the elimination of vitamin A deficiency and its consequences, including blindness, by the year 2000. This goal

was also endorsed at the Policy Conference on Ending Hidden Hunger in 1991, the 1992 International Conference on Nutrition, and the UN General Assembly's Special Session on Children in 2002. The critical role of vitamin A for child health and immune function also makes control of deficiency a primary component of child survival efforts, and therefore critical to the achievement of the fourth Millennium Development Goal: a two-thirds reduction in under-five mortality by the year 2015.

For countries with vitamin A deficiency problems, current international recommendations call for high-dose vitamin A supplementation every four to six months, targeted to all children between the ages of six to 59 months living in affected areas. Providing young children with two high-dose vitamin A capsules a year is a safe, cost-effective, efficient strategy for eliminating vitamin A deficiency and improving child survival. Giving vitamin A to new mothers who are breastfeeding helps protect their children during the first months of life and helps to replenish the mother's stores of vitamin A, which are depleted during pregnancy and lactation. For countries with vitamin A supplementation programs, the definition of the indicator is the percent of children 6-59 months of age receiving at least one high dose vitamin A supplement in the last six months.

UNICEF/WHO guidelines recommend that children aged 6-11 months be given one high dose Vitamin A capsules and children aged 12-59 months given a vitamin A capsule every 6 months. The guidelines also recommend that Vitamin A capsules are linked to immunization services and are given when the child gets his shots after six months of age. It is also recommended that mothers take a Vitamin A supplement within eight weeks of giving birth due to increased Vitamin A requirements during pregnancy and lactation.

Within the six months prior to the MICS, 19.8 percent of children aged 6-59 months received a high dose Vitamin A supplement (Table NU.6). It was found that 5.2 percent did not receive the supplement in the last 6 months but did receive Vitamin A supplement prior to that time although their mother/caretaker was unable to specify when. Vitamin A supplementation coverage is higher in the Beirut camps (34.5 percent) than in other camps; it drops to 12.8 percent in Sur.

Only about 35.5 percent of mothers with a birth in the previous two years before the MICS received a Vitamin A supplement within eight weeks of the birth (Table NU.7). This percentage is highest in the Beirut camps at 47.4 percent and Bekaa camps at 50 percent; and lowest in Tripoli camps at 19.8 percent.

### **5-5 Low Birth Weight**

Weight at birth is a good indicator of a mother's health and nutritional status and of the newborn's chances for survival, growth, long-term health and psychosocial development. Low birth weight (less than 2,500 grams) carries grave health risks for children. Babies who were undernourished in the uterus face a greatly increased risk of dying during their early months and years. Those who survive have impaired immune function and increased risk of disease; they are likely to remain undernourished, with reduced muscle strength, throughout their lives, and suffer a higher incidence of diabetes and heart disease in later life. Children

born underweight also tend to have a lower IQ and cognitive disabilities, affecting their performance in school and their job opportunities as adults.

In the developing world, low birth weight stems primarily from the mother's poor health and nutrition. Three factors have most impact: the mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood), and poor nutrition during the pregnancy. Inadequate weight gain during pregnancy leads to underdevelopment of the placenta through which the foetus gets its nutrients. Moreover, diseases such as diarrhoea and malaria, which are common in many developing countries, can significantly impair placental and foetal growth if the mother becomes infected while pregnant.

In the industrialized world, cigarette smoking during pregnancy is the leading cause of low birth weight. In developed and developing countries alike, teenagers who give birth when their own bodies have yet to finish growing run the risk of bearing underweight babies.

One of the challenges in measuring the incidence of low birth weight is the fact that more than half of infants in the developing world are not weighed. In the past, most estimates of low birth weight for developing countries were based on data compiled from health facilities. However, these estimates are biased for most developing countries because the majority of newborns are not delivered in facilities, and those who are represent only a selected sample of all births.

Because many infants are not weighed at birth and those who are weighed may be a biased sample of all births, the reported birth weights usually cannot be used to estimate the prevalence of low birth weight among all children. Therefore, the percentage of births weighing below 2500 grams is estimated from two items in the questionnaire: the mother's assessment of the child's **size** at birth (i.e., very small, smaller than average, average, larger than average, very large) and the mother's recall of the child's **weight** or the weight as recorded on a health card if the child was weighed at birth<sup>4</sup>.

Overall, 98 percent of births were weighed at birth and 8.7 percent of infants are estimated to weigh less than 2500 grams at birth (Table NU.8). There was significant variation by region (Figure NU.5). The percentage of low birth weight varies very much between camps in governorates rising up to 10.2 percent in Tripoli camps and going down to 5.8 percent in Beirut. The percentage of low birth weight varies by level of mother's education; it rises to 9.3 percent for children born to mothers who received basic education, whereas it is 6.4 percent for children born to mothers with secondary education or higher.

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<sup>4</sup> For a detailed description of the methodology, see Boerma, Weinstein, Rutstein and Sommerfelt, 1996.



## VI. Child Health

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### 6-1 Immunization

The Millennium Development Goal (MDG) 4 is to reduce child mortality by two thirds between 1990 and 2015. Immunization plays a key part in this goal. Immunizations have saved the lives of millions of children in the three decades since the launch of the Expanded Programme on Immunization (EPI) in 1974. Worldwide there are still 27 million children overlooked by routine immunization and as a result, vaccine-preventable diseases cause more than 2 million deaths every year.

A World Fit for Children goal is to ensure full immunization of children under one year of age at 90 percent nationally, with at least 80 percent coverage in every administrative unit.

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 MICS questionnaire.

Overall, 84.1 percent of children had health cards. If the child did not have a card, the mother was asked to recall whether or not the child had received each of the vaccinations and, for DPT and Polio, how many times. The percentage of children aged 12 to 23 months who had health cards and received each of the vaccinations is shown in Table CH.1. The denominator for the table is comprised of children aged 12-23 months with health cards 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.

97.3 percent of children aged 12-23 months received a BCG vaccination and the first dose of DPT was given to 98.5 percent. The percentage declines for subsequent doses of DPT to 98.3 percent for the second dose, and 97.3 percent for the third dose (Figure CH.1). Similarly, 98.3 percent of children received Polio 1 and this declines to 97.8 percent by the third dose. The coverage for measles vaccine by 12 months is 97.5 percent. As a result, the percentage of children who had all the recommended vaccinations is 93.1 percent. This proportion is particularly high because a Palestinian child would benefit from free health services offered by the Lebanon government as well as from the services offered by UNRWA to Palestinian.

UNRWA provides dose 0 of polio vaccine within the first month of life in addition to the three basic booster doses of DPT and polio vaccines.



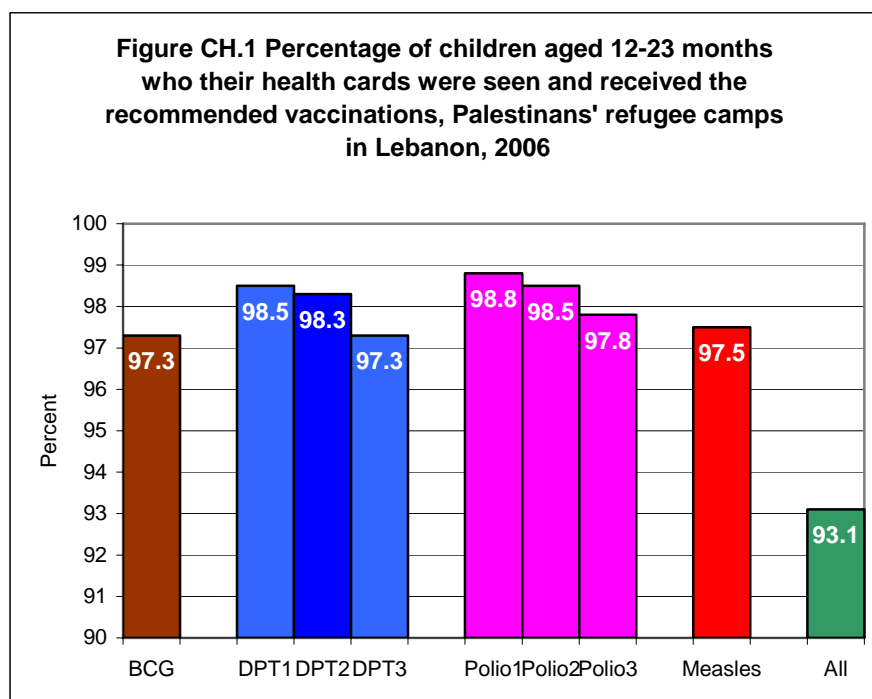


Table CH.2 shows vaccination coverage rates among children 12-23 months by background characteristics. The figures indicate children receiving the vaccinations at any time up to the date of the survey, and are based on information from vaccination cards. No significant differentials are observed by camp and/or mother's level of education.

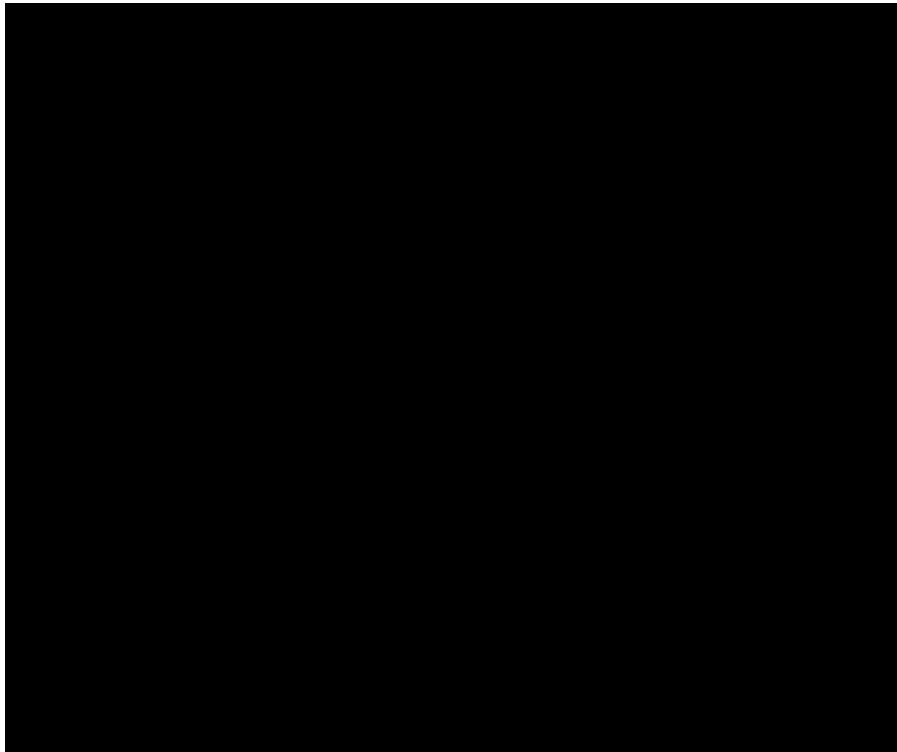
## 6-2 Tetanus Toxoid

One of the MDGs is to reduce by three quarters the maternal mortality ratio, with one strategy, to eliminate maternal tetanus. In addition, another goal is to reduce the incidence of neonatal tetanus to less than 1 case of neonatal tetanus per 1000 live births in every district. A World Fit for Children goal is to eliminate maternal and neonatal tetanus by 2005.

Prevention of maternal and neonatal tetanus is to assure all pregnant women receive at least two doses of tetanus toxoid vaccine. However, if women have not received two doses of the vaccine during the pregnancy, they (and their newborn) are also considered to be protected if the following conditions are met:

- Received at least two doses of tetanus toxoid vaccine, the last within the prior 3 years;
- Received at least 3 doses, the last within the prior 5 years;
- Received at least 4 doses, the last within 10 years;
- Received at least 5 doses during lifetime.

Table CH.3 shows the protection status from tetanus of women who have had a live birth within the last two years before the survey. Figure CH.2 shows the protection of women against neonatal tetanus by major background characteristics. 34.6 percent of the women who have had a live birth within the last two years had a tetanus toxoid. The percentage is highest in Beirut (38.3 percent) and Bekaa (38.7 percent) and lowest in Sidon (30.8 percent).



### **6-3 Oral Rehydration Treatment**

Diarrhoea is the second leading cause of death among children under five worldwide. Most diarrhoea-related deaths in children are due to dehydration from loss of large quantities of water and electrolytes from the body in liquid stools. Management of diarrhoea - either through oral rehydration salts (ORS) or a recommended home fluid (RHF) - can prevent many of these deaths. Preventing dehydration and malnutrition by increasing fluid intake and continuing to feed the child are also important strategies for managing diarrhoea.

The goals are to:

- 1) reduce by one half deaths due to diarrhoea among children under five by 2010 compared to 2000 (A World Fit for Children);
- 2) reduce by two thirds the mortality rate among children under five by 2015 compared to 1990 (Millennium Development Goals). In addition, the World Fit for Children calls for a reduction in the incidence of diarrhoea by 25 percent.

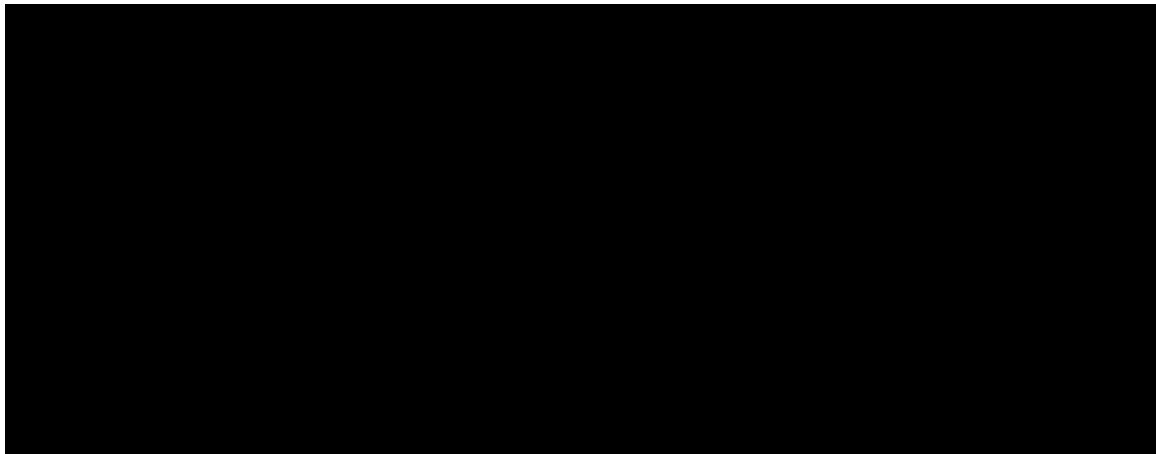
The indicators are:

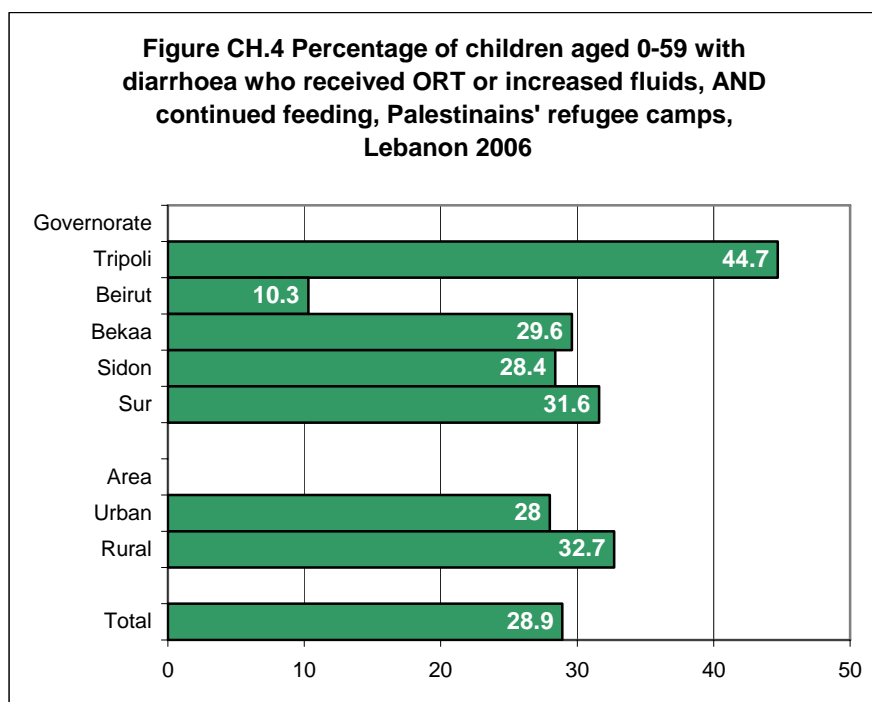
- Prevalence of diarrhoea
- Oral rehydration therapy (ORT)
- Home management of diarrhoea
- (ORT or increased fluids) **and** continued feeding

In the MICS questionnaire, mothers (or caretakers) were asked to report whether their child had diarrhoea in the two weeks prior to the survey. If so, the mother was asked a series of questions about what the child had to drink and eat during the episode and whether this was more or less than the child usually ate and drank.

Overall, 9.9 percent of under five children had diarrhoea in the two weeks preceding the survey (Table CH.4). Diarrhoea prevalence was different among camps. 19.0 percent of Bekaa camp children had had diarrhoea during the previous two weeks. The percentage goes down to 7.9 per cent in Beirut camps. The peak of diarrhoea prevalence occurs in the teething period among children aged 6-11 months.

Table CH.4 also shows the percentage of children receiving various types of recommended liquids during the episode of diarrhoea. Since mothers were able to name two types of liquid, the percentages do not necessarily add to 100. It was found that 24.3 percent received fluids from ORS packets; 37 percent received pre-packaged ORS fluids, and 64.3 percent received recommended homemade fluids. Children whose mothers received secondary education are less likely to receive oral rehydration treatment than other children. Approximately 79.6 percent of children with diarrhoea received one or more of the recommended home treatments (i.e., were treated with ORS or RHF), while 20.4 percent received no treatment.





A quarter of under-five children with diarrhoea drank more than usual while three quarters of them drank the same or less (Table CH.5). 38.3 percent ate somewhat less, same or more (continued feeding), but 60.4 percent ate much less or ate almost none. Given these figures, 11.1 percent children who were treated for diarrhoea at home received increased fluids and at the same time continued feeding. Combining the information in Table CH.5 with those in Table CH.4 on oral rehydration therapy, it is observed that 28.9 percent of children either received ORT or fluid intake was increased, and at the same time, feeding was continued, as is the recommendation.

#### 6-4 Care Seeking and Antibiotic Treatment of 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. A World Fit for Children goal is to reduce by one-third the deaths due to acute respiratory infections.

Children with suspected pneumonia are those who had an illness with a cough accompanied by rapid or difficult breathing and whose symptoms were not due to a problem in the chest and a blocked nose. The indicators are:

- Prevalence of suspected pneumonia
- Care seeking for suspected pneumonia
- Antibiotic treatment for suspected pneumonia
- Knowledge of the danger signs of pneumonia

Table CH.6 presents the prevalence of suspected pneumonia and, if care was sought outside the home, the site of care. 17.1 percent of children aged 0-59 months were reported to have had symptoms of pneumonia during the two

weeks preceding the survey. Of these children, 44.5 percent were taken to an appropriate provider. Medical advice was sought in private practices for 20.5 percent children and in UNRWA paediatric consultation clinics for 26.9 percent children.

Table CH.7 presents the use of antibiotics for the treatment of suspected pneumonia in under-5s by sex, governorate, residence, and socioeconomic factors. In Palestinian Refugee Camps and Gatherings 67.2 percent of under-5 children with suspected pneumonia had received an antibiotic during the two weeks prior to the survey. The percentage was higher in the age group 24-35 months.

Issues related to knowledge of danger signs of pneumonia are presented in Table CH.7A. Obviously, mothers' knowledge of the danger signs is an important determinant of care-seeking behavior. Overall, 10.6 percent of women know of the two danger signs of pneumonia - fast and difficult breathing. The most commonly identified symptom for taking a child to a health facility is child fever (87.1 percent). 35.4 percent of mothers identified difficult breathing and 21.5 percent of mothers identified fast breathing as symptoms for taking children immediately to a health care facility.

## **6-5 Solid Fuel Use**

More than 3 billion people around the world rely on solid fuels (biomass and coal) for their basic energy needs, including cooking and heating. Cooking and heating with solid fuels leads to high levels of indoor smoke, a complex mix of health-damaging pollutants. The main problem with the use of solid fuels is products of incomplete combustion, including CO, polyaromatic hydrocarbons, SO<sub>2</sub>, and other toxic elements. Use of solid fuels increases the risks of acute respiratory illness, pneumonia, chronic obstructive lung disease, cancer, and possibly tuberculosis, low birth weight, cataracts, and asthma. The primary indicator is the proportion of the population using solid fuels as the primary source of domestic energy for cooking.

Overall, use of solid fuels in cooking is an almost nonexistent practice in Palestinian Refugee Camps and Gatherings in Lebanon. Most households use natural gas for cooking purposes.

## VII. Environment

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### 7-1 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 contain chemical, physical and radiological contaminants with harmful effects on human health. In addition to its impact on health, access to drinking water may be particularly important for women and children, especially in rural areas, who bear the primary responsibility for carrying water, often for long distances.

The MDG goal is to reduce by half, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation. The World Fit for Children goal calls for a reduction in the proportion of households without access to hygienic sanitation facilities and affordable and safe drinking water by at least one-third.

The indicators used in MICS are as follows:

#### Water

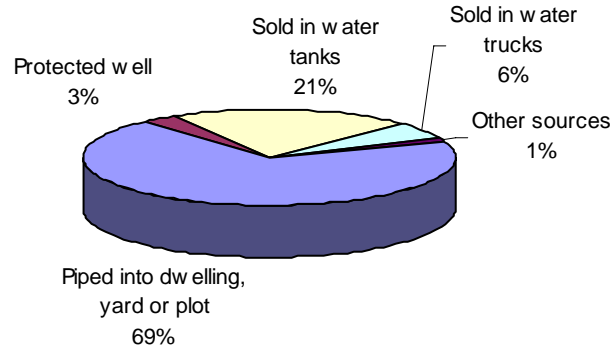
- Use of improved drinking water sources
- Use of adequate water treatment method
- Time to source of drinking water
- Person collecting drinking water

#### Sanitation

- Use of improved sanitation facilities
- Sanitary disposal of child's feces

The distribution of the population by source of drinking water is shown in Table EN.1 and Figure EN.1. The population using *improved sources* of drinking water are those using any of the following types of supply: piped water (into dwelling, yard or plot), public tap/standpipe, tubewell/borehole, protected well, protected spring, and rainwater collection. Bottled water is considered as an improved water source.

**Figure EN.1 Percentage distribution of household members by source of drinking water, Palestinian Refugee Camps and Agglomerates in Syria, 2006**



Overall, 91.2 percent of the population is using an improved source of drinking water – 89.3 percent in urban areas and 97.7 percent in rural areas (Table EN.1). The percentage in Beirut camps is the lowest compared to other camps (68.6%), it was found that only 2.4 percent of those get improved water from a public source while others buy water from water tanks. Although public water pipelines are accessible for all camp residents, the existence of some calcium salts in public water in some camps makes water unpalatable.

The source of drinking water for the population varies strongly by governorate. In all governorates (except Beirut) most of the population use drinking water that is piped into their dwellings or into their yards or plots.

Use of in-house water treatment is presented in Table EN.2. Households were asked of ways they may be treating water at home to make it safer to drink – boiling, adding bleach or chlorine, using a filter, and using solar disinfection were considered as proper treatment of drinking water. The table shows the percentages of household members using appropriate water treatment methods, separately for all households, for households using improved and unimproved drinking water sources. 5.5 percent of households use one of the home water treatment methods with boiling heading the list followed by the use of filters.

The time taken to obtain water is presented in Table EN.3. The table shows that for 65.7 percent of households, the drinking water source is on the premises. For 22 percent of all households, it takes less than 15 minutes to get to the water source and bring water, while the remaining households spend more than 15 minutes for this purpose. Excluding those households with water on the premises, the average time to the source of drinking water is 30 minutes.

Inadequate disposal of human excreta and personal hygiene is associated with a range of diseases including diarrhoeal diseases and polio. Improved sanitation facilities for excreta disposal include: flush or pour flush to a piped sewer system,

septic tank, ventilated improved pit latrine, pit latrine with slab, and composting toilet.

86.7 percent of the population of Palestinian Refugee Camps and Gatherings in Lebanon is living in households using improved sanitation facilities (Table EN.5). This percentage is 97.2 in urban areas and 52.0 percent in rural areas.



## VIII. Reproductive Health

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### 8-1 Contraception

Appropriate family planning is important to the health of women and children by: 1) preventing pregnancies that are too early or too late; 2) extending the period between births; and 3) limiting the number of children. A World Fit for Children goal is access by all couples to information and services to prevent pregnancies that are too early, too closely spaced, too late or too many.

Current use of contraception was reported by 68.3 percent of women currently married (Table RH.1). The most popular method is the intrauterine device (IUD) which is used by 24.7 percent of the married women in Palestinian Refugee Camps and Gatherings in Lebanon. The next most popular method is the pill, which is used by 21.4 percent of married women. 6.5 percent of women reported that their husbands use the condom. 13.7 percent use abstinence around ovulation time, withdrawal, and other conventional methods.

Contraceptive prevalence is highest in Sur camps at 70.8 percent followed by Beirut at 70.5 percent and Sidon at 68.8, while 67.5 percent of married women use contraceptive methods in Bekaa camps and 62.2 percent of married women in Tripoli camps. Adolescents are far less likely to use contraception than older women. Only about 22.5 percent of married women aged 15-19 currently use a method of contraception compared to 48.2 percent of 20-24 year old married women and 79.8 percent of 35-39 year old women.

### 8-2 Antenatal Care

The antenatal period presents important opportunities for reaching pregnant women with a number of interventions that may be vital to their health and well-being and that of their infants. Better understanding of foetal growth and development and its relationship to the mother's health has resulted in increased attention to the potential of antenatal care as an intervention to improve both maternal and newborn health. For example, if the antenatal period is used to inform women and families about the danger signs and symptoms and about the risks of labour and delivery, it may provide the route for ensuring that pregnant women do, in practice, deliver with the assistance of a skilled health care provider. The antenatal period also provides an opportunity to supply information on birth spacing, which is recognized as an important factor in improving infant survival. Tetanus immunization during pregnancy can be life-saving for both the mother and infant. The prevention and treatment of malaria among pregnant women, management of anaemia during pregnancy and treatment of STIs can significantly improve foetal outcomes and improve maternal health. Adverse outcomes such as low birth weight can be reduced through a combination of interventions to improve women's nutritional status and prevent infections (e.g., malaria and STIs) during pregnancy. More recently, the potential of the antenatal period as an entry point for HIV prevention and

care, in particular for the prevention of HIV transmission from mother to child, has led to renewed interest in access to and use of antenatal services.

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

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

Coverage of antenatal care (by a doctor, nurse, or midwife) is relatively high in Palestinian Refugee Camps and Gatherings in Lebanon with 90.5 percent of women receiving antenatal care at least once during the pregnancy (Table RH.2).

The type of personnel providing antenatal care to women aged 15-49 years who gave birth in the two years preceding is presented in Table RH.2. 63.4 percent of women's antenatal care were attended by a doctor while 27.1 percent had their care provided by nurses or midwives.

The types of services pregnant women received are shown in table RH.3. Most pregnant women were provided by all basic types of care including weight and blood pressure measurement, urine testing, and blood testing.

### **8-3 Assistance at Delivery**

Three quarters of all maternal deaths occur during delivery and the immediate post-partum period. The single most critical intervention for safe motherhood is to ensure a competent health worker with midwifery skills is present at every birth, and transport is available to a referral facility for obstetric care in case of emergency. A World Fit for Children goal is to ensure that women have ready and affordable access to skilled attendance at delivery. The indicators are the proportion of births with a skilled attendant and proportion of institutional deliveries. The skilled attendant at delivery indicator is also used to track progress toward the Millennium Development target of reducing the maternal mortality ratio by three quarters between 1990 and 2015.

The MICS included a number of questions to assess the proportion of births attended by a skilled attendant. A *skilled attendant* includes a doctor, nurse, midwife or auxiliary midwife.

About 99.3 percent of births occurring in the year prior to the MICS survey were delivered by skilled personnel (Table RH.4). 61.3 percent of births were delivered with assistance by a doctor. Midwives/nurses assisted with the delivery of 37.8 percent of births. 97.7 percent of births took place in an obstetric facility.

## 8-4 Maternal Mortality

The complications of pregnancy and childbirth are a leading cause of death and disability among women of reproductive age in developing countries. It is estimated worldwide that around 529,000 women die each year from maternal causes. For every woman who dies, approximately 20 more suffer injuries, infection and disabilities in pregnancy or childbirth. This means that at least 10 million women a year incur this type of damage.

The most common fatal complication is post-partum haemorrhage. Sepsis, complications of unsafe abortion, prolonged or obstructed labour and the hypertensive disorders of pregnancy, especially eclampsia, claim further lives. These complications, which can occur at any time during pregnancy and childbirth, require prompt access to quality obstetric services equipped to provide lifesaving drugs, antibiotics and transfusions and to perform the caesarean sections and other surgical interventions that prevent deaths from obstructed labour, eclampsia and intractable haemorrhage. One MDG target is to reduce by three quarters, between 1990 and 2015, the maternal mortality ratio.

Maternal mortality is defined as the death of a woman from pregnancy-related causes, when pregnant or within 42 days of termination of pregnancy. The maternal mortality ratio is the number of maternal deaths per 100,000 live births. In MICS, the maternal mortality ratio is estimated by using indirect sisterhood method. To collect the information needed for the use of this estimation method, adult household members are asked a small number of questions regarding the survival of their sisters and the timing of death relative to pregnancy, childbirth and the postpartum period for deceased sisters. The information collected is then converted to lifetime risks of maternal death and maternal mortality ratios<sup>5</sup>.

Palestinian Refugee Camps and Gatherings in Lebanon MICS results on maternal mortality are shown in Table RH.5. The results are also presented only for the national total, since maternal mortality ratios generally have very large sampling errors. Maternal mortality ratio in Palestinian Refugee Camps and Gatherings in Lebanon was 51 per 100,000.

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<sup>5</sup> For more information on the indirect sisterhood method, see WHO and UNICEF, 1997.

