VIET NAM

Monitoring the situation of children and women

Viet Nam Multiple Indicator Cluster Survey 2014

General Statistics office Viet Nam

MICS

The Viet Nam Multiple Indicator Cluster Survey (MICS) was carried out during 2013-2014 by the Viet Nam General Statistics Office (GSO) in collaboration with the United Nations Children's Fund (UNICEF), as part of the global MICS programme. Technical and financial support was provided by UNICEF.

The global MICS programme was developed by UNICEF in the 1990s as an international household survey programme to collect internationally comparable data on a wide range of indicators on the situation of children and women. MICS surveys measure key indicators that allow countries to generate data for use in policies and programmes, and to monitor progress towards the Millennium Development Goals (MDGs) and other internationally agreed upon commitments. Additional information on indicators and the analysis conducted in the final report can be found at www.gso.gov.vn, and mics.unicef.org.

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VIET NAM

MULTIPLE INDICATOR
CLUSTER SURVEY 2014

Summary Table of Survey Implementation and the Survey Population, Viet Nam MICS 2014

Sample frame	15% Sample, 2009 Population and Housing Census	**Questionnaires**	Household Women (aged 15-49) Children aged under 5
- Updated	Dec. 2013		
Interviewer training	Dec. 2013	**Fieldwork**	In late Dec. 2013 to Apr. 2014
Survey sample			
Households:		Children aged under 5:	
- Sampled	10200	- Eligible	3346
- Occupied	10018	- Mothers/caretakers interviewed	3316
- Interviewed	9979	- Response rate (%)	99.1
- Response rate (%)	99.6		
Women:			
- Eligible for interviews	10,190		
- Interviewed	9,827		
- Response rate (%)	96.4		

Survey population			
Average household size	3.9	**Percentage of population living in:**	
Percentage of population under:		- Urban areas	31.8
- Age 5	8.3	- Rural areas	68.2
- Age 18	29.3		
Percentage of women aged 15-49 years with at least one live birth in the last two years	14.9	- Red River Delta	23.6
		- Northern Midlands-Mountainous area	13.6
		- North Central and Central Coastal	21.3
		- Central Highlands	6.3
		- South East	16.6
		- Mekong River Delta	18.6

Percentage of households with:		**Percentage of households that own:**	
- Electricity	99.2	- A television	94.0
- Finished floor	92.9	- A refrigerator	60.9
- Finished roofing	97.2	- Agricultural land	56.0
- Finished walls	89.3	- Water surface	10.4
Mean number of persons per room used for sleeping per household	2.22	- Forestry land	8.8
		- Farm animals/livestock	50.1
		- Car or tractor	7.7
		Percentage of households where at least a member has or owns a:	
		- Mobile phone	92.5
		- Motorcycle or scooter	82.1

Summary Table of Findings[1]

Multiple Indicator Cluster Survey (MICS) and Millennium Development Goals (MDGs) Indicators, Viet Nam MICS 2014

CHILD MORTALITY

Early childhood mortality

MICS Indicator		Indicator	Description	Value
1.1		Neonatal mortality rate	Probability of dying within the first 28 days of life	11.95
1.2	**MDG 4.2**	Infant mortality rate	Probability of dying between birth and first birthday	16.21
1.3		Post-neonatal mortality rate	Difference between infant and neonatal mortality rates	4.26
1.4		Child mortality rate	Probability of dying between the first and fifth birthdays	3.59
1.5	**MDG 4.1**	Under-5mortality rate	Probability of dying between birth and fifth birthday	19.74

[A] Indicator values are per 1,000 live births and refer to the five-year period before this survey.

NUTRITION

Breastfeeding and infant feeding

MICS Indicator		Indicator	Description	Value
2.5		Children ever breastfed	Percentage of women with a live birth in the last two years who breastfed their last live-born child at any time	96.9
2.6		Early initiation of breastfeeding	Percentage of women with a live birth in the last two years who put their last newborn to the breast within one hour of birth	26.5
2.7		Exclusive breastfeeding under 6 months	Percentage of infants under 6 months of age who are exclusively breastfed[i]	24.3
2.8		Predominant breastfeeding under 6 months	Percentage of infants under 6 months of age who received breast milk as the predominant source of nourishment[ii] during the previous day	49.0
2.9		Continued breastfeeding at 1 year	Percentage of children aged 12-15 months who received breast milk during the previous day	65.6
2.10		Continued breastfeeding at 2 years	Percentage of children aged 20-23 months who received breast milk during the previous day	21.8
2.11		Median duration of breastfeeding	The age in months when 50 per cent of children aged 0-35 months did not receive breast milk during the previous day	15.8
2.12		Age-appropriate breastfeeding	Percentage of children aged 0-23 months appropriately fed[iii] during the previous day	46.9
2.13		Introduction of solid, semi-solid or soft foods	Percentage of infants aged 6-8 months who received solid, semi-solid or soft foods during the previous day	90.7
2.14		Milk feeding frequency for non-breastfed children	Percentage of non-breastfed children aged 6-23 months who received at least two milk feedings during the previous day	89.5
2.15		Minimum meal frequency	Percentage of children aged 6-23 months who received solid, semi-solid and soft foods (plus milk feeds for non-breastfed children) the minimum number of times[iv] or more during the previous day	90.5

1 See Appendix E for a detailed description of MICS indicators.

2.16		Minimum dietary diversity	Percentage of children aged 6-23 months who received foods from four or more food groups[v] during the previous day.	76.9
2.17a		Minimum acceptable diet	(a) Percentage of breastfed children aged 6-23 months who had at least the minimum dietary diversity and the minimum meal frequency during the previous day	62.4
2.17b			(b) Percentage of non-breastfed children aged 6-23 months who received at least two milk feedings and had at least the minimum dietary diversity not including milk feeds and the minimum meal frequency during the previous day.	54.5
2.18		Bottle feeding	Percentage of children aged 0-23 months who were fed with a bottle during the previous day.	44.1
2.20		Low birthweight infants	Percentage of live births in the last two years with children weighing less than 2,500 grams at birth	5.7
2.21		Infants weighed at birth	Percentage of live births in the last two years with children weighed at birth.	94.3

CHILD HEALTH				
Vaccinations				
MICS Indicator		**Indicator**	**Description**	**Value**
3.1		Tuberculosis immunization coverage	Percentage of children aged 12-23 months who received BCG vaccine by their first birthday	98.0
3.2		Polio immunization coverage	Percentage of children aged 12-23 months who received the third dose oforal polio vaccine (OPV) vaccine (OPV3) by their first birthday	91.9
3.3		Diphtheria, pertussis and tetanus (DPT) immunization coverage	Percentage of children aged 12-23 months who received the third dose of DPT vaccine (DPT3) by their first birthday	88.6
3.4	**MDG 4.3**	Measles immunization coverage	Percentage of children aged 12-23 months who received measles vaccine by their first birthday	86.2
3.5		Hepatitis B immunization coverage	Percentage of children aged 12-23 months who received the third dose of Hepatitis B vaccine (HepB3) by their first birthday	87.4
3.6		Haemophilus influenzae type B (Hib) immunization coverage	Percentage of children aged 12-23 months who received the third dose of Hib vaccine (Hib3) by their first birthday	87.5
3.8		Full immunization coverage	Percentage of children aged 12-23 months who received all[vi] vaccinations recommended in the national immunization schedule by their first birthday.	75.6
Tetanus toxoid				
3.9		Neonatal tetanus protection	Percentage of women aged 15-49 years with a live birth in the last two years who were given at least two doses of tetanus toxoid vaccine within the appropriate interval prior to the most recent birth.	82.2
Diarrhoea				
-		Children with diarrhoea	Percentage of children aged under 5 with diarrhoea in the last two weeks	8.6
3.10		Care-seeking for diarrhoea	Percentage of children aged under 5 with diarrhoea in the last two weeks for whom advice or treatment was sought from a health facility or provider	55.1

3.11	Diarrhoea treatment with oral rehydration salts (ORS) and zinc	Percentage of children aged under 5 with diarrhoea in the last two weeks who received ORS and zinc	12.6
3.12	Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	Percentage of children aged under 5 with diarrhoea in the last two weeks who received ORT (ORS packet, pre-packaged ORS fluid, recommended homemade fluid or increased fluids) and continued feeding during the episode of diarrhoea.	57.8
Acute Respiratory Infection symptoms			
-	Children with ARI symptoms	Percentage of children aged under 5 with ARI symptoms in the last two weeks	3.0
3.13	Care-seeking for children with ARI symptoms	Percentage of children aged under 5 with ARI symptoms in the last two weeks for whom advice or treatment was sought from a health facility or provider	81.1
3.14	Antibiotic treatment for children with ARI symptoms	Percentage of children aged under 5 with ARI symptoms in the last two weeks who received antibiotics.	88.2
Solid fuel use			
3.15	Use of solid fuels for cooking	Percentage of household members who use solid fuels as primary source of domestic energy to cook.	41.6

WATER AND SANITATION				
MICS Indicator		**Indicator**	**Description**	**Value**
4.1	**MDG 7.8**	Use of improved drinking water sources	Percentage of household members who use improved sources of drinking water	92.0
4.2		Water treatment	Percentage of household members who use unimproved drinking water, but appropriate treatment methods	79.0
4.3	**MDG 7.9**	Use of improved sanitation	Percentage of household members who use improved sanitation facilities not shared	79.2
4.4		Safe disposal of child faeces	Percentage of children aged 0-2 years whose last stools were disposed of safely	57.7
4.5		Place for handwashing	Percentage of households with a specific place for handwashing, where water and soap or other cleansing agents are present	86.3
4.6		Availability of soap or other cleansing agents	Percentage of households with soap or other cleansing agents.	92.4

REPRODUCTIVE HEALTH				
Contraception and unmet need				
MICS Indicator		**Indicator**	**Description**	**Value**
5.1	**MDG 5.4**	Adolescent birth rate	Age-specific fertility rate for women aged 15-19 years.	45
5.2		Early childbearing	Percentage of women aged 20-24 years who had at least one live birth before the age of 18	4.7
5.3	**MDG 5.3**	Contraceptive prevalence rate	Percentage of women aged 15-49 years currently married or in union who are using (or whose partner is using) a (modern or traditional) contraceptive method	75.7
5.4	**MDG 5.6**	Unmet need	Percentage of women aged 15-49 years currently married or in union who are fecund and want to space their births or limit the number of children they have and who are not currently using contraception.	6.1

Maternal and newborn health				
		Antenatal care coverage	Percentage of women aged 15-49 years with a live birth in the last two years who were attended during their last pregnancy by:	
5.5a	**MDG 5.5**		(a) At least once by skilled health personnel	95.8
5.5b	**MDG 5.5**		(b) At least four times by any provider	73.7
5.6		Content of antenatal care	Percentage of women aged 15-49 years with a live birth in the last two years who had their blood pressure measured and gave urine and blood samples during the last pregnancy	56.2
5.7	**MDG 5.2**	Skilled attendant at delivery	Percentage of women aged 15-49 years with a live birth in the last two years who were attended by skilled health personnel during their most recent live birth	93.8
5.8		Institutional deliveries	Percentage of women aged 15-49 years with a live birth in the last two years whose most recent live birth was delivered in a health facility	93.6
5.9		Caesarean section	Percentage of women aged 15-49 years whose most recent live birth in the last two years was delivered by caesarean section.	27.5
Post-natal health checks				
5.10		Post-partum stay in health facility	Percentage of women aged 15-49 years who stayed in a health facility for 12 hours or more after the delivery of their most recent live birth in the last two years	98.2
5.11		Post-natal health check for the newborn	Percentage of last live births in the last two years when the newbornreceived a health check while at a healthfacility or at home following delivery, or a post-natal care visit within two days after delivery	89.1
5.12		Post-natal health check for the mother	Percentage of women aged 15-49 years who received a health check while at a health facility or at home following delivery, or a post-natal care visit within two days after delivery of their most recent live birth in the last two years.	89.8
CHILD DEVELOPMENT				
MICS Indicator		**Indicator**	**Description**	**Value**
6.1		Attendance for early childhood education	Percentage of children aged 36-59 months attending an early childhood education programme	71.3
6.2		Support for learning	Percentage of children aged 36-59 months with whom an adult has engaged in four or more activities to promote learning and school readiness in the last three days	75.9
6.3		Father's support for learning	Percentage of children aged 36-59 months whose biological father has engaged in four or more activities to promote learning and school readiness in the last three days.	14.9
6.4		Mother's support for learning	Percentage of children aged 36-59 months whose biological mother has engaged in four or more activities to promote learning and school readiness in the last three days	45.0
6.5		Availability of children's books	Percentage of children aged under 5 who have three or more children's books	26.2
6.6		Availability of playthings	Percentage of children aged under 5 who play with two or more types of playthings	51.5
6.7		Inadequate care	Percentage of children aged under 5 left alone or in the care of another child younger than 10 years for more than one hour at least once in the last week	7.0
6.8		Early child development index	Percentage of children aged 36-59 months who are developmentally on track in at least three of the following four domains: literacy-numeracy, physical, social-emotional and learning.	88.7

LITERACY AND EDUCATION[vii]				
MICS Indicator		**Indicator**	**Description**	**Value**
7.1	**MDG 2.3**	Literacy rate among young people	Percentage of woman aged 15-24 years able to read a short, simple statement about everyday life or who attended secondary or higher education	96.5
7.2		School readiness	Percentage of children in first grade of primary school who attended pre-school during the previous school year	96.8
7.3		Net intake rate in primary education	Percentage of children of school-entry age who entered the first grade of primary school	96.1
7.4	**MDG 2.1**	Primary school net attendance ratio (adjusted)	Percentage of children of primary school age currently attending primary or secondary school	97.7
7.5		Secondary school net attendance ratio (adjusted)	Percentage of children of secondary school age currently attending secondary school or higher	83.9
7.S1		Lower secondary school net attendance ratio (adjusted)	Percentage of children of lower secondary school age currently attending lower secondary school or higher	90.4
7.S2		Upper secondary school net attendance ratio (adjusted)	Percentage of children of upper secondary school age currently attending upper secondary school or higher	70.7
7.6	**MDG 2.2**	Children reaching last grade of primary school	Percentage of children entering first grade of primary school who reached last grade	98.6
7.7		Primary school completion rate	Number of children attending last grade of primary school (excluding repeaters) divided by number of children of primary school completion age (age appropriate to final grade of primary school)	95.9
7.8		Transition rate to secondary school	Number of children who attended the last grade of primary school during the previous school year who are in the first grade of secondary school during the current school year divided by the number of children who attended the last grade of primary school during the previous school year.	98.0
7.S3		Transition rate to upper secondary school	Number of children who attended the last grade of lower secondary school during the previous school year who are in the first grade of upper secondary school during the current school year divided by the number of children who attended the last grade of lower secondary school during the previous school year	89.5
7.9	**MDG 3.1**	Gender parity index (primary school)	Primary school net attendance ratio (adjusted) for girls divided by primary school net attendance ratio (adjusted) for boys	1.00
7.10	**MDG 3.1**	Gender parity index (secondary school)	Secondary school net attendance ratio (adjusted) for girls divided by secondary school net attendance ratio (adjusted) for boys	1.04
7.S4		Gender Parity Index (lower secondary school)	Lower secondary school net attendance ratio (adjusted) for girls divided by lower secondary school net attendance ratio (adjusted) for boys	1.03
7.S5		Gender parity index (upper secondary school)	Upper secondary school net attendance ratio (adjusted) for girls divided by upper secondary school net attendance ratio (adjusted) for boys.	1.11

CHILD PROTECTION				
Birth registration				
MICS INDICATOR		**Indicator**	**Description**	**Value**
8.1		Birth registration	Percentage of children aged under 5 whose births were reported registered	96.1
Child labour				
8.2		Child labour	Percentage of children aged 5-17 years who are involved in child labour[viii]	16.4
Child discipline				
8.3		Violent discipline	Percentage of children aged 1-14 years who experienced psychological aggression or physical punishment during the last month.	68.4
Early marriage and polygyny				
8.4		Marriage before age of 15	Percentage of women aged 15-49 years who were first married or in union before the age of 15	0.9
8.5		Marriage before age of 18	Percentage of women aged 20-49 years who were first married or in union before the age of 18	11.2
8.6		Young people aged 15-19 years currently married or in union	Percentage of young women aged 15-19 years married or in union	10.3
8.7		Polygyny	Percentage of women aged 15-49 years in a polygynous union	0.7
		Spousal age difference	Percentage of young women who are married or in union and whose spouse is 10 or more years older:	
8.8a			(a) Among women aged 15-19 years	5.8
8.8b			(b) Among women aged 20-24 years	4.7
Attitudes towards domestic violence				
8.12		Attitudes towards domestic violence	Percentage of women aged 15-49 years who state that a husband is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food.	28.2
8.S1		Attitudes towards domestic violence[ix]	Percentage of women aged 15-49 years who state that a husband is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food, (5) she does not complete housework, (6) she is doubted to be faithful, (7) she is disclosed as faithful.	50.0
Children's living arrangements				
8.13		Children's living arrangements	Percentage of children aged 0-17 years living with neither biological parent	5.2
8.14		Prevalence of children with one or both parents dead	Percentage of children aged 0-17 years with one or both biological parents dead	3.5
8.15		Children with at least one parent living abroad	Percentage of children aged 0-17 years with at least one biological parent living abroad.	1.3

HIV/AIDS				
HIV/AIDS knowledge and attitudes				
MICS Indicator		**Indicator**	**Description**	**Value**
-		Have heard of AIDS	Percentage of women aged 15-49 years who have heard of AIDS	94.5
9.1	**MDG 6.3**	Knowledge of HIV prevention among young women	Percentage of young women aged 15-24 years who correctly identified ways to prevent sexual transmission of HIV[x] and who rejected major misconceptions about HIV transmission	49.3

9.2		Knowledge of mother-to-child transmission of HIV	Percentage of women aged 15-49 years who correctly identified all three means[xi] of mother-to-child transmission of HIV	46.8
9.3		Accepting attitudes towards people living with HIV	Percentage of women aged 15-49 years who expressed accepting attitudes in all four questions[xii] on attitudes towards people living with HIV.	30.0
HIV testing				
9.4		People who know where to be tested for HIV	Percentage of women 15-49 years who stated knowledge of a place to be tested for HIV	69.9
9.5		People who have been tested for HIV and know the results	Percentage of women aged 15-49 years who have been tested for HIV in the last 12 months and who know their results	11.3
9.7		HIV counselling during antenatal care	Percentage of women aged 15-49 years who had a live birth in the last two years and received antenatal care during the pregnancy of their most recent birth, with counselling on HIV during antenatal care	29.3
9.8		HIV testing during antenatal care	Percentage of women aged 15-49 years who had a live birth in the last two years and received antenatal care during the pregnancy of their most recent birth, reporting they offered and accepted an HIV test during antenatal care and received their results.	30.0

ACCESS TO MASS MEDIA AND INFORMATION/COMMUNICATION TECHNOLOGY				
Access to mass media				
MICS Indicator		**Indicator**	**Description**	**Value**
10.1		Exposure to mass media	Percentage of women aged 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television.	13.2
Use of information/communication technology				
10.2		Use of computers	Percentage of young women aged 15-24 years who used a computer during the last 12 months	63.3
10.3		Use of internet	Percentage of young women aged 15-24 years who used the internet during the last 12 months	66.7
10.S1		Use of mobile phones	Percentage of women aged 15-49 years who own a mobile phone or use one as if was theirs.	81.9

[i] Infants receiving breast milk, and not receiving any other fluids or foods, with the exception of oral rehydration solution, vitamins, mineral supplements and medicines

[ii] Infants receiving breast milk and certain fluids (water and water-based drinks, fruit juice, ritual fluids, oral rehydration solution, drops, vitamins, minerals, and medicines), but do not receive anything else (in particular, non-human milk and food-based fluids)

[iii] Infants age 0-5 months who are exclusively breastfed, and children age 6-23 months who are breastfed and ate solid, semi-solid or soft foods

[iv] Breastfeeding children: Solid, semi-solid, or soft foods, two times for infants age 6-8 months, and three times for children 9-23 months; Non-breastfeeding children: Solid, semi-solid, or soft foods, or milk feeds, four times for children age 6-23 months

[v] The indicator is based on consumption of any amount of food from at least four out of the seven following food groups: 1) grains, roots and tubers, 2) legumes and nuts, 3) dairy products (milk, yogurt, cheese), 4) flesh foods (meat, fish, poultry and liver/organ meats), 5) eggs, 6) vitamin-A rich fruits and vegetables, and 7) other fruits and vegetables

[vi] Full vaccination includes the following: a BCG vaccination to protect against tuberculosis, three doses of Polio, three doses of DPT to protect against diphtheria, pertussis, tetanus; three doses of Hepatitis B vaccine; three doses of Hib, one dose of measles

[vii] Education indicators were based on schooling information (throughout the school year, as proxy for calculation of enrolment rates)

[viii] Children involved in child labour are defined as children involved in economic activities above the age-specific thresholds, children involved in household chores above the age-specific thresholds, and children involved in hazardous work

[ix] Viet Nam has supplemented three more questions on domestic violence.

[x] Using condoms and limiting sex to one faithful, uninfected partner

[xi] Transmission during pregnancy, during delivery, and by breastfeeding

[xii] People (1) who think that a female teacher with the AIDS virus should be allowed to teach in school, (2) who would buy fresh vegetables from a shopkeeper or vendor who has the AIDS virus, (3) who would not want to keep it as a secret if a family member became infected with the AIDS virus, and (4) who would be willing to care for a family member who became sick with the AIDS virus

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LIST OF ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal care
ARI	Acute respiratory infection
ASFRs	Age-specific fertility rates
BCG	Bacillis-Cereus-Geuerin (Tuberculosis)
CBR	Crude birth rate
CRC	Convention on the Rights of the Child
CSPro	Census and Survey Processing System
DPT	Diphteria, Pertussis, Tetanus
ECDI	Early Child Development Index
EPI	Expanded Programme on Immunization
GAPPD	Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea
GFR	General fertility rate
GPI	Gender Parity Index
GSO	General Statistical Office
GVAP	Global Vaccine Action Plan
HIV	Human Immunodeficiency Virus
IQ	Intelligence Quotient
IPS2014	Intercensal Population Survey 2014
IUD	Intrauterine Device
IYCF	Infant and Young Child Feeding
JMP	Joint Monitoring Programme
MICS	Multiple Indicator Cluster Survey
MICS5	Fifth global round of Multiple Indicator Clusters Surveys programme
MoET	Ministry of Education and Training
MoH	Ministry of Health
MoLISA	Ministry of Labour, Invalids and Social Affairs
MPI	Ministry of Planning and Investment
NAR	Net Attendance Ratio
NCC	North Central and Central coastal region
NN	Neonatal mortality
NSIS	National Statistical Indicator System
OPV	Oral polio vaccine
ORS	Oral rehydration salts
ORT	Oral rehydration treatment
PHC2009	Population and Housing Census 2009
PNC	Post-natal care
PNN	Post-neonatal mortality
PSO	Province Statistical Office
PSU	Primary Sampling Unit
RHF	Recommended home fluid
SPSS	Statistical Package for Social Sciences
STIs	Sexually transmitted infections
TOT	Training of Trainers
UNAIDS	United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
WHO	World Health Organization

ACKNOWLEDGEMENTS

During the past 20 years, the General Statistics Office (GSO) has successfully conducted five rounds of the Multiple Indicator Cluster Survey (MICS) in Viet Nam. This is a household survey programme with multiple subjects, initiated by UNICEF and implemented globally.

The fifth round of MICS in Viet Nam (Viet Nam MICS 2014) collected information covering a wide range of issues related to the well-being and development of children and women in Viet Nam. The MICS findings are essential to inform the formulation, monitoring and evaluation of policies and programmes on children and women's rights in Viet Nam, to monitor progress towards national goals and global commitments as part of the National Programme of Action for Children 2012-2020, targets and plans of action for "A World Fit for Children", final reporting of the Millennium Development Goals by 2015 as well as provide baseline data for implementation of Sustainable Development Goals post 2015.

We would like to extend our sincere thanks to all relevant line ministries, local and international organizations and experts who actively participated in the preparation, field work and analysis of the survey results. In particular, we would like to acknowledge the efforts of the GSO, Ministry of Planning and Investment, Ministry of Labour, Invalids and Social Affairs, Ministry of Health, Ministry of Education and Training, Committee for Ethnic Minority, UNFPA, UNDP and especially UNICEF for valuable inputs, technical support, expertise and financial support for the implementation of Viet Nam MICS 2014 as well as previous rounds of MICS.

Also of note are the important contributions from surveyors, team leaders and supervisors who performed their tasks with the utmost integrity and technical ability as well as the valuable cooperation from participating households and active support from local authorities at all levels during the survey process. Their participation and support were important factors that contributed to ensuring the survey's quality.

The GSO and UNICEF are pleased to disseminate this publication to all local and international users. We welcome all comments from readers as well as expect stakeholders to extensively utilize the survey's results to improve the well-being of children and women in Viet Nam.

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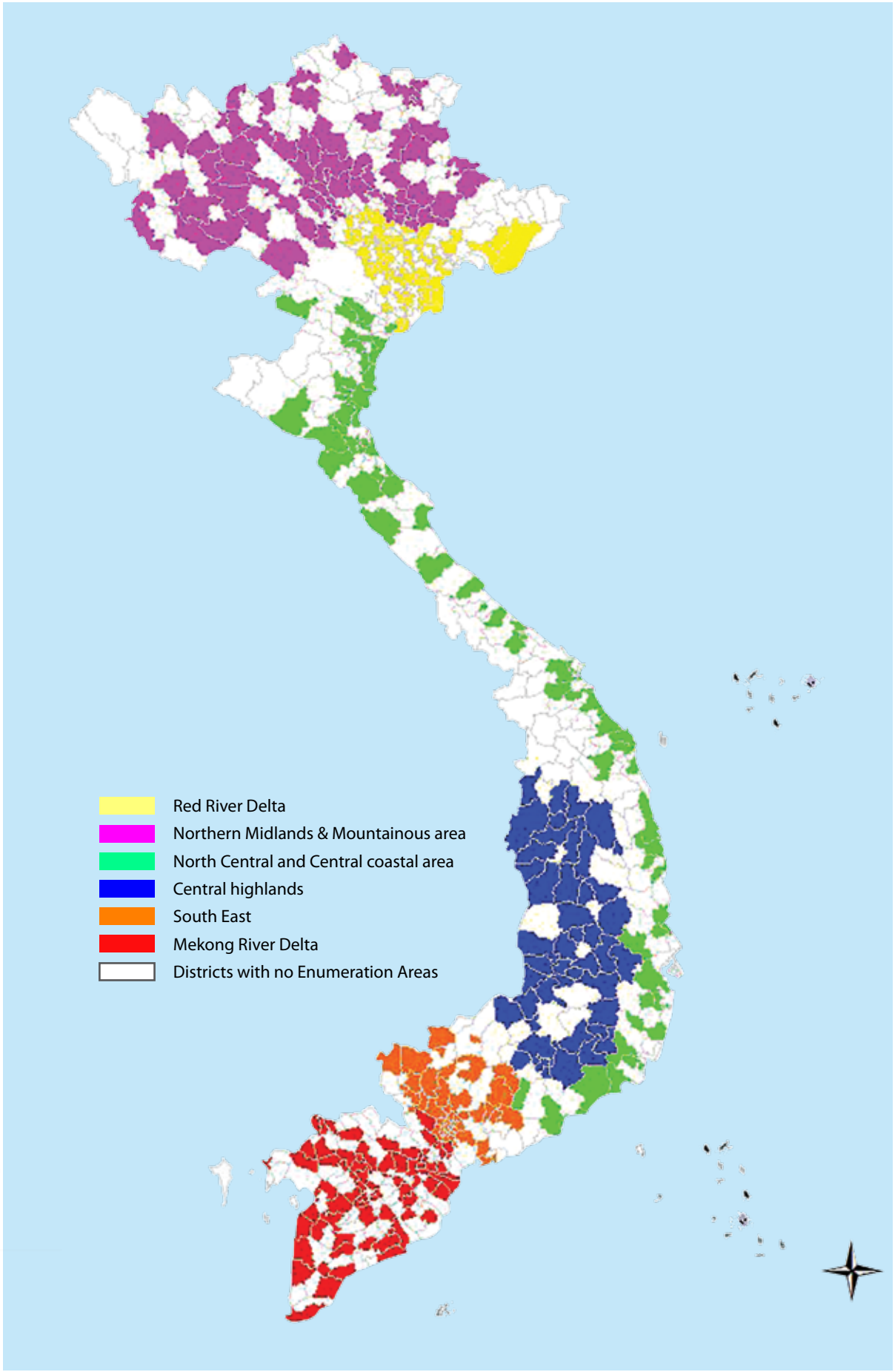
MAP OF SURVEYED DISTRICTS, VIET NAM MICS 2014



Note: The boundaries and the names shown the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

EXECUTIVE SUMMARY

MICS was carried out in Viet Nam during 2013-2014 by Viet Nam General Statistics Office in collaboration with UNICEF, as part of the global MICS programme. Technical and financial support for the survey was provided by UNICEF.

The global MICS programme was developed by UNICEF in the 1990s as an international household survey to collect internationally comparable data on a wide range of indicators to evaluate the situation of children and women. The survey provides statistically sound and internationally comparable data essential for developing evidence-based policies and programmes as well as monitoring progress towards national goals and global commitments including MDGs.

The sample for Viet Nam MICS 2014 was designed to provide estimates for a large number of indicators on the national level situation of children and women in urban and rural areas as well as six geographic regions. Viet Nam MICS 2014 is based on a sample of 10,018 interviewed households, with 9,827 women and 3,316 children interviewed.