## IX. Child Development

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It is well recognized that a period of rapid brain development occurs in the first 3-4 years of life, and the quality of home care is the major determinant of the child's development during this period. Adult activities with children, presence of books in the home, and the conditions of child care are important indicators of quality of home care. A World Fit for Children goal is that "children should be physically healthy, mentally alert, emotionally secure, socially competent and ready to learn."

### 9-1 Early Learning

Information on a number of activities that support early learning was collected in the survey. These included the involvement of adults with children in the following activities: reading books or looking at picture books, telling stories, singing, taking children outside the home, compound or yard, playing with children, and spending time with children naming, counting, or drawing things.

Approximately 65 percent of under-five children, an adult engaged in more than four activities that promote learning and school readiness during the 3 days preceding the survey (Table CD.1). The average number of activities that adults engaged with children was 4. The table also indicates that the father's involvement in such activities was low. Father's involvement with one or more activities was only 6 percent. Only 0.8 percent of children were living in a household without their fathers.

There were no gender differentials in terms of adult activities with children. The percentage reaches 70.5 percent in urban areas and 45.7 in rural areas. Differentials by governorate and socio-economic status are also observed: Adult engagement in activities with children was greatest in Sidon camps (79.3 percent) and lowest in Sur (50 percent), while the proportion was 70.8 percent for children living in the richest households, as opposed to those living in the poorest households at 50.6 percent. Father's involvement showed a similar pattern in terms of adults' engagement in such activities. Patterns of adults engaging in such activities are similar to patterns of parents engaging in these activities.

Exposure to books in early years not only provides the child with greater understanding of the nature of print, but may also give the child opportunities to see others reading, such as older siblings doing school work. Presence of books is important for later school performance and IQ scores.

In Palestinian Refugee Camps and Gatherings in Lebanon, around 17.5 percent of children are living in households where at least 3 non-children's books are present (Table CD.2). 21.4 percent of children aged 0-59 months have three or more children's books. Gender differentials have been observed regarding the percent of families having 3 or more non-children's books; 19 percent for males and 16 percent for females. The presence of both non-children's and children's books is positively correlated with the child's age; in the homes of 22.1 percent of

children aged 24-59 months, there are 3 or more non-children's books, while the figure is 9.7 percent for children aged 0-23 months. Similar differentials exist in terms of children's books.

Table CD.2 also shows that 31 percent of children aged 0-59 months had 3 or more playthings to play with in their homes. There was not a single child who had not at least one plaything (CD.2). The playthings in MICS included household objects, homemade toys, toys that came from a store, and objects and materials found outside the home. It is interesting to note that 70.6 percent of children play with toys that come from a store; however, the percentages for other homemade toys drops to 37.3 percent. The proportion of male children who have 3 or more playthings to play with is equal the proportion of females who had 3 or more playthings (approximately 31 percent). Big differentials are observed between camps with the proportion of children having 3 or more toys is as high as 57.3 percent in Sidon camps dropping to 3.4 percent in Tripoli camps.

## **9-2 Child Care**

Leaving children alone or in the presence of other young children is known to increase the risk of accidents. In MICS, two questions were asked to find out whether children aged 0-59 months were left alone during the week preceding the interview, and whether children were left in the care of other children under 10 years of age.

Table CD.3 shows that 18.3 percent of children aged 0-59 months were left in the care of other children, while 5.1 percent were left alone during the week preceding the interview. Combining the two indicators, it is calculated that 19.3 percent of children were left with inadequate care during the week preceding the survey. No differences were observed by the sex of the child but there are differences between urban and rural areas. The percentage was higher in urban areas reaching 22.1 percent down to 10.3 percent in rural areas. On the other hand, differences between individual camps were also observed. Percent of inadequate care among children of Sidon camps was 31.1 percent compared to 8.2 percent in Sur camps. The percentage of children left without adequate care was higher in the age group 24-59 months reaching 23.5 percent down to 12.2 percent for children aged 0-23 months. Differences were observed in regard to the mother's level of education; the percent of 0-59 months old children left in inadequate care was 25.5 for uneducated mothers, compared to 14.3 for mothers who had secondary education or higher.

## **9-3 Children living arrangements**

Losing one of the parents or one of them has a considerable effect on bringing up the child and on his mental and physiological health. Moreover, children who do not live with one of their parents due to any reason such as divorce or migration are usually more prone to social and psychological problems than children who live with both parents. The results of the survey (Table CD.4) show that 96.2 percent of children below 18 years of age live with both parents, whereas 3.8 percent live with one parent or none of them. The percentage of children who do not live with any of their parents was only 0.1.

## **X. Education**

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### **10-1 Pre-School Attendance and School Readiness**

Attendance to pre-school education in an organized learning or child education program is important for the readiness of children to school. One of the World Fit for Children goals is the promotion of early childhood education.

61.6 percent of children aged 36-59 months are attending pre-school (Table ED.1). Attendance was lowest in Bekaa (53.2 percent). No remarkable gender differences were observed. The proportions of children attending pre-school at ages 36-47 months and 48-59 months are different (48.5 percent and 76.4 percent respectively).

The table also shows the proportion of children in the first grade of primary school who attended pre-school the previous year, an important indicator of school readiness. Overall, 92.3 percent of children who are currently age 6 and attending the first grade of primary school were attending pre-school the previous year. The proportion among males is slightly higher (94.3 percent) than females (90.3 percent). 96.2 percent of children in urban areas had attended pre-school the previous year compared to 75.9 percent among children living in rural areas. Regional differentials are also significant; 97.4 percent of first graders in Beirut have attended pre-school compared to 70.4 percent in Sur.

### **10-2 Primary and Secondary School Participation**

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.

The indicators for primary and secondary school attendance include:

- Net intake rate in primary education
- Net primary school attendance rate
- Net secondary school attendance rate
- Net primary school attendance rate of children of secondary school age
- Female to male education ratio (or gender parity index - GPI)

The indicators of school progression include:

- Survival rate to grade five
- Transition rate to secondary school
- Net primary completion rate

Of the children who are of primary school entry age (age 6), 73.5 percent are attending the first grade of primary school (Table ED.2). (The reason behind this low rate is that the Survey was conducted in January 2006 while schools had begun in September 2005). Sex differentials do not exist; however, significant differentials are present by region. In Tripoli, for instance, the value of the indicator reaches 83 percent, while it is 58.4 percent in Sur.

Table ED.3 provides the percentage of children of primary school age attending primary or secondary (i.e. preparatory and secondary) school. The majority (94.7 percent) of children of primary school age are attending school. However 5.3 percent of the children are out of primary schools. Some may be attending the first grade of preparatory school while others are not in school being dropouts, sick, and/or handicapped. The table indicates that there are not major gender nor rural/urban differentials in net attendance rates, yet school attendance for girls in urban areas was 95.3 percent compared to 92.8 for girls in rural areas.

The secondary school net attendance ratio is presented in Table ED.4. Worse than in primary school, is the fact that only 63.4 percent of the children of secondary school age (12-17 years) are attending secondary school. The remaining percentage is either out of school or attending primary school (see below).

Table ED.4 shows that there are significant gender differences in the secondary school net attendance ratio. The ratio is 61 percent for males going up to 65.9 percent for females. Secondary school net attendance ratio in rural areas is as low as 60.2 percent going up to 64.5 percent in urban areas. The ratio goes down to 59.9 percent in Bekaa and up to 66.6 percent in Sidon.

The percentage of children entering first grade who eventually reach grade 5 is presented in Table ED.5. Of all children starting grade one, 97.5 percent will eventually reach grade five. Notice that this number includes children that repeat grades and that eventually move up to reach grade five. There are no significant gender differences.

The net primary school completion rate and transition rate to secondary education are presented in Table ED.6. At the moment of the survey, only 37.4 percent of the children of primary completion age (11 years) were attending the last grade of primary education. This value should be distinguished from the gross primary completion ratio which includes children of any age attending the last grade of primary. 73.9 percent of the children that completed successfully the last grade of primary school were found at the moment the survey to be attending the first grade of secondary school. No significant gender differences were noticed.

The ratio of girls to boys attending primary and secondary education is provided in Table ED.7. These ratios are better known as the Gender Parity Index (GPI). Notice that the ratios included here are obtained from net attendance ratios rather than gross attendance ratios. The last ratios provide an erroneous description of the GPI mainly because in most of the cases the majority of over-aged children attending primary education tend to be boys. The table shows that gender parity for primary school is 1.00 for primary school going up to 1.08 in secondary school. The advantage of girls is particularly pronounced in Beirut and Bekaa.

### **10-3 Adult Literacy**

One of the World Fit for Children goals is to assure adult literacy. Adult literacy is also an MDG indicator, relating to both men and women. In MICS, since only a women's questionnaire was administered, the results are based only on females age 15-24. Literacy was assessed on the ability of women to read a short simple statement or on school attendance. The percent literate is presented in Table ED.8. The percentage of women that are able to read is 88 percent. No significant differentials were observed according to area of residence (rural/ urban) or according to governorate.



## **XI. Child Protection**

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### **11-1 Birth Registration**

The 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 World Fit for Children states the goal to develop systems to ensure the registration of every child at or shortly after birth, and fulfil his or her right to acquire a name and a nationality, in accordance with national laws and relevant international instruments. The indicator is the percentage of children under 5 years of age whose birth is registered.

The births of 98.4 percent of children under five years in Palestinian Refugee Camps and Gatherings in Lebanon have been registered (Table CP.1). There are no variations in birth registration across any variable including sex, age, or mother's level of education.

### **11-2 Child Labour**

Article 32 of the Convention on the Rights of the Child states: "States Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development..." The World Fit for Children mentions nine strategies to combat child labour and the MDGs call for the protection of children against exploitation. In the MICS questionnaire, a number of questions addressed the issue of child labour, that is, children 5-14 years of age involved in labour activities. A child is considered to be involved in child labour activities at the moment of the survey if during the week preceding the survey:

- Ages 5-11: at least one hour of economic work or 28 hours of domestic work per week.
- Ages 12-14: at least 14 hours of economic work or 28 hours of domestic work per week.

This definition allows differentiation between child labour and child work to identify the type of work that should be eliminated. As such, the estimate provided here is a minimum of the prevalence of child labour since some children may be involved in hazardous labour activities for a number of hours that could be less than the numbers specified in the criteria explained above. Table CP.2 presents the results of child labour by the type of work. Percentages do not add up to the total child labour as children may be involved in more than one type of work. Survey results indicate that 1.5 percent of children aged 5-14 were involved

in labour activities during the reference week. The indicator goes up to 1.8 percent in boys and down to 1.1 in girls. Child labour is particularly high among school dropouts reaching 8.9 percent in children not attending school in opposition to 1.1 percent among children attending schools regularly. In rural areas, the indicator is 1.7 percent down to 0.8 in urban area children. In Sidon camps it is as high as 2.4 percent while it drops to 0.6 in Bekaa camps.

Table CP.3 presents the percentage of children classified as student labourers or as labourer students. Student labourers are the children attending school that were involved in child labour activities at the moment of the surveys. More specifically, of the 94.5 percent of the children 5-14 years of age attending school, 1.1 percent are also involved in child labour activities. Student labourers represent 67.6 percent of all child labourers.

### **11-3 Early Marriage**

Marriage before the age of 18 is a reality for many young girls. According to UNICEF's worldwide estimates, over 60 million women aged 20-24 were married before the age of 18. Factors that influence child marriage rates include: the state of the country's civil registration system, which provides proof of age for children; the existence of an adequate legislative framework with an accompanying enforcement mechanism to address cases of child marriage; and the existence of customary or religious laws that condone the practice.

In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In fact, 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 (female) nature of poverty. The right to 'free and full' consent to a marriage is recognized in the Universal Declaration of Human Rights - with the recognition that consent cannot be 'free and full' when one of the parties involved is not sufficiently mature to make an informed decision about a life partner. The Convention on the Elimination of all Forms of Discrimination against Women mentions the right to protection from child marriage in article 16, which states: "The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage..." While marriage is not considered directly in the Convention on the Rights of the Child, child marriage is linked to other rights - such as the right to express their views freely, the right to protection from all forms of abuse, and the right to be protected from harmful traditional practices - and is frequently addressed by the Committee on the Rights of the Child. Other international agreements related to child marriage are the Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages and the African Charter on the Rights and Welfare of the Child and the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa. Child marriage was also identified by the Pan-African Forum against the Sexual Exploitation of Children as a type of commercial sexual exploitation of children.

Young married girls are a unique, though often invisible, group. Required to perform heavy amounts of domestic work, under pressure to demonstrate fertility, and responsible for raising children while still children themselves, married girls and child mothers face constrained decision-making and reduced life choices. Boys are also affected by child marriage but the issue impacts girls in far larger numbers and with more intensity. Cohabitation - when a couple lives together as if married - raises the same human rights concerns as marriage. Where a girl lives with a man and takes on the role of caregiver for him, the assumption is often that she has become an adult woman, even if she has not yet reached the age of 18. Additional concerns due to the informality of the relationship - for example, inheritance, citizenship and social recognition - might make girls in informal unions vulnerable in different ways than those who are in formally recognized marriages.

Research suggests that many factors interact to place a child at risk of marriage. Poverty, protection of girls, family honour and the provision of stability during unstable social periods are considered as significant factors in determining a girl's risk of becoming married while still a child. Women who married at younger ages were more likely to believe that it is sometimes acceptable for a husband to beat his wife and were more likely to experience domestic violence themselves. The age gap between spouses contributes to domestic violence and to increase the risk of untimely widowhood.

Closely related to the issue of child marriage is the age at which girls become sexually active. Women who are married before the age of 18 tend to have more children than those who marry later in life. Pregnancy related deaths are known to be a leading cause of mortality for both married and unmarried girls between the ages of 15 and 19. There is evidence to suggest that girls who marry at young ages are more likely to marry older men which puts them at increased risk of HIV infection. Parents seek to marry off their girls to protect their honour, and men often seek younger women as wives as a means to assure choosing an HIV-free wife. The demand for this young wife to reproduce and the power imbalance resulting from the age differential lead to very low condom use among such couples. The percentage of women aged 15-49 that were married at an early age (before the age of 18) was around 32.6 percent and that 4.7 percent of the women aged 15-19 are currently married.

## **XII. HIV/AIDS**

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### **12-1 Knowledge of HIV 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). The UN General Assembly Special Session on HIV/AIDS (UNGASS) called on governments to improve the knowledge and skills of young people to protect themselves from HIV. The indicators to measure this goal as well as the MDG of reducing HIV infections by half include improving the level of knowledge of HIV and its prevention, and changing behaviours to prevent further spread of the disease. The HIV module was administered to women 15-49 years of age.

One indicator which is both an MDG and UNGASS indicator is the percent of young women who have correct and comprehensive of HIV prevention and transmission. Women were asked whether they have heard of HIV transmission. The results are presented in Table HA.1. In Palestinian Refugee Camps and Gatherings in Lebanon, the majority of the interviewed women (91.8 percent) have heard of AIDS.

Table HA.2 presents the percent of women who can correctly identify misconceptions concerning the transmission of HIV. The indicator is based on the two most common and relevant misconceptions in Palestinian Refugee Camps and Gatherings in Lebanon, that HIV can be transmitted by supernatural means and by sharing in food. The table also provides information on whether women know that HIV cannot be transmitted by mosquito bites (49 percent), whereas they know that HIV can be transmitted by sharing needles (88.7 percent). Of the interviewed women, 28.8 percent rejected the two most common misconceptions and knew that a healthy-looking person can be HIV infected.

Knowledge of mother-to-child transmission of HIV is also an important first step for women to seek HIV testing when they are pregnant to avoid infection in the baby. Women should know that HIV can be transmitted during pregnancy, delivery, and through breastfeeding. The level of knowledge among women age 15-49 years concerning mother-to-child transmission is presented in Table HA.4. Overall, 88.9 percent of women knew of the possibility of mother-to-child transmission. Mothers who know all three ways of mother-to-child transmission were 45.1 percent, while nearly 3 percent of women did not know of any specific way of HIV mother-to-child transmission.

The indicators on attitudes toward people living with HIV measure stigma and discrimination in the community. Stigma and discrimination are low if respondents report an accepting attitude on the following four questions:

- 1) would care for family member sick with AIDS;
- 2) would buy fresh vegetables from a vendor who was HIV positive;
- 3) thinks that a female teacher who is HIV positive should be allowed to teach in school;
- 4) would *not* want to keep HIV status of a family member a secret.

Table HA.5 presents the attitudes of women towards people living with HIV/AIDS. The table indicates that 4.7 percent of women would refuse care for a family member sick with AIDS. 49.7 percent of women would want to keep HIV status of a family member a secret. 47 percent of women think that a teacher who is HIV positive should not be allowed to teach in school and 41 percent of women would refuse to buy food from an HIV positive person. The table indicates that two women in ten reject all the above mentioned discriminatory statements.

Another important indicator is the knowledge of where to be tested for HIV and use of such services. Questions related to knowledge among women of a facility for HIV testing and whether they have ever been tested is presented in Table HA.6. Only 26.6 percent of women knew where to be tested. The percentage was 55.6 in Beirut camps down to 14.6 in Sidon camp.

### **XIII. Conclusion and Recommendations**

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The Multiple Indicator Cluster Survey (MICS3) was conducted in the Palestinian camps and gatherings in Lebanon, with the purpose of monitoring the situation of women and children. The survey was conducted in the period from December 25, 2005 to February 5, 2006, using three questionnaires: the Household questionnaire, the Individual Women questionnaire, and the Under-Five Children questionnaire. The survey was done on a random self-weighted sample of 6167 households. The response rate was 99.5 percent. The number of women interviewed was 3955 women at a response rate of 98.9 percent. Under-five questionnaires were successfully completed for 2381 children below five years of age, at a response rate of 97.9 percent.

The results of the survey can be summarized as follows:

- The results of the survey show that the mortality rate has decreased over the past fifteen years. The results reveal that the mortality rate for children under five years of age decreased from 37.3 per thousand in 1998 to 31 per thousand in 2006.
- The results show that approximately one child of every 20 children under five years of age is moderately or severely under-weight, and that more than twenty percent of under-fives are stunted. 4.6 percent of the under-five children are wasted, whereas 15.3 percent of children are obese.
- The percentage of infants below 6 months of age who are fed on breast milk exclusively as low as 18 percent. Fifty three percent of infants at the age of 6-9 months are fed on breast milk and solid or semi solid foods. 21 percent of infants at the age of 20-23 months are still breastfed.
- The percent of children at the age of 12-23 months who have taken all recommended vaccines are 93.1 percent.
- 99.9 percent of camps dwellers live in houses that have to improved sanitation facilities.
- 68.3 percent of currently married women said they were using a contraception method; they survey has shown that intrauterine device (IUD) is the most common contraceptive method, followed by the pill.
- The percentage of women who received antenatal care from a skilled medical professional at least once during pregnancy was 90.5. The study reveals that during the last two years preceding the survey, 99.3 percent of deliveries took place in the presence of a skilled medical professional, whereas 97.7 percent of these deliveries took place in a health facility.
- The results reveal that only 61.6 percent of children at the age of 36-59 attend preschool; 73.5 percent of children at the age of joining school (6 years) attend grade one of primary school; the reason behind this low percent is that the survey was conducted in December 2005 whereas the school year had begun in September 2005.

- The percent of women at the age of (15-49) who were married at an early age (below 18 years) was 32.6
- Most of women who were interviewed (91.8 percent) had heard of HIV/AIDS. 45.1 percent of women know that HIV can be transmitted from mother to child.

The following recommendations are based on the results of the survey:

- The healthcare umbrella should be extended to include advanced services and information on their places of availability and types of healthcare services.
- Eliminate all unhealthy practices which are related to child and mother nutrition, through spreading the culture of breastfeeding and encouraging mothers to breastfeed their infants by pointing out the importance of breast milk for the child's healthy growth, how it can protect infants against diseases, and how it can contribute to diminishing risks of child mortality.
- Increase efforts to encourage consultation of health facilities through reducing fees; offering integrated health services: reproductive health services; mother and childcare services; and improving quality of service and performance of medical professionals.
- Using all mass media to enhance health awareness among all family members about the importance of breastfeeding, adequate nutrition, and completion of recommended vaccines, as well as enhancing awareness of improper practices and how STD's can be transmitted.
- The last recommendation is to help policy makers and health programs by conducting further detailed studies on the trends of fertility, unmet medical needs, and children nutritional status.

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**Table HH. 1: Results of household and individual interviews****Number 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 rate, Palestinian refugee camps, Lebanon, 2006**

	Urban/ Rural		Governorate					Total
	Urban	Rural	Tripoli	Beirut	Bekaa	Sidon	Sur	
<b>Number of households</b>	4821	1379	1200	1420	440	1840	1300	6200
<b>Number of occupied households</b>	4821	1379	1200	1420	440	1840	1300	6200
<b>Number of households interviewed</b>	4796	1371	1200	1409	435	1826	1297	6167
<b>Response rate</b>	99.5	99.4	100.0	99.2	98.9	99.2	99.8	99.5
<b>Number of eligible women</b>	3135	866	754	890	264	1244	849	4001
<b>Number of interviewed</b>	3102	853	753	880	261	1225	836	3955
<b>Response rate among women</b>	98.9	98.5	99.9	98.9	98.9	98.5	98.5	98.9
<b>Total response rate among women</b>	98.5	97.9	99.9	98.1	97.8	97.7	98.3	98.4
<b>Number of eligible children under 5</b>	1850	581	483	504	142	742	560	2431
<b>Interviewed mother/ caretaker</b>	1808	573	473	492	142	724	550	2381
<b>Response rate among children</b>	97.7	98.6	97.9	97.6	100.0	97.6	98.2	97.9
<b>Total response rate among children</b>	97.2	98.0	97.9	96.8	98.9	96.8	98.0	97.5

**Table HH.2: Household age distribution by sex**

**Percent distribution of the household population by five-year age groups and dependency age groups, and number of children aged 0-17 years, by sex, Palestinian refugee camps, Lebanon, 2006**

		Sex				Total	
		Male		Female		Number	Rate
		Number	Rate	Number	Rate		
Age	0 - 4	1182	8.2	1249	8.5	2431	8.3
	5 - 9	1741	12.0	1586	10.8	3327	11.4
	10 - 14	2001	13.8	1857	12.7	3858	13.2
	15 - 19	1908	13.2	1758	12.0	3666	12.6
	20 - 24	1514	10.5	1250	8.5	2764	9.5
	25 - 29	934	6.5	1040	7.1	1974	6.8
	30 - 34	885	6.1	1076	7.3	1961	6.7
	35- 39	954	6.6	1147	7.8	2101	7.2
	40 - 44	940	6.5	998	6.8	1938	6.7
	45 - 49	603	4.2	580	4.0	1183	4.1
	50 - 54	427	3.0	503	3.4	930	3.2
	55 - 59	308	2.1	402	2.7	710	2.4
	60 - 64	325	2.2	377	2.6	702	2.4
	65 - 69	258	1.8	316	2.2	574	2.0
	70 +	464	3.2	535	3.6	999	3.4
	Missing/ DK	5	.0	3	.0	8	.0
Dependency age groups	< 15	4924	34.1	4692	32.0	9616	33.0
	15 - 64	8798	60.9	9131	62.2	17929	61.6
	65 +	722	5.0	851	5.8	1573	5.4
	Missing/DK	5	.0	3	.0	8	.0
Age	Children aged 0-17	6102	42.2	5828	39.7	11930	41.0
	Adults 18+/ Missing/ DK	8347	57.8	8849	60.3	17196	59.0
<b>Total</b>		14449	100.0	14677	100.0	29126	100.0

**Table HH.3: Household composition**  
**Percent distribution of households by selected characteristics, Palestinian refugee camps,**  
**Lebanon, 2006**

		<b>Weighted percent</b>	<b>Number of weighted households</b>	<b>Number of unweighted households</b>
<b>Sex of household head</b>	<b>Male</b>	80.6	4972	4972
	<b>Female</b>	19.4	1195	1195
<b>Governorates</b>	<b>Tripoli</b>	19.5	1200	1200
	<b>Beirut</b>	22.8	1409	1409
	<b>Bekaa</b>	7.1	435	435
	<b>Sidon</b>	29.6	1826	1826
	<b>Sur</b>	21.0	1297	1297
<b>Urban/ Rural</b>	<b>Urban</b>	77.8	4796	4796
	<b>Rural</b>	22.2	1371	1371
<b>Family size</b>	<b>1</b>	8.3	509	509
	<b>3 -2</b>	24.0	1482	1482
	<b>5 - 4</b>	30.7	1891	1891
	<b>7 - 6</b>	25.9	1596	1596
	<b>9 - 8</b>	8.9	549	549
	<b>+ 10</b>	2.3	140	140
<b>Total</b>		100.0	6167	6167
<b>At least one child aged &lt; 18 years</b>		63.9	6167	6167
<b>At least one child aged &lt; 5 years</b>		30.4	6167	6167
<b>At least one ever-married woman aged 15-49</b>		64.3	6167	6167

<b>Table HH.4: Women's background characteristics</b> <b>Percent distribution of women aged 15-49 years by background characteristics,</b> <b>Palestinians' refugee camps, Lebanon, 2006</b>				
		Weighted percent of women	Number of women Weighted	Number of women Unweighted
<b>Governorates</b>	<b>Tripoli</b>	19.0	753	753
	<b>Beirut</b>	22.3	880	880
	<b>Bekaa</b>	6.6	261	261
	<b>Sidon</b>	31.0	1225	1225
	<b>Sur</b>	21.1	836	836
<b>Urban/ Rural</b>	<b>Urban</b>	78.4	3102	3102
	<b>Rural</b>	21.6	853	853
<b>Age</b>	<b>15-19</b>	2.1	82	82
	<b>20-24</b>	8.6	342	342
	<b>25-29</b>	15.4	610	610
	<b>30-34</b>	20.0	790	790
	<b>35-39</b>	22.5	891	891
	<b>40-44</b>	19.6	775	775
	<b>45-49</b>	11.8	465	465
<b>Motherhood status</b>	<b>Ever gave birth</b>	93.8	3707	3707
	<b>Never gave birth</b>	6.2	247	247
<b>Education</b>	<b>None</b>	4.5	176	176
	<b>Basic</b>	76.5	3024	3024
	<b>Secondary+</b>	19.1	755	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	18.0	711	711
	<b>Second</b>	19.0	750	750
	<b>Middle</b>	21.0	829	829
	<b>Fourth</b>	20.3	801	801
	<b>Richest</b>	21.8	864	864
<b>Total</b>		100.0	3955	3955

**Table HH.5: Children's background characteristics  
Percent distribution of children under five years of age by  
background characteristics, Palestinian refugee camps, Lebanon,  
2006**

		Weighted percent	Number of under-5 children Weighted	Number of under-5 children Unweighted
<b>Sex</b>	<b>Male</b>	48.4	1153	1153
	<b>Female</b>	51.6	1228	1228
<b>Governorates</b>	<b>Tripoli</b>	19.9	473	473
	<b>Beirut</b>	20.7	492	492
	<b>Bekaa</b>	6.0	142	142
	<b>Sidon</b>	30.4	724	724
	<b>Sur</b>	23.1	550	550
<b>Urban/ Rural</b>	<b>Urban</b>	75.9	1808	1808
	<b>Rural</b>	24.1	573	573
<b>Child age</b>	<b>&lt; 6 months</b>	7.9	189	189
	<b>6- 11 months</b>	9.2	219	219
	<b>12-23 months</b>	20.3	483	483
	<b>24-35 months</b>	21.4	509	509
	<b>36-47 months</b>	21.8	520	520
	<b>48-59 months</b>	19.4	461	461
<b>Mother education</b>	<b>None</b>	4.6	110	110
	<b>Basic</b>	76.1	1811	1811
	<b>Secondary+</b>	19.3	460	460
<b>Wealth index quintiles</b>	<b>Poorest</b>	18.0	429	429
	<b>Second</b>	18.1	430	430
	<b>Middle</b>	23.7	565	565
	<b>Fourth</b>	20.7	494	494
	<b>Richest</b>	19.4	463	463
<b>Total</b>		100.0	2381	2381

**Table CM.1 Early childhood mortality**  
**Infant and under-5 mortality rates, Palestinians' refugee camps, Lebanon, 2006**

	<b>Infant mortality rate*</b>	<b>Under-5 mortality rate**</b>
<b>Sex</b>		
Male	30	36
Female	21	25
<b>Region</b>		
Tripoli	31	38
Beirut	23	27
Bekaa	28	35
Sidon	21	25
Sur	17	21
<b>Area</b>		
Urban	26	31
Rural	25	30
<b>Women's education</b>		
None	26	35
Degree holder	26	31
<b>Wealth index quintiles</b>		
Poorest	34	42
Second	13	15
Middle	32	40
Fourth	23	27
Richest	19	22
<b>Total</b>	<b>26</b>	<b>31</b>

\* MICS indicator 2; MDG indicator 14

\*\* MICS indicator 1; MDG indicator 13

**Table CM.2: Children ever born and proportion dead**  
**Mean number of children ever born and proportion dead by age of**  
**women, Palestinians' refugee camps, Lebanon, 2006**

	Mean number of children ever born	Mean number children surviving	Proportion dead	Number of women
<b>Age</b>				
15-19	.561	.561	.000	82
20-24	1.421	1.392	.021	342
25-29	2.551	2.487	.025	610
30-34	3.546	3.423	.035	790
35-39	4.522	4.310	.047	891
40-44	4.872	4.639	.048	775
45-49	5.553	5.217	.060	465
Total	3.862	3.693	.044	3955