CHILD MORTALITY

Neonatal mortality during the most recent five-years preceding Viet Nam MICS 2014 is estimated at 12 per 1,000 live births, while the post-neonatal mortality rate is four per 1,000 live births.

The infant mortality rate in the five years preceding Viet Nam MICS 2014 was more than 16 per 1,000 live births and under-5 mortality amounted to nearly 20 deaths per 1,000 live births for the same period. This indicates that 82 per cent of under-5 deaths were infants.

NUTRITION AND BREASTFEEDING

Overall, 94.3 per cent of newborns were found to have been weighed at birth and 5.7 per cent of infants had low birth weights (less than 2,500 grams at birth).

Breastfeeding in the first few years of life protects children from infection, provides an ideal source of nutrients, is economical and safe. While 96.6 per cent of children were discovered by Viet Nam MICS 2014 to be ever breastfed, only 26.5 per cent of babies were breastfed within one hour of birth and 67.8 per cent of newborns started breastfeeding within one day of birth.

Approximately 24.3 per cent of children aged less than six months were exclusively breastfed and by 12-15 months, 65.6 per cent continued to be breastfed.

Use of the minimum acceptable diet indicator revealed that only 59.0 per cent of children aged 6-23 months benefitted from a diet sufficient in diversity and frequency. This indicator was slightly higher among children currently breastfeeding (62.4 per cent) than those not breastfeeding (54.5 per cent).

IMMUNIZATION

Viet Nam MICS 2014 results show that the fully vaccinated rate of children aged 12-23 months was 78.5 per cent and 80.0 per cent for children aged 24-35 months. The proportion of children not immunized was 1.5 and 1.9 per cent for those aged 12-23 and 24-35 months, respectively

The lowest proportion of vaccinated children at birth was for Hepatitis B, at 78.5 among children aged 12-23 months. The second lowest vaccination rate was for measles, at 86.2 per cent.

CARE OF ILLNESS

Overall, 8.6 per cent of under-5 children in Viet Nam were reported to have had diarrhoea in the two weeks preceding the survey, and 3.0 per cent had symptoms of Acute Respiratory Infection.

Importantly, diarrhoea is a leading cause of death among children under-5 worldwide and most such deaths are due to dehydration from loss of large quantities of water and electrolytes.

In Viet Nam, advice or treatment from a health facility or provider was sought for 55.1 per cent of all children with diarrhoea. However, no such assistance was requested for 15.4 per cent.

Overall, 28.4 per cent of mothers or caretakers of children knew at least one of the two danger signs of pneumonia (fast breathing and difficult breathing). The most commonly identified symptom for taking a child to a health facility was "the child develops a fever" (90.8 per cent). Only 4.8 per cent of mothers identified "fast breathing" and 25.5 per cent "difficult breathing" as symptoms for immediately taking children to a health facility.

WATER AND SANITATION

Viet Nam MICS 2014 results reveal that 92 per cent of the household population uses an improved source of drinking water – 98.2 per cent in urban areas and 89.1 per cent in rural areas.

About 79.2 per cent of the population of Viet Nam lives in households with improved sanitation facilities. This percentage was 90.9 per cent in urban areas and 73.8 per cent in rural areas, while 97.3 per cent of households were observed with a specific place for hand washing.

REPRODUCTIVE HEALTH

The adolescent birth rate for the three years preceding Viet Nam MICS 2014 was 45 births per 1,000 women aged 15-19 years. Strikingly, the rate in rural areas (56 births per 1,000 women) was more than double that of urban areas (24 births per 1,000 women). Sexual activity and childbearing early in life carry significant risks for young people, yet 6.3 per cent of women aged 15-19 were found to have already given birth.

Appropriate family planning is important to the health of women and children, as it prevents pregnancies too early or late, extends the period between births and limits the total number of children. Current use of contraception was reported by 75.7 per cent of women currently married or in union. The most popular method was IUDs used by three-in-10 married women (28.2 per cent) in Viet Nam.

An "unmet need" for contraception refers to fecund women married or in union not using any method of contraception, but who wish to postpone the next birth (spacing) or who wish to stop childbearing altogether (limiting). Overall, the unmet need for spacing and limiting amounted to 2.5 and 3.6 per cent, respectively of women aged 15-49 years married or in union. The total unmet need for contraception was 6.1 per cent.

The percentage of women aged 15-49 with a live birth in the last two years who received antenatal care, an important period to reach pregnant women with interventions potentially vital to their health and that of their infants, from skilled providers was 95.8 per cent nationwide.

Three-quarters of all maternal deaths occur during delivery or the immediate post-partum period. The single most critical intervention for safe motherhood is to ensure that a competent health worker with midwifery skills is present at every birth. Some 93.8 per cent of births in the two years preceding Viet Nam MICS 2014 were delivered by skilled personnel.

EARLY CHILDHOOD DEVELOPMENT

Viet Nam MICS 2014 found that 71.3 per cent of children aged 36-59 months attended organized early childhood education programmes, while 75.9 per cent had an adult household member engaged in four or more activities that promoted learning and school readiness during the three days preceding the survey.

However, only 26.2 per cent of children aged 0-59 months lived in households where at least three children's books were present.

Leaving children alone or in the care of other young children under 10 years is known to increase risk of injury. Viet Nam MICS 2014 reveals that 6.0 per cent of children aged 0-59 months were left in the care of other children, while 1.5 per cent was left alone within the week preceding the survey.

EDUCATION

Overall, Viet Nam MICS 2014 indicates that a high proportion (96.5 per cent) of women aged 15-24 in Viet Nam were literate. However, relatively large differences emerged between Kinh/ Hoa (99.1 per cent) and ethnic minority (83.2 per cent) women.

The majority of primary school aged children attended school (97.9 per cent). However, 2.1 per cent of children aged 6-10 years do not currently attend school. Of all children who started Grade 1, the vast majority (98.6 per cent) reached Grade 5 and 98 per cent from the last grade of primary school in the previous school year were found to be attending first grade of secondary school in the survey school year. Meanwhile, 89.5 per cent of children who completed the last grade of lower secondary school in the previous school year were found to be attending first grade of upper secondary school.

Overall, the net attendance ratios at lower and upper secondary schools were less than primary school rates. Some 90.4 per cent of children aged 11-14 years attended lower secondary school, while 3.5 per cent of them were still in primary school and 6 per cent out of school.

Some 70.7 per cent of children aged 15-17 years attended upper secondary school, 4.9 per cent attended primary or lower secondary school and 24.1 per cent of children were out of school.

CHILD PROTECTION

Viet Nam's birth registration rate has risen in recent years, as reflected by the births of 96.1 per cent of children aged under-5 found by Viet Nam MICS 2014 to have been registered. However, 36.1 per cent of mothers of unregistered children reported not knowing how to register a child's birth.

Child labour is defined by MICS as having performed economic activities during the last week preceding the survey for more than the age-specific number of hours. Viet Nam MICS 2014 discovered that 14.9 per cent of children aged 5-11 years were involved in economic activities for at least one hour, 10.2 per cent of children aged 12-14 years were involved in economic activities for more than 14 hours and 6.8 per cent of children aged 15-17 were engaged in economic activities for more than 43 hours. About 16.4 per cent of children aged 5-17 years

were involved in household chores and economic activities for more than the age-specific threshold of hours, which are considered as child labour. Especially, 7.8 per cent of children aged 5-17 years were found to work in hazardous conditions.

Some 68.4 per cent of children aged 1-14 years in Viet Nam were subjected to at least one form of psychological or physical punishment by household members during the month preceding the survey, yet 14.6 per cent of respondents believed that children should be physically punished.

Marriage before the age of 18 is a reality for many young girls in Viet Nam and 11.1 per cent of women aged 20-49 were discovered to be married before their 18th birthday.

HIV/AIDS

In Viet Nam, the vast majority of women (94.5 per cent) aged 15-49 years had heard of HIV/AIDS. However, the percentage of women with comprehensive knowledge was not high (43.4 per cent) and this proportion was 49.3 per cent among women aged 15-24 years.

Meanwhile, 46.8 per cent of women aged 15-49 years knew all three ways of mother-to-child transmission (during pregnancy, delivery and through breastfeeding).

While 69.9 per cent of women aged 15-49 knew where to get tested HIV, only 29 per cent had actually been tested HIV. Only 20.1 per cent of women knew the result of their most recent test.

ACCESS TO MASS MEDIA AND USE OF INFORMATION/ COMMUNICATION TECHNOLOGY

Viet Nam MICS 2014 found that 81.9 per cent of women aged 15-49 years owned or used a mobile telephone, with 63.3 per cent using them to read or write SMS messages and 51.3 per cent doing so at least once a week.

Meanwhile, 36.6 per cent of women read newspapers or magazines, 27.6 per cent listen to the radio and 95.3 per cent watch television at least once a week.

CHAPTER I

INTRODUCTION

I. INTRODUCTION

Background

This report is based on the Viet Nam Multiple Indicator Cluster Survey 2014 (Viet Nam MICS 2014), conducted from the end of December 2013 to April 2014 by the GSO in collaboration with UNICEF, with support from line ministries, including the Ministry of Planning and Investment and Ministry of Labour, Invalids and Social Affairs. The survey provides statistically sound and internationally comparable data essential for developing evidence-based policies and programmes, and for monitoring progress toward national goals and global commitments. Among these global commitments are those emanating from the World Fit for Children Declaration and Plan of Action, the goals of the United Nations General Assembly Special Session on HIV/AIDS, the Education for All Declaration and the Millennium Development Goals (MDGs).

A Commitment to Action: National and International Reporting Responsibilities

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

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

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

The Plan of Action of the **World Fit for Children** (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."

Viet Nam MICS 2014 provides up-to-date information on the situation of children and women in the country, as a basis to accurately assess progress towards achievement of the international commitments (final MDG reporting, World Fit for Children reporting and 5th Country Report on the implementation of the Convention of the Rights of the Child), as well as the national plans, policies and programmes for the realization of children's rights (2012-2020 National Programme of Action for Children and 2015 National Situation Analysis of Women and Children). The Government of Viet Nam is strongly committed to improving children's living conditions by not only signing the international agreements, but also implementing a range of socio-economic development and poverty reduction policies and programmes.

These include compulsory pre-school, primary and lower secondary education, free health insurance for children aged under 6 years of age as well as child-focused national programmes, such as the 2012-2020 National Programme of Action for Children, 2011-2015 National Programme for Child Protection and 2014-2020 National Programme of Action for Children affected by HIV/AIDS.

In addition, Viet Nam MICS 2014 will generate data for identification of vulnerable groups, inequities and disparities to inform policies and interventions, contribute to national data and monitoring system improvements as well as strengthen technical expertise in the design, implementation and analysis of other nationwide surveys.

Viet Nam MICS 2014 results will be critically important for final MDG reporting in 2015, and are expected to form part of the baseline data for the Sustainable Development Goals post-2015.

Viet Nam MICS 2014 is expected to contribute to the evidence base of several other important initiatives, including Committing to Child Survival: A Promise Renewed, a global movement to end child deaths from preventable causes, and the accountability framework proposed by the Commission on Information and Accountability for the Global Strategy for Women's and Children's Health (CoIA).

This final report presents the results of the indicators and topics covered in the survey.

Survey Objectives

Viet Nam MICS 2014 has the following primary objectives:

- To provide up-to-date information for assessing the situation of children and women in Viet Nam.
- To generate data for the critical assessment of progress made in various areas, and to put additional efforts in areas that require more attention.
- To furnish data needed for monitoring progress toward goals established in the Millennium Declaration and other internationally agreed upon goals and those in the Viet Nam National Programme of Action for Children 2012-2020 and other national commitments such as reporting for the MDGs, World Fit for Children and 5th Country Report on the implementation of the Convention of the Rights of the Child, as a basis for future action.
- To collect disaggregated data for the identification of disparities, to allow for evidence-based policy-making aimed at social inclusion of the most vulnerable children's groups.
- To contribute to the generation of baseline data for the post-2015 agenda.
- To validate data from other sources and the results of focused interventions.

CHAPTER II

SAMPLE AND SURVEY METHODOLOGY

II. SAMPLE AND SURVEY METHODOLOGY

Sample Design

The sample for Viet Nam MICS 2014 was designed to provide estimates for a large number of indicators on the situation of children and women at the national level, for urban and rural areas of Viet Nam as well as six geographic regions in the country, the Red River Delta, Northern Midlands and Mountainous area, North Central and Central Coastal area, Central Highlands, South East and Mekong River Delta. Urban and rural areas within each region were identified as the main sampling strata and the sample was selected in two stages. Within each stratum, a specified number of census enumeration areas were selected systematically with probability proportional to size. After a household listing was carried out within the selected enumeration areas, a systematic sample of 20 households was drawn in each sample enumeration area. A total of 510 enumeration areas belonging to 510 communes were selected and visited during the fieldwork period. The sample was stratified by region, urban and rural areas, and is not self-weighted. For reporting national level results and producing all the tables, sample weights are used. A more detailed description of the sample design can be found in Appendix A.

Questionnaires

Three sets of questionnaires of the global programme were used in the survey: 1) a household questionnaire to collect basic demographic information on all de jure household members (usual residents), the household and dwelling, 2) a questionnaire for individual women administered in each household to all women aged 15-49 years and 3) an under-5 questionnaire administered to mothers (or caretakers) for all children aged under-5 living in the household.

In addition, there was one country specific questionnaire form with supplementary questions on Multi-Dimensional Child Poverty, administered during the Household Questionnaire (after the Household Characteristic Module), which was not part of the global programme. The questionnaires included the following modules:

The Household Questionnaire included the following modules:

- List of Household Members
- Education
- Child Labour
- Child Discipline
- Household Characteristics
- Water and Sanitation
- Handwashing.

The Questionnaire for Individual Women was administered to all women aged 15-49 years living in the households and included the following modules:

- Woman's Background
- Access to Mass Media and Use of Information/Communication Technology
- Fertility/Birth History
- Desire for Last Birth
- Maternal and Newborn Health
- Post-natal Health Checks
- Illness Symptoms
- Contraception
- Unmet Need
- Attitudes Toward Domestic Violence
- Marriage/Union
- HIV/AIDS.

The Questionnaire for Children Under-5 was administered to mothers (or caretakers) of children under 5 years of age[1] living in the households. Normally, the questionnaire was administered to mothers of under-5 children. But, if the mother was not listed in the household roster, a primary caretaker for the child was identified and interviewed. The questionnaire included the following modules:

- Age
- Birth Registration
- Early Childhood Development
- Breastfeeding and Dietary Intake
- Immunization[2]
- Care of Illness.

The questionnaire form for vaccination records at commune health centres included the immunization module.