**Table NU.1: Child Nutrition**  
**Percent of children aged 0-59 who are severely or moderately malnourished, Palestinians' refugee camps, Lebanon, 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 + 2SD)	Number of children
Sex	Male	5.0	.3	20.6	9.2	4.5	1.4	16.4	918
	Female	4.2	1.8	19.1	7.1	4.7	.8	14.3	974
Governorates	Tripoli	1.2	0.2	18.2	6.4	3.4	0.5	17.4	407
	Beirut	8.1	1.9	26.5	14.8	5.6	0.8	13.6	359
	Bekaa	0.8	0.8	15.8	4.2	8.	0.	10.0	120
	Sidon	4.5	1.0	18.2	5.7	6.2	2.1	11.6	577
	Sur	6.1	1.4	19.1	8.4	3.7	0.9	21.2	429
Urban/ Rural	Urban	4.6	1.1	20.1	8.2	4.8	1.1	13.7	1449
	Rural	4.7	1.1	19.0	7.7	3.8	1.1	20.5	443
Child age	< 6 months	2.1	.7	11.2	4.9	8.4	5.6	21.0	143
	6-11 months	2.3	.6	18.0	2.9	2.3	.0	22.7	172
	12-23 months	5.3	.6	23.5	9.5	5.0	.6	19.8	358
	24-35 months	5.4	1.5	21.7	10.5	4.6	1.2	11.7	411
	35-47 months	3.5	.5	18.3	7.7	3.7	.0	11.1	431
	48-59 months	6.4	2.4	20.2	8.2	4.8	1.6	14.3	377
Mother's education	None	3.6	1.2	16.9	9.6	2.4	0.	24.1	83
	Basic	4.4	1.0	20.3	8.3	4.6	1.3	16.3	1450
	Secondary +	5.6	1.7	18.4	6.7	5.0	0.6	9.2	359
Wealth index quintiles	Poorest	4.3	1.6	20.8	7.5	3.4	0.6	21.1	322
	Second	3.4	0.3	17.3	6.5	3.4	2.0	10.8	353
	Middle	5.2	1.1	17.9	6.6	6.1	1.4	13.2	441
	Fourth	5.6	1.5	22.0	9.5	6.1	0.5	13.0	409
	Richest	4.1	1.1	21.3	10.4	3.3	1.1	19.9	367
<b>Total</b>		4.6	1.1	19.8	8.1	4.6	1.1	15.3	1892

\* MICS indicator 6; MDG indicator 4

\*\* MICS indicator 7

\*\*\* MICS indicator 8



**Table NU.2: Initial breastfeeding**  
**Percentage of women aged 15-49 years with a birth in the two years preceding the survey who breastfed their baby within one hour of birth and within one day of birth, Palestinians' refugee camps, 2006**

		Percentage of women who started breastfeeding immediately after birth	Percentage of women who started breastfeeding within one hour of birth*	Percentage of women who started breastfeeding within one day of birth**	Number of women with a live birth in the two years preceding the survey
<b>Governorates</b>	Tripoli	58.8	58.8	58.8	177
	Beirut	69.5	70.1	72.7	154
	Bekaa	64.5	64.5	64.5	62
	Sidon	68.3	68.3	68.3	331
	Sur	53.8	53.8	54.7	225
<b>Urban/ Rural</b>	Urban	67.3	67.4	68.0	728
	Rural	48.9	48.9	49.8	221
<b>Months since last birth</b>	Less than 6 months	62.0	62.6	62.6	179
	6 – 8 months	65.0	65.0	65.0	206
	12-23 months	63.5	63.5	64.4	463
<b>Mother's education</b>	None	66.7	66.7	66.7	21
	Basic	62.3	62.5	62.7	722
	Secondary+	65.0	65.0	67.0	206
<b>Wealth index quintiles</b>	Poorest	50.0	50.0	50.6	166
	Second	65.6	65.6	68.3	183
	Middle	70.4	70.4	70.4	233
	Fourth	61.6	62.2	62.2	185
	Richest	64.3	64.3	64.3	182
<b>Total</b>		63.0	63.1	63.8	949

\*\*MICS indicator 45

**Table NU. 3: Breastfeeding**  
**Percentage of living children according to breastfeeding status at each age group, Palestinians' refugee camps, Lebanon, 2006**

		Children 0-3 months		Children 0-5 months		Children 6-9 months		Children 12-15 months		Children 20-23 months	
		Percent exclusively breastfed	Number of children	Percent exclusively breastfed **	Number of children	Percent receiving breast milk and solid/ mushy food ***	Number of children	Percent breastfed ****	Number of children	Percent breasted*****	Number of children
<b>Sex</b>	<b>Male</b>	32.1	53	23.7	97	52.3	86	43.5	69	18.8	69
	<b>Female</b>	18.2	55	12.0	92	53.6	56	51.9	79	22.7	88
<b>Governorate</b>	<b>Tripoli</b>	*	20	(25.0)	28	(53.8)	26	(43.3)	30	(14.3)	42
	<b>Beirut</b>	*	21	(11.8)	34	*	24	(20.0)	30	(14.8)	27
	<b>Bekaa</b>	*	7	*	14	*	19	*	1	*	11
	<b>Sidon</b>	(17.5)	40	20.6	63	(52.2)	46	59.6	52	(35.1)	37
	<b>Sur</b>	*	20	(16.0)	50	(51.9)	27	(57.1)	35	(22.5)	40
<b>Urban/ Rural</b>	<b>Urban</b>	20.9	86	17.6	142	51.7	118	44.1	111	20.5	112
	<b>Rural</b>	*	22	(19.1)	47	*	24	(59.5)	37	(22.2)	45
<b>Mother's education</b>	<b>None</b>	*	3	*	6	*	6	*	6	*	5
	<b>Basic</b>	20.7	87	15.9	145	54.9	102	44.6	112	20.9	129
	<b>Secondary+</b>	*	18	(23.7)	38	(47.1)	34	(63.3)	30	*	23
<b>Wealth index quintiles</b>	<b>Poorest</b>	*	18	(20.0)	30	*	23	(42.9)	28	(19.4)	31
	<b>Second</b>	*	20	(27.3)	44	(48.4)	31	(55.2)	29	(17.2)	29
	<b>Middle</b>	(20.0)	25	(12.8)	47	(60.5)	43	(48.3)	29	(23.5)	34
	<b>Fourth</b>	*	24	(22.9)	35	*	21	(41.9)	31	(30.3)	33
	<b>Richest</b>	*	21	(6.1)	33	*	24	(51.6)	31	(13.3)	30
<b>Total</b>		25.0	108	18.0	189	52.8	142	48.0	148	21.0	157

\*Less than 25 children  
\*\* MICS indicator 15  
\*\*\*MICS indicator 17  
\*\*\*\* MICS indicator 16

() number of cases from 20 to 25



**Table NU3.W Infant feeding patterns by age**  
**Percent distribution of children aged under 3 years by feeding pattern, Palestinians' refugee camps, Lebanon, 2006**

Age in months	Infant feeding pattern						Total	Number of children
	Exclusively breastfed	Breastfed and plain water only	Breastfed and non-milk liquids	Breastfed and other milk/formula	Breastfed and other complimentary foods	Weaned (not breastfed)		
0-1	(40.0)	(8.9)	(8.9)	(24.4)	(2.2)	(15.6)	100.0	45
2-3	14.3	19.0	7.9	33.3	9.5	15.9	100.0	63
4-5	8.6	8.6	9.9	17.3	33.3	22.2	100.0	81
6-7	2.7	6.8	8.1	10.8	45.9	25.7	100.0	74
8-9	.0	2.9	4.4	4.4	60.3	27.9	100.0	68
10-11	1.3	5.2	2.6	7.8	50.6	32.5	100.0	77
12-13	.0	4.7	3.1	6.3	37.5	48.4	100.0	64
14-15	.0	.0	1.2	3.6	40.5	54.8	100.0	84
16-17	.0	.0	1.0	5.1	18.2	75.8	100.0	99
18-19	.0	.0	.0	1.3	13.9	84.8	100.0	79
20-21	.0	.0	1.2	6.1	17.1	75.6	100.0	82
22-23	.0	2.7	1.3	.0	13.3	82.7	100.0	75
24-25	.0	.0	1.2	.0	12.2	86.6	100.0	82
26-27	.0	.0	1.1	.0	5.4	93.5	100.0	93
28-29	.0	.0	.0	.0	3.3	96.7	100.0	90
30-31	.0	.0	.0	.0	1.4	98.6	100.0	70
32-33	.0	.0	.0	.0	1.5	98.5	100.0	67
34-35	.0	.0	.0	.0	4.7	95.3	100.0	107
<b>Total</b>	2.6	2.8	2.6	5.8	20.3	65.9	100.0	1400

( ) number of cases from 20 to 25

**Table NU. 4: Adequately fed infants**  
**Percentage of infants under 6 months of age exclusively breastfed, percentage of infants aged 6-11 months who are breastfed and who ate solid/semi-solid food at least the minimum recommended number of times yesterday and percentage of infants who are adequately fed, Palestinians' refugee camps, Lebanon, 2006**

		Percent of infants aged 0-5 months who are exclusively breastfed	Percent of infants aged 6-8 months who received breast milk and complementary food at least 2 times in prior 24 hours	Percent of infants aged 9-11 months who received breast milk and complementary food at least 3 times in prior 24 hours	Percent of infants aged 6-11 months who received breast milk and complementary food at least the minimum recommended number of times per day**	Percent of infants aged 0-11 months who were appropriately fed**	Number of infants aged 0-11 months
Sex	Male	23.7	38.8	22.2	31.4	28.0	1153
	Female	12.0	41.5	15.8	26.5	19.5	1228
Governorates	Tripoli	25.0	50.0	40.9	45.2	37.1	473
	Beirut	11.8	38.9	10.0	23.7	18.1	492
	Bekaa	14.3	58.3	33.3	47.6	34.3	142
	Sidon	20.6	28.6	9.5	18.2	19.3	724
	Sur	16.0	39.1	16.7	29.3	22.0	550
Urban/ Rural	Urban	17.6	39.1	18.6	28.3	23.6	1808
	Rural	19.1	42.9	21.4	34.3	25.6	573
Mother's education	None	33.3	50.0	.0	20.0	25.0	110
	Basic	15.9	38.0	22.5	30.2	23.4	1811
	Secondary+	23.7	44.0	12.0	28.0	26.1	460
Wealth index quintiles	Poorest	20.0	58.8	35.7	48.4	34.4	429
	Second	27.3	29.6	5.6	20.0	23.6	430
	Middle	12.8	51.7	15.6	32.8	24.1	565
	Fourth	22.9	21.1	13.6	17.1	19.7	494
	Richest	6.1	37.5	28.0	31.7	20.3	463
<b>Total</b>		18.0	39.8	18.9	29.2	24.0	2381

\* MICS indicator 18

\*\* MICS indicator 19

**Table NU.5 Iodized salt consumption**  
**Percentage of households consuming adequately iodized salt, Palestinians' refugee camps, Lebanon, 2006**

		Percent of households in which salt was tested	Number of households interviewed	Percent of households with salt test result is		Total	Number of households in which salt was tested or with no salt
				<15 PPM	15+ PPM*		
<b>Governorates</b>	<b>Tripoli</b>	100.0	1200	.3	99.7	100.0	1200
	<b>Beirut</b>	100.0	1409	.1	99.9	100.0	1409
	<b>Bekaa</b>	100.0	435	.2	99.8	100.0	435
	<b>Sidon</b>	100.0	1826	.1	99.9	100.0	1826
	<b>Sur</b>	95.0	1297	.1	99.9	100.0	1232
<b>Urban/ Rural</b>	<b>Urban</b>	100.0	4796	.1		100.0	4796
	<b>Rural</b>	95.3	1371	.2	99.8	100.0	1306
<b>Wealth index quintiles</b>	<b>Poorest</b>	95.6	1352	.2	99.8	100.0	1292
	<b>Second</b>	99.8	1255	.1	99.9	100.0	1252
	<b>Middle</b>	100.0	1257	.2	99.8	100.0	1257
	<b>Fourth</b>	100.0	1191	.2	99.8	100.0	1191
	<b>Richest</b>	99.8	1112	.2	99.8	100.0	1110
<b>Total</b>		98.9	6167	.1	99.9	100.0	6102

\*MICS indicator 41

**Table NU.6: Children's vitamin A**

**Percent distribution of children aged 6-59 months by whether they have received a high dose vitamin A supplement in the last 6 months, Palestinians' refugee camps, Lebanon, 2006**

		Percent of children who received vitamin A supplement					Total	Number of children aged 6-59 months
		Within last 6 months*	Prior to last 6 months	Not sure when	Not sure if received vitamin A supplement	Never received vitamin A supplement		
Sex	Male	19.4	5.5	6.9	3.9	64.3	100.0	1056
	Female	20.2	4.8	5.9	4.9	64.2	100.0	1136
Governorate	Tripoli	14.6	.7	2.7	.0	82.0	100.0	445
	Beirut	34.5	.9	2.4	.4	61.8	100.0	458
	Bekaa	28.1	3.1	16.4	4.7	47.7	100.0	128
	Sidon	16.8	9.5	14.1	9.4	50.2	100.0	661
	Sur	12.8	7.8	.6	5.4	73.4	100.0	500
Urban/ Rural	Urban	22.3	5.3	8.2	4.3	59.9	100.0	1666
	Rural	12.0	4.6	.6	4.9	77.9	100.0	526
Child age	6-11 months	24.2	3.7	6.4	3.7	62.1	100.0	219
	12-23 months	25.3	4.8	5.2	5.2	59.6	100.0	483
	24-35 months	20.0	8.1	5.1	3.1	63.7	100.0	509
	36-47 months	14.4	4.4	9.6	4.8	66.7	100.0	520
	48-59 months	17.8	3.9	5.4	5.0	67.9	100.0	461
Mother's education	None	25.0	8.7	1.0	7.7	57.7	100.0	104
	Basic	19.4	4.9	6.8	4.9	64.0	100.0	1666
	Secondary +	20.1	5.5	5.9	1.7	66.8	100.0	422
Wealth index quintiles	Poorest	19.5	7.0	2.3	3.8	67.4	100.0	399
	Second	15.5	6.7	6.2	3.4	68.1	100.0	386
	Middle	18.3	6.6	11.2	4.2	59.7	100.0	518
	Fourth	22.4	2.0	6.3	6.5	62.7	100.0	459
	Richest	22.8	3.7	4.7	4.0	64.9	100.0	430
Total		19.8	5.2	6.4	4.4	64.2	100.0	2192
*MICS indicator 42								

**Table NU.7: Post-partum mothers' vitamin A supplementation**

**Percentage of women aged 15-49 years with a live birth in the 2 years preceding the survey by whether they received a high dose vitamin A supplement before the infant was 8 weeks old, Palestinians' refugee camps, Lebanon, 2006**

		Received vitamin A supplement**	Not sure if received vitamin A	Number of women aged 15-49 years
<b>Governorates</b>	<b>Tripoli</b>	19.8	1.1	177
	<b>Beirut</b>	47.4	1.9	154
	<b>Bekaa</b>	50.0	1.6	62
	<b>Sidon</b>	33.8	4.2	331
	<b>Sur</b>	37.3	.4	225
<b>Urban/ Rural</b>	<b>Urban</b>	37.5	2.7	728
	<b>Rural</b>	28.1	.5	221
<b>Mother's education</b>	<b>None</b>	*	*	21
	<b>Basic</b>	35.9	2.5	722
	<b>Secondary +</b>	31.1	1.5	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	39.2	1.8	166
	<b>Second</b>	41.5	1.1	183
	<b>Middle</b>	35.6	3.0	233
	<b>Fourth</b>	28.6	2.2	185
	<b>Richest</b>	31.9	2.7	182
<b>Total</b>		35.3	2.2	949
<b>*Less than 25 cases</b>				
<b>**MICS indicator 43</b>				



**Table NU.8: Low birth weight infants**

**Percentage of live births in the 2 years preceding the survey that weighed below 2500 grams at birth, Palestinians' refugee camps, Lebanon, 2006**

		Percent of live births below 2500 grams**	Percent of live births weighed at birth ***	Number of live births
<b>Governorate</b>	<b>Tripoli</b>	10.2	98.9	177
	<b>Beirut</b>	5.8	99.4	154
	<b>Bekaa</b>	8.0	93.5	62
	<b>Sidon</b>	9.7	97.6	331
	<b>Sur</b>	8.5	98.2	225
<b>Urban/ Rural</b>	<b>Urban</b>	9.2	97.8	728
	<b>Rural</b>	7.4	98.6	221
<b>Mother's education</b>	<b>None</b>	*	*	21
	<b>Basic</b>	9.3	97.8	722
	<b>Secondary+</b>	6.4	98.5	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	9.2	98.8	166
	<b>Second</b>	10.5	96.7	183
	<b>Middle</b>	8.1	98.7	233
	<b>Fourth</b>	9.9	97.8	185
	<b>Richest</b>	6.2	97.8	182
<b>Total</b>		8.7	98.0	949

\*Less than 25 cases

\*\* MICS indicator 9

\*\*\*MICS indicator 10

**Table CH.1: Vaccinations in first year of life**

**Percentage of children aged 12-23 months with seen vaccination cards who were immunized against childhood diseases at any time before the survey and before the first birthday, Palestinians' refugee camps, Lebanon, 2006**

	BCG*	DPT1	DPT2	DPT3**	Polio0	Polio1	Polio2	Polio3***	Measles****	All*****	None	Number of children aged 12-23 months
<b>Vaccinated at any time before the survey according to vaccination card</b>	97.3	98.5	98.3	97.3	93.9	98.8	98.5	97.8	97.5	93.1	.0	408

\*MICS indicator 25

\*\*MICS indicator 27

\*\*\*MICS indicator 26

\*\*\*\* MICS indicator 28; MDG 15

\*\*\*\*\*MICS indicator 31

**Table CH.2: Vaccinations by background characteristics**  
**Percentage of children aged 12-23 months with seen vaccination cards , who are currently vaccinated against childhood diseases, Palestinians' refugee camps, Lebanon, 2006**

		BCG	DPT1	DPT2	DPT3	Polio0	Polio1	Polio2	Polio3	Measles	All	None	Number of children aged 12-23
<b>Sex</b>	<b>Male</b>	94.6	97.8	97.3	97.3	92.9	97.8	98.4	98.9	98.4	91.3	.0	184
	<b>Female</b>	99.6	99.1	98.2	96.4	94.6	99.6	98.7	96.9	96.9	94.6	.0	224
<b>Governorates</b>	<b>Tripoli</b>	97.9	100.0	100.0	100.0	99.0	100.0	100.0	100.0	100.0	97.9	.0	96
	<b>Beirut</b>	91.1	100.0	98.2	100.0	91.1	100.0	100.0	100.0	100.0	89.3	.0	56
	<b>Bekaa</b>	100.0	100.0	93.3	86.7	53.3	100.0	100.0	100.0	100.0	86.7	.0	15
	<b>Sidon</b>	100.0	98.5	97.8	94.9	97.1	100.0	97.8	94.9	95.6	94.9	.0	136
	<b>Sur</b>	96.2	96.2	96.2	96.2	92.4	95.2	97.1	98.1	96.2	89.5	.0	105
<b>Rural/ Urban</b>	<b>Urban</b>	97.6	99.3	98.3	96.9	93.5	100.0	98.6	97.6	97.6	93.8	.0	292
	<b>Rural</b>	96.6	96.6	96.6	96.6	94.8	95.7	98.3	98.3	97.4	91.4	.0	116
<b>Mother's education</b>	<b>None</b>	100.0	100.0	92.9	92.9	100.0	100.0	92.9	92.9	92.9	85.7	.0	14
	<b>Basic</b>	96.6	98.8	98.4	97.8	92.8	98.4	99.1	98.8	98.4	93.5	.0	321
	<b>Secondary+</b>	100.0	97.3	95.9	93.2	97.3	100.0	97.3	94.5	94.5	93.2	.0	73
<b>Wealth index quintiles</b>	<b>Poorest</b>	97.3	97.3	93.3	96.0	92.0	97.3	97.3	100.0	98.7	94.7	.0	75
	<b>Second</b>	92.3	97.4	100.0	96.2	84.6	96.2	100.0	97.4	97.4	84.6	.0	78
	<b>Middle</b>	97.0	100.0	99.0	98.0	94.9	100.0	99.0	98.0	97.0	92.9	.0	99
	<b>Fourth</b>	100.0	100.0	100.0	100.0	97.4	100.0	100.0	100.0	100.0	100.0	.0	78
	<b>Richest</b>	100.0	97.4	96.2	93.6	100.0	100.0	96.2	93.6	94.9	93.6	.0	78
<b>Total</b>		97.3	98.5	97.8	96.8	93.9	98.8	98.5	97.8	97.5	93.1	.0	408

\*Less than 25 cases  
 ()20-25 cases

**Table CH.3: Neonatal tetanus protection**

**Percent of mothers with a birth in the last 2 years prior to survey who were vaccinated against neonatal tetanus, Palestinians' refugee camps, Lebanon, 2006**

		Percent of mothers with a birth in the last 2 years who received at least two doses in the last pregnancy	Percent of mothers with a birth in the last 2 years who received at least 2 doses within three years	Percent of mothers with a birth in the last 2 years who received at least 3 doses within prior 5 years	Percent of mothers with a birth in the last 2 years who received at least 4 doses within prior 10 years	Percent of mothers with a birth in the last 2 years who received at least 5 doses during lifetime	Protected against tetanus**	Number of women
<b>Governorates</b>	<b>Tripoli</b>	2.8	30.5	.0	.6	.0	33.9	177
	<b>Beirut</b>	1.9	35.7	.0	.0	.6	38.3	154
	<b>Bekaa</b>	6.5	32.3	.0	.0	.0	38.7	62
	<b>Sidon</b>	6.9	23.3	.0	.0	.6	30.8	331
	<b>Sur</b>	16.4	19.6	.0	.4	.4	36.9	225
<b>Urban/ Rural</b>	<b>Urban</b>	6.2	29.4	.0	.1	.4	36.1	728
	<b>Rural</b>	12.2	16.3	.0	.5	.5	29.4	221
<b>Mother's age</b>	<b>15-19</b>	(2.7)	(10.8)	(.0)	(.0)	(.0)	(13.5)	37
	<b>20-24</b>	4.3	13.4	.0	.0	1.1	18.7	187
	<b>25-29</b>	6.8	28.5	.0	.0	.8	36.1	263
	<b>30-34</b>	8.5	33.8	.0	.9	.0	43.2	213
	<b>35-39</b>	11.6	30.5	.0	.0	.0	42.1	190
	<b>40-44</b>	7.3	25.5	.0	.0	.0	32.7	55
	<b>45-49</b>	*	*	*	*	*	*	4
<b>Mother's education</b>	<b>None</b>	*	*	*	*	*	*	21
	<b>Basic</b>	7.1	26.5	.0	.3	.4	34.2	722
	<b>Secondary+</b>	7.8	27.7	.0	.0	.5	35.9	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	9.0	20.5	.0	.0	.0	29.5	166
	<b>Second</b>	9.8	27.3	.0	.5	1.1	38.8	183
	<b>Middle</b>	10.3	22.7	.0	.4	.4	33.9	233
	<b>Fourth</b>	3.8	34.6	.0	.0	.5	38.9	185
	<b>Richest</b>	4.4	26.9	.0	.0	.0	31.3	182
<b>Total</b>		7.6	26.3	.0	.2	.4	34.6	949
<p>*Less than 25  () 25-50 cases  **MICS indicator 32</p>								



**Table CH.4: Oral rehydration treatment**  
**Percentage of children aged 0-59 months with diarrhea in the last two weeks who were treated with oral rehydration solution (ORS) or other oral rehydration treatment (ORT), Palestinians' refugee camps, Lebanon, 2006**

		Percent of children who had diarrhea in the last two weeks prior to survey	Number of children aged 0-59	Percent of children who had diarrhea in the last two weeks prior to survey who received ORS packet	Percent of children who had diarrhea in the last two weeks prior to survey who received recommended homemade fluid	Percent of children who had diarrhea in the last two weeks prior to survey who received prepackaged ORS fluid	Percent of children who had diarrhea in the last two weeks prior to survey who received no treatment	ORT use rate**	Number of children aged 0-59 months who had diarrhea
<b>Sex</b>	<b>Male</b>	11.3	1153	20.8	64.6	31.5	23.8	76.2	130
	<b>Female</b>	8.6	1228	28.6	63.8	43.8	16.2	83.8	105
<b>Governorate</b>	<b>Tripoli</b>	8.0	473	(21.1)	(57.9)	(47.4)	(21.1)	(78.9)	38
	<b>Beirut</b>	7.9	492	(25.6)	(56.4)	(30.8)	(25.6)	(74.4)	39
	<b>Bekaa</b>	19.0	142	(18.5)	(81.5)	(44.4)	(11.1)	(88.9)	27
	<b>Sidon</b>	10.2	724	33.8	63.5	33.8	20.3	79.7	74
	<b>Sur</b>	10.4	550	15.8	66.7	35.1	21.1	78.9	57
<b>Urban/ Rural</b>	<b>Urban</b>	10.3	1808	26.3	62.4	36.6	21.5	78.5	186
	<b>Rural</b>	8.6	573	(16.3)	(71.4)	(38.8)	(16.3)	(83.7)	49
<b>Child's age</b>	<b>&lt;6 months</b>	12.7	189	*	*	*	*	*	24
	<b>6- 11 months</b>	22.4	219	(20.4)	(55.1)	(40.8)	(26.5)	(73.5)	49
	<b>12- 23 months</b>	13.5	483	27.7	67.7	38.5	18.5	81.5	65
	<b>24-35 months</b>	6.7	509	(29.4)	(76.5)	(32.4)	(8.8)	(91.2)	34
	<b>36-47 months</b>	5.2	520	(18.5)	(81.5)	(33.3)	(14.8)	(85.2)	27
	<b>48- 59 months</b>	7.8	461	(30.6)	(72.2)	(38.9)	(11.1)	(88.9)	36
<b>Mother's education</b>	<b>None</b>	5.5	110	*	*	*	*	*	6
	<b>Basic</b>	10.9	1811	25.4	63.5	35.5	19.8	80.2	197
	<b>Secondary+</b>	7.0	460	(21.9)	(68.8)	(50.0)	(21.9)	(78.1)	32
<b>Wealth index quintiles</b>	<b>Poorest</b>	8.2	429	(20.0)	(77.1)	(51.4)	(11.4)	(88.6)	35
	<b>Second</b>	13.7	430	22.0	59.3	32.2	25.4	74.6	59
	<b>Middle</b>	12.0	565	26.5	69.1	36.8	14.7	85.3	68
	<b>Fourth</b>	9.1	494	(33.3)	(57.8)	(33.3)	(24.4)	(75.6)	45
	<b>Richest</b>	6.0	463	(14.3)	(57.1)	(35.7)	(28.6)	(71.4)	28
<b>Total</b>		9.9	2381	24.3	64.3	37.0	20.4	79.6	235
<p align="center">** MICS indicator 33                      *Less than 25 cases                      (25-50 cases)</p>									

**Table CH.5: Home management of diarrhea**

**Percentage of children aged 0-59 months with diarrhea in the last two weeks who took increased fluids and continued to feed during the episode, Palestinians' refugee camps, Lebanon, 2006**

		Percent of children who had diarrhea in last two weeks	Number of children aged 0-59 months	Children with diarrhea who drank more	Children with diarrhea who drank more or less	Children with diarrhea who ate the same or more	Children with diarrhea who ate much less or none	Home management of diarrhea**	Received ORT or increased fluids AND continued feeding***	Children aged 0-59 months who had diarrhea in the last two week
<b>Sex</b>	<b>Male</b>	11.3	1153	25.4	73.1	43.8	53.8	13.1	33.1	130
	<b>Female</b>	8.6	1228	24.8	75.2	31.4	68.6	8.6	23.8	105
<b>Governorate</b>	<b>Tripoli</b>	8.0	473	(31.6)	(68.4)	(57.9)	(42.1)	(21.1)	(44.7)	38
	<b>Beirut</b>	7.9	492	(10.3)	(89.7)	(10.3)	(89.7)	(0.)	(10.3)	39
	<b>Bekaa</b>	19.0	142	(33.3)	(66.7)	(37.0)	(59.3)	(11.1)	(29.6)	27
	<b>Sidon</b>	10.2	724	21.6	78.4	47.3	52.7	8.1	28.4	74
	<b>Sur</b>	10.4	550	31.6	64.9	33.3	63.2	15.8	31.6	57
<b>Urban/ Rural</b>	<b>Urban</b>	10.3	1808	24.7	75.3	39.2	60.2	10.8	28.0	186
	<b>Rural</b>	8.6	573	(26.5)	(69.4)	(34.7)	(61.2)	(12.2)	(32.7)	49
<b>Child</b>	<b>0-11 months</b>	17.9	408	11.0	87.7	46.6	50.7	6.8	27.4	73
	<b>12-23 months</b>	13.5	483	27.7	70.8	26.2	72.3	9.2	23.1	65
	<b>24-35 months</b>	6.7	509	(32.4)	(67.6)	(41.2)	(58.8)	(20.6)	(41.2)	34
	<b>36-47 months</b>	5.2	520	(29.6)	(70.4)	(40.7)	(59.3)	(18.5)	(33.3)	27
	<b>48-59 months</b>	7.8	461	(38.9)	(61.1)	(38.9)	(61.1)	(8.3)	(27.8)	36
<b>Mother's education</b>	<b>None</b>	5.5	110	*	*	*	*	*	*	6
	<b>Basic</b>	10.9	1811	26.4	72.6	38.1	60.4	11.2	29.4	197
	<b>Secondary+</b>	7.0	460	(15.6)	(84.4)	(40.6)	(59.4)	(12.5)	(25.0)	32
<b>Wealth index quintiles</b>	<b>Poorest</b>	8.2	429	(20.0)	(80.0)	(28.6)	(68.6)	(8.6)	(28.6)	35
	<b>Second</b>	13.7	430	18.6	81.4	40.7	59.3	5.1	27.1	59
	<b>Middle</b>	12.0	565	33.8	63.2	26.5	70.6	17.6	25.0	68
	<b>Fourth</b>	9.1	494	(22.2)	(77.8)	(42.2)	(57.8)	(6.7)	(24.4)	45
	<b>Richest</b>	6.0	463	(28.6)	(71.4)	(67.9)	(32.1)	(17.9)	(50.0)	28
<b>Total</b>		9.9	2381	25.1	74.0	38.3	60.4	11.1	28.9	235

\*\* MICS indicator 34

\*\*\*MICS indicator 35

\* Less than 25 ( ) 25-50 cases

**Table CH.6: Respiratory system infections**

**Percentage of children aged 0-59 who had acute respiratory system infection within two weeks prior to the survey, Palestinians' refugee camps, Lebanon, 2006**