The questionnaires are based on the MICS5 model questionnaire[3]. From the MICS5 model English version, the questionnaires were customized and translated into Vietnamese and cross-checked by translating back into English and compared with the original version. After a five-day Training of Trainers (TOT), the questionnaires were pre-tested in a commune and ward of Hoa Binh province during October 2013. Hoa Binh belongs to the Northern Midlands and Mountainous area and it is also home to the majority Kinh/Hoa people as well as the Muong ethnic minority people. Specifically, the rural commune of Dan Chu is home to concentrations of the Muong ethnic minority people, while Phuong Lam ward of Hoa Binh City is typically-sized urban ward. Based on the pre-test results, modifications were made to the wording and translations of the questionnaires. A copy of the Viet Nam MICS 2014 questionnaires is provided in Appendix F.

In addition to the administration of questionnaires, fieldwork teams observed the place for handwashing. Details and findings of these observations are provided in the respective sections of the report.

Training and Fieldwork

Training for the fieldwork was conducted for 13 days in December 2013 with 180 trainees, the majority of whom were female, mobilized from the GSO, Province Statistical Offices (PSOs), District Statistics Offices (DSOs) and relevant stakeholders. Training included lectures on interviewing techniques and the contents of the questionnaires, and mock interviews between trainees to gain practice in asking questions. Towards the end of the training period, the 180 trainees spent two days practice interviewing in a rural commune and an urban ward of Da Nang city, in central Viet Nam. All participants were examined at the end of the training and their results were used to select interviewers, data editors and team leaders for field work.

Data were collected by 32 teams from 16 December, 2013 to 25 January, 2014 (before the Lunar New Year "Tet holidays"). The number of teams was reduced to 16 from 28 February to 5 April,

1 The terms "children under 5", "children aged 0-4 years" and "children aged 0-59 months" are used interchangeably in this report.

2 Immunization data were collected both from households and commune health centres, accordingly there was a separate data collection form for commune health centres.

3 The model MICS5 questionnaires can be found at http://mics.unicef.org/tools#survey-design.

2014. The reduction in the number of post-Tet survey teams was due to the smaller number of households left to be surveyed. Each survey team comprised of three interviewers, one field editor and one supervisor. Interpreters accompanied survey interviewers in areas with concentrations of ethnic minority households to assist in translating questions and responses to respondents and interviewers, respectively.

Data Processing

Data were entered, using CSPro software Version 5.0, on 13 desktop computers by 12 data entry operators and two data entry supervisors. For quality assurance purposes, all questionnaires were double-entered and internal consistency checks performed. Procedures and standard programmes developed under the global MICS programme and adapted to the Viet Nam MICS 2014 questionnaires were used throughout. Data processing began simultaneously with data collection on 25 December 2013 and was completed on 18 April 2014.

Data were analysed using the Statistical Package for Social Sciences (SPSS) software, Version 21.0. Model syntax and tabulation plans developed by UNICEF were customized and used for this purpose.

Dissemination of Survey Results

After processing and reviewing the quality of data, the Viet Nam MICS 2014 Steering Committee conducted a dissemination of key findings on 4 September 2014 in Ha Noi, to provide updated information for users. Its content included all key indicators and MDG indicators.

The official MICS results, which include a full report, summary report, database (micro data, MICS information, metadata) as well as communication products, will be disseminated widely in electronic and hard copy form.

CHAPTER III

SAMPLE COVERAGE AND THE CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS

III. SAMPLE COVERAGE AND THE CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS

Sample Coverage

Of the 10,200 households selected for the sample, 10,018 were found to be occupied. Of these, 9,979 were successfully interviewed for a household response rate of 99.6 per cent.

In the interviewed households, 10,190 women (aged 15-49 years) were identified. Of these, 9,827 were successfully interviewed, yielding a response rate of 96.4 per cent within interviewed households.

There were 3,346 children under-5 listed in the household questionnaires. Questionnaires were completed for 3,316 of these children, which corresponds to a response rate of 99.1 per cent within interviewed households.

Overall response rates of 96.1 and 98.7 per cent were calculated for the individual interviews of women and children under-5, respectively (Table HH.1).

Table HH.1: Results of household, women's and under-5 interviews

Number of households, women and children aged under-5 from results of household, women's and under-5's interviews as well as household, women's and under-5's response rates, MICS Viet Nam, 2014

	Total	Area		Region					
		Urban	Rural	Red River Delta	Northern Midlands and Mountainous area	North Central and Central coastal area	Central Highlands	South East	Mekong River Delta
Households									
Sampled	10200	4200	6000	1700	1700	1700	1700	1700	1700
Occupied	10018	4132	5886	1681	1677	1666	1673	1667	1654
Interviewed	9979	4107	5872	1674	1674	1661	1668	1652	1650
Household response rate	99.6	99.4	99.8	99.6	99.8	99.7	99.7	99.1	99.8
Women									
Eligible	10190	4323	5867	1535	1711	1580	1866	1869	1629
Interviewed	9827	4200	5627	1495	1599	1535	1811	1821	1566
Women's response rate	96.4	97.2	95.9	97.4	93.5	97.2	97.1	97.4	96.1
Women's overall response rate	96.1	96.6	95.7	97.0	93.3	96.9	96.8	96.6	95.9
Children under-5									
Eligible	3346	1274	2072	520	644	495	673	521	493
Mothers/caretakers interviewed	3316	1265	2051	516	638	492	668	516	486
Under-5's response rate	99.1	99.3	99.0	99.2	99.1	99.4	99.3	99.0	98.6
Under-5's overall response rate	98.7	98.7	98.8	98.8	98.9	99.1	99.0	98.1	98.3

Response rates were similar across surveyed areas and regions, except in the Northern Midlands and Mountainous area, which recorded a slightly lower response rate (93.3 per cent) for women. This was because some women often go to farms far from their homes and stay for several days, hence their absence during the Viet Nam MICS 2014 fieldwork.

Characteristics of Households

The weighted age and sex distribution of the survey population is provided in Table HH.2. This distribution was also used to produce the population pyramid in Figure HH.1. In the 9,979 households successfully interviewed in the survey, 38,506 household members were listed. Of these, 18,927 were males and 19,579 were females.

Table HH.2: Household age distribution by sex

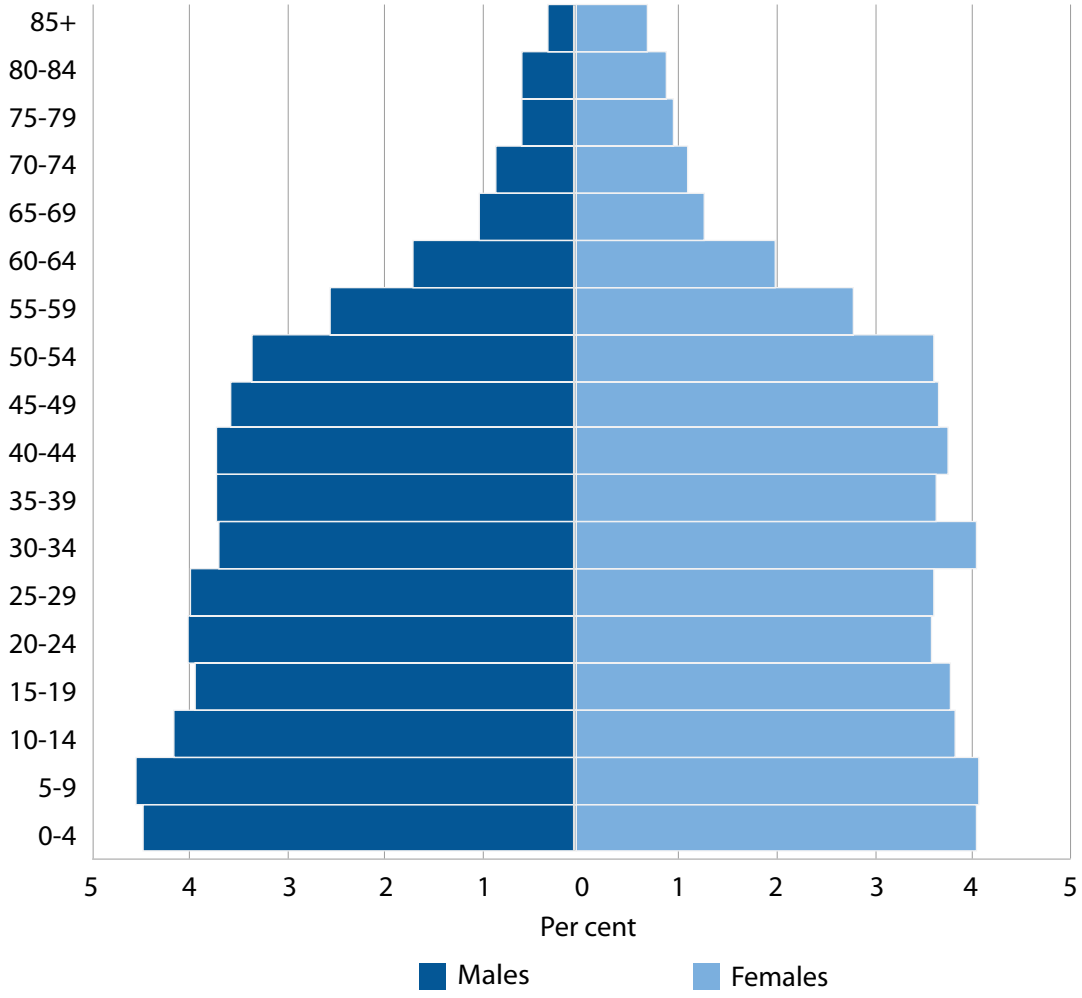
Percentage and frequency distribution of household population by five-year age groups, dependency age groups, and by child (age 0-17 years) and adult populations (aged 18 or more), by sex, Viet Nam, 2014

	Total		Males		Females	
	Number	Per cent	Number	Per cent	Number	Per cent
Total	**38506**	**100**	**18927**	**100**	**19579**	**100**
Age						
0-4	3206	8.3	1668	8.8	1537	7.9
5-9	3242	8.4	1694	9.0	1548	7.9
10-14	3010	7.8	1550	8.2	1460	7.5
15-19	2911	7.6	1474	7.8	1437	7.3
20-24	2867	7.4	1502	7.9	1365	7.0
25-29	2867	7.4	1489	7.9	1378	7.0
30-34	2919	7.6	1383	7.3	1536	7.8
35-39	2768	7.2	1387	7.3	1381	7.1
40-44	2813	7.3	1386	7.3	1427	7.3
45-49	2728	7.1	1335	7.1	1393	7.1
50-54	2629	6.8	1253	6.6	1376	7.0
55-59	2015	5.2	951	5.0	1064	5.4
60-64	1401	3.6	633	3.3	768	3.9
65-69	871	2.3	380	2.0	491	2.5
70-74	743	1.9	316	1.7	427	2.2
75-79	582	1.5	209	1.1	373	1.9
80-84	553	1.4	208	1.1	344	1.8
85+	383	1.0	108	0.6	275	1.4
Dependency age groups						
0-14	9458	24.6	4913	26.0	4545	23.2
15-64	25917	67.3	12793	67.6	13124	67.0
65+	3131	8.1	1221	6.5	1910	9.8
Child and adult populations						
Children aged 0-17 years	11283	29.3	5820	30.7	5463	27.9
Adults aged 18+ years	27223	70.7	13107	69.3	14116	72.1

Children aged 0-14 make up one-fourth of the population (24.6 per cent), while those aged 15-64 represent 67.3 per cent and those aged 65 and above years make up 8.1 per cent. These figures were similar to the corresponding proportions in the 1 April 2013 time-point Population Change and Family Planning Survey (PCS 2013), which also recorded 24.3, 65.2 and 10.5 per cent for these age groups, respectively. Both PCS 2013 and Viet Nam MICS 2014 showed the proportion of population aged 15-64 years was double that of the population aged 0-14 years and aged 65 and above.

According to Viet Nam MICS 2014, the sex ratio of each five-year age group, from 0-4 years to 45-49 years (excluding the group 30-34 years) was equal or larger than one and the sex ratios of the remaining groups from 50-54 were smaller than one.

Figure HH.1: Age and sex distribution of household population, Viet Nam MICS 2014



Tables HH.3, HH.4 and HH.5 provide basic information on the households, female respondents aged 15-49 years and children aged under-5 years. Both unweighted and weighted numbers are presented. Such information is essential for interpretation of the findings presented later in this report and provides background information on the representativeness of the survey sample. The remaining tables in this report are only presented with weighted numbers[4].

Table HH.3 provides basic background information on households, including the sex of the household heads, regions, areas and numbers of household members as well as sex, education

4 See Appendix A: Sample Design, for more details on sample weights.

and ethnicity[5] details of household heads. These background characteristics are used in subsequent tables in this report and are intended to show the numbers of observations in major categories of analysis in this report.

Table HH.3: Household composition

Percentage and frequency distribution of households by selected characteristics, Viet Nam, 2014

	Weighted per cent	Number of households	
		Weighted	Unweighted
Total	**100**	**9979**	**9979**
Sex of household head			
Male	73.1	7297	7279
Female	26.9	2682	2700
Region			
Red River Delta	24.7	2468	1674
Northern Midlands and Mountainous area	13.0	1292	1674
North Central and Central coastal area	22.5	2245	1661
Central Highlands	5.6	558	1668
South East	15.6	1557	1652
Mekong River Delta	18.6	1859	1650
Area			
Urban	31.1	3102	4107
Rural	68.9	6877	5872
Number of household members			
1	6.8	683	613
2	15.2	1512	1436
3	20.0	1994	1964
4	28.0	2794	2824
5	15.4	1535	1572
6	8.6	858	870
7	3.2	318	355
8	1.4	135	161
9	0.7	66	85
10+	0.8	83	99
Education of household head			
None	6.8	680	753
Primary	25.4	2534	2464
Lower Secondary	38.6	3853	3710
Upper Secondary	15.8	1578	1643
Tertiary	13.4	1333	1409
Ethnicity of household head			
Kinh/Hoa	87.9	8772	8392
Ethnic Minorities	12.1	1207	1587
Mean household size	**3.9**	**9979**	**9979**

5 This was determined by asking respondents about their ethnic backgrounds. The majority of Kinh people and those of Hoa ethnicity are classified in the same group as they have similar living standards.

The weighted and unweighted total numbers of households were equal, since sample weights were normalized. The table also shows the weighted mean household size estimated by the survey.

Under observation in some classifications, for example the Central Highlands, Northern Midlands and Mountainous area and South East, the weighted number of observations was smaller than the unweighted number. However, a reverse pattern emerged in other classifications such as the Mekong River Delta, North Central and Central coastal area and Red River Delta. This reflects the unequal portion sampling strategy in the sample design of the survey to ensure that the indicators were representative and efficient. The Central Highlands, Northern Midlands and Mountainous area and South East were over-sampled in the sample selection to ensure a sufficient level of precision for survey estimates for these regions. For further rationale for the over-sampling in these regions, please consult Appendix A on the sample design.

In the Viet Nam MICS 2014, the percentage of households with sizes of one, two-to-four, five-to-six and seven or more members were 6.8, 63.2, 24 and 6.1 per cent, respectively. These percentages were similar to the 2013 PCS, which recorded 7.8, 66.5, 21.1 and 4.5 per cent for one, two-to-four, five-to-six and seven or more household members, respectively.

The average household size was 3.9 (Table HH.3), which was similar to the figure recorded in the 2013 PCS.

Characteristics of Female Respondents 15-49 Years of Age and Children Under-5

Tables HH.4 and HH.5 provide important information on the background characteristics of female respondents 15-49 years of age and children aged under-5. The total numbers of weighted and unweighted observations in the tables were equal, as sample weights have been standardized. In addition to providing useful information on the background characteristics of women and children, the tables illustrate the numbers of observations in each background category. These categories are used in subsequent tabulations of this report.

Table HH.4: Women's background characteristics

Percentage and frequency distribution of women age 15-49 years by selected background characteristics, Viet Nam, 2014.

	Weighted per cent	Number of women	
		Weighted	Unweighted
Total	**100**	**9827**	**9827**
Region			
Red River Delta	22,6	2221	1495
Northern Midlands and Mountainous area	13,5	1325	1599
North Central and Central coastal area	21,2	2082	1535
Central Highlands	6,3	619	1811
South East	18,0	1768	1821
Mekong River Delta	18,4	1811	1566

	Weighted per cent	Number of women	
		Weighted	Unweighted
Area			
Urban	33,2	3259	4200
Rural	66,8	6568	5627
Age			
15-19	14,0	1374	1398
20-24	13,6	1333	1338
25-29	13,8	1359	1369
30-34	15,7	1539	1546
35-39	14,2	1391	1402
40-44	14,7	1442	1414
45-49	14,1	1390	1360
Marital/Union status			
Currently married/in union	71,6	7038	6972
Widowed	2,1	206	207
Divorced	1,9	185	193
Separated	0,9	90	107
Never married/in union	23,5	2308	2348
Motherhood and recent births			
Never gave birth	27,4	2692	2726
Ever gave birth	72,6	7135	7101
Gave birth in last two years	14,9	1464	1484
No birth in last two years	57,7	5671	5617
Education			
None	4,8	475	581
Primary	15,1	1483	1459
Lower Secondary	35,8	3516	3370
Upper Secondary	24,2	2382	2412
Tertiary	20,1	1971	2005
Wealth Index quintiles			
Poorest	18,0	1773	1980
Second	18,5	1814	1638
Middle	20,4	2003	1860
Fourth	22,1	2171	2204
Richest	21,0	2067	2145
Ethnicity of household head			
Kinh/Hoa	86,0	8456	8016
Ethnic Minorities	14,0	1371	1811

Table HH.4 provides background characteristics of female respondents aged 15-49 years. It includes information on the distribution of women according to region, area, age, marital/in union and motherhood status, births in last two years, education[6], wealth index quintiles[7],[8] and ethnicity of household head. The weighted number is higher than the unweighted number for Kinh/Hoa, while ethnic minorities were over sampled with a larger unweighted number.

Table HH.5 highlights background characteristics of children aged under-5 years. It includes information on the distribution of children under-5 according to sex, region, area, age in months, the respondent to the under-5 questionnaire, mother's education, wealth index quintiles and ethnicity of the household head.

The over-sampling strategy is again in evidence, as the unweighted number of ethnic minority women and children was larger than the weighted numbers.

6 Throughout this report, unless otherwise stated, "education" refers to highest educational level ever attended by the respondent when used as a background variable.

7 The Wealth Index is a composite indicator of wealth. To construct the Wealth Index, a principal components analysis is performed using information on the ownership of consumer goods, dwelling characteristics, water and sanitation, and other characteristics related to the household's wealth, to generate weights (factor scores) for each of the items used. First, initial factor scores are calculated for the total sample. Then, separate factor scores are calculated for households in urban and rural areas. Finally, the urban and rural factor scores are regressed on the initial factor scores to obtain the combined, final factor scores for the total sample. This is carried out to minimize the urban bias in the Wealth Index values.

Each household in the total sample is then assigned a wealth score based on the assets owned by that household and on the final factor scores obtained as described above. The survey household population is then ranked according to the wealth score of the household they live in and is finally divided into five equal parts (quintiles), from lowest (poorest) to highest (richest).

In Viet Nam MICS 2014, the following assets were used in these calculations: radio, television, telephone, refrigerator, table and chair set, fan, computer, air conditioner, gas cooker, electric cooker, washing machine, car or tractor, ship or boat, mobile telephone, bicycle, motorbike, ownership of dwelling, bank account, agricultural land, water surface, forestry land and animals/livestock.

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. The wealth scores calculated are only applicable for the particular dataset they are based on.

Further information on the construction of the Wealth Index can be found in Filmer, D. and Pritchett, L., 2001. "Estimating wealth effects without expenditure data – or tears: An application to educational enrolments in states of India". Demography 38(1): 115-132. Rutstein, S.O. and Johnson, K., 2004. The DHS Wealth Index. DHS Comparative Reports No.6. Calverton, Maryland: ORC Macro and Rutstein, S.O., 2008. The DHS Wealth Index: Approaches for Rural and Urban Areas. DHS Working Papers No.60. Calverton, Maryland: Macro International Inc.

8 When describing survey results by Wealth Index quintiles, appropriate terminology is used when referring to individual household members, such as "women in the richest household population", used interchangeably with "women in the wealthiest survey population" and similar.

Table HH.5: Under-5's background characteristics

Percentage and frequency distribution of children aged under-5 by selected characteristics, Viet Nam, 2014

	Weighted per cent	Number of under-5 children	
		Weighted	Unweighted
Total	**100**	**3316**	**3316**
Sex			
Male	51.8	1719	1713
Female	48.2	1597	1603
Region			
Red River Delta	23.6	784	516
Northern Midlands and Mountainous area	15.5	513	638
North Central and Central coastal area	20.8	690	492
Central Highlands	7.3	241	668
South East	15.5	515	516
Mekong River Delta	17.3	573	486
Area			
Urban	29.7	985	1265
Rural	70.3	2331	2051
Age			
0-5 months	10.6	350	358
6-11 months	10.2	338	333
12-23 months	23.8	790	785
24-35 months	19.3	641	633
36-47 months	16.3	539	548
48-59 months	19.8	658	659
Respondent to the under-5 questionnaire			
Mother	95.2	3156	3176
Other primary caretaker	4.8	160	140
Mother's educationa			
None	5.9	197	250
Primary	15.3	506	518
Lower Secondary	36.8	1219	1171
Upper Secondary	20.6	683	692
Tertiary	21.4	710	685
Wealth Index quintiles			
Poorest	20.9	694	828
Second	20.0	662	589
Middle	20.3	672	617
Fourth	19.9	659	655
Richest	18.9	628	627
Ethnicity of household head			
Kinh/Hoa	82.8	2746	2530
Ethnic Minorities	17.2	570	786

a In this table and throughout the report, "mother's education" refers to educational attainment of mothers as well as caretakers of children under-5, who are the respondents to the under-5 questionnaire if the mother is deceased or living elsewhere.

Housing Characteristics, Asset Ownership and Wealth Quintiles

Tables HH.6, HH.7 and HH.8 provide further details on household level characteristics. Table HH.6 presents characteristics of housing, disaggregated by area and region, distributed by whether the dwelling has electricity, the main materials of flooring, roofing and exterior walls as well as the number of rooms used for sleeping.

Nationally, the availability of electricity was almost universal in households (99.2 per cent). However, 1.1 per cent of households in rural areas had no electricity. Regions with higher percentages of dwellings without electricity are the Northern Midlands and Mountainous area (2.8 per cent) and Mekong River Delta (1.0 per cent).

Materials used for dwelling roofing, flooring and exterior walls are classified into three categories: natural, rudimentary and finished. The majority of households had finished floors (92.9 per cent), finished roofing (97.2 per cent) and finished walls (89.3 per cent). The natural category is considered bad for inhabitants' health, especially children.

The proportion of households with natural category materials for roofing, flooring and exterior walls were much higher in rural than urban areas: 5.7 and 0.9 per cent for flooring, 3.1 and 0.4 per cent for roofing and 5.6 and 1.0 per cent for walls, respectively. The proportions in natural categories were higher in the Mekong River Delta and Northern Midlands and Mountainous area. Sixteen per cent of households in the Mekong River Delta had natural walls, 7.2 per cent had natural roofing and 13.3 per cent had natural flooring.

Overall, 24 per cent of households had three or more rooms used for sleeping, reflecting better living conditions. Urban areas have higher percentages of households with three or more rooms for sleeping (31 per cent), than rural areas (21 per cent). The Mekong River Delta had the lowest percentage (16.9 per cent) of households with three or more rooms for sleeping. The national mean number of persons per room used for sleeping was 2.22. However, the Red River Delta had a mean number of persons per room used for sleeping below the national figure (1.88), while the Northern Midlands and Mountainous area had a figure of 2.67 for this indicator.

Table HH.6: Housing characteristics

Percentage distribution of households by selected housing characteristics, according to area of residence and region, Viet Nam, 2014

	Total	Area		Region					
		Urban	Rural	Red River Delta	Northern Midlands and Mountainous area	North Central and Central coastal area	Central Highlands	South East	Mekong River Delta
Electricity									
Yes	99.2	99.9	98.9	100	97.2	99.7	99.3	99.3	99.0
No	0.8	0.1	1.1	0.0	2.8	0.3	0.7	0.7	1.0
Flooring									
Natural flooring	4.2	0.9	5.7	0.7	7.3	1.3	2.2	1.5	13.3
Rudimentary flooring	2.9	0.6	3.9	0.0	10.8	1.9	4.8	0.1	4.2
Finished flooring	92.9	98.5	90.4	99.3	81.9	96.8	93.0	98.4	82.5
Roofing									
Natural roofing	2.3	0.4	3.1	0.1	5.1	0.6	0.1	0.5	7.2
Rudimentary roofing	0.6	0.2	0.8	0.0	2.9	0.5	0.2	0.1	0.3
Finished roofing	97.2	99.4	96.1	99.9	92.0	98.8	99.6	99.4	92.4
Exterior walls									
Natural walls	4.2	1.0	5.6	0.0	6.0	0.5	0.3	1.8	16.0
Rudimentary walls	3.4	1.4	4.3	0.3	7.5	4.2	2.8	1.8	5.4
Finished walls	89.3	95.5	86.5	99.5	86.6	95.1	94.7	95.7	63.6
Other	3.1	2.0	3.6	0.1	0.0	0.2	2.2	0.6	15.0
Rooms used for sleeping									
1	32.6	27.3	35.0	24.9	42.2	32.5	30.5	31.8	37.7
2	43.4	41.7	44.2	44.7	35.3	45.0	40.4	44.4	45.4
3 or more	24.0	31.0	20.8	30.3	22.5	22.5	29.1	23.8	16.9
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Number of households	9979	3102	6877	2468	1292	2245	558	1557	1859
Mean number of persons per room used for sleeping	2.22	2.09	2.28	1.88	2.67	2.10	2.52	2.27	2.36

In Table HH.7, households are distributed according to ownership of assets by household and by individual household members. Household assets include those used in daily life, such as air conditioner(s), refrigerator(s), television(s) and washing machine(s) and those of higher value such as a dwelling, agricultural land, water surface and forestry land.

Fifty-six per cent of households nationally have agricultural land, with the percentage highest in the Northern Midlands and Mountainous area and Central Highlands. These data also reflect the regional characteristics of Viet Nam. The predominantly forested Northern Midlands and Mountainous area had the highest percentage of forestry land use (36.9 per cent), while the Mekong River Delta's large number of rivers was reflected in its inhabitants' high use of water surfaces (19.8 per cent).

Of the interviewed households, 93.4 per cent owned their dwelling. But, this was lowest in the South East (83.6 per cent), which could be explained by the region's large number of migrants who live in rented households or households not owned.

Table HH.7: Household and personal assets

Percentage of households by ownership of selected household and personal assets, and percentage distribution by ownership of dwelling, according to areas of residence and regions, Viet Nam, 2014

	Total	Area		Region					
		Urban	Rural	Red River Delta	Northern Midlands and Mountainous area	North Central and Central coastal area	Central Highlands	South East	Mekong River Delta
Percentage of households that own a:									
Radio	18.7	22.3	17.0	24.6	10.4	14.7	10.6	21.7	21.1
Television	94.0	96.6	92.8	95.7	89.2	93.6	93.4	95.5	94.5
Fixed phone	23.0	38.0	16.3	26.8	13.3	17.2	15.3	34.1	24.8
Refrigerator	60.9	80.9	51.8	74.2	55.3	51.0	46.3	79.1	48.0
Bed	90.2	85.1	92.5	98.2	86.3	94.8	95.2	73.5	89.5
Table and chair set	71.4	71.9	71.2	73.4	63.0	75.1	60.2	70.8	73.9
Sofa	26.8	35.8	22.7	31.7	25.3	27.0	29.0	29.2	18.2
Fan	93.2	97.0	91.5	99.3	86.2	95.0	67.7	97.6	91.9
Computer	27.1	49.4	17.1	32.9	17.0	21.2	21.9	46.3	19.1
Air conditioner	15.0	33.9	6.4	26.2	6.2	8.4	1.6	27.1	8.1
Gas cooker	76.3	88.6	70.7	85.0	54.4	73.9	63.3	90.1	75.1
Electric cooker	22.6	33.2	17.9	36.2	17.5	11.3	19.0	25.6	20.5
Washing machine	32.2	58.2	20.5	45.1	20.9	20.8	29.2	55.9	17.8
Tractor	3.6	1.3	4.6	2.7	7.9	2.2	16.2	.9	1.8
Car	4.2	8.4	2.3	5.5	4.3	3.0	3.9	6.7	1.8
Car or tractor	7.7	9.6	6.8	8.1	12.1	5.2	19.5	7.5	3.6
Ship or boat with a motor	4.8	1.9	6.1	0.7	0.7	3.0	0.1	0.7	20.1

	Total	Area		Region					
		Urban	Rural	Red River Delta	Northern Midlands and Mountainous area	North Central and Central coastal area	Central Highlands	South East	Mekong River Delta
Percentage of households that own:									
Agricultural land	56.0	20.6	71.9	64.5	77.0	61.9	73.1	21.5	46.6
Water surface	10.4	2.4	14.1	8.7	17.4	8.3	4.3	1.5	19.8
Forestry land	8.8	2.0	11.9	1.5	36.9	13.3	2.6	0.7	2.4
Farm animals/Livestock	50.1	21.3	63.2	44.2	81.0	63.1	53.7	22.3	43.1
Percentage of households where at least one member owns or has a:									
Mobile telephone	92.5	95.6	91.1	92.1	93.9	91.0	88.8	95.7	92.4
Bicycle	64.6	60.0	66.6	80.3	58.8	69.6	41.8	48.7	61.8
Motorcycle or scooter	82.1	89.0	79.1	79.5	84.9	79.0	89.6	92.4	76.7
Bank account	33.1	53.5	23.9	38.6	23.0	28.8	25.5	53.5	23.3
Ownership of dwelling									
Owned by a household member	93.4	89.5	95.1	95.4	96.6	96.5	96.0	83.6	92.0
Not owned	6.6	10.5	4.9	4.6	3.4	3.5	4.0	16.4	8.0
Rented	3.4	7.6	1.5	2.2	0.7	0.8	1.7	13.6	2.0
Other	3.2	2.9	3.4	2.4	2.7	2.7	2.3	2.8	6.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of households	9979	3102	6877	2468	1292	2245	558	1557	1859

Table HH.8 shows how household populations in areas and regions are distributed according to household wealth index quintiles. This table shows each of five wealth index quintiles occupied 20 per cent of the household population.