		Had respiratory infection	Number of children aged 0-59	Red Crescent Center	UNRWA clinic	Private hospital/clinic	Pharmacy	Other	Any appropriate healthcare provider*	Number of children aged 0-59 who had respiratory infections
Sex	Males	17.8	1153	2.9	28.3	42.4	3.7	2.0	47.6	378
	Females	16.5	1228	3.1	25.6	34.5	2.2	1.5	41.6	418
Governorate	Tripoli	16.7	473	1.2	25.6	38.0	6.1	2.5	38.4	164
	Beirut	14.8	492	.8	19.3	61.6	4.2	1.4	55.5	119
	Bekaa	14.1	142	1.6	8.2	60.0	1.6	5.0	27.9	61
	Sidon	20.2	724	3.2	43.4	32.9	1.4	1.4	63.0	219
	Sur	16.4	550	5.6	21.0	24.4	1.7	1.1	30.0	233
Urban/Rural	Urban	17.1	1808	1.9	28.2	43.9	3.3	2.3	49.5	570
	Rural	17.1	573	5.8	23.5	21.4	1.8	.0	31.9	226
Age	0-11 months	18.6	408	3.3	28.7	44.7	2.0	.0	48.7	150
	12-23 months	18.8	483	4.9	22.4	37.4	2.2	1.1	42.1	183
	24-35 months	16.5	509	4.3	26.7	39.3	3.1	2.4	46.6	161
	36-47 months	17.3	520	1.2	25.8	42.2	3.1	3.3	44.2	163
	48-59 months	14.5	461	.7	32.4	26.9	4.3	1.5	41.0	139
Mother's education	None	24.5	110	.0	27.3	33.3	.0	.0	47.7	44
	Basic	17.6	1811	3.3	28.5	37.6	2.9	2.2	45.2	628
	Secondary+	13.5	460	2.4	18.5	45.2	4.0	.0	39.5	124
Wealth index quintiles	Poorest	15.9	429	4.4	23.5	26.5	.5	.0	31.7	183
	Second	24.2	430	4.5	33.5	35.6	3.4	1.9	49.4	176
	Middle	20.5	565	3.0	29.4	37.1	2.0	2.6	50.2	201
	Fourth	12.3	494	1.8	24.8	44.3	4.4	1.6	48.7	113
	Richest	12.7	463	.0	20.3	54.2	5.7	1.7	43.1	123
<b>Total</b>		<b>17.1</b>	<b>2381</b>	<b>3.0</b>	<b>26.9</b>	<b>38.5</b>	<b>2.9</b>	<b>1.7</b>	<b>44.5</b>	<b>796</b>
*MICS indicator 23		() 25-50 cases								



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

		Percent of children with suspected pneumonia who received antibiotics in the two weeks prior to survey*	Number of children aged 0-59 months with suspected pneumonia in the two weeks prior to the survey
<b>Sex</b>	<b>Male</b>	66.8	205
	<b>Female</b>	67.5	203
<b>Governorate</b>	<b>Tripoli</b>	36.7	79
	<b>Beirut</b>	65.8	73
	<b>Bekaa</b>	80.0	20
	<b>Sidon</b>	80.8	146
	<b>Sur</b>	70.0	90
<b>Urban/Rural</b>	<b>Urban</b>	71.6	310
	<b>Rural</b>	53.1	98
<b>Child's age</b>	<b>0-11 months</b>	72.4	76
	<b>12-23 months</b>	65.9	91
	<b>24-35 months</b>	77.4	84
	<b>36-47 months</b>	60.0	90
	<b>48-59 months</b>	59.7	67
<b>Mother's education</b>	<b>None</b>	48.1	27
	<b>Basic</b>	69.3	319
	<b>Secondary+</b>	64.5	62
<b>Wealth index quintiles</b>	<b>Poorest</b>	70.6	68
	<b>Second</b>	63.5	104
	<b>Middle</b>	62.1	116
	<b>Fourth</b>	75.4	61
	<b>Richest</b>	71.2	59
<b>Total</b>		67.2	408

<b>Table CH.7A: Knowledge of the two danger signs of pneumonia</b> <b>Percentage of mothers/caretakers of children aged 0-59 months by knowledge of types of symptoms for taking a child immediately to a health facility, and percentage of mothers/caretakers who recognize fast and difficult breathing as signs for seeking care immediately, Palestinians' refugee camps, Lebanon 2006</b>											
		<b>Percentage of mothers/caretakers of children aged 0-59 months who think that a child should be taken immediately to a health facility if the child:</b>								<b>Mothers/caretakers who recognize the two danger signs of pneumonia</b>	<b>Number of mothers/caretakers of children aged 0-59 months</b>
		<b>Unable to drink or breastfeed</b>	<b>Becomes sicker</b>	<b>Develops a fever</b>	<b>Has fast breathing</b>	<b>Has difficulty breathing</b>	<b>Has blood in stool</b>	<b>Is drinking poorly</b>	<b>Has other symptoms</b>		
<b>Governorates</b>	<b>Tripoli</b>	8.0	41.6	88.6	9.9	21.1	10.1	0.4	4.0	1.7	473
	<b>Beirut</b>	11.6	16.3	87.8	24.2	50.8	4.5	0.8	15.0	14.4	492
	<b>Bekaa</b>	7.0	64.8	84.5	16.9	34.5	3.5	0.	21.8	4.2	142
	<b>Sidon</b>	4.8	28.0	90.1	40.2	41.4	5.5	0.6	10.2	22.7	724
	<b>Sur</b>	6.2	21.8	81.8	5.5	26.0	1.1	0.9	20.4	0.7	550
<b>Urban/ Rural</b>	<b>Urban</b>	7.5	30.5	88.1	26.7	38.9	5.3	0.7	11.0	13.7	1808
	<b>Rural</b>	6.8	24.6	83.8	5.1	24.1	4.4	0.5	19.5	9.	573
<b>Mother's education</b>	<b>None</b>	3.6	32.7	80.9	19.1	24.5	2.7	0.9	11.8	7.3	110
	<b>Basic</b>	7.8	29.6	86.3	22.3	36.3	5.2	0.7	13.6	11.3	1811
	<b>Secondary+</b>	6.1	26.1	91.5	18.7	34.1	5.2	0.4	10.9	8.9	460
<b>Wealth index quintiles</b>	<b>Poorest</b>	5.8	29.6	77.4	8.6	27.0	4.2	0.5	18.9	4.2	429
	<b>Second</b>	8.4	32.8	82.3	20.9	31.6	4.7	0.9	7.2	10.5	430
	<b>Middle</b>	6.7	31.2	91.2	27.3	35.8	5.3	0.9	10.6	13.5	565
	<b>Fourth</b>	7.1	27.3	89.7	27.7	41.5	5.9	0.	13.6	15.4	494
	<b>Richest</b>	8.6	24.4	92.7	20.1	39.5	5.2	0.9	15.3	8.2	463
<b>Total</b>		7.3	29.1	87.1	21.5	35.4	5.1	0.6	13.0	10.6	2381

**Table CH.8: Solid fuel use**  
**Percent distribution of households according to type of cooking fuel, and percentage of**  
**households using solid fuels for cooking, Palestinians' refugee camps, Lebanon 2006**

		Electricity	Natural Gas	Kerosene	Wood	Other source	Total	Solid fuels for cooking*	Number of households
	<b>Tripoli</b>	3.3	96.3	0.4	.0	0.1	100.0	0.0	1200
	<b>Beirut</b>	4.5	94.6	0.9	0.1	.0	100.0	0.1	1409
<b>Governorates</b>	<b>Bekaa</b>	0.7	98.2	0.5	0.7	.0	100.0	0.7	435
	<b>Sidon</b>	4.5	95.1	0.4	0.	.0	100.0	0.	1826
	<b>Sur</b>	3.4	95.3	0.6	0.2	0.5	100.0	0.2	1297
<b>Urban/ Rural</b>	<b>Urban</b>	4.0	95.4	0.5	0.1	.0	100.0	0.1	4796
	<b>Rural</b>	3.0	95.6	0.7	0.2	0.5	100.0	0.2	1371
	<b>Poorest</b>	6.1	90.9	2.1	0.5	0.3	100.0	0.5	1352
	<b>Second</b>	5.6	94.0	4.	.0	.0	100.0	.0	1255
<b>Wealth index quintiles</b>	<b>Middle</b>	5.6	94.1	.0	.0	0.2	100.0	.0	1257
	<b>Fourth</b>	0.4	99.6	.0	.0	.0	100.0	.0	1191
	<b>Richest</b>	0.2	99.8	.0	.0	.0	100.0	.0	1112
<b>Total</b>		3.7	95.5	6.	0.1	0.1	100.0	0.1	6167

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

		Source of drinking water										Total	Improved source of drinking water*	Number of household members
		Improved sources							Unimproved sources					
		Piped into dwelling	Piped into yard/plot	Public tap/stand-pipe	Tube-well/bore-hole	Protected well	Protected spring	Bottled water	Tanker truck	Bottled water <sup>1</sup>	Other			
<b>Governorate</b>	<b>Tripoli</b>	82.8	.7	.1	.2	.7	.2	10.7	4.3	.0	.3	100.0	95.3	6165
	<b>Beirut</b>	2.4	.0	.1	.0	.2	.0	66.0	30.7	.3	.3	100.0	68.6	6086
	<b>Bekaa</b>	83.8	.9	3.5	2.0	1.3	1.3	5.0	1.4	.3	.4	100.0	97.9	2108
	<b>Sidon</b>	88.5	.2	.0	1.3	4.1	.1	3.3	1.5	.2	.8	100.0	97.5	8496
	<b>Sur</b>	63.1	4.0	.7	5.5	1.4	.9	22.7	.3	.9	.4	100.0	98.4	6271
<b>Urban/ Rural</b>	<b>Urban</b>	63.7	.2	.4	.7	1.8	.2	22.2	9.9	.4	.5	100.0	89.3	22359
	<b>Rural</b>	62.9	4.0	.7	5.1	1.7	.9	22.4	1.6	.2	.4	100.0	97.7	6767
<b>Wealth index quintiles</b>	<b>Poorest</b>	66.5	4.5	.7	6.6	.7	.5	17.3	2.1	.1	.9	100.0	96.9	5820
	<b>Second</b>	64.7	1.1	.5	1.4	.8	.6	24.8	5.5	.7	.0	100.0	93.8	5844
	<b>Middle</b>	83.9	.0	.0	.5	1.5	.3	11.0	2.3	.2	.3	100.0	97.2	5884
	<b>Fourth</b>	58.4	.0	.3	.0	2.3	.1	26.2	11.6	.3	.7	100.0	87.4	5754
	<b>Richest</b>	43.7	.0	.8	.3	3.6	.3	32.1	18.2	.3	.7	100.0	80.7	5824
<b>Total</b>		63.5	1.1	.5	1.8	1.8	.4	22.3	7.9	.3	.5	100.0	91.2	29126

\*MICS indicator 11; MDG indicator 30

**1** For households using bottled water as the main source of drinking water, the source used for other purposes such as cooking and handwashing is used to determine whether to classify the source as improved

**Table EN.2: Household water treatment**

**Percentage of household population according to drinking water treatment method used in the household, and percentage of household population that applied an appropriate water treatment method, Palestinian refugee camps, Lebanon, 2006**

		Water treatment method used in the household						All drinking water sources Appropriate water treatment method*	Number of household members	Improved drinking water sources Appropriate water treatment method	Number of household members	Unimproved drinking water sources Appropriate water treatment method	Number of household members
		None	Boil	Add bleach/ chlorine	Strain through a cloth	Use water filter	Let it stand and settle						
<b>Governorate</b>	<b>Tripoli</b>	87.1	2.1	.9	.6	8.4	.7	11.0	6165	11.4	5878	3.8	287
	<b>Beirut</b>	98.4	.9	.0	.2	.4	.2	1.3	6086	1.6	4178	.6	1908
	<b>Bekaa</b>	90.8	2.8	.2	.6	6.2	.0	8.4	2108	8.6	2064	.0	44
	<b>Sidon</b>	94.3	.0	.0	.0	5.0	.0	5.0	8496	5.0	8282	8.9	214
	<b>Sur</b>	79.2	.5	.0	.9	3.5	17.2	4.0	6271	3.9	6169	13.7	102
<b>Urban/ Rural</b>	<b>Urban</b>	89.4	1.1	.2	.2	4.6	4.2	5.8	22359	6.3	19958	1.6	2401
	<b>Rural</b>	92.3	.5	.1	1.0	4.2	3.0	4.8	6767	4.7	6613	11.0	154
<b>Wealth Index quintiles</b>	<b>Poorest</b>	89.8	.9	.0	.9	4.0	5.4	5.0	5820	5.1	5639	.0	181
	<b>Second</b>	92.7	1.1	.2	.4	3.5	2.6	4.5	5844	4.6	5483	3.3	361
	<b>Middle</b>	91.9	.7	.2	.3	3.4	3.2	4.4	5884	4.4	5717	3.6	167
	<b>Fourth</b>	90.4	1.2	.2	.1	4.2	3.7	5.3	5754	5.9	5030	1.4	724
	<b>Richest</b>	85.8	.7	.5	.3	7.5	4.6	8.5	5824	10.0	4702	2.4	1122
<b>Total</b>		90.1	.9	.2	.4	4.5	3.9	5.5	29126	5.9	26571	2.2	2555

**\*MICS indicator 13**

**Table EN.3: Time to source of water**  
**Percent distribution of households according to time to go to source of drinking water, get water and return, and mean time to source of drinking water, Palestinian refugee camps, Lebanon, 2006**

		Time to source of drinking water						Total	Mean time to source of drinking water*	Number of households
		Water on premises	Water on premises	15 minutes to less than 30 minutes	30 minutes to less than 1 hour	1 hour or more	Don't know			
<b>Governorate</b>	<b>Tripoli</b>	84.5	8.5	5.0	.7	.7	.6	100.0	72.6	1200
	<b>Beirut</b>	3.2	64.7	18.0	7.2	7.0	.0	100.0	14.8	1409
	<b>Bekaa</b>	93.6	1.4	2.4	1.2	1.4	.0	100.0	373.1	435
	<b>Sidon</b>	89.2	2.1	1.2	3.3	4.2	.0	100.0	38.4	1826
	<b>Sur</b>	74.1	22.9	1.1	1.6	.4	.0	100.0	16.7	1297
<b>Urban/Rural</b>	<b>Urban</b>	63.6	22.0	6.8	3.5	4.0	.1	100.0	32.6	4796
	<b>Rural</b>	73.1	22.1	2.3	1.9	.3	.1	100.0	16.3	1371
<b>Wealth index quintiles</b>	<b>Poorest</b>	78.7	14.2	4.2	1.7	1.2	.0	100.0	31.5	1352
	<b>Second</b>	65.4	17.6	10.2	2.9	3.8	.1	100.0	35.5	1255
	<b>Middle</b>	82.8	12.0	2.2	1.5	1.5	.0	100.0	32.8	1257
	<b>Fourth</b>	54.7	31.6	6.2	3.8	3.6	.1	100.0	21.5	1191
	<b>Richest</b>	42.5	37.6	6.7	6.5	6.1	.5	100.0	30.9	1112
<b>Total</b>		65.7	22.0	5.8	3.2	3.1	.1	100.0	29.8	6167

\* The mean time to source of drinking water is calculated based on those households that do not have water on the premises.

**Table EN.4: Person collecting water**  
**Percent distribution of households according to the person collecting drinking water used in the household,**  
**Palestinian refugee camps, Lebanon, 2006**

		Person collecting drinking water						Total	Number of households
		Adult woman	Adult man	Female child under age 15	Male child under age 15	Don't know			
<b>Governorate</b>	<b>Tripoli</b>	27.6	70.4	.5	1.0	.5	100.0	199	
	<b>Beirut</b>	12.4	82.2	1.9	3.5	.0	100.0	1385	
	<b>Bekaa</b>	(24.4)	(73.3)	(2.2)	(.0)	(.0)	100.0	45	
	<b>Sidon</b>	7.5	90.5	.0	1.0	1.0	100.0	201	
	<b>Sur</b>	47.5	42.9	4.9	4.3	.3	100.0	345	
<b>Urban/ Rural</b>	<b>Urban</b>	14.1	81.2	1.6	2.8	.2	100.0	1797	
	<b>Rural</b>	43.1	47.9	4.5	4.2	.3	100.0	378	
<b>Wealth index quintiles</b>	<b>Poorest</b>	29.4	59.2	5.7	5.7	.0	100.0	299	
	<b>Second</b>	15.3	78.8	2.4	3.3	.2	100.0	458	
	<b>Middle</b>	23.7	69.7	.4	5.3	.9	100.0	228	
	<b>Fourth</b>	18.9	76.1	2.2	2.8	.0	100.0	544	
	<b>Richest</b>	15.8	82.0	.8	1.2	.2	100.0	646	
<b>Total</b>		19.2	75.4	2.1	3.1	.2	100.0	2175	

( ) Number of cases 25 - 50

**Table EN.4: Use of sanitary means of excreta disposal**

**Percent distribution of household population according to type of toilet facility used by the household, and the percentage of household population using sanitary means of excreta disposal, Palestinian refugee camps, Lebanon, 2006**

		Type of toilet facility used by household				Total	Percentage of population using sanitary means of excreta disposal*	Number of household members
		Improved sanitation facility			Unimproved sanitation facility			
		Piped sewer system	Septic tank	Pit latrine	Other			
<b>Governorate</b>	<b>Tripoli</b>	98.3	.2	1.3	.1	100.0	99.9	6165
	<b>Beirut</b>	99.1	.9	.0	.0	100.0	100.0	6086
	<b>Bekaa</b>	79.6	19.1	1.2	.0	100.0	100.0	2108
	<b>Sidon</b>	99.7	.3	.0	.0	100.0	100.0	8496
	<b>Sur</b>	48.0	43.0	8.8	.2	100.0	99.8	6271
<b>Urban /Rural</b>	<b>Urban</b>	97.2	2.2	.6	.0	100.0	100.0	22359
	<b>Rural</b>	52.0	39.8	8.0	.3	100.0	99.7	6767
<b>Wealth index quintiles</b>	<b>Poorest</b>	47.4	41.9	10.5	.2	100.0	99.8	5820
	<b>Second</b>	86.6	12.6	.9	.0	100.0	100.0	5844
	<b>Middle</b>	99.5	.3	.0	.1	100.0	99.9	5884
	<b>Fourth</b>	100.0	.0	.0	.0	100.0	100.0	5754
	<b>Richest</b>	100.0	.0	.0	.0	100.0	100.0	5824
<b>Total</b>		86.7	11.0	2.3	.1	100.0	99.9	29126

\*MICS indicator 12; MDG indicator 31



**Table EN.5: Use of improved water sources and improved sanitation**

**Percentage of household population using both improved drinking water sources and sanitary means of excreta disposal, Palestinian refugee camps, Lebanon, 2006**

		Using improved sources of drinking water*	Using sanitary means of excreta disposal**	Using improved sources of drinking water and using sanitary means of excreta disposal***	Number of household members
<b>Governorate</b>	<b>Tripoli</b>	95.3	99.9	95.2	6165
	<b>Beirut</b>	68.6	100.0	68.6	6086
	<b>Bekaa</b>	97.9	100.0	97.9	2108
	<b>Sidon</b>	97.5	100.0	97.5	8496
	<b>Sur</b>	98.4	99.8	98.2	6271
<b>Urban/ Rural</b>	<b>Urban</b>	89.3	100.0	89.3	22359
	<b>Rural</b>	97.7	99.7	97.4	6767
<b>Wealth index quintiles</b>	<b>Poorest</b>	96.9	99.8	96.7	5820
	<b>Second</b>	93.8	100.0	93.8	5844
	<b>Middle</b>	97.2	99.9	97.0	5884
	<b>Fourth</b>	87.4	100.0	87.4	5754
	<b>Richest</b>	80.7	100.0	80.7	5824
<b>Total</b>		95.3	91.2	99.9	29126
*MICS indicator 11; MDG indicator 30					
**MICS indicator 12; MDG indicator 31					

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

		Percent of women currently married who are using:									Any modern method	Any traditional method	Any method*	Number of women currently married
		Not using any method	Female sterilization	Pill	IUD	Condom	Withdrawal	Periodic abstinence	Other	Total				
<b>Governorate</b>	<b>Tripoli</b>	37.8	2.5	12.4	29.9	9.1	1.4	3.2	3.8	100.0	53.8	8.4	62.2	693
	<b>Beirut</b>	29.5	.5	22.8	22.0	7.7	12.1	2.9	2.5	100.0	53.1	17.5	70.5	801
	<b>Bekaa</b>	32.5	3.7	11.8	33.7	7.3	2.0	6.5	2.4	100.0	56.5	11.0	67.5	246
	<b>Sidon</b>	31.2	1.9	24.1	22.8	5.4	8.0	4.0	2.6	100.0	54.2	14.6	68.8	1162
	<b>Sur</b>	29.2	3.0	27.3	22.3	4.1	6.2	5.5	2.4	100.0	56.8	14.1	70.8	761
<b>Urban/ Rural</b>	<b>Urban</b>	31.3	1.7	21.4	24.8	7.0	7.1	4.0	2.7	100.0	54.8	13.9	68.7	2888
	<b>Rural</b>	33.3	3.5	21.7	24.0	4.4	5.9	4.5	2.7	100.0	53.5	13.2	66.7	775
<b>Woman's age</b>	<b>15-19</b>	77.5	.0	17.5	3.8	.0	.0	.0	1.3	100.0	21.3	1.3	22.5	80
	<b>20-24</b>	51.8	.0	19.2	12.3	6.3	7.2	2.1	1.2	100.0	37.7	10.5	48.2	334
	<b>25-29</b>	33.7	.0	27.3	20.3	8.5	4.4	2.2	3.7	100.0	56.1	10.2	66.3	597
	<b>30-34</b>	27.3	.7	24.3	27.8	7.4	5.3	4.9	2.3	100.0	60.2	12.6	72.7	748
	<b>35-39</b>	20.2	2.6	24.3	29.8	7.1	7.6	5.4	3.0	100.0	63.8	16.0	79.8	846
	<b>40-44</b>	27.6	4.4	15.7	30.1	5.1	10.3	4.1	2.8	100.0	55.3	17.2	72.4	682
	<b>45-49</b>	43.4	4.8	13.3	18.9	4.0	7.4	5.1	3.2	100.0	41.0	15.7	56.6	376
<b>Number of living children</b>	<b>0</b>	91.0	.0	2.4	3.9	1.2	.8	.4	.4	100.0	7.5	1.6	9.0	255
	<b>1</b>	64.1	.3	17.9	4.6	4.6	5.8	1.8	.9	100.0	27.4	8.5	35.9	329
	<b>2</b>	31.3	.0	23.6	21.0	10.3	6.9	3.9	3.0	100.0	54.9	13.7	68.7	466
	<b>3</b>	24.1	.4	24.6	27.2	7.4	8.5	4.8	3.0	100.0	59.5	16.3	75.9	692
	<b>4+</b>	21.1	3.7	23.0	30.7	6.2	7.3	4.8	3.2	100.0	63.6	15.3	78.9	1921
<b>Woman's level of education</b>	<b>None</b>	42.4	4.0	22.5	18.5	3.3	7.3	.0	2.0	100.0	48.3	9.3	57.6	151
	<b>Basic</b>	31.7	2.2	21.7	25.2	6.1	6.8	3.8	2.7	100.0	55.0	13.3	68.3	2807
	<b>Secondary+</b>	29.5	1.1	20.4	23.7	8.8	7.2	6.1	3.1	100.0	54.0	16.5	70.5	705
<b>Wealth index quintiles</b>	<b>Poorest</b>	32.1	3.8	22.8	22.0	6.6	6.3	4.3	2.2	100.0	55.1	12.8	67.9	624
	<b>Second</b>	33.2	1.8	20.2	24.6	6.1	8.0	3.8	2.3	100.0	52.6	14.2	66.8	684
	<b>Middle</b>	31.5	1.8	19.5	29.3	5.4	6.4	3.5	2.6	100.0	56.0	12.5	68.5	778
	<b>Fourth</b>	34.5	1.9	22.0	22.3	7.0	6.5	3.0	2.8	100.0	53.2	12.3	65.5	741
	<b>Richest</b>	28.0	1.3	22.8	24.3	7.2	7.2	5.7	3.5	100.0	55.6	16.4	72.0	836
<b>Total</b>		31.7	2.0	21.5	24.6	6.5	6.9	4.1	2.7	100.0	54.6	13.7	68.3	3663

\* MICS indicator 21, MDG indicator 19c



**Table RH.2: Antenatal care provider**

**Percent distribution of women aged 15-49 who gave birth in the two years preceding the survey by type of personnel providing antenatal care, Palestinian refugee camps Lebanon, 2006**

		Person providing antenatal care				Total	Any skilled personnel	Number of women who gave birth in the preceding two years
		Medical doctor	Nurse/ midwife	Relative/ friend	Other/Missing			
<b>Governorate</b>	<b>Tripoli</b>	59.9	31.6	.0	8.5	100.0	91.5	177
	<b>Beirut</b>	84.4	15.6	.0	.0	100.0	100.0	154
	<b>Bekaa</b>	75.8	22.6	.0	1.6	100.0	98.4	62
	<b>Sidon</b>	55.9	23.0	20.8	.3	100.0	78.9	331
	<b>Sur</b>	59.6	38.7	.0	1.8	100.0	98.2	225
<b>Urban/ Rural</b>	<b>Urban</b>	65.0	23.5	9.5	2.1	100.0	88.5	728
	<b>Rural</b>	58.4	38.9	.0	2.7	100.0	97.3	221
<b>Woman's age</b>	<b>15-19</b>	(67.6)	(16.2)	(16.2)	(.0)	100.0	(83.8)	37
	<b>20-24</b>	67.4	25.1	4.8	2.7	100.0	92.5	187
	<b>25-29</b>	63.9	26.2	8.4	1.5	100.0	90.1	263
	<b>30-34</b>	59.2	30.5	7.0	3.3	100.0	89.7	213
	<b>35-39</b>	64.2	26.3	7.9	1.6	100.0	90.5	190
	<b>40-44</b>	58.2	34.5	3.6	3.6	100.0	92.7	55
	<b>45-49</b>	*	*	*	*	100.0	100.0	4
<b>Woman's education</b>	<b>None</b>	*	*	*	*	100.0	100.0	21
	<b>Basic</b>	62.5	26.7	8.0	2.8	100.0	89.2	722
	<b>Secondary</b>	67.0	27.2	5.3	.5	100.0	94.2	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	60.8	36.1	.6	2.4	100.0	97.0	166
	<b>Second</b>	70.5	26.2	2.2	1.1	100.0	96.7	183
	<b>Middle</b>	54.1	34.3	9.0	2.6	100.0	88.4	233
	<b>Fourth</b>	64.9	17.8	14.6	2.7	100.0	82.7	185
	<b>Richest</b>	69.2	19.8	8.8	2.2	100.0	89.0	182
<b>Total</b>		63.4	27.1	7.3	2.2	100.0	90.5	949

\* less than 25

() between 25 and 50

\*\* \* MICS indicator 20

**Table RH.3: Antenatal care**

**Percentage of pregnant women receiving antenatal care among women aged 15-49 years who gave birth in two years preceding the survey and percentage of pregnant women receiving specific care as part of the antenatal care received, Palestinian refugee camps, Lebanon, 2006**

		Percent of pregnant women receiving ANC one or more times during pregnancy	Percent of pregnant women who had:				Number of women who gave birth in two years preceding survey
			Blood test taken	Blood pressure measured	Urine specimen taken	Weight measured	
<b>Governorate</b>	<b>Tripoli</b>	100.0	96.6	97.7	95.5	100.0	177
	<b>Beirut</b>	100.0	97.4	94.8	97.4	100.0	154
	<b>Bekaa</b>	100.0	95.2	96.8	93.5	98.4	62
	<b>Sidon</b>	99.7	96.4	98.5	97.0	99.1	331
	<b>Sur</b>	99.6	91.1	93.8	89.3	95.6	225
<b>Urban/ Rural</b>	<b>Urban</b>	99.9	96.0	97.1	96.3	99.0	728
	<b>Rural</b>	99.5	92.8	94.6	89.6	96.8	221
<b>Woman's age</b>	<b>15-19</b>	(100.0)	(100.0)	(97.3)	(94.6)	(100.0)	37
	<b>20-24</b>	99.5	94.1	96.3	94.1	99.5	187
	<b>25-29</b>	100.0	97.0	97.3	96.2	99.2	263
	<b>30-34</b>	99.5	96.7	95.8	95.3	98.1	213
	<b>35-39</b>	100.0	92.6	97.4	93.7	97.9	190
	<b>40-44</b>	100.0	92.7	94.5	92.7	94.5	55
	<b>45-49</b>	*	*	*	*	*	4
<b>Woman's level of education</b>	<b>None</b>	*	*	*	*	*	21
	<b>Basic</b>	99.7	95.2	96.4	93.8	98.3	722
	<b>Secondary +</b>	100.0	95.6	97.1	98.1	99.0	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	100.0	92.8	94.0	92.2	96.4	166
	<b>Second</b>	99.5	97.3	96.2	95.1	97.8	183
	<b>Middle</b>	100.0	94.0	97.9	92.3	100.0	233
	<b>Fourth</b>	99.5	95.1	97.3	95.7	97.8	185
	<b>Richest</b>	100.0	97.3	96.7	98.9	100.0	182
<b>Total</b>		99.8	95.3	96.5	94.7	98.5	949

\* Number of cases is less than 25 cases

() Number of cases between 25 and 50 cases

\*\* \* MICS indicator 44

**Table RH.4: 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, Palestinian, Lebanon, 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				
<b>Governorate</b>	<b>Tripoli</b>	55.9	42.4	.6	.6	.6	100.0	98.9	98.3	177
	<b>Beirut</b>	74.0	26.0	.0	.0	.0	100.0	100.0	99.4	154
	<b>Bekaa</b>	85.5	14.5	.0	.0	.0	100.0	100.0	95.2	62
	<b>Sidon</b>	52.9	45.6	.0	1.5	.0	100.0	98.5	96.4	331
	<b>Sur</b>	62.7	37.3	.0	.0	.0	100.0	100.0	98.7	225
<b>Urban/Rural</b>	<b>Urban</b>	62.5	36.8	.0	.5	.1	100.0	99.3	97.1	728
	<b>Rural</b>	57.5	41.2	.5	.9	.0	100.0	99.1	99.5	221
<b>Woman's age</b>	<b>15-19</b>	(70.3)	(29.7)	(.0)	(.0)	(.0)	100.0	(100.0)	(94.6)	37
	<b>20-24</b>	63.1	36.9	.0	.0	.0	100.0	100.0	98.9	187
	<b>25-29</b>	55.1	43.7	.0	.8	.4	100.0	98.9	97.7	263
	<b>30-34</b>	65.3	33.8	.5	.5	.0	100.0	99.5	97.2	213
	<b>35-39</b>	61.1	37.9	.0	1.1	.0	100.0	98.9	97.9	190
	<b>40-44</b>	63.6	34.5	.0	1.8	.0	100.0	98.2	96.4	55
	<b>45-49</b>	*	*	*	*	*	100.0	*	*	4
<b>Woman's level of education</b>	<b>None</b>	*	*	*	*	*	100.0	*	*	21
	<b>Primary</b>	59.7	39.3	.1	.7	.1	100.0	99.2	98.2	722
	<b>Secondary +</b>	68.0	31.6	.0	.5	.0	100.0	99.5	96.6	206
<b>Wealth index quintiles</b>	<b>Poorest</b>	61.4	38.6	.0	.0	.0	100.0	100.0	98.2	166
	<b>Second</b>	62.8	37.2	.0	.0	.0	100.0	100.0	97.3	183
	<b>Middle</b>	53.6	45.5	.4	.4	.0	100.0	99.6	98.3	233
	<b>Fourth</b>	59.5	37.8	.0	2.7	.0	100.0	97.3	96.8	185
	<b>Richest</b>	71.4	28.0	.0	.0	.5	100.0	99.5	97.8	182
<b>Total</b>		61.3	37.8	.1	.6	.1	100.0	99.3	97.7	949