Table HH.8 shows that 47.2 per cent of the urban population is in the richest wealth index quintile, in stark contrast to just 7.3 per cent of the rural population. Moreover, more than a quarter of the rural population is in the poorest wealth index quintile (26.8 per cent), five times higher than the poorest urban population (5.4 per cent). Of the six regions, the Red River Delta (31.7 per cent) and South East (36.9 per cent) occupied one-third of the richest wealth quintiles, while the Northern Midlands and Mountainous area and Central Highlands had two-fifths of their populations in the poorest wealth index quintile.

Table HH.8: Wealth quintile

Percentage distribution of household population by Wealth Index quintiles, according to area of residence and regions, Viet Nam, 2014

	Wealth Index quintile					Total	Number of household members
	Poorest	Second	Middle	Fourth	Richest		
Total	**20.0**	**20.0**	**20.0**	**20.0**	**20.0**	**100**	**38506**
Area							
Urban	5.4	7.1	14.8	25.5	47.2	100	12236
Rural	26.8	26.0	22.4	17.4	7.3	100	26270
Region							
Red River Delta	3.5	15.8	23.7	25.3	31.7	100	9091
Northern Midlands and Mountainous area	44.6	21.8	15.0	9.9	8.8	100	5240
North Central and Central coastal area	19.6	27.1	22.0	17.7	13.5	100	8214
Central Highlands	40.2	17.5	17.2	17.7	7.3	100	2432
South East	6.9	9.7	17.6	28.8	36.9	100	6373
Mekong River Delta	28.3	25.8	19.8	16.2	10.0	100	7156

CHAPTER IV

CHILD MORTALITY

IV. CHILD MORTALITY

One of the overarching goals of the MDGs is to reduce infant and under-5 mortality. Specifically, the MDGs call for the reduction of under-5 mortality by two-thirds between 1990 and 2015. Monitoring progress towards this goal is an important, yet challenging objective.

Mortality rates presented in this chapter are calculated from information collected in the birth histories of women's questionnaires. All interviewed women in Viet Nam MICS 2014 were asked whether they had ever given birth. If the answer was yes, they were asked to report the number of sons and daughters who live with them, the number who live elsewhere and the number who have died. In addition, they were asked to provide a detailed birth history of live births in chronological order starting with the firstborn. Women were also asked whether births were single or multiple, the child's sex, the date of birth (month and year), and survival status. Furthermore, for children still alive, they were asked the current age of the child and, if not alive, the age at death. Childhood mortality rates are expressed by conventional age categories and are defined as follows:

- Neonatal mortality (NN): probability of dying within the first month of life
- Post-neonatal mortality (PNN): difference between infant and neonatal mortality rates
- Infant mortality (1q0): probability of dying between birth and the first birthday
- Child mortality (4q1): probability of dying between the first and the fifth birthdays
- Under-5 mortality (5q0): probability of dying between birth and the fifth birthday.

Table CM.1: Early childhood mortality rates (per thousand live births)

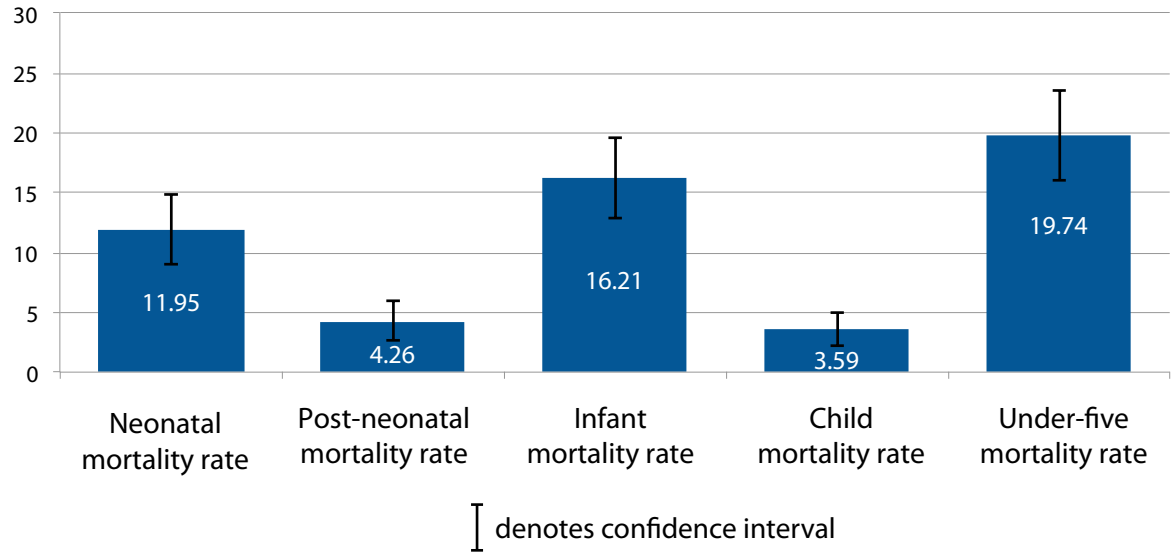
Neonatal, post-neonatal, infant, child and under-5 mortality rates for five-year periods preceding the survey, Viet Nam, 2014

	Neonatal mortality rate[1]	Post-neonatal mortality rate[2, a]	Infant mortality rate[3]	Child mortality rate[4]	Under-5 mortality rate[5]
			Years preceding the survey		
0-4	11.95	4.26	16.21	3.59	19.74
5-9	7.20	6.13	13.33	5.18	18.44
10-14	9.72	6.15	15.87	8.46	24.19
15-19	18.23	4.79	23.03	9.56	32.37
20-24	25.71	14.03	39.73	12.39	51.63

[1] MICS Indicator 1.1 - Neonatal mortality rate
[2] MICS Indicator 1.3 - Post-neonatal mortality rate
[3] MICS Indicator 1.2, MDG Indicator 4.2 - Infant mortality rate
[4] MICS Indicator 1.4 - Child mortality rate
[5] MICS Indicator 1.5; MDG Indicator 4.1 - Under-5 mortality rate
a Post-neonatal mortality rates are computed as the difference between the infant and neonatal mortality rates

Table CM.1 and Figure CM.1 present neonatal, post-neonatal, infant, child and under-5 mortality rates for the three most recent five-year periods before the survey. Neonatal mortality in the most recent five-year period is estimated at 12 per 1,000 live births, while the post-neonatal mortality rate is estimated at four per 1,000 live births.

Figure CM.1: Early childhood mortality rates, Viet Nam MICS 2014



Note: Indicator values are per 1,000 live births

The infant mortality rate in the five years preceding the survey was more than 16 per 1,000 live births (95% confidence interval from 12.78‰ to 19.64‰) and under-5 mortality amounted to nearly 20 deaths per 1,000 live births (95% confidence interval from 15.99‰ to 23.49‰) for the same period, indicating that around 82 per cent of under-5 deaths were infant deaths.

Table CM.2: Early childhood mortality rates by socio-economic characteristics (per thousand live births)

Neonatal, post-neonatal, infant, child and under-5 mortality rates for the five-year period preceding the survey, by socio-economic characteristics, Viet Nam, 2014

	Neonatal mortality rate[1]	Post-neonatal mortality rate[2], [a]	Infant mortality rate[3]	Child mortality rate[4]	Under-5 mortality rate[5]
Total	**11.95**	**4.26**	**16.21**	**3.59**	**19.74**
Area					
Urban	8.69	3.93	12.62	3.13	15.71
Rural	13.37	4.41	17.78	3.79	21.51
Mother's education					
None	46.27	20.74	67.02	19.47	85.19
Primary	5.95	2.00	7.95	0.00	7.95
Lower Secondary	11.43	4.05	15.48	3.59	19.01
Upper Secondary	10.14	3.99	14.14	0.00	14.14
Tertiary	8.88	1.63	10.51	4.23	14.70
Wealth Index quintiles					
40% Poorest	18.73	6.86	25.59	6.10	31.53
60% Richest	7.35	2.51	9.86	1.91	11.76
Ethnicity of household head					
Kinh/Hoa	8.21	1.99	10.20	2.25	12.42
Ethnic Minorities	28.97	14.59	43.56	9.89	53.02

[1] **MICS Indicator 1.1 - Neonatal mortality rate**

[2] **MICS Indicator 1.3 - Post-neonatal mortality rate**

[3] **MICS Indicator 1.2, MDG indicator 4.2 - Infant mortality rate**

[4] **MICS Indicator 1.4 - Child mortality rate**

[5] **MICS Indicator 1.5, MDG indicator 4.1 - Under-5 mortality rate**

a Post-neonatal mortality rates are computed as the difference between the infant and neonatal mortality rates

Table CM.3: Early childhood mortality rates by demographic characteristics (per thousand live births)

Neonatal, post-neonatal, infant, child and under-5 mortality rates for the five-year period preceding the survey, by demographic characteristics, Viet Nam, 2014

	Neonatal mortality rate [1]	Post-neonatal mortality rate [2, a]	Infant mortality rate [3]	Child mortality rate [4]	Under-5 mortality rate [5]
Total	**11.95**	**4.26**	**16.21**	**3.59**	**19.74**
Sex of child					
Male	14.69	3.26	17.95	4.92	22.79
Female	8.99	5.35	14.33	2.10	16.40
Mother's age at birth					
Less than 20	24.13	10.51	34.64	8.23	42.59
20-34	8.99	3.46	12.45	3.18	15.58
35-49	27.44	5.90	33.35	3.88	37.09
Birth order					
1	7.50	5.99	13.48	5.02	18.44
2-3	11.47	3.15	14.62	1.40	15.99
4-6	53.73	0.73	54.46	3.05	57.34
7+	51.86	0.00	51.86	65.15	113.63
Previous birth interval [b]					
< 2 years	28.11	13.16	41.27	9.03	49.92
2 years	16.82	0.00	16.82	0.77	17.57
3 years	14.70	0.50	15.20	6.16	21.26
4+ years	11.35	1.00	12.35	0.52	12.86

[1] MICS Indicator 1.1 - Neonatal mortality rate

[2] MICS Indicator 1.3 - Post-neonatal mortality rate

[3] MICS Indicator 1.2, MDG indicator 4.2 - Infant mortality rate

[4] MICS Indicator 1.4 - Child mortality rate

[5] MICS Indicator 1.5, MDG indicator 4.1 - Under-5 mortality rate

[a] Post-neonatal mortality rates are computed as the difference between the infant and neonatal mortality rates

[b] Excludes first order births

Tables CM.2 and CM.3 provide estimates of child mortality by socio-economic and demographic characteristics.

The probabilities of dying were higher for males than for females, but lower for those in urban and Kinh/Hoa groups than for those from rural and ethnic minority groups. The probability of dying was also lowest for children of mothers aged 20-34 years. Neonatal, infant and under-5 mortality rates were highest for the 40 per cent poorest wealth index group and triple the 60 per cent richest wealth index group. Figure CM.2 shows the disparities of under-5 mortality rates by urban-rural areas. The under-5 mortality rate in rural areas was 22 per 1,000, 1.38 times higher than in urban areas.

Figure CM.2: Under-5 mortality rates by area Viet Nam MICS 2014

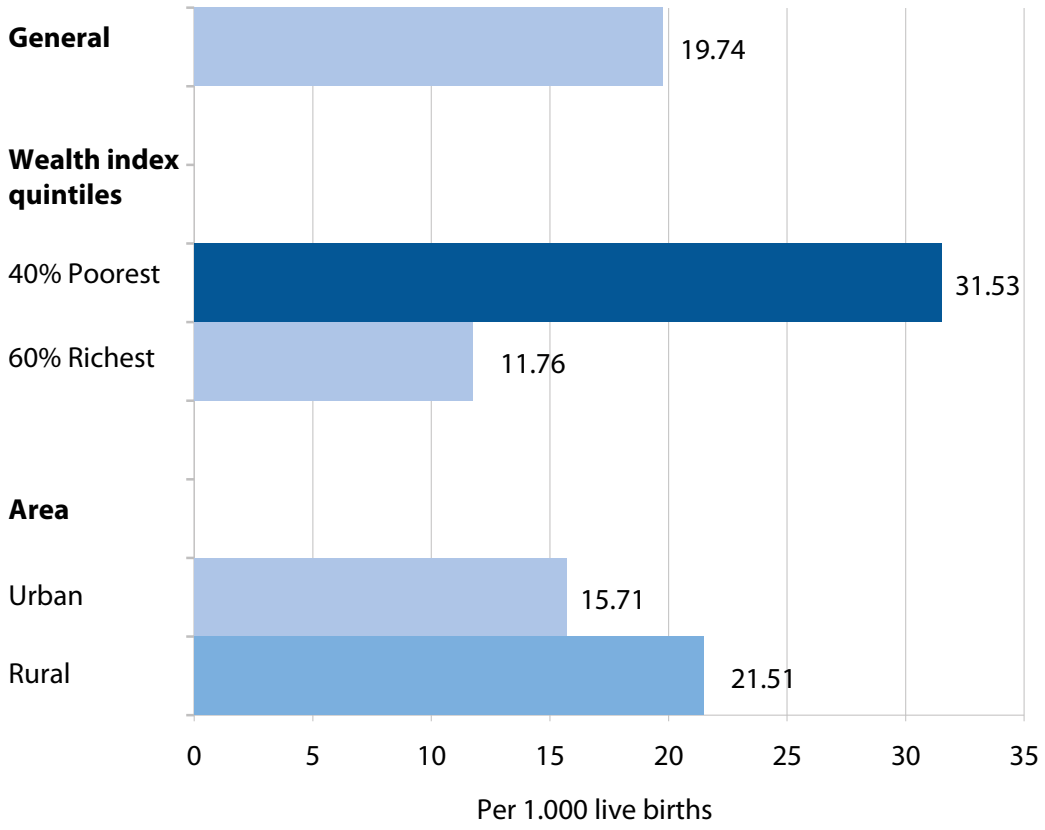
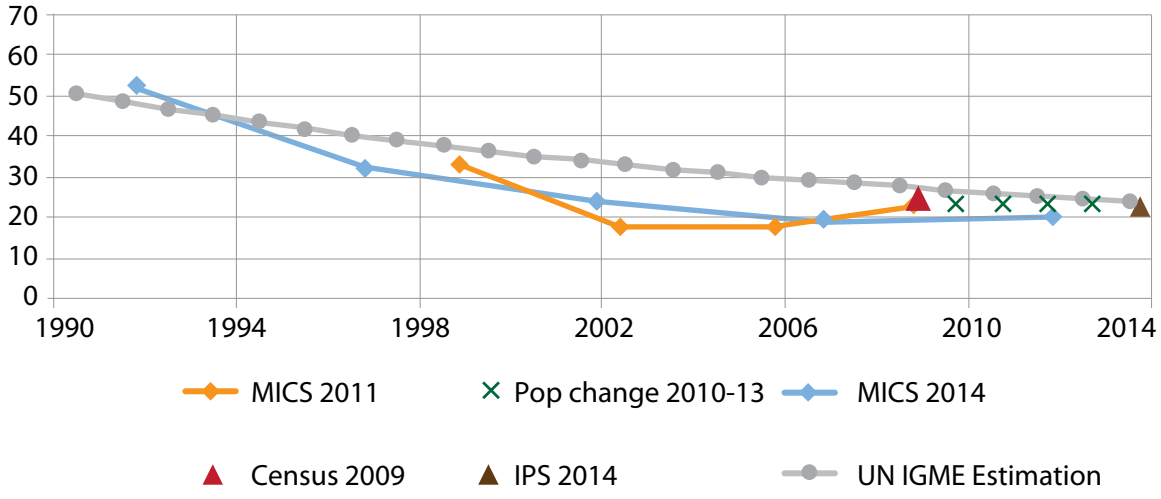