\* Number of cases is less than 25 cases

() Number of cases between 25 and 50 cases

\*\* MICS indicator 4; MDG indicator 17

\*\* \*MICS indicator 5

**Table RH.5: Maternal mortality ratio**

**Lifetime risk of maternal death and proportion of dead sisters dying of maternal causes, Palestinian refugee camps,**

		Number of adult household respondents	Sisters who reached age 15	Sisters who reached age 15 (adjusted)	Sisters who reached aged 15 and who died	Maternal deaths	Adjustment factor	Sister units of risk exposure	Lifetime risk of maternal death	Proportion of dead sisters dying of maternal causes	Total fertility rate for girls at the age 10-14	Maternal mortality ratio*
<b>Respondent's age</b>	<b>15-19</b>	82	215	757	1	0	.107	81	.000	.0	.	.
	<b>20-24</b>	342	923	3248	15	2	.206	669	.003	13.3	.	.
	<b>25-29</b>	610	1925	6775	38	0	.343	2324	.000	.0	.	.
	<b>30-34</b>	789	2859	2859	51	5	.503	1438	.003	9.8	.	.
	<b>35-39</b>	890	3503	3503	126	8	.664	2326	.003	6.3	.	.
	<b>40-44</b>	775	2735	2735	124	9	.802	2193	.004	7.3	.	.
	<b>45-49</b>	465	1752	1752	113	6	.900	1577	.004	5.3	.	.
<b>Total</b>		3953	13912	21629	468	30	.	10608	.003	6.4	5.50	51

\*MICS indicator 3; MDG indicator 16

**Table CD.1: Family support for learning**

**Percentage of children aged 0-59 months for whom household members are engaged in activities that promote learning and school readiness, Palestinian refugee camps, Lebanon, 2006**

		Number of children aged 0-59 months					Number of children aged 0-59 months
		For whom household members engaged in four or more activities that promote learning and school readiness*	Mean number of activities household members engage in with the child	For whom the father engaged in one or more activities that promote learning and school readiness**	Mean number of activities the father engaged in with the child	Living in a household without their natural father	
<b>Sex</b>	<b>Male</b>	63.7	1.2	6.0	.1	1.0	1153
	<b>Female</b>	65.2	1.2	5.9	.1	.5	1228
<b>Governorate</b>	<b>Tripoli</b>	55.8	.9	5.9	.1	.4	473
	<b>Beirut</b>	68.9	1.2	14.0	.1	.2	492
	<b>Bekaa</b>	59.2	1.0	4.2	.1	.0	142
	<b>Sidon</b>	79.3	1.5	4.4	.1	.8	724
	<b>Sur</b>	50.0	1.1	1.3	.0	1.6	550
<b>Urban/ Rural</b>	<b>Urban</b>	70.5	1.3	7.2	.1	.4	1808
	<b>Rural</b>	45.7	.9	2.1	.0	1.9	573
<b>Age</b>	<b>0-23 months</b>	58.7	.9	3.1	.0	.6	891
	<b>24-59 months</b>	68.0	1.4	7.7	.1	.9	1490
<b>Mother's education</b>	<b>None</b>	47.3	.9	5.5	.1	4.5	110
	<b>Basic</b>	62.9	1.2	5.8	.1	.7	1811
	<b>Secondary +</b>	74.8	1.3	6.7	.1	.0	460
<b>Wealth index quintiles</b>	<b>Poorest</b>	50.6	1.1	2.6	.0	1.2	429
	<b>Second</b>	64.4	1.2	4.2	.1	.0	430
	<b>Middle</b>	66.2	1.2	4.6	.1	1.2	565
	<b>Fourth</b>	69.4	1.3	6.1	.1	1.0	494
	<b>Richest</b>	70.2	1.2	12.3	.1	.2	463
<b>Total</b>		64.5	1.2	6.0	.1	.8	2381
<p>*MICS indicator 46 **MICS Indicator 47</p>							



**Table CD.2: Learning materials**

**Percentage of children aged 0-59 months living in households containing learning materials, Palestinian refugee camps, Lebanon, 2006**

		3 or more non-children's books*	3 or more children's books**	Child plays with:					3 or more types of playthings***	Number of children aged 0 – 59 months
				Household objects	Objects and materials found outside the home	Home-made toys	Toys that came from a store	No playthings mentioned		
<b>Sex</b>	<b>Male</b>	18.7	19.6	43.9	34.3	38.0	69.6	.0	30.6	1153
	<b>Female</b>	16.3	23.1	50.7	26.1	36.6	71.5	.0	31.4	1228
<b>Governorate</b>	<b>Tripoli</b>	15.0	12.7	23.0	17.3	27.3	64.1	.0	3.4	473
	<b>Beirut</b>	9.3	31.3	56.9	50.6	35.2	60.6	.0	40.7	492
	<b>Bekaa</b>	26.1	18.3	39.4	43.7	54.9	59.9	.0	38.7	142
	<b>Sidon</b>	19.8	29.6	69.3	29.0	64.2	74.2	.0	57.3	724
	<b>Sur</b>	21.6	10.2	33.1	20.5	7.8	83.1	.0	9.5	550
<b>Urban/ Rural</b>	<b>Urban</b>	16.7	24.6	50.9	33.0	45.0	68.6	.0	38.7	1808
	<b>Rural</b>	19.9	11.3	36.3	20.8	12.9	76.8	.0	6.8	573
<b>Age</b>	<b>0-23 months</b>	9.7	18.2	38.3	12.3	29.3	57.1	.0	17.7	891
	<b>24-59 months</b>	22.1	23.4	52.9	40.7	42.1	78.6	.0	38.9	1490
<b>Mother's education</b>	<b>None</b>	8.2	23.6	49.1	25.5	30.9	67.3	.0	21.8	110
	<b>Basic</b>	16.8	20.8	48.7	30.9	37.7	71.1	.0	31.9	1811
	<b>Secondary +</b>	22.4	23.3	42.0	28.0	37.2	69.3	.0	29.8	460
<b>Wealth index quintiles</b>	<b>Poorest</b>	16.1	14.0	40.6	21.9	17.2	71.8	.0	12.6	429
	<b>Second</b>	17.4	19.5	45.1	25.8	32.6	69.1	.0	30.5	430
	<b>Middle</b>	16.5	22.7	48.7	29.9	47.3	71.7	.0	36.6	565
	<b>Fourth</b>	19.2	26.5	49.0	36.0	42.7	71.7	.0	34.8	494
	<b>Richest</b>	18.1	23.1	52.7	35.4	42.3	68.3	.0	37.6	463
<b>Total</b>		17.5	21.4	47.4	30.1	37.3	70.6	.0	31.0	2381
*MICS indicator 49 **MICS indicator 48 ***MICS indicator 50										

**Table CD.3: Children left alone or with other children**

**Percentage of children aged 0-59 months left in the care of other children under the age of 10 years or left alone in the past week, Palestinian refugee camps, 2006**

		Left in the care of children under the age of 10 years in past week*	Left alone in the past week	Left with inadequate care in past week*	Number of children aged 0-59 months
<b>Sex</b>	<b>Male</b>	18.6	5.8	19.9	1153
	<b>Female</b>	18.0	4.4	18.6	1228
<b>Governorate</b>	<b>Tripoli</b>	19.7	10.4	21.6	473
	<b>Beirut</b>	9.1	4.3	10.4	492
	<b>Bekaa</b>	25.4	.7	25.4	142
	<b>Sidon</b>	29.8	5.4	31.1	724
	<b>Sur</b>	8.2	2.0	8.2	550
<b>Urban/ Rural</b>	<b>Urban</b>	21.0	5.3	22.1	1808
	<b>Rural</b>	9.6	4.4	10.3	573
<b>Age</b>	<b>0-23 months</b>	11.0	3.4	12.2	891
	<b>24-59 months</b>	22.6	6.1	23.5	1490
<b>Mother's education</b>	<b>None</b>	24.5	8.2	25.5	110
	<b>Basic</b>	19.1	5.1	20.2	1811
	<b>Secondary +</b>	13.7	4.3	14.3	460
<b>Wealth index quintiles</b>	<b>Poorest</b>	12.6	2.6	12.8	429
	<b>Second</b>	15.8	5.3	17.7	430
	<b>Middle</b>	23.5	7.4	24.4	565
	<b>Fourth</b>	19.6	5.3	20.6	494
	<b>Richest</b>	17.9	4.1	19.0	463
<b>Total</b>		18.3	5.1	19.3	2381

\*MICS indicator 51

**Table CD.4: Child living arrangements and orphanhood**  
**Percentage distribution of children aged 0-17 years old by living arrangements and children aged 0-17 years who live in households without their parents and percent of orphans, in Palestinian refugee camps, Lebanon, 2006**

		Living with both parents	Not living with parents	Living with mother	Living with mother	Total	Not living with any of his parents	At least one parent is dead**	عدد الأطفال
			Both parents are dead	Father is dead	Mother is dead				
Sex	Male	96.1	.2	3.1	.6	100.0	.2	3.9	6102
	Female	96.3	.1	2.8	.8	100.0	.1	3.7	5828
Governorate	Tripoli	96.2	.3	2.8	.6	100.0	.3	3.8	2539
	Beirut	96.3	.0	3.2	.4	100.0	.0	3.7	2301
	Bekaa	96.7	.4	2.2	.7	100.0	.4	3.3	826
	Sidon	95.6	.1	2.9	1.3	100.0	.1	4.4	3574
	Sur	96.7	.0	3.2	.1	100.0	.0	3.3	2690
Urban/ Rural	Urban	96.3	.1	2.8	.8	100.0	.1	3.7	9036
	Rural	95.9	.1	3.5	.5	100.0	.1	4.1	2894
Age	0-4 years	99.1	.0	.7	.2	100.0	.0	.9	2431
	5-9 years	97.6	.1	1.8	.5	100.0	.1	2.4	3327
	10-14	95.6	.2	3.4	.9	100.0	.2	4.4	3858
	15-17	92.1	.3	6.3	1.2	100.0	.3	7.8	2314
Wealth index quintiles	Poorest	94.3	.3	4.6	.7	100.0	.3	5.7	2271
	Second	95.7	.1	2.9	1.3	100.0	.1	4.2	2307
	Middle	96.7	.2	2.9	.2	100.0	.2	3.3	2511
	Fourth	96.0	.0	3.3	.7	100.0	.0	4.0	2372
	Richest	98.1	.1	1.3	.5	100.0	.1	1.9	2469
<b>Total</b>		96.2	.1	3.0	.7	100.0	.1	3.8	11930
*MICS indicator 78									
**MICS indicator 75									

**Table ED.1: Early childhood education**  
**Percentage of children aged 36-59 months who are attending some form of organized early childhood education program and percentage of first graders who attended pre-school, Palestinian refugee camps, Lebanon, 2006**

		Percentage of children aged 36-59 months currently attending early childhood education**	Number of children aged 36-59 months	Percentage of children attending first grade who attended preschool program in previous year***	Number of children attending first grade
<b>Sex</b>	<b>Male</b>	62.4	479	94.3	211
	<b>Female</b>	60.8	502	90.3	206
<b>Governorate</b>	<b>Tripoli</b>	69.3	202	97.2	109
	<b>Beirut</b>	66.5	206	97.4	76
	<b>Bekaa</b>	53.2	62	93.9	33
	<b>Sidon</b>	57.0	291	96.9	128
	<b>Sur</b>	58.2	220	70.4	71
<b>Urban/ Rural</b>	<b>Urban</b>	63.1	732	96.2	338
	<b>Rural</b>	57.0	249	75.9	79
<b>Child' age</b>	<b>36-47 months</b>	48.5	520	.	0
	<b>48-59 months</b>	76.4	461	.	0
	<b>5 years</b>	.	0	92.3	417
	<b>6 years</b>	47.3	188	83.1	59
<b>Wealth index quintiles</b>	<b>Poorest</b>	60.6	170	90.8	76
	<b>Second</b>	59.1	230	94.9	118
	<b>Middle</b>	64.6	212	90.1	91
	<b>Fourth</b>	76.8	181	100.0	73
	<b>Richest</b>	62.4	479	94.3	211
<b>Total</b>		61.6	981	92.3	417

\*less than 25

()25-50 cases

\*\*MICS indicator 52

\*\*\*MICS indicator 53

**Table\_ED.2: Primary school entry  
Percentage of children at primary school entry age who are attending grade 1, Palestinian  
refugee camps, Lebanon, 2006**

		Percentage of children of primary school entry age currently attending grade 1*	Number of children of primary school entry age
<b>Sex</b>	<b>Male</b>	72.9	306
	<b>Female</b>	74.2	302
<b>Governorate</b>	<b>Tripoli</b>	83.0	135
	<b>Beirut</b>	74.6	122
	<b>Bekaa</b>	(75.6)	45
	<b>Sidon</b>	76.9	169
	<b>Sur</b>	58.4	137
<b>Urban/ Rural</b>	<b>Urban</b>	77.7	466
	<b>Rural</b>	59.9	142
<b>Child's age</b>	<b>6 years</b>	73.5	608
<b>Wealth index quintiles</b>	<b>Poorest</b>	61.2	103
	<b>Second</b>	72.9	118
	<b>Middle</b>	78.1	155
	<b>Fourth</b>	75.4	126
	<b>Richest</b>	77.4	106
<b>Total</b>		73.5	608
() Number of cases between 25- 50 cases			
*MICS indicator 54			

**Table ED.3: Primary school net attendance ratio**  
**Percentage of children at primary school age\*\* who are attending primary or secondary school**  
**(preparatory/ secondary) (net attendance ratio), Palestinian refugee camps, Lebanon, 2006**

		Male		Females		Total	
		Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio*	Number of children
<b>Governorate</b>	<b>Tripoli</b>	95.6	456	95.9	440	95.8	896
	<b>Beirut</b>	95.1	430	94.1	355	94.6	785
	<b>Bekaa</b>	98.1	158	95.7	138	97.0	296
	<b>Sidon</b>	93.7	618	95.9	585	94.8	1203
	<b>Sur</b>	93.9	444	92.1	430	93.0	874
<b>Urban/ Rural</b>	<b>Urban</b>	94.9	1600	95.3	1492	95.1	3092
	<b>Rural</b>	94.5	506	92.8	456	93.7	962
<b>Age in years</b>	<b>6</b>	77.0	291	76.7	300	76.8	591
	<b>7</b>	98.4	315	97.5	281	98.0	596
	<b>8</b>	98.6	358	98.4	320	98.5	678
	<b>9</b>	98.1	377	98.3	303	98.2	680
	<b>10</b>	96.8	407	97.8	415	97.3	822
	<b>11</b>	96.4	358	97.9	329	97.1	687
<b>Wealth index quintiles</b>	<b>Poorest</b>	96.1	382	93.6	360	94.9	742
	<b>Second</b>	93.3	405	93.4	365	93.4	770
	<b>Middle</b>	93.7	428	95.1	430	94.4	858
	<b>Fourth</b>	95.3	444	94.7	378	95.0	822
	<b>Richest</b>	95.5	447	96.4	415	95.9	862
<b>Total</b>		94.8	2106	94.7	1948	94.7	4054
<b>*MICS indicator 55 † MDG indicator 6</b>							

**Table ED.4: Secondary school net attendance ratio  
Percentage of children of secondary school age\*\* attending secondary school or higher (NAR),  
Palestinian refugee camps, Lebanon, 2006**

		Male		Female		Total	
		Net attendance ratio	Number of children	Net attendance ratio	Number of children	Net attendance ratio*	Number of children
<b>Governorate</b>	<b>Tripoli</b>	58.3	499	64.1	496	61.2	995
	<b>Beirut</b>	59.4	433	67.0	412	63.1	845
	<b>Bekaa</b>	57.0	193	63.5	159	59.9	352
	<b>Sidon</b>	65.1	707	68.2	657	66.6	1364
	<b>Sur</b>	60.8	582	64.8	525	62.7	1107
<b>Urban/ Rural</b>	<b>Urban</b>	61.9	1789	67.2	1682	64.5	3471
	<b>Rural</b>	58.2	625	62.3	567	60.2	1192
<b>Age in years</b>	<b>12</b>	41.1	394	43.8	390	42.5	784
	<b>13</b>	71.4	398	71.2	375	71.3	773
	<b>14</b>	77.7	444	78.7	348	78.2	792
	<b>15</b>	66.5	427	78.4	389	72.2	816
	<b>16</b>	55.0	407	65.9	378	60.3	785
	<b>17</b>	50.3	344	58.8	369	54.7	713
<b>Wealth index quintiles</b>	<b>Poorest</b>	53.9	514	57.4	451	55.5	965
	<b>Second</b>	55.1	497	60.8	469	57.9	966
	<b>Middle</b>	58.1	468	66.0	420	61.8	888
	<b>Fourth</b>	67.5	443	67.5	425	67.5	868
	<b>Richest</b>	71.1	492	77.5	484	74.3	976
<b>Total</b>		61.0	2414	65.9	2249	63.4	4663
<b>*MICS indicator 56</b>							

**Table ED.4w: Secondary school age children attending primary school**  
**Percentage of children of secondary school age attending primary school, Palestinian refugee**  
**camps, Lebanon, 2006**

		Male		Female		Total	
		Percent attending primary school	Number of children	Percent attending primary school	Number of children	Percent attending primary school	Number of children
<b>Governorate</b>	<b>Tripoli</b>	14.4	499	14.7	496	14.6	995
	<b>Beirut</b>	9.0	433	11.4	412	10.2	845
	<b>Bekaa</b>	17.1	193	18.9	159	17.9	352
	<b>Sidon</b>	12.4	707	15.1	657	13.7	1364
	<b>Sur</b>	14.6	582	14.1	525	14.4	1107
<b>Urban/ Rural</b>	<b>Urban</b>	12.6	1789	14.2	1682	13.4	3471
	<b>Rural</b>	14.6	625	14.8	567	14.7	1192
<b>Age in years</b>	<b>12</b>	53.6	394	52.6	390	53.1	784
	<b>13</b>	17.1	398	20.3	375	18.6	773
	<b>14</b>	6.1	444	8.6	348	7.2	792
	<b>15</b>	1.9	427	2.8	389	2.3	816
	<b>16</b>	.2	407	.3	378	.3	785
	<b>17</b>	.6	344	.0	369	.3	713
<b>Wealth index quintiles</b>	<b>Poorest</b>	15.6	514	16.2	451	15.9	965
	<b>Second</b>	12.3	497	15.6	469	13.9	966
	<b>Middle</b>	16.0	468	13.6	420	14.9	888
	<b>Fourth</b>	9.9	443	16.2	425	13.0	868
	<b>Richest</b>	11.6	492	10.5	484	11.1	976
<b>Total</b>		13.1	2414	14.4	2249	13.7	4663



**Table ED.5: Children reaching grade 5**  
**Percentage of children entering first grade of primary school who eventually reach grade 5,**  
**Palestinian refugee camps, Lebanon, 2006**

		Percent attending 2 <sup>nd</sup> grade who were in 1 <sup>st</sup> grade last year	Percent attending 3 <sup>rd</sup> grade who were in 2 <sup>nd</sup> grade last year	Percent attending 4 <sup>th</sup> grade who were in 3 <sup>rd</sup> grade last year	Percent attending 5 <sup>th</sup> grade who were in 4 <sup>th</sup> grade last year	Percent who reach grade 5 of those who enter 1 <sup>st</sup> grade*
<b>Sex</b>	<b>Male</b>	99.7	100.0	99.7	99.1	98.6
	<b>Female</b>	99.3	99.1	98.8	99.2	96.4
<b>Governorate</b>	<b>Tripoli</b>	97.8	99.4	100.0	98.8	96.1
	<b>Beirut</b>	100.0	100.0	99.3	100.0	99.3
	<b>Bekaa</b>	100.0	100.0	100.0	100.0	100.0
	<b>Sidon</b>	100.0	99.5	100.0	99.2	98.7
	<b>Sur</b>	100.0	99.1	95.5	98.0	92.7
<b>Urban/ Rural</b>	<b>Urban</b>	99.8	99.6	99.8	99.3	98.6
	<b>Rural</b>	98.1	99.3	96.2	98.3	92.0
<b>Wealth index quintiles</b>	<b>Poorest</b>	100.0	98.9	95.6	97.9	92.5
	<b>Second</b>	100.0	99.2	99.3	100.0	98.5
	<b>Middle</b>	99.3	99.4	100.0	98.8	97.4
	<b>Fourth</b>	99.2	100.0	100.0	98.7	98.0
	<b>Richest</b>	99.3	100.0	100.0	100.0	99.3
<b>Total</b>		99.5	99.6	99.3	99.1	97.5
<b>*MICS indicator 57 ; MDG indicator 7</b>						

**Table ED.6: Primary school completion and transition rate to secondary education  
Primary school completion rate and transition rate to secondary education, Palestinian refugee  
camps, Lebanon, 2006**

		Net primary school completion rate*	Number of children of primary school completion age	Transition rate to secondary education**	Number of children who were in the last grade of primary school the previous year
<b>Sex</b>	<b>Male</b>	33.5	358	73.8	248
	<b>Female</b>	41.6	329	74.0	269
<b>Governorate</b>	<b>Tripoli</b>	48.6	138	75.8	99
	<b>Beirut</b>	40.0	125	90.4	94
	<b>Bekaa</b>	54.8	42	84.2	38
	<b>Sidon</b>	41.3	218	85.9	149
	<b>Sur</b>	16.5	164	45.3	137
<b>Urban/ Rural</b>	<b>Urban</b>	41.9	516	84.9	371
	<b>Rural</b>	24.0	171	45.9	146
<b>Wealth index quintiles</b>	<b>Poorest</b>	16.8	131	38.5	104
	<b>Second</b>	32.8	134	69.0	87
	<b>Middle</b>	41.1	129	85.9	85
	<b>Fourth</b>	49.0	145	88.9	117
	<b>Richest</b>	45.3	148	84.7	124
<b>Total</b>		37.4	687	73.9	517
*MICS indicator 59 ; MDG indicator 7b					
**MICS indicator 58					

Note: Secondary refers to preparatory and secondary schools as one educational stage

**Table ED.7: Education gender parity**  
**Ration of girls to boys attending primary education and ratio of girls to boys attending secondary education, Palestinian refugee camps, Lebanon, 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*
<b>Sex</b>	<b>Male</b>	.	94.8	.	.	61.0	.
	<b>Female</b>	94.7	.	.	65.9	.	.
<b>Governorate</b>	<b>Tripoli</b>	95.9	95.6	1.00	64.1	58.3	1.10
	<b>Beirut</b>	94.1	95.1	.99	67.0	59.4	1.13
	<b>Bekaa</b>	95.7	98.1	.98	63.5	57.0	1.11
	<b>Sidon</b>	95.9	93.7	1.02	68.2	65.1	1.05
	<b>Sur</b>	92.1	93.9	.98	64.8	60.8	1.06
<b>Urban/ Rural</b>	<b>Urban</b>	95.3	94.9	1.00	67.2	61.9	1.08
	<b>Rural</b>	92.8	94.5	.98	62.3	58.2	1.07
<b>Wealth index quintiles</b>	<b>Poorest</b>	93.6	96.1	.97	57.4	53.9	1.07
	<b>Second</b>	93.4	93.3	1.00	60.8	55.1	1.10
	<b>Middle</b>	95.1	93.7	1.02	66.0	58.1	1.13
	<b>Fourth</b>	94.7	95.3	.99	67.5	67.5	1.00
	<b>Richest</b>	96.4	95.5	1.01	77.5	71.1	1.09
<b>Total</b>		94.6	94.8	1.00	65.8	61.2	1.08
<b>*MICS indicator 61 † MDG indicator 9</b>							

<b>Table ED.8: Adult literacy</b>			
<b>Percentage of women aged 15-24 years who are literate, Palestinian refugee camps, Lebanon, 2006</b>			
		<b>Percentage of literate women**</b>	<b>Number of women aged 15-24 years</b>
<b>Governorate</b>	<b>Tripoli</b>	87.1	70
	<b>Beirut</b>	87.1	93
	<b>Bekaa</b>	*	19
	<b>Sidon</b>	89.5	153
	<b>Sur</b>	88.8	89
<b>Urban/ Rural</b>	<b>Urban</b>	87.7	332
	<b>Rural</b>	89.1	92
<b>Woman's education</b>	<b>None</b>	*	6
	<b>Primary</b>	87.1	349
	<b>Secondary+</b>	100.0	69
<b>Woman's age</b>	<b>15-19</b>	84.1	82
	<b>20-24</b>	88.9	342
<b>Wealth index quintiles</b>	<b>Poorest</b>	82.4	74
	<b>Second</b>	87.5	96
	<b>Middle</b>	88.7	115
	<b>Fourth</b>	90.7	75
	<b>Richest</b>	90.6	64
<b>Total</b>		88.0	424
<b>* Number of cases less than 25</b>			
<b>** MICS indicator 60 ; MDG indicator 8</b>			

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

		Birth is registered **	Not sure if birth is registered	Number of children aged 0-59 months	Percentage of children aged 0-59 months whose birth is not registered because						Number of children aged 0-59 months without birth registration
					Costs too much	Must travel too far	Doesn't know where to register	Other	Don't know	Total	
Sex	Male	98.4	.2	1153	*	*	*	*	*	100.0	17
	Female	98.3	.3	1228	*	*	*	*	*	100.0	17
Governorate	Tripoli	97.9	1.1	473	*	*	*	*	*	100.0	6
	Beirut	99.0	0.0	492	*	*	*	*	*	100.0	5
	Bekaa	97.2	0.7	142	*	*	*	*	*	100.0	3
	Sidon	99.2	0.0	724	*	*	*	*	*	100.0	6
	Sur	97.5	0.0	550	*	*	*	*	*	100.0	14
Urban/ Rural	Urban	98.7	0.3	1808	*	*	*	*	*	100.0	19
	Rural	97.4	0.0	573	*	*	*	*	*	100.0	15
Child's age in months	0-11	96.1	.2	408	*	*	*	*	*	100.0	15
	12-23	98.8	.4	483	*	*	*	*	*	100.0	4
	24-35	98.6	.0	509	*	*	*	*	*	100.0	7
	36-47	98.8	.2	520	*	*	*	*	*	100.0	6
	48-59	99.1	.4	461	*	*	*	*	*	100.0	2
Mother's education	None	95.5	1.8	110	*	*	*	*	*	100.0	3
	Primary	98.2	0.2	1811	(17.2)	(20.7)	(6.9)	(51.7)	(3.4)	100.0	29
	Secondary+	99.6	0.0	460	*	*	*	*	*	100.0	2
Wealth index quintiles	Poorest	94.4	0.5	429	*	*	*	*	*	100.0	22
	Second	99.3	0.	430	*	*	*	*	*	100.0	3
	Middle	99.3	0.2	565	*	*	*	*	*	100.0	3
	Fourth	99.0	0.6	494	*	*	*	*	*	100.0	3
	Richest	99.4	0.0	463	*	*	*	*	*	100.0	3
<b>Total</b>		98.4	3.	2381	(14.7)	(26.5)	(11.8)	(44.1)	(2.9)	100.0	34
* Number of cases is less than 25				( ) Number of cases between 25-50 cases							
**MICS indicator 62											

**Table CP.2: Child labour**  
**Percentage of children aged 5-14 years who are involved in child labour activities by type of work,**  
**Palestinian refugee camps, Lebanon, 2006**

		<b>Working outside household</b>	<b>Household chores for 28+ hours/ week</b>	<b>Working for family business</b>	<b>Total child labour*</b>	<b>Number of children aged 5-14 years</b>
<b>Sex</b>	<b>Male</b>	.9	.4	.7	1.8	3742
	<b>Female</b>	.1	.9	.1	1.1	3443
<b>Governorate</b>	<b>Tripoli</b>	.8	.3	.5	1.3	1575
	<b>Beirut</b>	.8	.3	.5	1.4	1388
	<b>Bekaa</b>	.4	.0	.2	.6	498
	<b>Sidon</b>	.5	1.4	.6	2.4	2174
	<b>Sur</b>	.2	.5	.2	.8	1550
<b>Urban/ Rural</b>	<b>Urban</b>	.6	.7	.5	1.7	5486
	<b>Rural</b>	.2	.5	.2	.9	1699
<b>Child's age in years</b>	<b>5-11</b>	.1	.4	.4	1.0	4836
	<b>12-14</b>	1.4	1.1	.5	2.6	2349
<b>Attending school</b>	<b>Yes</b>	.1	.6	.4	1.1	6792
	<b>No</b>	7.9	.5	1.8	8.9	393
<b>Wealth index quintiles</b>	<b>Poorest</b>	.2	.5	.5	1.1	1320
	<b>Second</b>	.7	1.0	.7	2.3	1375
	<b>Middle</b>	.7	.9	.5	2.1	1506
	<b>Fourth</b>	.5	.6	.2	1.2	1457
	<b>Richest</b>	.6	.2	.3	.9	1527
<b>Total</b>		.5	.6	.4	1.5	7185

\*MICS indicator 71

**Table CP.3: Labourer students and student labourers  
Percentage of children aged 5-14 years who are labourer students and student labourers,  
Palestinian refugee camps, Lebanon, 2006**

		Percentage of children in child labour	Percentage of children attending school	Number of children 5-14 years of age	Percentage of child labourers who are also attending school*	Number of child labourers aged 5-14	Percentage of students who are also involved in child labour**	Number of students aged 5-14
<b>Sex</b>	<b>Male</b>	1.8	93.6	3742	55.1	69	1.1	3503
	<b>Female</b>	1.1	95.5	3443	89.7	39	1.1	3289
<b>Governorate</b>	<b>Tripoli</b>	1.3	93.6	1575	38.1	21	.5	1474
	<b>Beirut</b>	1.4	94.6	1388	63.2	19	.9	1313
	<b>Bekaa</b>	.6	94.0	498	.0	3	.0	468
	<b>Sidon</b>	2.4	94.5	2174	82.7	52	2.1	2054
	<b>Sur</b>	.8	95.7	1550	76.9	13	.7	1483
<b>Urban/ Rural</b>	<b>Urban</b>	1.7	94.3	5486	67.4	92	1.2	5176
	<b>Rural</b>	.9	95.1	1699	68.8	16	.7	1616
<b>Age in years</b>	<b>5-11</b>	1.0	96.5	4836	91.3	46	.9	4668
	<b>12-14</b>	2.6	90.4	2349	50.0	62	1.5	2124
<b>Wealth index quintiles</b>	<b>Poorest</b>	1.1	93.8	1320	86.7	15	1.1	1238
	<b>Second</b>	2.3	92.8	1375	71.0	31	1.7	1276
	<b>Middle</b>	2.1	93.4	1506	61.3	31	1.4	1407
	<b>Fourth</b>	1.2	95.2	1457	66.7	18	.9	1387
	<b>Richest</b>	.9	97.2	1527	53.8	13	.5	1484
<b>Total</b>		1.5	94.5	7185	67.6	108	1.1	6792
<b>*MICS indicator 72</b>								
<b>**MICS indicator 73</b>								

**Table CP.4: Child discipline**  
**Percentage of children aged 2-14 years according to method of disciplining the child, Palestinian refugee camps, Lebanon, 2006**

		Percentage of children 2-14 years of age who experience:						Mother/care taker believes that the child needs to be physically punished	Number of children aged 2-14 years**
		Only non-violent discipline	Psychological punishment	Minor physical punishment	Severe physical punishment	Any psychological or physical punishment*	No discipline or punishment		
Sex	Male	3.6	91.8	79.8	27.5	95.9	.5	24.5	1686
	Female	4.8	88.4	74.3	27.5	94.2	.8	22.0	1511
Governorate	Tripoli	6.6	87.8	73.1	32.2	92.6	.8	41.1	609
	Beirut	4.0	91.8	75.0	10.6	96.0	.0	18.6	708
	Bekaa	3.9	90.9	73.5	30.4	94.3	1.7	40.0	230
	Sidon	2.2	93.0	83.3	31.7	97.7	.1	6.5	966
	Sur	5.1	86.4	75.7	34.1	93.0	1.6	30.4	684
Urban/ Rural	Urban	3.2	91.6	78.9	28.1	96.1	.6	22.0	2502
	Rural	7.5	85.2	71.2	25.5	91.5	.7	28.1	695
Age in years	2-4	3.5	86.8	78.7	28.0	94.9	1.6	22.1	371
	5-9	4.0	90.5	83.0	27.8	95.3	.6	24.8	1285
	10-14	4.4	90.7	72.0	27.2	95.0	.5	22.3	1541
Wealth index quintiles	Poorest	5.8	89.2	72.9	27.9	93.7	.5	30.1	584
	Second	3.8	90.5	74.5	27.6	95.0	.9	28.4	580
	Middle	3.3	91.1	82.0	33.0	95.6	1.1	18.6	639
	Fourth	3.3	91.9	79.0	27.4	96.3	.4	20.8	667
	Richest	4.7	88.3	76.9	22.4	94.9	.4	20.1	727
<b>Total</b>		4.2	90.2	77.2	27.5	95.1	.7	23.3	3197

\* MICS indicator 74



**Table CP.5: Early marriage**  
**Percentage of women aged 15-49 years in marriage before their 15th birthday, percentage of women aged 20-49 years in marriage before their 18th birthday, percentage of women aged 15-19 years currently married, Palestinian refugee camps, Lebanon, 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 married**	Number of women aged 15-19 years
<b>Governorate</b>	<b>Tripoli</b>	5.8	753	37.4	740	3.3	369
	<b>Beirut</b>	3.8	880	27.8	862	5.8	325
	<b>Bekaa</b>	2.7	261	29.2	257	3.7	134
	<b>Sidon</b>	4.7	1225	35.1	1190	6.8	514
	<b>Sur</b>	6.1	836	30.8	824	2.6	416
<b>Urban/ Rural</b>	<b>Urban</b>	4.5	3102	32.2	3035	5.1	1322
	<b>Rural</b>	6.1	853	34.1	838	3.2	436
<b>Woman's age</b>	<b>15-19</b>	8.5	82	.	0	4.7	1758
	<b>20-24</b>	3.8	342	31.0	342		
	<b>25-29</b>	3.9	610	35.2	610		
	<b>30-34</b>	4.6	790	32.4	790		
	<b>35-39</b>	4.2	891	33.4	891		
	<b>40-44</b>	5.8	775	33.0	775		
	<b>45-49</b>	6.7	465	28.6	465		
<b>Woman's education</b>	<b>None</b>	12.5	176	34.3	175	2.2	45
	<b>Basic</b>	5.2	3024	37.9	2948	5.8	1320
	<b>Secondary+</b>	1.7	755	11.5	750	1.3	393
<b>Wealth index quintiles</b>	<b>Poorest</b>	6.9	711	33.2	699	3.1	358
	<b>Second</b>	6.7	750	31.6	725	6.6	381
	<b>Middle</b>	4.6	829	32.7	805	7.1	337
	<b>Fourth</b>	4.1	801	31.5	788	4.5	308
	<b>Richest</b>	2.7	864	34.1	856	2.1	374
<b>Total</b>		4.9	3955	32.6	3873	4.7	1758

\* MICS indicator 67

\*\* MICS indicator 68

\*\*\* MICS indicator 70

**Table HA.1: Knowledge of preventing HIV transmission**  
**Percentage of women aged 15-49 years who know the main ways of preventing HIV transmission,**  
**Palestinian refugee camps, Lebanon, 2006**

		Heard of AIDS	Abstaining from sex	Number of women
<b>Governorate</b>	<b>Tripoli</b>	87.5	34.9	753
	<b>Beirut</b>	94.5	18.5	880
	<b>Bekaa</b>	95.4	31.8	261
	<b>Sidon</b>	88.5	19.3	1225
	<b>Sur</b>	96.7	42.3	836
<b>Urban/ Rural</b>	<b>Urban</b>	91.5	23.2	3102
	<b>Rural</b>	93.2	44.5	853
<b>Woman's age</b>	<b>15-19</b>	82.9	22.0	82
	<b>20-24</b>	91.2	28.1	342
	<b>25-29</b>	91.1	25.1	610
	<b>30-34</b>	93.2	25.3	790
	<b>35-39</b>	93.3	31.4	891
	<b>40-44</b>	92.3	28.9	775
	<b>45-49</b>	89.0	27.7	465
<b>Woman's education</b>	<b>None</b>	75.6	21.6	176
	<b>Basic</b>	91.4	29.0	3024
	<b>Secondary+</b>	97.4	24.6	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	91.4	40.1	711
	<b>Second</b>	89.3	27.7	750
	<b>Middle</b>	88.4	24.0	829
	<b>Fourth</b>	93.0	25.8	801
	<b>Richest</b>	96.5	23.3	864
<b>Total</b>		91.8	27.8	3955

**Table HA.2: Identifying misconceptions about HIV/AIDS**  
**Percentage of women aged 15-49 years who correctly identify misconceptions about HIV/AIDS,**  
**Palestinian refugee camps, Lebanon, 2006**

		Percent of women who know that:			Reject two most common misconceptions and know a healthy-looking person can be infected	Percent of women who know that HIV cannot be transmitted by mosquito bites	Percent of women who know that HIV can be transmitted by sharing needles	Number of women
		HIV cannot be transmitted by supernatural means	HIV cannot be transmitted by sharing food	A healthy looking person can be infected				
<b>Governorate</b>	<b>Tripoli</b>	77.0	62.9	28.8	19.5	39.0	84.6	753
	<b>Beirut</b>	82.7	77.7	29.1	24.3	51.6	90.8	880
	<b>Bekaa</b>	76.2	79.3	49.8	40.2	47.5	90.0	261
	<b>Sidon</b>	67.4	73.6	38.9	29.2	48.4	86.1	1225
	<b>Sur</b>	72.6	86.6	52.6	37.8	56.5	93.4	836
<b>Urban/Rural</b>	<b>Urban</b>	75.7	74.0	37.7	29.3	49.1	88.3	3102
	<b>Rural</b>	69.4	81.6	40.9	27.0	48.5	90.2	853
<b>Woman's age</b>	<b>15-19</b>	57.3	68.3	20.7	17.1	35.4	81.7	82
	<b>20-24</b>	77.5	76.6	38.6	31.6	43.9	88.3	342
	<b>25-29</b>	75.2	75.2	38.0	29.0	50.0	87.9	610
	<b>30-34</b>	74.2	77.2	41.6	29.4	49.2	91.0	790
	<b>35-39</b>	76.8	78.6	37.8	30.1	54.1	90.3	891
	<b>40-44</b>	71.4	74.1	38.2	27.1	49.4	87.6	775
	<b>45-49</b>	74.4	70.8	37.8	28.2	42.8	85.8	465
<b>Woman's education</b>	<b>None</b>	56.3	56.8	25.6	17.6	44.3	71.6	176
	<b>Basic</b>	72.7	74.9	36.9	27.2	46.6	88.1	3024
	<b>Secondary+</b>	85.2	82.9	47.5	37.7	59.6	95.1	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	68.4	75.8	46.0	31.6	45.6	87.3	711
	<b>Second</b>	71.3	75.1	36.0	27.2	50.8	85.6	750
	<b>Middle</b>	70.8	71.8	33.3	25.6	45.2	85.0	829
	<b>Fourth</b>	77.0	74.8	35.2	26.5	47.6	91.0	801
	<b>Richest</b>	82.8	80.3	42.1	33.2	55.1	93.8	864
<b>Total</b>		74.3	75.6	38.4	28.8	49.0	88.7	3955

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

		Know 2 ways to prevent HIV transmission	Correctly identify 3 misconceptions about HIV transmission	Have comprehensive knowledge (identify 2 prevention methods and 3 misconceptions)*	Number of women
<b>Governorate</b>	<b>Tripoli</b>	37.8	19.5	10.2	753
	<b>Beirut</b>	76.7	24.3	20.1	880
	<b>Bekaa</b>	50.6	40.2	25.7	261
	<b>Sidon</b>	51.3	29.2	19.8	1225
	<b>Sur</b>	59.9	37.8	26.2	836
<b>Urban/ Rural</b>	<b>Urban</b>	58.5	29.3	21.2	3102
	<b>Rural</b>	47.6	27.0	14.4	853
<b>Woman's age</b>	<b>15-19</b>	43.9	17.1	12.2	82
	<b>20-24</b>	55.0	31.6	21.1	342
	<b>15-24</b>	52.8	28.8	19.3	424
	<b>25-29</b>	54.9	29.0	19.5	610
	<b>30-34</b>	56.3	29.4	19.9	790
	<b>35-39</b>	60.3	30.1	21.5	891
	<b>40-44</b>	53.5	27.1	18.1	775
	<b>45-49</b>	57.0	28.2	19.8	465
<b>Woman's education</b>	<b>None</b>	43.2	17.6	12.5	176
	<b>Basic</b>	54.8	27.2	18.5	3024
	<b>Secondary+</b>	64.5	37.7	26.5	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	49.5	31.6	19.5	711
	<b>Second</b>	48.5	27.2	16.8	750
	<b>Middle</b>	50.5	25.6	18.6	829
	<b>Fourth</b>	60.4	26.5	18.4	801
	<b>Richest</b>	69.7	33.2	25.0	864
<b>Total</b>		56.2	28.8	19.8	3955

\* MICS indicator 82; MDG indicator 19b

**Table HA.4: Knowledge of mother-to-child HIV transmission**  
**Percentage of women aged 15-49 years who correctly identify means of HIV transmission from**  
**mother to child, Palestinian refugee camps, Lebanon, 2006**

		Percent of women who knew that AIDS can be transmitted from mother to child	Percent who know AIDS can be transmitted:				Did not know any specific way	Number of women
			During pregnancy	At delivery	Through breast milk	All three ways*		
<b>Governorate</b>	<b>Tripoli</b>	85.3	83.8	65.9	46.1	44.4	2.3	753
	Beirut	91.1	90.6	78.1	47.4	44.9	3.4	880
	Bekaa	92.0	90.4	65.5	47.9	38.7	3.4	261
	Sidon	87.0	86.9	67.3	47.0	43.0	1.5	1225
	Sur	91.6	90.7	63.2	53.1	51.1	5.1	836
<b>Urban/ Rural</b>	<b>Urban</b>	89.1	88.6	67.8	45.7	42.3	2.4	3102
	<b>Rural</b>	88.3	86.5	70.6	57.6	55.2	5.0	853
<b>Woman's age</b>	<b>15-19</b>	81.7	81.7	54.9	41.5	39.0	1.2	82
	<b>20-24</b>	88.9	88.3	69.3	50.6	45.9	2.3	342
	<b>25-29</b>	87.9	85.9	68.2	43.9	40.2	3.3	610
	<b>30-34</b>	90.0	89.6	67.5	45.9	42.7	3.2	790
	<b>35-39</b>	90.3	89.9	68.5	52.1	48.7	2.9	891
	<b>40-44</b>	88.5	87.9	69.9	50.2	47.6	3.9	775
	<b>45-49</b>	87.5	86.9	69.5	46.9	45.2	1.5	465
<b>Woman's education</b>	<b>None</b>	69.3	68.8	50.0	35.8	34.7	6.3	176
	<b>Basic</b>	88.3	87.5	68.0	49.1	45.8	3.2	3024
	<b>Secondary+</b>	96.0	95.4	74.4	47.9	44.8	1.3	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	84.8	84.2	65.5	50.9	49.4	6.6	711
	<b>Second</b>	86.3	85.2	70.7	52.0	48.5	3.1	750
	<b>Middle</b>	85.4	85.0	60.8	43.8	39.9	3.0	829
	<b>Fourth</b>	91.6	91.1	69.5	44.9	41.8	1.5	801
	<b>Richest</b>	95.4	94.2	75.1	50.2	46.6	1.2	864
<b>Total</b>		88.9	88.2	68.4	48.3	45.1	3.0	3955
<b>*MICS indicator 89</b>								

**Table HA.5: Attitudes toward people living with HIV/AIDS**  
**Percentage of women aged 15-49 years who have heard of AIDS who express a discriminatory attitude**  
**towards people living with HIV/AIDS, Palestinian refugee camps, Lebanon, 2006**

		Percent of women who:						Number of women who have heard of AIDS
		Would not care for a family member who was sick with AIDS		Believe that a teacher with HIV should not be allowed to work	Would not buy food from a person with HIV/AIDS	Agree with at least one discriminatory statement	Agree with none of the discriminatory statements*	
<b>Governorate</b>	<b>Tripoli</b>	5.2	62.1	56.8	58.0	88.0	12.0	659
	<b>Beirut</b>	2.3	63.2	42.8	31.5	83.9	16.1	832
	<b>Bekaa</b>	9.6	45.0	43.8	42.6	75.5	24.5	249
	<b>Sidon</b>	5.4	35.0	45.2	38.2	73.6	26.4	1084
	<b>Sur</b>	4.3	46.9	46.9	39.4	80.6	19.4	808
<b>Urban/ Rural</b>	<b>Urban</b>	4.7	48.8	47.5	39.6	79.8	20.2	2837
	<b>Rural</b>	4.7	52.8	45.3	45.2	81.9	18.1	795
<b>Woman's age</b>	<b>15-19</b>	4.4	45.6	47.1	48.5	88.2	11.8	68
	<b>20-24</b>	3.5	54.8	44.6	39.4	82.7	17.3	312
	<b>25-29</b>	5.0	50.7	46.8	36.7	79.5	20.5	556
	<b>30-34</b>	5.0	50.1	49.3	41.0	81.0	19.0	736
	<b>35-39</b>	4.6	46.7	46.7	43.9	78.6	21.4	831
	<b>40-44</b>	4.6	48.4	47.0	39.0	79.4	20.6	715
	<b>45-49</b>	5.1	52.7	45.9	42.5	81.6	18.4	414
<b>Woman's education</b>	<b>None</b>	9.8	51.1	54.1	51.9	90.2	9.8	133
	<b>Primary</b>	4.5	49.9	48.0	42.4	80.6	19.4	2764
	<b>Secondary+</b>	4.5	48.8	42.0	32.7	77.1	22.9	735
<b>Wealth index quintiles</b>	<b>Poorest</b>	7.8	50.9	44.0	42.0	81.4	18.6	650
	<b>Second</b>	2.5	55.8	44.3	40.4	83.1	16.9	670
	<b>Middle</b>	6.1	44.2	50.2	42.6	79.1	20.9	733
	<b>Fourth</b>	3.8	47.1	50.1	44.7	80.0	20.0	745
	<b>Richest</b>	3.6	51.0	46.0	35.1	78.3	21.7	834
<b>Total</b>		4.7	49.7	47.0	40.8	80.3	19.7	3632

**\*MICS indicator 86**

**Table HA.6: Knowledge of a facility for HIV testing  
Percentage of women aged 15-49 years who know where to get an HIV test, percentage of women who have been tested and, of those tested the percentage who have been told the result, Palestinian refugee camps, Lebanon, 2006**

		Know a place to get tested*	Number of women
<b>Governorate</b>	<b>Tripoli</b>	19.3	753
	<b>Beirut</b>	55.6	880
	<b>Bekaa</b>	16.1	261
	<b>Sidon</b>	14.6	1225
	<b>Sur</b>	23.4	836
<b>Urban/ Rural</b>	<b>Urban</b>	29.9	3102
	<b>Rural</b>	14.5	853
<b>Woman's age</b>	<b>15-19</b>	18.3	82
	<b>20-24</b>	22.8	342
	<b>25-29</b>	29.2	610
	<b>30-34</b>	27.1	790
	<b>35-39</b>	25.8	891
	<b>40-44</b>	26.8	775
	<b>45-49</b>	27.5	465
<b>Woman's education</b>	<b>None</b>	18.2	176
	<b>Primary</b>	24.3	3024
	<b>Secondary+</b>	37.7	755
<b>Wealth index quintiles</b>	<b>Poorest</b>	18.6	711
	<b>Second</b>	26.4	750
	<b>Middle</b>	17.5	829
	<b>Fourth</b>	30.3	801
	<b>Richest</b>	38.5	864
<b>Total</b>		26.6	3955
<b>*MICS indicator 87</b>			

## Appendix A. Sample Design

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The major features of sample design are described in this appendix. Sample design features include target sample size, sample allocation, sample frame and listing, choice of domains, and sampling stages.

The primary objective of the sample design for the Palestinians' Refugee Camps in Lebanon Multiple Indicator Cluster Survey was to produce statistically reliable estimates of most indicators, at the national level, for urban and rural areas, and for the five regions (Tripoli, Beirut, Bekaa, Sidon and Sur).

### Sample Size and Sample Allocation

The target sample size for the Palestinians' Refugee Camps in Lebanon MICS was calculated as 6200 households. For the calculation of the sample size, the key indicator used was the diarrhoea prevalence among children aged 0-4 years. The following formula was used to estimate the required sample size for these indicators:

$$n = \frac{[4 (r) (1-r) (f) (1.1)]}{[(0.12r)^2 (p) (n_h)]}$$

where

- $n$  is the required sample size, expressed as number of households
- 4 is a factor to achieve the 95 per cent level of confidence
- $r$  is the predicted or anticipated prevalence (coverage rate) of the indicator
- 1.1 is the factor necessary to raise the sample size by 10 per cent for non-response
- $f$  is the shortened symbol for *deff* (design effect)
- $0.12r$  is the margin of error to be tolerated at the 95 per cent level of confidence, defined as 12 per cent of  $r$  (relative sampling error of  $r$ )
- $p$  is the proportion of the total population upon which the indicator,  $r$ , is based
- $n_h$  is the average household size.

For the calculation,  $r$  (diarrhoea prevalence) was assumed to be 16 percent. The value of *deff* (design effect) was taken as 1.5 based on estimates from previous surveys,  $p$  (percentage of children aged 0-4 years in the total population) was taken as 12 percent, and  $n_h$  (average household size) was taken as 5.2 households.

### Sampling Frame and Selection of Clusters

The sample population (based on the Palestinian Refugee Camps and Gatherings in Lebanon Census of 1999) was divided into equal clusters each containing 20 households (totaling 1300



clusters). Sample clusters (310 clusters, i.e. 6200 households) were drawn with uniformity, random start and a sampling fraction of 0.25.

**Table SD.1: Distribution of Sample Households by Governorate**

<b>Area</b>	<b>Sample size (households)</b>
Tripoli	1200
Beirut	1420
Bekaa	440
Sidon	1840
Sur	1300
<b>Total</b>	<b>6200</b>

## Appendix B. Estimates of Sampling Errors

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The sample of respondents selected in the Palestinians' Refugee Camps in Lebanon Multiple Indicator Cluster Survey is only one of the samples that could have been selected from the same population, using the same design and size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. The extent of variability is not known exactly, but can be estimated statistically from the survey results.

The following sampling error measures are presented in this appendix for each of the selected indicators:

- Standard error (*se*): Sampling errors are usually measured in terms of standard errors for particular indicators (means, proportions etc). Standard error is the square root of the variance. The Taylor linearization method is used for the estimation of standard errors.
- Coefficient of variation ( $se/r$ ) is the ratio of the standard error to the value of the indicator
- Design effect (*deff*) is the ratio of the actual variance of an indicator, under the sampling method used in the survey, to the variance calculated under the assumption of simple random sampling. The square root of the design effect (*deft*) is used to show the efficiency of the sample design. A *deft* value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a *deft* value above 1.0 indicates the increase in the standard error due to the use of a more complex sample design.
- Confidence limits are calculated to show the interval within which the true value for the population can be reasonably assumed to fall. For any given statistic calculated from the survey, the value of that statistics will fall within a range of plus or minus two times the standard error ( $p + 2.se$  or  $p - 2.se$ ) of the statistic in 95 percent of all possible samples of identical size and design.

For the calculation of sampling errors from MICS data, SPSS Version 14 Complex Samples module has been used. The results are shown in the tables that follow. In addition to the sampling error measures described above, the tables also include weighted and unweighted counts of denominators for each indicator.

Sampling errors are calculated for indicators of primary interest, for the national total and for each of the five regions. Two of the selected indicators are based on households, 7 are based on household members, 8 are based on women, and 12 are based on children under 5. All indicators presented here are in the form of proportions. Table SE.1 shows the list of indicators for which sampling errors are calculated, including the base population (denominator) for each indicator. Tables SE.2 to SE.7 show the calculated sampling errors.

**Table SE.1: Indicators selected for sampling error calculations**

List of indicators selected for sampling error calculations, and base populations (denominators) for each indicator, Palestinians' Refugee Camps in Lebanon, 2006

MICS Indicator		Base Population
HOUSEHOLDS		
41	Iodized salt consumption	All households
74	Child discipline	Children aged 2-14 years selected
HOUSEHOLD MEMBERS		
11	Use of improved drinking water sources	All household members
12	Use of improved sanitation facilities	All household members
55	Net primary school attendance rate	Children of primary school age
56	Net secondary school attendance rate	Children of secondary school age
59	Primary completion rate	Children of primary school completion age
71	Child labour	Children aged 5-14 years
75	Prevalence of orphans	Children aged under 18
WOMEN		
4	Skilled attendant at delivery	Women aged 15-49 years with a live birth in the last 2 years
20	Antenatal care	Women aged 15-49 years with a live birth in the last 2 years
21	Contraceptive prevalence	Women aged 15-49 currently married
60	Adult literacy	Women aged 15-24 years
63	Prevalence of female genital mutilation/cutting (FGM/C)	Women aged 15-49 years
67	Marriage before age 18	Women aged 20-49 years
70	Polygyny	Women aged 15-49 years currently married
82	Comprehensive knowledge about HIV prevention among young people	Women aged 15-24 years
86	Attitude towards people with HIV/AIDS	Women aged 15-49 years
89	Knowledge of mother- to-child transmission of HIV	Women aged 15-49 years
UNDER-5s		
6	Underweight prevalence	Children under age 5
25	Tuberculosis immunization coverage	Children aged 12-23 months
26	Polio immunization coverage	Children aged 12-23 months
27	Immunization coverage for DPT	Children aged 12-23 months
28	Measles immunization coverage	Children aged 12-23 months
31	Fully immunized children	Children aged 12-23 months
	- Acute respiratory infection in last two weeks	Children under age 5
22	Antibiotic treatment of suspected pneumonia	Children under age 5 with suspected pneumonia in the last 2 weeks
	- Diarrhoea in last two weeks	Children under age 5
35	Received ORT or increased fluids and continued feeding	Children under age 5 with diarrhoea in the last 2 weeks
46	Support for learning	Children under age 5
62	Birth registration	Children under age 5

**Table SE.2: Sampling errors: Total sample**

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deff*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deff</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
<b>HOUSEHOLDS</b>										
Iodized salt consumption	NU.5	0.999	0.001	0.001	1.224	1.106	6102	6102	0.997	1.000
Child discipline	CP.4	0.950	0.004	0.005	1.287	1.134	3282	3282	0.942	0.959
<b>HOUSEHOLD MEMBERS</b>										
Use of improved drinking water sources	EN.1	0.912	0.008	0.008	4.600	2.145	29126	6167	0.897	0.928
Use of improved sanitation facilities	EN.5	0.999	0.000	0.000	1.248	1.117	29126	6167	0.999	1.000
Net primary school attendance rate	ED.3	0.947	0.004	0.004	1.166	1.080	4054	4054	0.940	0.955
Net secondary school attendance rate	ED.4	0.634	0.009	0.015	1.786	1.336	4663	4663	0.615	0.653
Primary completion rate	ED.6	0.374	0.019	0.050	1.019	1.009	687	687	0.337	0.411
Child labour	CP.2	0.015	0.002	0.151	2.504	1.582	7185	7185	0.010	0.020
Prevalence of orphans	HA.10	0.038	0.003	0.082	3.192	1.787	11930	11930	0.032	0.044
<b>WOMEN</b>										
Skilled attendant at delivery	RH.5	0.993	0.003	0.003	0.861	0.928	949	949	0.987	0.998
Antenatal care	RH.3	0.905	0.009	0.010	0.885	0.941	949	949	0.887	0.923
Contraceptive prevalence	RH.1	0.683	0.008	0.012	1.197	1.094	3663	3663	0.666	0.700
Adult literacy	ED.8	0.880	0.014	0.015	0.737	0.858	424	424	0.853	0.907
Marriage before age 18	CP.5	0.326	0.009	0.027	1.355	1.164	3873	3873	0.309	0.344
Comprehensive knowledge about HIV prevention among young people	HA.3	0.198	0.008	0.040	1.527	1.236	3955	3955	0.182	0.213
Attitude towards people with HIV/AIDS	HA.5	0.197	0.009	0.045	1.785	1.336	3632	3632	0.180	0.215
Knowledge of mother- to-child transmission of HIV	HA.4	0.451	0.010	0.023	1.760	1.327	3955	3955	0.430	0.472
<b>UNDER-5s</b>										
Underweight prevalence	NU.1	0.046	0.005	0.099	0.896	0.946	1892	1892	0.037	0.055
Tuberculosis immunization coverage	CH.2	0.973	0.009	0.009	1.165	1.079	408	408	0.956	0.990
Polio immunization coverage	CH.2	0.978	0.007	0.007	0.913	0.955	408	408	0.964	0.992
Immunization coverage for DPT	CH.2	0.973	0.007	0.007	0.755	0.869	406	406	0.959	0.987
Measles immunization coverage	CH.2	0.975	0.008	0.008	1.030	1.015	408	408	0.960	0.991
Fully immunized children	CH.2	0.931	0.011	0.011	0.711	0.843	408	408	0.910	0.953
Acute respiratory infection in last two weeks	CH.6	0.171	0.010	0.056	1.541	1.241	2381	2381	0.152	0.191
Antibiotic treatment of suspected pneumonia	CH.7	0.672	0.021	0.031	0.776	0.881	408	408	0.631	0.713
Diarrhoea in last two weeks	CH.4	0.099	0.007	0.069	1.249	1.118	2381	2381	0.085	0.112
Received ORT or increased fluids and continued feeding	CH.5	0.289	0.023	0.080	0.614	0.784	235	235	0.243	0.336
Support for learning	CD.1	0.645	0.012	0.019	1.617	1.272	2381	2381	0.620	0.670
Birth registration	CP.1	0.984	0.003	0.003	1.316	1.147	2381	2381	0.978	0.990

**Table SE.3: Sampling errors: Tripoli Region**Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deff*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deff</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Iodized salt consumption	NU.5	0.997	0.002	0.002	1.502	1.226	1200	1200	0.993	1.000
Child discipline	CP.4	0.925	0.012	0.013	1.268	1.126	643	643	0.902	0.949
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.953	0.009	0.009	1.983	1.408	6165	1200	0.936	0.971
Use of improved sanitation facilities	EN.5	0.999	0.001	0.001	1.186	1.089	6165	1200	0.997	1.000
Net primary school attendance rate	ED.3	0.958	0.008	0.008	1.275	1.129	896	896	0.942	0.973
Net secondary school attendance rate	ED.4	0.612	0.017	0.028	1.216	1.103	995	995	0.578	0.646
Primary completion rate	ED.6	0.486	0.048	0.099	1.272	1.128	138	138	0.389	0.582
Child labour	CP.2	0.013	0.003	0.253	1.358	1.165	1575	1575	0.007	0.020
Prevalence of orphans	HA.10	0.038	0.006	0.153	2.328	1.526	2539	2539	0.026	0.049
WOMEN										
Skilled attendant at delivery	RH.5	0.989	0.008	0.008	0.988	0.994	177	177	0.973	1.000
Antenatal care	RH.3	0.915	0.028	0.031	1.828	1.352	177	177	0.858	0.972
Contraceptive prevalence	RH.1	0.622	0.022	0.035	1.406	1.186	693	693	0.578	0.666
Adult literacy	ED.8	0.871	0.033	0.038	0.666	0.816	70	70	0.806	0.937
Marriage before age 18	CP.5	0.374	0.020	0.053	1.245	1.116	740	740	0.335	0.414
Comprehensive knowledge about HIV prevention among young people	HA.3	0.102	0.013	0.123	1.304	1.142	753	753	0.077	0.127
Attitude towards people with HIV/AIDS	HA.5	0.120	0.012	0.101	0.912	0.955	659	659	0.096	0.144
Knowledge of mother- to-child transmission of HIV	HA.4	0.444	0.022	0.050	1.484	1.218	753	753	0.399	0.488
UNDER-5s										
Underweight prevalence	NU.1	0.012	0.005	0.428	0.925	0.962	407	407	0.002	0.023
Tuberculosis immunization coverage	CH.2	0.979	0.010	0.010	0.474	0.688	96	96	0.959	0.999
Polio immunization coverage	CH.2	1.000	0.000	0.000	.	.	96	96	1.000	1.000
Immunization coverage for DPT	CH.2	1.000	0.000	0.000	.	.	96	96	1.000	1.000
Measles immunization coverage	CH.2	1.000	0.000	0.000	.	.	96	96	1.000	1.000
Fully immunized children	CH.2	0.979	0.010	0.010	0.474	0.688	96	96	0.959	0.999
Acute respiratory infection in last two weeks	CH.6	0.167	0.026	0.155	2.260	1.503	473	473	0.115	0.219
Antibiotic treatment of suspected pneumonia	CH.7	0.367	0.030	0.082	0.305	0.552	79	79	0.307	0.427
Diarrhoea in last two weeks	CH.4	0.080	0.012	0.145	0.866	0.931	473	473	0.057	0.104
Received ORT or increased fluids and continued feeding	CH.5	*	*	*	*	*	38	38	*	*
Support for learning	CD.1	0.558	0.028	0.050	1.510	1.229	473	473	0.502	0.614
Birth registration	CP.1	0.979	0.008	0.008	1.337	1.156	473	473	0.964	0.994