Figure CM.3 compares the findings of Viet Nam MICS 2014 on under-5 mortality rates with those from other data sources: Viet Nam MICS 2011, Viet Nam Population and Housing Census 2009 (PHC2009), Population Change and Family Planning Survey (PCFPS 2010, 2011, 2012 and 2013) and Inter-censal Population Survey 2014 (IPS 2014). The Viet Nam MICS 2014 findings were obtained from Table CM.21. The MICS estimates indicate a decline in mortality during the last 20 years. The most recent under-5 mortality estimate (20 per 1,000 live births) from Viet Nam MICS 2014 was lower than estimated by PCFPS (87 per cent) and IPS 2014 (91 per cent). The mortality trend depicted by the UN IGME[9] is also a declining one. However, Viet Nam MICS 2014 results were also lower than those indicated by the UN IGME estimate. Further qualification of these apparent declines and differences as well as their determinants should be taken up in a more detailed and separate analysis.

9 The UN Inter-agency Group for Child Mortality Estimation (IGME). The IGME, led by the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO), also includes the World Bank and the United Nations Population Division of the Department of Economic and Social Affairs as full members.

Figure CM.3: Under-5 mortality rate trends in Viet Nam MICS 2014 and other surveys



CHAPTER V

NUTRITION

V. NUTRITION

Low Birth Weight

Weight at birth is a good indicator not only of a mother's health and nutritional status but also the newborn's chances for survival, growth, long-term health and psychosocial development. Low birth weight (defined as less than 2,500 grams) carries a range of grave health risks for children. Babies who were undernourished in the womb face a greatly increased risk of dying during their early days, months and years. Those who survive may 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 with low birth weight also risk 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 the most impact - mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood) and poor nutrition during pregnancy. Inadequate weight gain during pregnancy is particularly important, as it accounts for a large proportion of foetal growth retardation. Moreover diseases such as diarrhoea and malaria, which are common in many developing countries, can significantly impair 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 a higher risk of bearing low birth weight babies.

One of the major challenges in measuring incidences of low birth weight is that more than half of infants in the developing world are not weighed at birth. 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 2,500 grams is estimated from two items in the Viet Nam MICS 2014 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[10].

Table NU.1: Low birth weight infants

Percentage of last live-born children in the last two years estimated to have weighed below 2500 grams at birth and percentage of live births weighed at birth, Viet Nam, 2014

	Percentage distribution of births by mother's assessment of size at birth:						Percentage of live births:		Number of last live-born children in the last two years
	Very small	Smaller than average	Average	Larger than average or very large	DK	Total	Below 2500 grams[1]	Weighed at birth[2]	
Total	**1.4**	**8.3**	**77.7**	**11.8**	**0.8**	**100**	**5.7**	**94.3**	**1464**
Mother's age at birth									
Less than 20 years	0.9	10.9	79.7	6.8	1.6	100	6.4	86.8	124
20-34 years	1.6	7.7	77.6	12.3	0.8	100	5.6	95.2	1212
35-49 years	0	10.8	76.9	12.3	0	100	5.5	92.9	128
Birth order									
1	1.0	9.0	80.4	8.8	0.8	100	5.7	97.1	603
2-3	1.3	7.3	76.4	14.1	0.9	100	5.2	93.7	807
4-5	9.9	15.5	61.6	13.0	0	100	13.9	77.7	46
6+	*	*	*	*	*	*	*	*	9
Region									
Red River Delta	1.1	8.0	80.4	9.4	1.0	100	5.4	98.3	343
Northern Midlands and Mountainousarea	2.4	7.4	78.1	8.6	3.6	100	6.2	79.2	230
North Central and Central coastal area	2.7	8.6	75.7	13.0	0	100	6.6	97.7	300
Central Highlands	0.9	13.9	74.4	10.8	0	100	7.2	85.6	109
South East	1.0	9.2	73.8	16.0	0	100	5.5	97.3	242
MekongRiver Delta	0	5.5	81.4	13.1	0	100	3.7	99.6	239

10 For a detailed description of the methodology, see Boerma, J. T., Weinstein, K. I., Rutstein, S.O., and Sommerfelt, A. E. , 1996.Data on Birth Weight in Developing Countries: Can Surveys Help? Bulletin of the World Health Organization, 74(2), 209-16.

	Percentage distribution of births by mother's assessment of size at birth:						Percentage of live births:		Number of last live-born children in the last two years
	Very small	Smaller than average	Average	Larger than average or very large	DK	Total	Below 2500 grams[1]	Weighed at birth[2]	
Area									
Urban	1.2	7.3	75.7	15.5	0.3	100	5.1	98.5	428
Rural	1.5	8.7	78.5	10.3	1.0	100	5.9	92.5	1037
Mother's education									
None	5.3	12.5	61.4	16.0	4.7	100	10.1	41.8	67
Primary	2.7	8.2	75.5	13.6	0	100	6.5	87.2	182
Lower Secondary	0.7	9.6	78.3	10.5	1.0	100	5.6	96.7	529
Upper Secondary	0.4	8.2	77.8	13.3	0.3	100	4.8	99.6	340
Tertiary	2.2	5.6	80.9	10.8	0.6	100	5.3	99.2	347
Wealth Index quintiles									
Poorest	1.7	10.4	75.7	10.1	2.1	100	6.7	75.3	294
Second	2.8	6.6	79.0	10.1	1.6	100	6.1	97.0	288
Middle	0.2	10.3	75.2	14.0	0.3	100	5.4	99.7	292
Fourth	1.1	7.3	80.2	11.4	0	100	5.1	99.7	314
Richest	1.5	6.7	78.1	13.7	0	100	5.1	99.7	275
Ethnicity of household head									
Kinh/Hoa	1.1	7.6	78.4	12.5	0.4	100	5.2	99.1	1215
Ethnic Minorities	3.0	11.6	74.1	8.4	2.8	100	8.1	70.9	250

[1] **MICS Indicator 2.20 –Low birth weight infants**

[2] **MICS Indicator 2.21 - Infants weighed at birth**

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Overall, 94.3 per cent of births were weighed and 5.7 per cent of infants had low birth weights - less than 2,500 grams at birth (Table NU.1). There were significant regional variations with the lowest percentage of 3.7 per cent in the Mekong River Delta in contrast to the highest of 7.2 per cent in the Central Highlands. Generally, the prevalence of low birth weights did not vary much by mother's age or wealth index quintile. However, children born to mothers with primary education or no education had a higher prevalence of low weight at birth than lower secondary education and above.

Viet Nam MICS 2014 did not include anthropometric measurements for children under 5, which had been included in Viet Nam MICS 2011, due to time and resource constraints as well as the availability of national nutrition survey data.

Breastfeeding, Infant and Young Child Feeding

Proper feeding of infants and young children can increase their chances of survival and promote optimal growth and development, especially in the critical window from birth to two years of age. 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 do not start to breastfeed early enough, do not breastfeed exclusively for the recommended six months or stop breastfeeding too soon. There are often pressures to switch to infant formula,

which can contribute to growth faltering and micronutrient malnutrition and can be unsafe if hygienic conditions, including safe drinking water, are not readily available. Studies have shown that in addition to continued breastfeeding, consumption of appropriate, adequate and safe solid, semi-solid and soft foods from the age of six months onwards leads to better health and growth outcomes, with potential to reduce stunting during the first two years of life[11].

UNICEF and WHO recommend that infants be breastfed within one hour of birth, breastfed exclusively for the first six months of life and continue to be breastfed up to two years of age and beyond[12]. Starting at six months, breastfeeding should be combined with safe, age-appropriate feeding of solid, semi-solid and soft foods[13]. A summary of key guiding principles[14, 15], for feeding 6 to 23-month-old children is provided in the table below along with proximate measures for these guidelines collected in this survey.

The guiding principles for which proximate measures and indicators exist are:

(i) Continued breastfeeding

(ii) Appropriate frequency of meals (but not energy density)

(iii) Appropriate nutrient content of food.

Feeding frequency is used as a proxy for energy intake, requiring children to receive a minimum number of meals/snacks (and milk feeds for non-breastfed children) for their age. Dietary diversity is used to ascertain the adequacy of the nutrient content of the food (not including iron) consumed. For dietary diversity seven food groups were created, for which a child consuming at least four of these is considered to have a better quality diet. In most populations, consumption of at least four food groups means that the child has a high likelihood of consuming at least one animal-source food and at least one fruit or vegetable, in addition to a staple food (grain, root or tuber)[16].

These three dimensions of child feeding are combined into an assessment of children who received appropriate feeding, using the indicator of "minimum acceptable diet". To have a minimum acceptable diet in the previous day, a child must have received:

(i) The appropriate number of meals/snacks/milk feeds

(ii) Food items from at least four food groups

(iii) Breastmilk or at least two milk feeds (for non-breastfed children).

11 Bhuta Z. et al. (2013). Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost? The Lancet June 6, 2013.

12 WHO (2003). Implementing the Global Strategy for Infant and Young Child Feeding. Meeting Report Geneva, 3-5 February 2003.

13 WHO (2003). Global Strategy for Infant and Young Child Feeding.

14 PAHO (2003). Guiding principles for complementary feeding of the breastfed child.

15 WHO (2005). Guiding principles for feeding non-breastfed children 6-24 months of age.

16 WHO (2008).Indicators for assessing infant and young child feeding practices. Part 1: Definitions.

Guiding Principle (age 6-23 months)	Proximate measures	Table
Continue frequent, on-demand breastfeeding for two years and beyond	Breastfed in the last 24 hours	NU.4
Appropriate frequency and energy density of meals	**Breastfed children** Depending on age, two or three meals/ snacks provided in the last 24 hours **Non-breastfed children** Four meals/snacks and/or milk feeds provided in the last 24 hours	NU.6
Appropriate nutrient content of food	Four food groups[17] eaten in the last 24 hours	NU.6
Appropriate amount of food	No standard indicator exists	na
Appropriate consistency of food	No standard indicator exists	na
Use of vitamin-mineral supplements or fortified products for infant and mother	No standard indicator exists	na
Practice good hygiene and proper food handling	While it was not possible to develop indicators to fully capture programme guidance, one standard indicator does cover part of the principle: Not feeding with a bottle with a nipple	NU.9
Practice responsive feeding, applying the principles of psycho-social care	No standard indicator exists	na

17 Food groups used for assessment of this indicator are 1) Grains, roots and tubers, 2) legumes and nuts, 3) dairy products (milk, yogurt, cheese), 4) flesh foods (meat, fish, poultry and liver/organ meats), 5) eggs, 6) vitamin-A rich fruits and vegetables and 7) other fruits and vegetables.

Table NU.3: Initial breastfeeding

Percentage of last live-born children in the last two years who were ever breastfed, breastfed within one hour of birth, within one day of birth, and percentage who received a prelacteal feed, Viet Nam, 2014

	Percentage of children who were first breastfed:			Percentage who received a prelacteal feed	Number of last live-born children in the last two years
	Percentage who were ever breastfed[1]	Within one hour of birth[2]	Within one day of birth		
Total	**96.9**	**26.5**	**67.8**	**72.2**	**1464**
Region					
Red River Delta	97.4	20.9	70.8	81.8	343
Northern Midlands and Mountainous area	96.0	31.1	69.4	58.7	230
North Central and Central coastal area	98.6	28.5	69.1	71.2	300
Central Highlands	98.1	35.1	69.7	59.5	109
South East	93.4	22.1	57.1	79.3	242
Mekong River Delta	98.0	27.8	70.1	71.0	239
Area					
Urban	95.7	23.8	57.9	83.2	428
Rural	97.5	27.6	71.9	67.6	1037
Months since last birth					
0-11 months	97.3	26.0	64.4	73.4	680
12-23 months	97.0	26.7	71.4	71.4	744
Assistance at delivery					
Skilled attendant	97.5	25.8	68.1	74.7	1373
Traditional birth attendant	(100)	(42.3)	(75.9)	(29.1)	12
Other	99.6	43.2	69.6	37.8	64
No one/Missing	*	*	*	*	16
Place of delivery					
Home	99.7	45.1	73.5	32.9	82
Health facility	97.5	25.5	68.0	75.1	1371
Public	97.5	25.4	68.4	74.6	1313
Private	97.0	28.4	58.3	85.2	58
Other/DK/Missing	*	*	*	*	11
Mother's education					
None	93.1	39.8	68.9	36.9	67
Primary	97.6	27.5	65.8	66.1	182
Lower Secondary	97.2	27.7	73.1	69.3	529
Upper Secondary	98.0	27.0	66.7	74.7	340
Tertiary	95.9	20.8	61.5	83.9	347

	Percentage of children who were first breastfed:				
	Percentage who were ever breastfed[1]	Within one hour of birth[2]	Within one day of birth	**Percentage who received a prelacteal feed**	**Number of last live-born children in the last two years**
Wealth Index quintiles					
Poorest	95.2	31.2	68.9	50.0	294
Second	96.8	25.5	70.5	68.7	288
Middle	98.6	28.2	70.3	77.5	292
Fourth	97.8	24.6	67.7	80.0	314
Richest	96.1	22.7	61.1	84.8	275
Ethnicity of household head					
Kinh/Hoa	97.0	24.4	67.6	76.5	1215
Ethnic Minorities	96.4	36.3	68.4	50.8	250