**Table SE.4: Sampling errors: Beirut Region**

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deft</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Iodized salt consumption	NU.5	0.999	0.001	0.001	1.000	1.000	1409	1409	0.998	1.000
Child discipline	CP.4	0.960	0.009	0.010	1.625	1.275	720	720	0.941	0.978
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.686	0.035	0.051	7.907	2.812	6086	1409	0.617	0.756
Use of improved sanitation facilities	EN.5	1.000	0.000	0.000	.	.	6086	1409	1.000	1.000
Net primary school attendance rate	ED.3	0.946	0.008	0.008	0.919	0.959	785	785	0.931	0.962
Net secondary school attendance rate	ED.4	0.631	0.025	0.039	2.201	1.484	845	845	0.581	0.680
Primary completion rate	ED.6	0.400	0.044	0.111	1.018	1.009	125	125	0.311	0.489
Child labour	CP.2	0.014	0.003	0.239	1.096	1.047	1388	1388	0.007	0.020
Prevalence of orphans	HA.10	0.037	0.006	0.167	2.431	1.559	2301	2301	0.024	0.049
WOMEN										
Skilled attendant at delivery	RH.5	1.000	0.000	0.000	.	.	154	154	1.000	1.000
Antenatal care	RH.3	1.000	0.000	0.000	.	.	154	154	1.000	1.000
Contraceptive prevalence	RH.1	0.705	0.016	0.023	1.008	1.004	801	801	0.673	0.738
Adult literacy	ED.8	0.871	0.038	0.043	1.160	1.077	93	93	0.796	0.946
Marriage before age 18	CP.5	0.278	0.015	0.053	0.925	0.962	862	862	0.249	0.308
Comprehensive knowledge about HIV prevention among young people	HA.3	0.201	0.016	0.079	1.390	1.179	880	880	0.169	0.233
Attitude towards people with HIV/AIDS	HA.5	0.161	0.014	0.090	1.287	1.135	832	832	0.132	0.190
Knowledge of mother- to-child transmission of HIV	HA.4	0.449	0.022	0.050	1.779	1.334	880	880	0.404	0.494
UNDER-5s										
Underweight prevalence	NU.1	0.081	0.012	0.144	0.655	0.809	359	359	0.057	0.104
Tuberculosis immunization coverage	CH.2	0.911	0.050	0.055	1.716	1.310	56	56	0.810	1.000
Polio immunization coverage	CH.2	1.000	0.000	0.000	.	.	56	56	1.000	1.000
Immunization coverage for DPT	CH.2	1.000	0.000	0.000	.	.	56	56	1.000	1.000
Measles immunization coverage	CH.2	1.000	0.000	0.000	.	.	56	56	1.000	1.000
Fully immunized children	CH.2	0.893	0.041	0.046	0.958	0.979	56	56	0.811	0.975
Acute respiratory infection in last two weeks	CH.6	0.148	0.019	0.130	1.453	1.205	492	492	0.110	0.187
Antibiotic treatment of suspected pneumonia	CH.7	0.658	0.082	0.125	2.167	1.472	73	73	0.493	0.822
Diarrhoea in last two weeks	CH.4	0.079	0.016	0.199	1.681	1.297	492	492	0.048	0.111
Received ORT or increased fluids and continued feeding	CH.5	*	*	*	*	*	39	39	*	*
Support for learning	CD.1	0.689	0.023	0.033	1.168	1.081	492	492	0.644	0.734
Birth registration	CP.1	0.990	0.005	0.005	1.393	1.180	492	492	0.979	1.000

**Table SE.5: Sampling errors: Bekaa Region**Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deff*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deff</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Iodized salt consumption	NU.5	0.998	0.002	0.002	1.000	1.000	435	435	0.993	1.000
Child discipline	CP.4	0.940	0.018	0.020	1.382	1.176	233	233	0.903	0.977
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.979	0.013	0.014	3.742	1.934	2108	435	0.953	1.000
Use of improved sanitation facilities	EN.5	1.000	0.000	0.000	.	.	2108	435	1.000	1.000
Net primary school attendance rate	ED.3	0.970	0.009	0.010	0.851	0.922	296	296	0.951	0.988
Net secondary school attendance rate	ED.4	0.599	0.042	0.070	2.560	1.600	352	352	0.516	0.683
Primary completion rate	ED.6	0.548	0.071	0.129	0.823	0.907	42	42	0.407	0.689
Child labour	CP.2	0.006	0.004	0.746	1.678	1.295	498	498	0.000	0.015
Prevalence of orphans	HA.10	0.033	0.010	0.312	2.709	1.646	826	826	0.012	0.053
WOMEN										
Skilled attendant at delivery	RH.5	1.000	0.000	0.000	.	.	62	62	1.000	1.000
Antenatal care	RH.3	0.984	0.016	0.016	0.946	0.973	62	62	0.952	1.000
Contraceptive prevalence	RH.1	0.675	0.031	0.047	1.107	1.052	246	246	0.612	0.738
Adult literacy	ED.8	*	*	*	*	*	19	19	*	*
Marriage before age 18	CP.5	0.292	0.024	0.082	0.705	0.840	257	257	0.244	0.340
Comprehensive knowledge about HIV prevention among young people	HA.3	0.257	0.021	0.083	0.622	0.788	261	261	0.214	0.299
Attitude towards people with HIV/AIDS	HA.5	0.245	0.031	0.128	1.327	1.152	249	249	0.182	0.308
Knowledge of mother- to-child transmission of HIV	HA.4	0.387	0.046	0.118	2.279	1.510	261	261	0.296	0.478
UNDER-5s										
Underweight prevalence	NU.1	0.008	0.009	1.037	1.074	1.037	120	120	0.000	0.026
Tuberculosis immunization coverage	CH.2	*	*	*	*	*	15	15	*	*
Polio immunization coverage	CH.2	*	*	*	*	*	15	15	*	*
Immunization coverage for DPT	CH.2	*	*	*	*	*	15	15	*	*
Measles immunization coverage	CH.2	*	*	*	*	*	15	15	*	*
Fully immunized children	CH.2	*	*	*	*	*	15	15	*	*
Acute respiratory infection in last two weeks	CH.6	0.141	0.033	0.231	1.237	1.112	142	142	0.076	0.206
Antibiotic treatment of suspected pneumonia	CH.7	0.800	0.100	0.125	1.188	1.090	20	20	*	*
Diarrhoea in last two weeks	CH.4	0.190	0.025	0.130	0.561	0.749	142	142	0.141	0.240
Received ORT or increased fluids and continued feeding	CH.5	*	*	*	*	*	27	27	*	*
Support for learning	CD.1	0.592	0.038	0.064	0.825	0.908	142	142	0.516	0.667
Birth registration	CP.1	0.972	0.015	0.015	1.130	1.063	142	142	0.942	1.000

**Table SE.6: Sampling errors: Sidon Region**Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deff*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deff</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Iodized salt consumption	NU.5	0.999	0.001	0.001	1.001	1.000	1826	1826	0.997	1.000
Child discipline	CP.4	0.977	0.005	0.005	1.104	1.051	992	992	0.967	0.987
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.975	0.006	0.006	2.859	1.691	8496	1826	0.962	0.987
Use of improved sanitation facilities	EN.5	1.000	0.000	0.000	.	.	8496	1826	1.000	1.000
Net primary school attendance rate	ED.3	0.948	0.007	0.007	1.093	1.045	1203	1203	0.934	0.961
Net secondary school attendance rate	ED.4	0.666	0.016	0.024	1.612	1.270	1364	1364	0.633	0.698
Primary completion rate	ED.6	0.413	0.032	0.079	0.944	0.972	218	218	0.348	0.478
Child labour	CP.2	0.024	0.006	0.267	3.802	1.950	2174	2174	0.011	0.037
Prevalence of orphans	HA.10	0.044	0.007	0.154	3.893	1.973	3574	3574	0.030	0.057
WOMEN										
Skilled attendant at delivery	RH.5	0.985	0.006	0.006	0.816	0.903	331	331	0.973	0.997
Antenatal care	RH.3	0.789	0.021	0.027	0.881	0.939	331	331	0.746	0.831
Contraceptive prevalence	RH.1	0.688	0.015	0.021	1.143	1.069	1162	1162	0.659	0.718
Adult literacy	ED.8	0.895	0.015	0.017	0.356	0.596	153	153	0.866	0.925
Marriage before age 18	CP.5	0.351	0.018	0.051	1.662	1.289	1190	1190	0.316	0.387
Comprehensive knowledge about HIV prevention among young people	HA.3	0.198	0.018	0.091	2.513	1.585	1225	1225	0.161	0.234
Attitude towards people with HIV/AIDS	HA.5	0.264	0.021	0.081	2.575	1.605	1084	1084	0.221	0.307
Knowledge of mother- to-child transmission of HIV	HA.4	0.430	0.021	0.048	2.151	1.467	1225	1225	0.389	0.472
UNDER-5s										
Underweight prevalence	NU.1	0.045	0.007	0.151	0.624	0.790	577	577	0.031	0.059
Tuberculosis immunization coverage	CH.2	1.000	0.000	0.000	.	.	136	136	1.000	1.000
Polio immunization coverage	CH.2	0.949	0.019	0.020	0.992	0.996	136	136	0.911	0.986
Immunization coverage for DPT	CH.2	0.949	0.019	0.020	0.992	0.996	136	136	0.911	0.986
Measles immunization coverage	CH.2	0.956	0.019	0.020	1.128	1.062	136	136	0.918	0.993
Fully immunized children	CH.2	0.949	0.019	0.020	0.992	0.996	136	136	0.911	0.986
Acute respiratory infection in last two weeks	CH.6	0.202	0.019	0.093	1.587	1.260	724	724	0.164	0.239
Antibiotic treatment of suspected pneumonia	CH.7	0.808	0.025	0.031	0.572	0.757	146	146	0.759	0.858
Diarrhoea in last two weeks	CH.4	0.102	0.012	0.114	1.073	1.036	724	724	0.079	0.126
Received ORT or increased fluids and continued feeding	CH.5	0.284	0.041	0.145	0.606	0.778	74	74	0.202	0.366
Support for learning	CD.1	0.793	0.016	0.020	1.071	1.035	724	724	0.762	0.824
Birth registration	CP.1	0.992	0.003	0.003	0.648	0.805	724	724	0.986	0.997



**Table SE.7: Sampling errors: Sur Region**

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deff*) and confidence intervals for selected indicators, Palestinians' Refugee Camps in Lebanon, 2006

	Table	Value ( <i>r</i> )	Standard error ( <i>se</i> )	Coefficient of variation ( <i>se/r</i> )	Design effect ( <i>deff</i> )	Square root of design effect ( <i>deff</i> )	Weighted count	Unweighted count	Confidence limits	
									<i>r</i> - 2 <i>se</i>	<i>r</i> + 2 <i>se</i>
HOUSEHOLDS										
Iodized salt consumption	NU.5	0.999	0.001	0.001	1.001	1.000	1232	1232	0.998	1.000
Child discipline	CP.4	0.929	0.010	0.011	1.136	1.066	694	694	0.909	0.950
HOUSEHOLD MEMBERS										
Use of improved drinking water sources	EN.1	0.984	0.004	0.004	1.578	1.256	6271	1297	0.975	0.993
Use of improved sanitation facilities	EN.5	0.998	0.001	0.001	1.185	1.089	6271	1297	0.995	1.000
Net primary school attendance rate	ED.3	0.930	0.010	0.011	1.396	1.182	874	874	0.910	0.951
Net secondary school attendance rate	ED.4	0.627	0.020	0.032	1.962	1.401	1107	1107	0.586	0.668
Primary completion rate	ED.6	0.165	0.034	0.205	1.346	1.160	164	164	0.097	0.232
Child labour	CP.2	0.008	0.002	0.290	1.102	1.050	1550	1550	0.004	0.013
Prevalence of orphans	HA.10	0.033	0.007	0.203	3.744	1.935	2690	2690	0.019	0.046
WOMEN										
Skilled attendant at delivery	RH.5	1.000	0.000	0.000	.	.	225	225	1.000	1.000
Antenatal care	RH.3	0.982	0.008	0.008	0.823	0.907	225	225	0.966	0.998
Contraceptive prevalence	RH.1	0.708	0.019	0.026	1.287	1.134	761	761	0.671	0.746
Adult literacy	ED.8	0.888	0.031	0.035	0.847	0.920	89	89	0.826	0.950
Marriage before age 18	CP.5	0.308	0.021	0.068	1.671	1.293	824	824	0.267	0.350
Comprehensive knowledge about HIV prevention among young people	HA.3	0.262	0.015	0.058	1.009	1.004	836	836	0.231	0.293
Attitude towards people with HIV/AIDS	HA.5	0.194	0.018	0.094	1.714	1.309	808	808	0.158	0.231
Knowledge of mother- to-child transmission of HIV	HA.4	0.511	0.019	0.038	1.270	1.127	836	836	0.472	0.550
UNDER-5s										
Underweight prevalence	NU.1	0.061	0.014	0.224	1.381	1.175	429	429	0.033	0.088
Tuberculosis immunization coverage	CH.2	0.962	0.016	0.017	0.730	0.854	105	105	0.930	0.994
Polio immunization coverage	CH.2	0.981	0.013	0.013	0.922	0.960	105	105	0.955	1.000
Immunization coverage for DPT	CH.2	0.981	0.013	0.013	0.921	0.960	103	103	0.954	1.000
Measles immunization coverage	CH.2	0.962	0.018	0.019	0.948	0.974	105	105	0.925	0.998
Fully immunized children	CH.2	0.895	0.021	0.024	0.505	0.710	105	105	0.853	0.938
Acute respiratory infection in last two weeks	CH.6	0.164	0.015	0.092	0.910	0.954	550	550	0.134	0.194
Antibiotic treatment of suspected pneumonia	CH.7	0.700	0.035	0.050	0.524	0.724	90	90	0.630	0.770
Diarrhoea in last two weeks	CH.4	0.104	0.017	0.161	1.651	1.285	550	550	0.070	0.137
Received ORT or increased fluids and continued feeding	CH.5	0.316	0.058	0.183	0.869	0.932	57	57	0.200	0.432
Support for learning	CD.1	0.500	0.032	0.063	2.196	1.482	550	550	0.437	0.563
Birth registration	CP.1	0.975	0.008	0.009	1.572	1.254	550	550	0.958	0.991

## Appendix C. Data Quality Tables

**Table DQ.1: Age distribution of household population**

Single-year age distribution of household population by sex, Palestinians' Refugee Camps in Lebanon, 2006

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
<b>0</b>	219	1.5	194	1.3	<b>41</b>	147	1.0	146	1.0
<b>1</b>	220	1.5	270	1.8	<b>42</b>	229	1.6	247	1.7
<b>2</b>	244	1.7	271	1.8	<b>43</b>	196	1.4	182	1.2
<b>3</b>	244	1.7	281	1.9	<b>44</b>	124	.9	131	.9
<b>4</b>	255	1.8	233	1.6	<b>45</b>	189	1.3	185	1.3
<b>5</b>	385	2.7	380	2.6	<b>46</b>	98	.7	125	.9
<b>6</b>	306	2.1	302	2.1	<b>47</b>	123	.9	100	.7
<b>7</b>	315	2.2	281	1.9	<b>48</b>	116	.8	106	.7
<b>8</b>	358	2.5	320	2.2	<b>49</b>	77	.5	64	.4
<b>9</b>	377	2.6	303	2.1	<b>50</b>	108	.7	167	1.1
<b>10</b>	407	2.8	415	2.8	<b>51</b>	73	.5	85	.6
<b>11</b>	358	2.5	329	2.2	<b>52</b>	91	.6	100	.7
<b>12</b>	394	2.7	390	2.7	<b>53</b>	87	.6	88	.6
<b>13</b>	398	2.8	375	2.6	<b>54</b>	68	.5	63	.4
<b>14</b>	444	3.1	348	2.4	<b>55</b>	71	.5	115	.8
<b>15</b>	427	3.0	389	2.7	<b>56</b>	54	.4	61	.4
<b>16</b>	407	2.8	378	2.6	<b>57</b>	74	.5	88	.6
<b>17</b>	344	2.4	369	2.5	<b>58</b>	74	.5	89	.6
<b>18</b>	416	2.9	350	2.4	<b>59</b>	35	.2	49	.3
<b>19</b>	314	2.2	272	1.9	<b>60</b>	134	.9	158	1.1
<b>20</b>	358	2.5	311	2.1	<b>61</b>	37	.3	40	.3
<b>21</b>	292	2.0	239	1.6	<b>62</b>	44	.3	75	.5
<b>22</b>	277	1.9	221	1.5	<b>63</b>	56	.4	58	.4
<b>23</b>	314	2.2	261	1.8	<b>64</b>	54	.4	46	.3
<b>24</b>	273	1.9	218	1.5	<b>65</b>	116	.8	161	1.1
<b>25</b>	250	1.7	234	1.6	<b>66</b>	38	.3	43	.3
<b>26</b>	207	1.4	193	1.3	<b>67</b>	42	.3	44	.3
<b>27</b>	179	1.2	222	1.5	<b>68</b>	42	.3	42	.3
<b>28</b>	157	1.1	207	1.4	<b>69</b>	20	.1	26	.2
<b>29</b>	141	1.0	184	1.3	<b>70</b>	97	.7	143	1.0
<b>30</b>	229	1.6	268	1.8	<b>71</b>	28	.2	18	.1
<b>31</b>	134	.9	184	1.3	<b>72</b>	23	.2	31	.2
<b>32</b>	176	1.2	204	1.4	<b>73</b>	31	.2	28	.2
<b>33</b>	194	1.3	225	1.5	<b>74</b>	17	.1	20	.1
<b>34</b>	152	1.1	195	1.3	<b>75</b>	87	.6	88	.6
<b>35</b>	221	1.5	281	1.9	<b>76</b>	19	.1	17	.1
<b>36</b>	169	1.2	202	1.4	<b>77</b>	25	.2	14	.1
<b>37</b>	170	1.2	231	1.6	<b>78</b>	24	.2	13	.1
<b>38</b>	207	1.4	239	1.6	<b>79</b>	3	.0	7	.0
<b>39</b>	187	1.3	194	1.3	<b>80+</b>	110	.8	156	1.1
<b>40</b>	244	1.7	292	2.0	<b>DK/Missing</b>	5	.0	3	.0
<b>Total</b>						14449	100.0	14677	100.0

**Table DQ.2: Age distribution of eligible and interviewed women**

Household population of women age 10-54, interviewed women age 15-49, and percentage of eligible women who were interviewed, by five-year age group, Palestinians' Refugee Camps in Lebanon, 2006

Age	Household population of women age 10-54	Interviewed women age 15-49		Percentage of eligible women interviewed
	Number	Number	Percent	
<b>10-14</b>	na	na	na	na
<b>15-19</b>	85	82	2.1	96.5
<b>20-24</b>	346	342	8.6	98.8
<b>25-29</b>	615	610	15.4	99.2
<b>30-34</b>	801	790	20.0	98.6
<b>35-39</b>	896	891	22.5	99.4
<b>40-44</b>	784	775	19.6	98.9
<b>45-49</b>	474	465	11.8	98.1
<b>50-54</b>	414	82	2.1	.
<b>15-49</b>	4001	3955	100.0	98.9

na: not applicable

**Table DQ.3: Age distribution of eligible and interviewed under-5s**

Household population of children age 0-4, children whose mothers/caretakers were interviewed, and percentage of under-5 children whose mothers/caretakers were interviewed, by five-year age group, Palestinians' Refugee Camps in Lebanon, 2006

Age	Household population of children age 0-7	Interviewed children age 0-4		Percentage of eligible children interviewed
	Number	Number	Percent	
<b>0</b>	413	408	17.1	98.8
<b>1</b>	490	483	20.3	98.6
<b>2</b>	515	509	21.4	98.8
<b>3</b>	525	520	21.8	99.0
<b>4</b>	488	461	19.4	94.5
<b>5</b>	765	.	.	.
<b>6</b>	608	.	.	.
<b>7</b>	596	.	.	.
<b>0-4</b>	2431	2381	100.0	97.9

na: not applicable

Note: Weights for both household population of children and interviewed children are household weights. Age is based on the household schedule.

**Table DQ.4: Age distribution of under-5 children**  
Age distribution of under-5 children by 3-month groups, Palestinians'  
Refugee Camps in Lebanon, 2006

	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
<b>Age in months</b>						
<b>0-2</b>	37	3.2	36	2.9	73	3.1
<b>3-5</b>	60	5.2	57	4.6	117	4.9
<b>6-8</b>	67	5.8	40	3.3	107	4.5
<b>9-11</b>	54	4.7	57	4.6	111	4.7
<b>12-14</b>	52	4.5	57	4.6	109	4.6
<b>15-17</b>	66	5.7	72	5.9	138	5.8
<b>18-20</b>	38	3.3	77	6.3	115	4.8
<b>21-23</b>	60	5.2	61	5.0	121	5.1
<b>24-26</b>	52	4.5	75	6.1	127	5.3
<b>27-29</b>	70	6.1	68	5.5	138	5.8
<b>30-32</b>	51	4.4	49	4.0	100	4.2
<b>33-35</b>	67	5.8	77	6.3	144	6.0
<b>36-38</b>	58	5.0	73	5.9	131	5.5
<b>39-41</b>	61	5.3	69	5.6	130	5.5
<b>42-44</b>	54	4.7	72	5.9	126	5.3
<b>45-47</b>	67	5.8	66	5.4	133	5.6
<b>48-50</b>	55	4.8	57	4.6	112	4.7
<b>51-53</b>	71	6.2	63	5.1	134	5.6
<b>54-56</b>	68	5.9	42	3.4	110	4.6
<b>57-59</b>	45	3.9	60	4.9	105	4.4
<b>Total</b>	1153	100.0	1228	100.0	2381	100.0

**Table DQ.5: Heaping on ages and periods**

Age and period ratios at boundaries of eligibility by type of information collected, Palestinians' Refugee Camps in Lebanon, 2006

	<b>Age and period ratios*</b>			Eligibility boundary (lower-upper)	Module or questionnaire
	Males	Females	Total		
<b>Age in household questionnaire</b>					
<b>1</b>	.97	1.10	1.04		
<b>2</b>	1.03	.99	1.01	Lower	Child discipline and
<b>3</b>	.99	1.07	1.03		
<b>4</b>	.87	.78	.82	Upper	Under-5 questionnaire
<b>5</b>	1.22	1.25	1.23	Lower	Child labour and education
<b>6</b>	.91	.94	.93		
<b>8</b>	1.02	1.06	1.04		
<b>9</b>	.99	.88	.94		
<b>10</b>	1.07	1.19	1.13		
<b>13</b>	.97	1.01	.99		
<b>14</b>	1.05	.94	1.00	Upper	Child labour and child discipline
<b>15</b>	1.00	1.05	1.02	Lower	Women's questionnaire
<b>16</b>	1.04	1.00	1.02		
<b>17</b>	.88	1.01	.94	Upper	Orphaned and vulnerable children
<b>18</b>	.96	1.12	1.04		
<b>23</b>	1.09	1.12	1.10		
<b>24</b>	.98	.92	.95	Upper	Education
<b>25</b>	1.03	1.09	1.06		
<b>48</b>	1.10	1.18	1.14		
<b>49</b>	.77	.57	.66	Upper	Women's questionnaire
<b>50</b>	1.26	1.59	1.44		
<b>Months since last birth in women's questionnaire</b>					
<b>6-11</b>	na	.99	na		
<b>12-17</b>	na	1.11	na		
<b>18-23</b>	na	.91	na	Upper	Tetanus toxoid and maternal and child health
<b>24-29</b>	na	1.09	na		
<b>30-35</b>	na	.96	na		

\* Age or period ratios are calculated as  $x / ((x_{n-1} + x_n + x_{n+1}) / 3)$ , where x is age or period.

na: not applicable

**Table DQ.6: Completeness of reporting**

Percentage of observations missing information for selected questions and indicators,  
Palestinians' Refugee Camps in Lebanon, 2006

Questionnaire and Subject	Reference group	Percent with missing information*	Number of cases
<b>Household</b>			
Salt testing	All households surveyed	0.0	6167
<b>Women</b>			
Date of Birth	All women age 15-49		
Month only		0.4	3707
Month and year missing		0.0	3707
Completed years since first birth	All women age 15-49 with at least one live birth	2.3	519
Date of last birth	All women age 15-49 with at least one live birth		
Month only		1.3	3707
Month and year missing		0.2	3707
Date of first marriage	All ever married women age 15-49		
Month only			
Month and year missing			
<b>Under-5</b>			
Date of Birth	All under five children surveyed		
Month only		1.1	2381
Month and year missing		0.4	2381
Anthropometry	All under five children surveyed		
Height		5.0	2381
Weight		8.0	2381
Height or Weight		8.3	2381

\* Includes "Don't know" responses

**Table DQ.7: School attendance by single age**

Distribution of household population age 5-24 by educational level and grade attended in the Palestinians' Refugee Camps in Lebanon, 2006

Age	Pre school					Primary						Preparatory					Vocation after preparatory				Secondary			Vocation after secondary		Not-Standard		Not attending school	Total
	1	2	3	4	5	1	2	3	4	5	6	1	2	3	4	8	1	2	3	4	1	2	3	1	3	1	2		
5	4.4	31.2	50.5	0.1	0.1	2.5	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	10.7	100
6	0.7	4.8	15.8	0.5	0.0	68.6	4.9	1.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.6	100
7	0.0	0.5	0.7	0.0	0.0	28.7	65.4	3.5	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.8	100
8	0.0	0.3	0.0	0.0	0.0	2.4	36.1	56.2	3.2	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.2	100
9	0.0	0.0	0.0	0.0	0.0	0.0	4.6	43.4	46.6	3.4	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.3	1.3	100
10	0.0	0.0	0.0	0.0	0.0	0.0	1.5	9.1	40.4	42.8	2.7	0.5	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.9	100
11	0.0	0.0	0.0	0.0	0.0	0.3	0.3	2.3	14.3	38.7	35.4	4.2	1.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.9	100
12	0.0	0.0	0.0	0.0	0.1	0.8	0.4	0.3	4.6	14.9	32.1	27.9	12.2	1.5	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.3	0.0	0.0	4.3	100
13	0.0	0.0	0.0	0.0	0.0	0.1	0.3	0.6	1.8	4.3	11.3	20.9	27.5	19.6	2.1	0.0	0.0	0.0	0.0	0.0	0.9	0.0	0.1	0.0	0.0	0.0	0.1	9.7	100
14	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.4	1.9	4.8	11.1	18.6	30.3	16.3	0.0	0.0	0.1	0.0	0.1	0.5	0.0	0.3	0.0	0.0	0.0	0.0	14.5	100
15	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	0.1	0.6	0.9	3.1	9.8	27.6	24.3	0.0	0.7	0.4	0.2	0.1	4.7	1.0	0.0	0.0	0.1	0.1	0.0	25.3	100
16	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	1.9	3.7	11.2	20.0	0.1	3.1	1.0	0.4	0.0	16.2	2.7	0.3	0.0	0.0	0.0	0.0	38.9	100
17	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.4	1.8	3.5	6.4	0.1	4.7	3.4	0.3	0.0	16.3	12.9	4.3	0.9	0.1	0.0	0.0	44.7	100
18	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
19	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
20	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.0	0.0	0.0	94.4	100
21	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
22	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
23	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
24	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100
Total	0.4	2.8	5.1	0.0	0.0	6.6	7.5	8.4	8.6	8.5	6.8	5.7	6.1	7.8	5.7	0.0	0.7	0.4	0.1	0.0	3.0	1.3	0.4	0.1	0.0	0.0	13.9	100	

**Table DQ.8: Sex ratio at birth among children ever born and living**

Sex ratio at birth among children ever born, children living, and deceased children, by age of women, Palestinians' Refugee Camps in Lebanon, 2006

Age	Children Ever Born			Children Living			Children deceased			Number of women
	Number of sons ever born	Number of daughters ever born	Sex ratio	Number of sons living	Number of daughters living	Sex ratio	Number of deceased sons	Number of deceased daughters	Sex ratio	
15-19	25	21	1.19	25	21	1.19	0	0	.	82
20-24	251	235	1.07	244	232	1.05	7	3	2.33	342
25-29	734	822	.89	711	806	.88	23	16	1.44	610
30-34	1457	1348	1.08	1390	1310	1.06	59	38	1.55	790
35-39	2137	1892	1.13	2002	1834	1.09	132	57	2.32	891
40-44	1952	1824	1.07	1839	1749	1.05	106	75	1.41	775
45-49	1300	1282	1.01	1208	1213	1.00	90	66	1.36	465
<b>Total</b>	<b>7856</b>	<b>7424</b>	<b>1.06</b>	<b>7419</b>	<b>7165</b>	<b>1.04</b>	<b>417</b>	<b>255</b>	<b>1.64</b>	<b>3955</b>

Note: Sex ratios are calculated as number of males/ number of females

**Table DQ.9: Distribution of women by time since last birth**

Distribution of women aged 15-49 with at least one live birth, by months since last birth during past 3 years, Palestinians' Refugee Camps in Lebanon, 2006

Months since last birth					
	Number	Percent		Number	Percent
<b>0</b>	17	1.4	<b>21</b>	37	2.9
<b>1</b>	23	1.8	<b>22</b>	31	2.5
<b>2</b>	30	2.4	<b>23</b>	26	2.1
<b>3</b>	35	2.8	<b>24</b>	26	2.1
<b>4</b>	35	2.8	<b>25</b>	41	3.3
<b>5</b>	41	3.3	<b>26</b>	40	3.2
<b>6</b>	35	2.8	<b>27</b>	46	3.7
<b>7</b>	33	2.6	<b>28</b>	33	2.6
<b>8</b>	32	2.5	<b>29</b>	38	3.0
<b>9</b>	36	2.9	<b>30</b>	31	2.5
<b>10</b>	38	3.0	<b>31</b>	22	1.8
<b>11</b>	37	2.9	<b>32</b>	23	1.8
<b>12</b>	38	3.0	<b>33</b>	31	2.5
<b>13</b>	32	2.5	<b>34</b>	36	2.9
<b>14</b>	44	3.5	<b>35</b>	45	3.6
<b>15</b>	35	2.8			
<b>16</b>	41	3.3	<b>Total</b>	1255	100.0
<b>17</b>	56	4.5			
<b>18</b>	37	2.9			
<b>19</b>	33	2.6			
<b>20</b>	41	3.3			



Figure 1. Scatterplot of weight (Y-axis) by height (x-axis), Palestinians' Refugee Camps in Lebanon, 2006

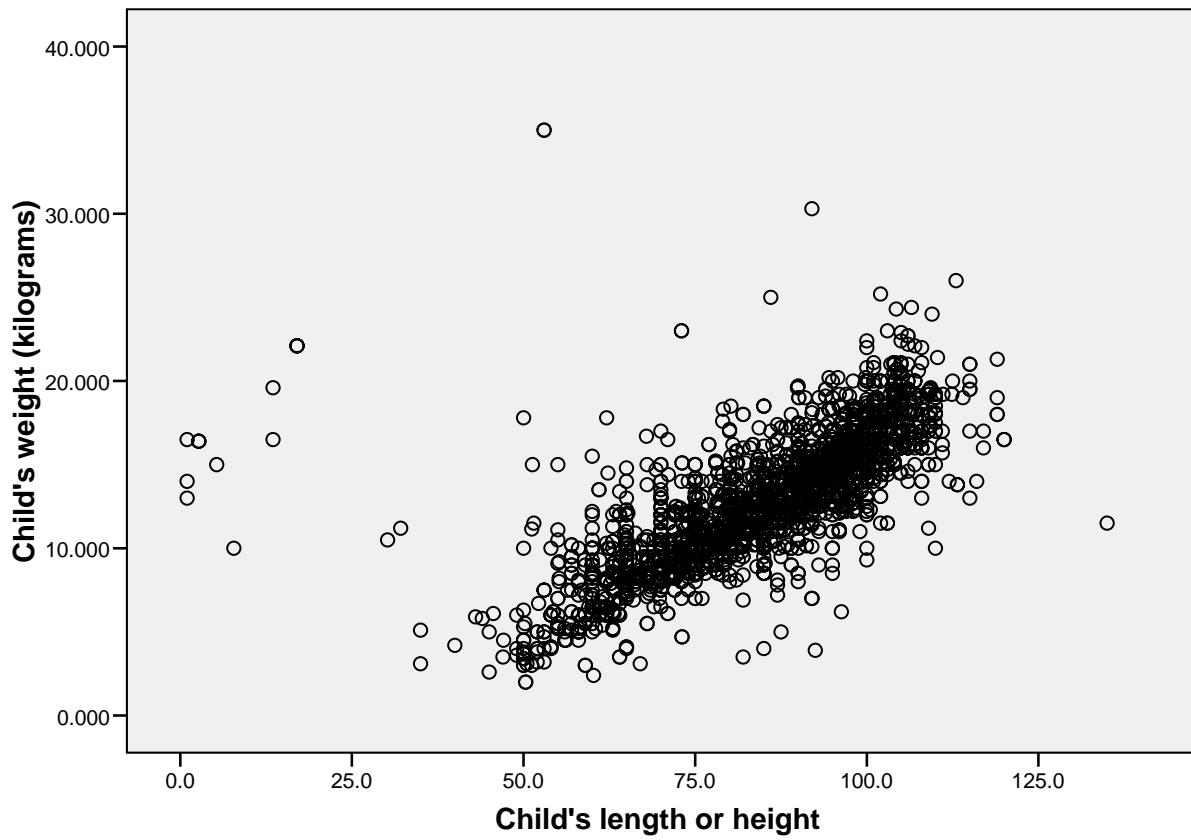


Figure 2. Scatterplot of weights of children by age in months, Palestinians' Refugee Camps in Lebanon, 2006

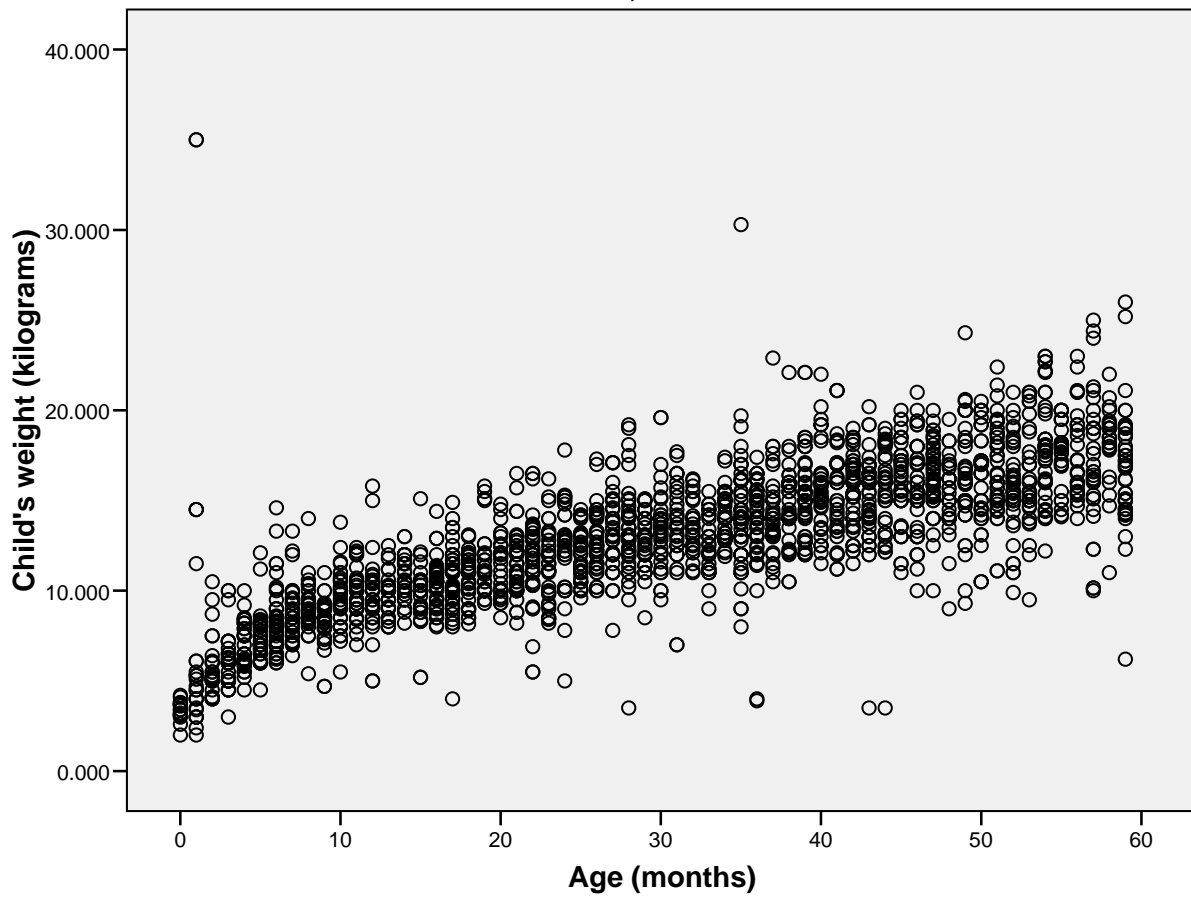
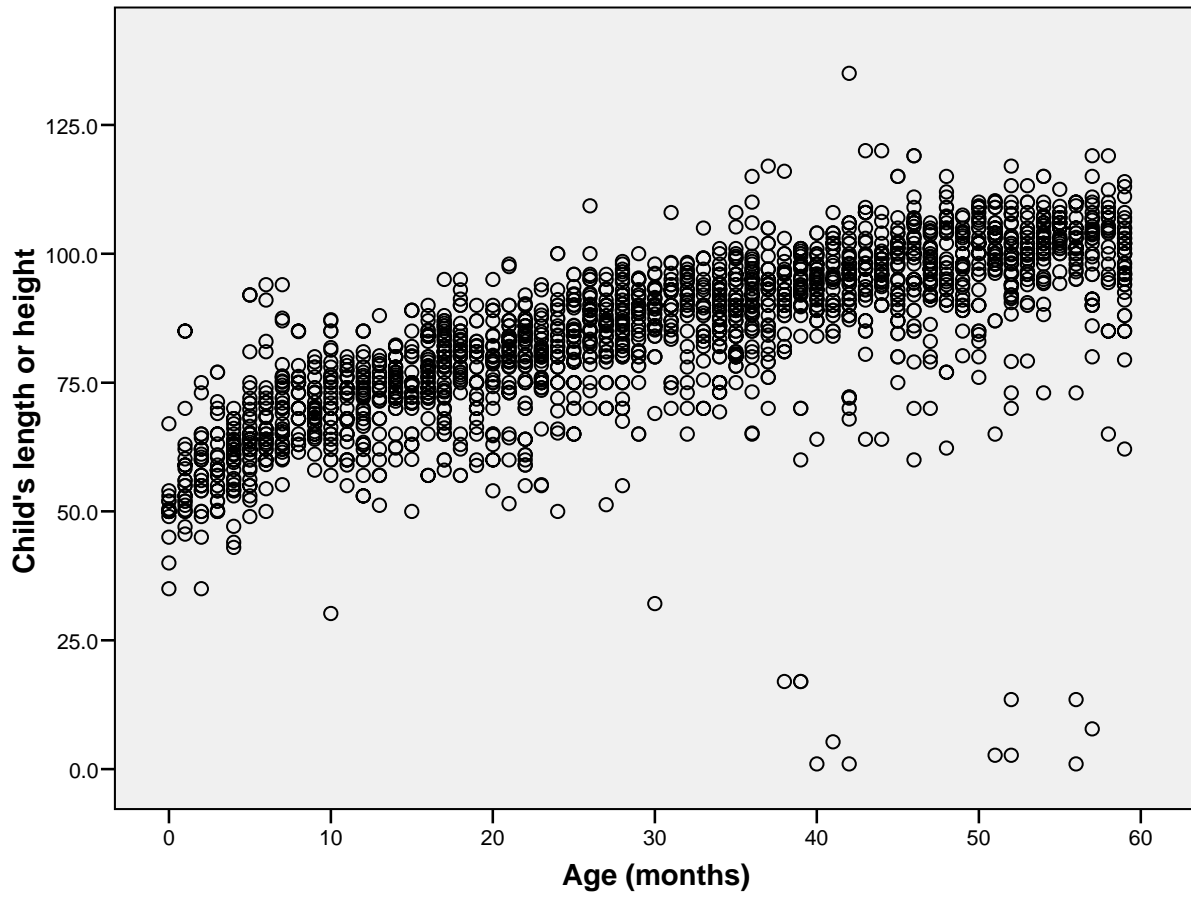
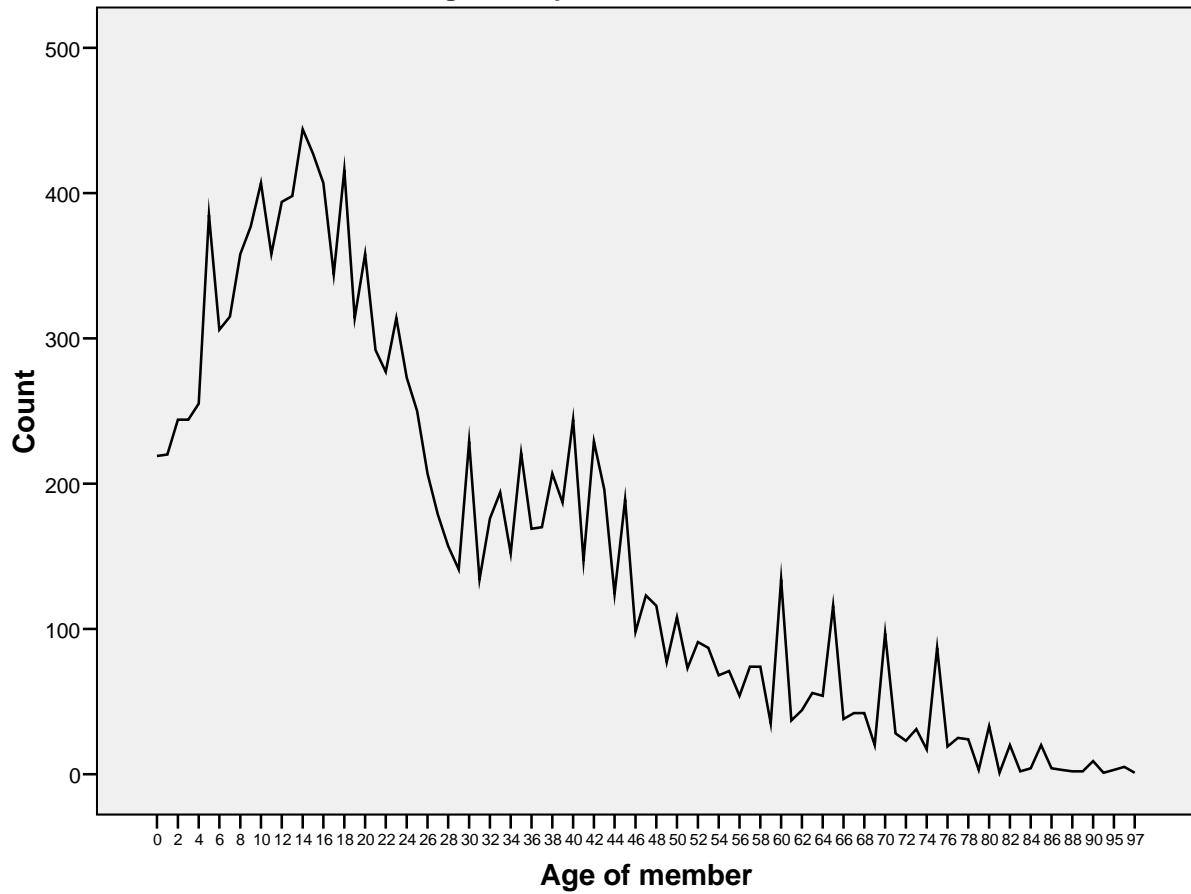


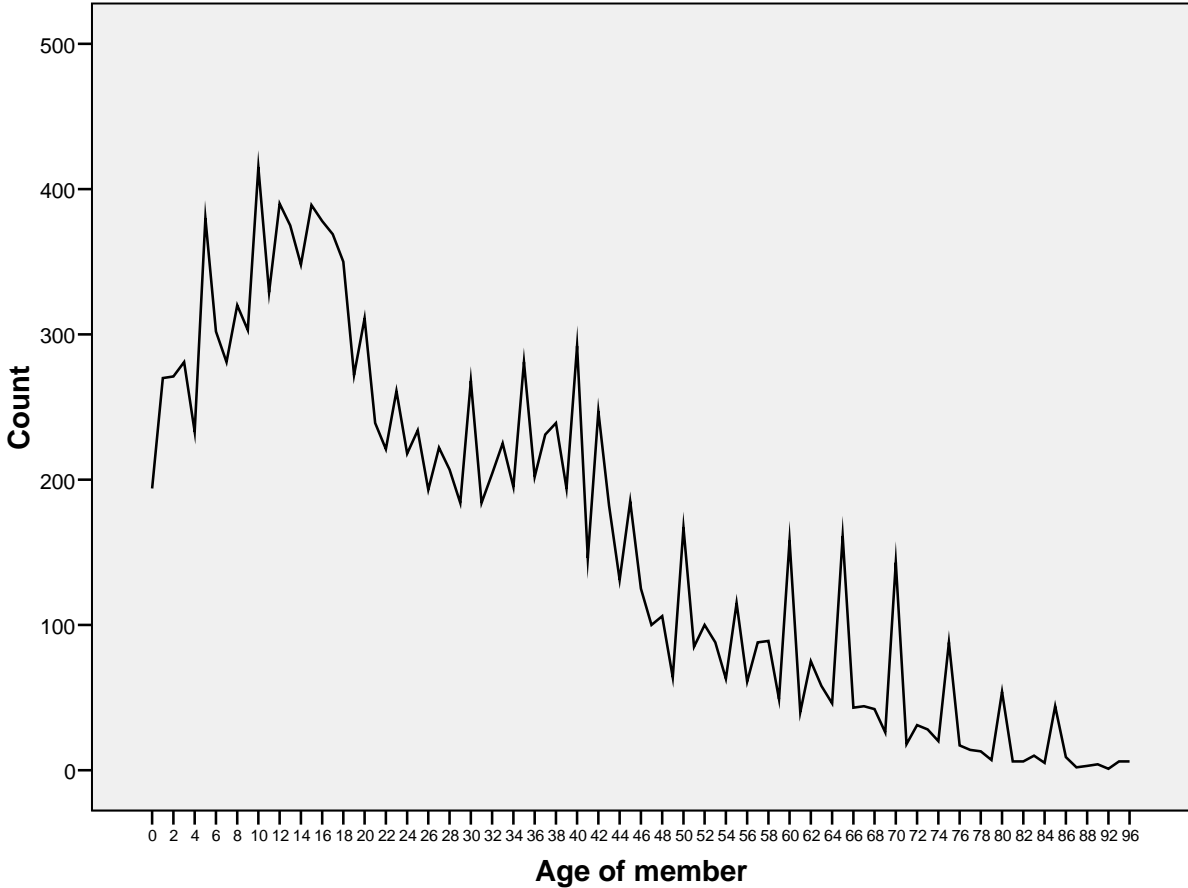
Figure 3. Scatterplot of heights of children by age in months, Palestinians' Refugee Camps in Lebanon, 2006



**Figure 4. Number of male household population (Y-axis) by single ages (X-axis), Palestinians' Refugee Camps in Lebanon, 2006**



**Figure 5. Number of female household population (Y-axis) by single ages (X-axis),  
Palestinians' Refugee Camps in Lebanon, 2006**



## Appendix D. MICS Indicators: Numerators and Denominators

INDICATOR	NUMERATOR	DENOMINATOR
1 Under-five mortality rate	Probability of dying by exact age 5 years	
2 Infant mortality rate	Probability of dying by exact age 1 year	
3 Maternal mortality ratio	Number of deaths of women from pregnancy-related causes in a given year	Number of live births in the year (expressed per 100,000 births)
4 Skilled attendant at delivery	Number of women aged 15-49 years with a birth in the 2 years preceding the survey that were attended during childbirth by skilled health personnel	Total number of women surveyed aged 15-49 years with a birth in the 2 years preceding the survey
5 Institutional deliveries	Number of women aged 15-49 years with a birth in the 2 years preceding the survey that delivered in a health facility	Total number of women surveyed aged 15-49 years with a birth in 2 years preceding the survey
6 Underweight prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five that were weighed
7 Stunting prevalence	Number of children under age five that fall below minus two standard deviations from the median height for age of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five measured
8 Wasting prevalence	Number of children under age five that fall below minus two standard deviations from the median weight for height of the NCHS/WHO standard (moderate and severe); number that fall below minus three standard deviations (severe)	Total number of children under age five weighed and measured
9 Low-birthweight infants	Number of last live births in the 2 years preceding the survey weighing below 2,500 grams	Total number of last live births in the 2 years preceding the survey
10 Infants weighed at birth	Number of last live births in the 2 years preceding the survey that were weighed at birth	Total number of last live births in the 2 years preceding the survey
11 Use of improved drinking water sources	Number of household members living in households using improved sources of drinking water	Total number of household members in households surveyed
12 Use of improved sanitation facilities	Number of household members using improved sanitation facilities	Total number of household members in households surveyed
13 Water treatment	Number of household members using water that has been treated	Total number of household members in households surveyed
15 Exclusive breastfeeding rate	Number of infants aged 0-5 months that are exclusively breastfed	Total number of infants aged 0-5 months surveyed
16 Continued breastfeeding rate	Number of infants aged 12-15 months, and 20-23 months, that are currently breastfeeding	Total number of children aged 12-15 months

INDICATOR	NUMERATOR	DENOMINATOR
		and 20-23 months surveyed
17 Timely complementary feeding rate	Number of infants aged 6-9 months that are receiving breastmilk and complementary foods	Total number of infants aged 6-9 months surveyed
18 Frequency of complementary feeding	Number of infants aged 6-11 months that receive breastmilk and complementary food at least the minimum recommended number of times per day (two times per day for infants aged 6-8 months, three times per day for infants aged 9-11 months)	Total number of infants aged 6-11 months surveyed
19 Adequately fed infants	Number of infants aged 0-11 months that are appropriately fed: infants aged 0-5 months that are exclusively breastfed and infants aged 6-11 months that are breastfed and ate solid or semi-solid foods the appropriate number of times (see above) yesterday	Total number of infants aged 0-11 months surveyed
20 Antenatal care	Number of women aged 15-49 years that were attended at least once during pregnancy in the 2 years preceding the survey by skilled health personnel	Total number of women surveyed aged 15-49 years with a birth in the 2 years preceding the survey
21 Contraceptive prevalence	Number of women currently married aged 15-49 years that are using (or whose partner is using) a contraceptive method (either modern or traditional)	Total number of women aged 15-49 years that are currently married
22 Antibiotic treatment of suspected pneumonia	Number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks receiving antibiotics	Total number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks
23 Care-seeking for suspected pneumonia	Number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks that are taken to an appropriate health provider	Total number of children aged 0-59 months with suspected pneumonia in the previous 2 weeks
24 Solid fuels	Number of residents in households that use solid fuels (wood, charcoal, crop residues and dung) as the primary source of domestic energy to cook	Total number of residents in households surveyed
25 Tuberculosis immunization coverage	Number of children aged 12-23 months receiving BCG vaccine before their first birthday	Total number of children aged 12-23 months surveyed
26 Polio immunization coverage	Number of children aged 12-23 months receiving OPV3 vaccine before their first birthday	Total number of children aged 12-23 months surveyed
27 Immunization coverage for diphtheria, pertussis and tetanus (DPT)	Number of children aged 12-23 months receiving DPT3 vaccine before their first birthday	Total number of children aged 12-23 months surveyed
28 Measles immunization coverage	Number of children aged 12-23 months receiving measles vaccine before their first birthday	Total number of children aged 12-23 months surveyed
29 Hepatitis B immunization coverage	Number of children aged 12-23 months immunized against hepatitis before their first birthday	Total number of children aged 12-23 months surveyed
30 Yellow fever immunization coverage	Number of children aged 12-23 months immunized against yellow fever before their first birthday	Total number of children aged 12-23 months surveyed
31 Fully immunized children	Number of children aged 12-23 months receiving DPT1-3, OPV-1-3, BCG and measles vaccines before their first birthday	Total number of children aged 12-23 months surveyed
32 Neonatal tetanus protection	Number of mothers with live births in the previous year that were given at least two doses of tetanus toxoid (TT) vaccine within the appropriate interval prior to giving birth	Total number of women surveyed aged 15-49 years with a birth in the year preceding the survey

INDICATOR	NUMERATOR	DENOMINATOR
33 Use of oral rehydration therapy (ORT)	Number of children aged 0-59 months with diarrhoea in the previous 2 weeks that received oral rehydration salts and/or an appropriate household solution	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks
34 Home management of diarrhoea	Number of children aged 0-59 months with diarrhoea in the previous 2 weeks that received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks
35 Received ORT or increased fluids and continued feeding	Number of children aged 0-59 months with diarrhoea that received ORT (oral rehydration salts or an appropriate household solution) or received more fluids AND continued eating somewhat less, the same or more food	Total number of children aged 0-59 months with diarrhoea in the previous 2 weeks
41 Iodized salt consumption	Number of households with salt testing 15 parts per million or more of iodine/iodate	Total number of households surveyed
42 Vitamin A supplementation (under-fives)	Number of children aged 6-59 months receiving at least one high-dose vitamin A supplement in the previous 6 months	Total number of children aged 6-59 months surveyed
43 Vitamin A supplementation (post-partum mothers)	Number of women with a live birth in the 2 years preceding the survey that received a high-dose vitamin A supplement within 8 weeks after birth	Total number of women that had a live birth in the 2 years preceding the survey
44 Content of antenatal care	Number of women with a live birth in the 2 years preceding the survey that received antenatal care during the last pregnancy	Total number of women with a live birth in the 2 years preceding the survey
45 Timely initiation of breastfeeding	Number of women with a live birth in the 2 years preceding the survey that put the newborn infant to the breast within 1 hour of birth	Total number of women with a live birth in the 2 years preceding the survey
46 Support for learning	Number of children aged 0-59 months living in households in which an adult has engaged in four or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0-59 months surveyed
47 Father's support for learning	Number of children aged 0-59 months whose father has engaged in one or more activities to promote learning and school readiness in the past 3 days	Total number of children aged 0-59 months
48 Support for learning: children's books	Number of households with three or more children's books	Total number of households surveyed
49 Support for learning: non-children's books	Number of households with three or more non-children's books	Total number of households surveyed
50 Support for learning: materials for play	Number of households with three or more materials intended for play	Total number of households surveyed
51 Non-adult care	Number of children aged 0-59 months left alone or in the care of another child younger than 10 years of age in the past week	Total number of children aged 0-59 months surveyed
52 Pre-school attendance	Number of children aged 36-59 months that attend some form of early childhood education programme	Total number of children aged 36-59 months surveyed
53 School readiness	Number of children in first grade that attended some form of pre-school the previous year	Total number of children in the first grade surveyed
54 Net intake rate in primary education	Number of children of school-entry age that are currently attending first grade	Total number of children of primary- school entry age surveyed
55 Net primary school attendance rate	Number of children of primary-school age currently attending primary or secondary school	Total number of children of primary- school age surveyed
56 Net secondary school	Number of children of secondary-school age currently attending secondary school or higher	Total number of children of secondary-school



INDICATOR	NUMERATOR	DENOMINATOR
attendance rate		age surveyed
57 Children reaching grade five	Proportion of children entering the first grade of primary school that eventually reach grade five	
58 Transition rate to secondary school	Number of children that were in the last grade of primary school during the previous school year that attend secondary school	Total number of children that were in the last grade of primary school during the previous school year surveyed
59 Primary completion rate	Number of children (of any age) attending the last grade of primary school (excluding repeaters)	Total number of children of primary school completion age (age appropriate to final grade of primary school) surveyed
60 Adult literacy rate	Number of women aged 15-24 years that are able to read a short simple statement about everyday life	Total number of women aged 15-24 years surveyed
61 Gender parity index	Proportion of girls in primary and secondary education	Proportion of boys in primary and secondary education
62 Birth registration	Number of children aged 0-59 months whose births are reported registered	Total number of children aged 0-59 months surveyed
67 Marriage before age 15 and age 18	Number of women that were first married by the exact age of 15 and the exact age of 18, by age groups	Total number of women aged 15-49 years and 20-49 years surveyed, by age groups
68 Young women aged 15-19 years currently married	Number of women aged 15-19 years currently married	Total number of women aged 15-19 years surveyed
71 Child labour	Number of children aged 5-14 years that are involved in child labour	Total number of children aged 5-14 years surveyed
72 Labourer students	Number of children aged 5-14 years involved in child labour activities that attend school	Total number of children aged 5-14 years involved in child labour activities
73 Student labourers	Number of children aged 5-14 years attending school that are involved in child labour activities	Total number of children aged 5-14 years attending school
74 Child discipline	Number of children aged 2-14 years that (1) experience only non-violent aggression, (2) experience psychological aggression as punishment, (3) experience minor physical punishment, (4) experience severe physical punishment	Total number of children aged 2-14 years selected and surveyed
75 Prevalence of orphans	Number of children under age 18 with at least one dead parent	Total number of children under age 18 surveyed
77 School attendance of orphans versus non-orphans	Proportion of double orphans (both mother and father dead) aged 10-14 years attending school	Proportion of children aged 10-14 years, both of whose parents are alive, that are living with at least one parent and are attending school
78 Children's living arrangements	Number of children aged 0-17 years not living with a biological parent	Total number of children aged 0-17 years surveyed
82 Comprehensive knowledge about HIV prevention among young people	Number of women aged 15-24 years that correctly identify two ways of avoiding HIV infection and reject three common misconceptions about HIV transmission	Total number of women aged 15-24 years surveyed
86 Attitude towards people with	Number of women expressing acceptance on all four questions about people with HIV or AIDS	Total number of women surveyed

INDICATOR	NUMERATOR	DENOMINATOR
HIV/AIDS		
87 Women who know where to be tested for HIV	Number of women that state knowledge of a place to be tested	Total number of women surveyed
88 Women who have been tested for HIV	Number of women that report being tested for HIV	Total number of women surveyed
89 Knowledge of mother-to-child transmission of HIV	Number of women that correctly identify all three means of vertical transmission	Total number of women surveyed
90 Counselling coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received counselling on HIV/AIDS during this care	Total number of women that gave birth in the previous 24 months surveyed
91 Testing coverage for the prevention of mother-to-child transmission of HIV	Number of women that gave birth in the previous 24 months and received antenatal care reporting that they received the results of an HIV test during this care	Total number of women that gave birth in the previous 24 months surveyed
98 Unmet need for family planning	Number of women that are currently married that are fecund and want to space their births or limit the number of children they have and that are not currently using contraception	Total number of women interviewed that are currently married
99 Demand satisfied for family planning	Number of women currently married that are currently using contraception	Number of women currently married that have an unmet need for contraception or that are currently using contraception