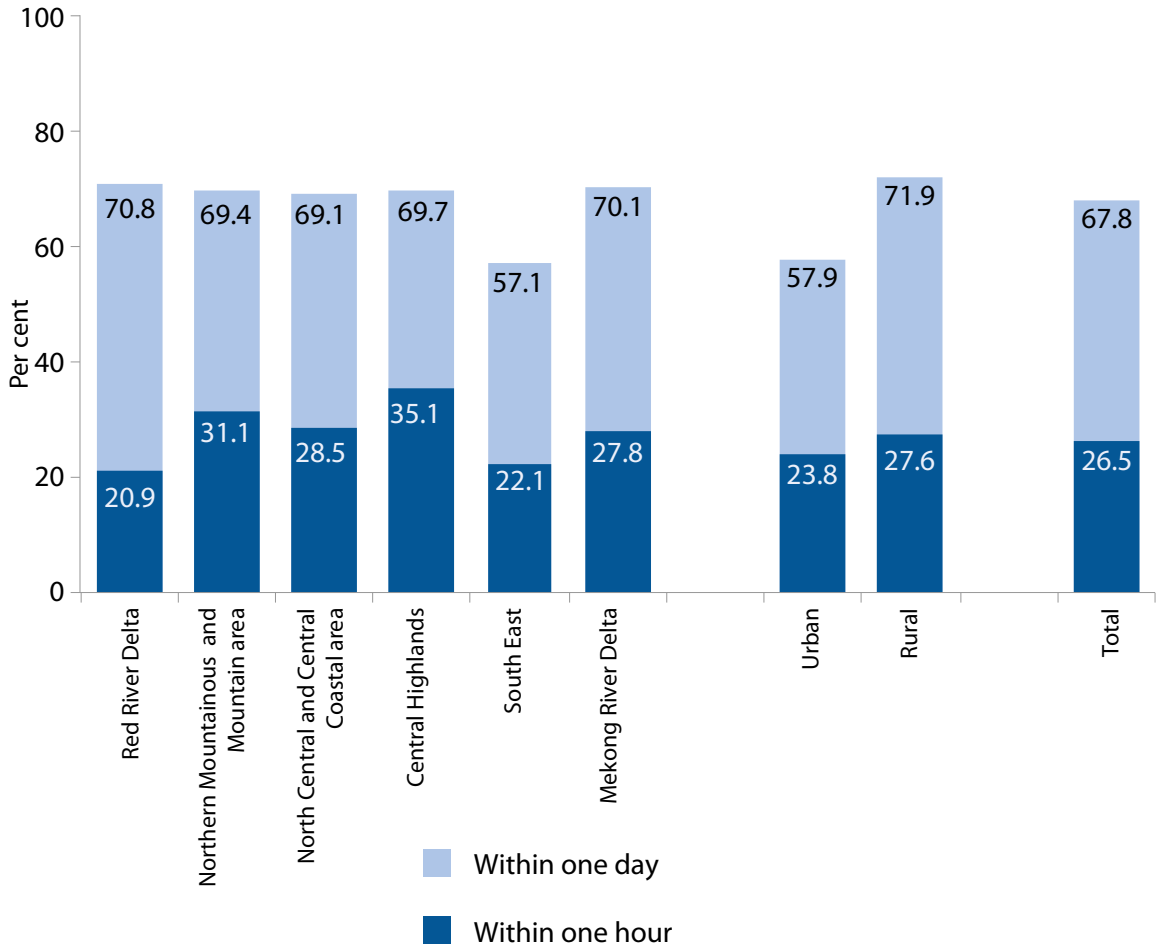
[1] **MICS Indicator 2.5 - Children ever breastfed**
[2] **MICS Indicator 2.6 - Early initiation of breastfeeding**
Note:
Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases
Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table NU.3 is based on mothers' reports of what their last-born child, born within the last two years, was fed in the first few days of life. It indicates the proportion who were ever breastfed, those who were first breastfed within one hour and one day of birth as well as those who received a prelacteal feed[18]. Although a very important step in management of lactation and establishment of a physical and emotional relationship between baby and mother, only 26.5 per cent of babies were breastfed for the first time within one hour of birth, while 67.8 per cent of newborns in Viet Nam started breastfeeding within one day of birth.

The highest proportion of children breastfed within one hour of birth was recorded in the Central Highlands (35.1 per cent), while the lowest proportion was recorded in the Red River Delta (20.9 per cent). Women in rural areas, those in the poorest wealth index quintile and ethnic minority women are more likely to breastfeed their children within one hour of birth than those from urban areas, the richest wealth index quintile and Kinh/Hoa group, respectively. Tertiary-educated women are less likely to breastfeed their children within one hour than those with other educational levels.

18 Prelacteal feed refers to the provision any liquid or food, other than breastmilk, to a newborn during the period when breast milk flow is generally being established (estimated here as the first three days of life).

Figure NU.2: Initiation of breastfeeding, Viet Nam MICS 2014



The set of Infant and Young Child Feeding (IYCF) indicators reported in Tables NU.4 through NU.8 are based on mothers' reports of consumption of food and fluids during the day or night prior to being interviewed. Data are subject to a number of limitations, some related to the respondent's ability to provide a full report on the child's liquid and food intake due to recall errors as well as lack of knowledge in cases where the child was fed by other individuals.

In Table NU.4, breastfeeding status is presented for both exclusively breastfed and predominantly breastfed referring to infants aged less than six months who are breastfed, distinguished by the former only allowing vitamins, mineral supplements and medicine and the latter allowing also plain water and non-milk liquids. The table also shows continued breastfeeding of children at 12-15 and 20-23 months of age.

Table NU.4: Breastfeeding

Percentage of living children according to breastfeeding status at selected age groups, Viet Nam, 2014

	Children aged 0-5 months			Children aged 12-15 months		Children aged 20-23 months	
	Percentage exclusively breastfed[1]	Percentage predominantly breastfed[2]	Number of children	Percentage breastfed (Continued breastfeeding at one year)[3]	Number of children	Percentage breastfed (Continued breastfeeding at two years)[4]	Number of children
Total	**24.3**	**49.0**	**350**	**65.6**	**260**	**21.8**	**233**
Sex							
Male	23.8	51.2	191	65.5	131	21.2	136
Female	25.0	46.3	159	65.7	130	22.7	98
Region							
Red River Delta	28.9	48.0	78	(64.5)	49	(34.6)	51
Northern Midlands and Mountainous area	41.0	55.3	61	87.2	50	(11.5)	28
North Central and Central coastal area	26.7	54.2	77	(82.8)	45	(20.6)	50
Central Highlands	28.7	57.4	25	(81.3)	17	42.3	23
South East	7.4	29.2	56	(31.0)	41	(13.4)	38
Mekong River Delta	(11.1)	(52.4)	54	54.7	58	(11.7)	44
Area							
Urban	20.8	42.7	99	57.7	84	18.0	84
Rural	25.8	51.4	251	69.4	177	23.9	149
Mother's education							
None	*	*	14	*	12	*	15
Primary	(24.2)	(53.1)	44	(76.7)	31	(16.9)	38
Lower Secondary	25.0	52.4	144	68.8	85	28.1	76
Upper Secondary	28.1	48.4	72	62.1	73	18.3	48
Tertiary	16.5	38.3	76	55.1	60	14.0	57
Wealth Index quintiles							
Poorest	41.6	74.0	72	81.2	53	24.7	50
Second	20.6	45.0	76	(78.9)	52	(31.0)	47
Middle	24.1	44.7	79	(69.5)	48	(22.3)	34
Fourth	12.0	39.7	66	58.2	60	18.7	54
Richest	22.2	39.4	57	38.9	47	13.3	49
Ethnicity of household head							
Kinh/Hoa	19.7	45.5	283	58.6	209	18.8	195
Ethnic Minorities	44.0	63.4	67	94.2	52	37.0	39

[1] **MICS Indicator 2.7 - Exclusive breastfeeding under six months**

[2] **MICS Indicator 2.8 - Predominant breastfeeding under six months**

[3] **MICS Indicator 2.9 - Continued breastfeeding at one year**

[4] **MICS Indicator 2.10 - Continued breastfeeding at two years**

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Approximately 24.3 per cent of children aged less than six months were exclusively breastfed. With 49 per cent predominantly breastfed, it was evident that water-based liquids were displacing feeding of breastmilk to a greater degree. By the age of 12-15 months, 65.6 per cent of children were breastfed and by 20-23 months, 21.8 per cent were breastfed. However, male children were predominantly breastfed more than female children. Exclusive or continued breastfeeding was more common in rural areas, among ethnic minority households.

Figure NU.3 shows the detailed pattern of breastfeeding by child's age in months. Within in the first 4-5 months of life, the majority of children received breastfeeding, liquids or foods other than breast milk, with other milk/formula liquid(s), even at an early age of 0-1 months. At 4-5 months old, the percentage of children exclusively breastfed was below 15 per cent. At 6-13 months, about 80 per cent of children were breastfed and/or received other foods. Only 20 per cent of children received breast milk aged 22-23 months.

Figure NU.3: Infant and young child feeding patterns by age, Viet Nam MICS 2014

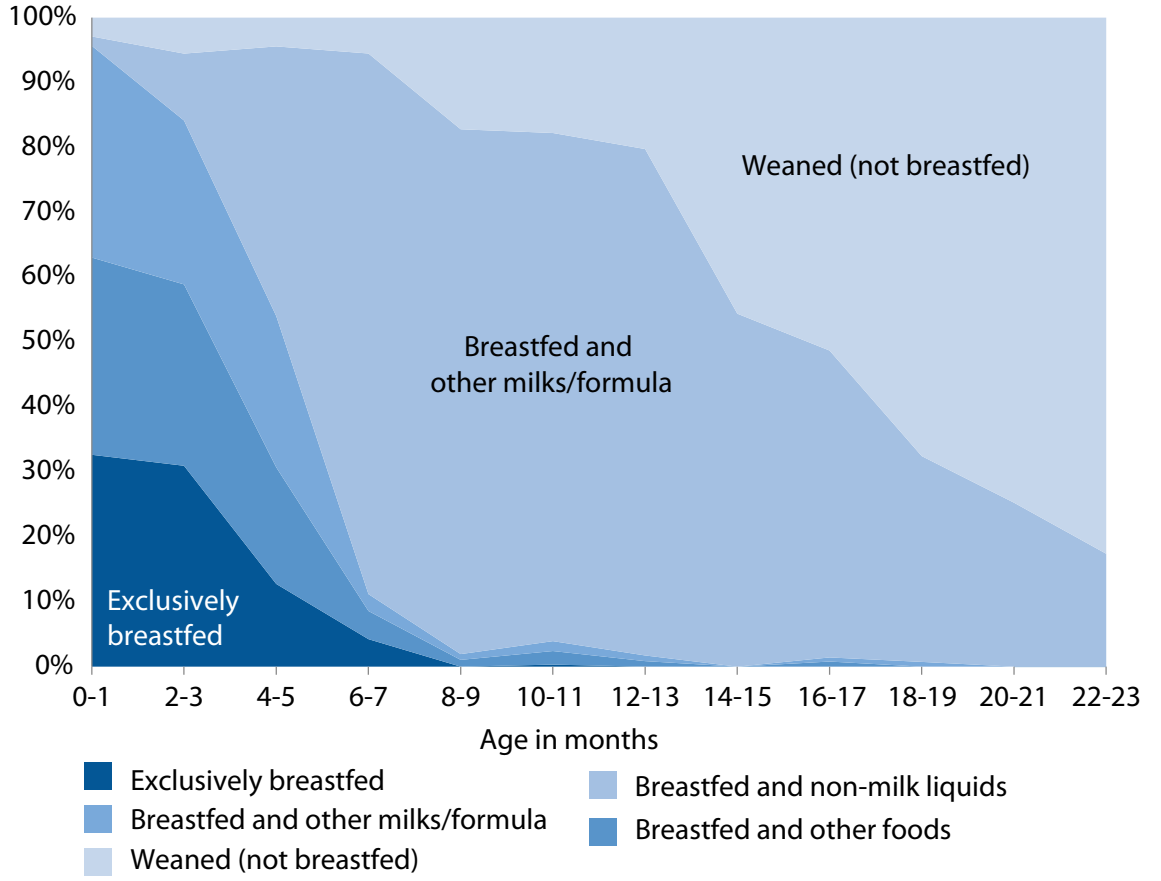


Table NU.5 shows the median duration of breastfeeding by selected background characteristics. Among children age under 3 years, the median duration was 15.8 months for any breastfeeding, 0.6 months for exclusive breastfeeding and 2.4 months for predominant breastfeeding. The duration of breastfeeding is longer among mothers with lower educational levels, those in rural areas or in ethnic minority households (19.1 months). In terms of regional disparities, mothers in the Central Highlands tend to breastfeed for a longer period, while those in the South East had the lowest duration of breastfeeding (9.9 months).

Table NU.5: Duration of breastfeeding

Median duration of any breastfeeding, exclusive breastfeeding and predominant breastfeeding among children aged 0-35 months, Viet Nam, 2014

	Median duration (in months) of:			Number of children aged 0-35 months
	Any breastfeeding[1]	Exclusive breastfeeding	Predominant breastfeeding	
Median	**15.8**	**0.6**	**2.4**	**2119**
Sex				
Male	15.6	0.7	2.6	1128
Female	15.9	0.5	1.7	991
Region				
Red River Delta	15.9	0.7	2.4	502
Northern Midlands and Mountainous area	17.2	0.7	2.1	325
North Central and Central coastal area	17.0	0.4	3.4	433
Central Highlands	18.1	1.2	3.1	148
South East	9.9	0.5	0.7	343
Mekong River Delta	14.0	0.5	2.8	368
Area				
Urban	14.8	0.5	0.9	635
Rural	16.2	0.6	2.7	1484
Mother's education				
None	20.2	2.2	3.6	116
Primary	15.8	0.5	3.1	286
Lower Secondary	16.1	0.6	2.9	754
Upper Secondary	15.7	0.6	2.4	476
Tertiary	14.8	0.4	0.7	487
Wealth Index quintiles				
Poorest	17.9	0.7	4.9	425
Second	16.3	0.7	2.3	427
Middle	15.9	0.5	2.1	420
Fourth	15.3	0.5	0.6	439
Richest	12.0	0.4	0.6	408
Ethnicity of household head				
Kinh/Hoa	15.0	0.5	2.0	1764
Ethnic Minorities	19.1	1.9	4.1	355
Mean	**16.5**	**1.5**	**3.1**	**2119**

[1] MICS Indicator 2.11 - Duration of breastfeeding

The age-appropriateness of breastfeeding of children under age 24 months is provided in Table NU.6. Different criteria of feeding are used depending on the age of the child. For infants aged 0-5 months, exclusive breastfeeding is considered as age-appropriate feeding, while children aged 6-23 months were considered to be appropriately fed if they are receiving breast milk and solids, semi-solids or soft food. As a result of feeding patterns, only 53.9 per cent of children aged 6-23 months were appropriately breastfed and age-appropriate breastfeeding among all

children aged 0-23 months drops to 46.9 per cent. There was no considerable sex differential in breastfeeding or appropriate breastfeeding. Among the regions, age appropriate breastfeeding among children aged 0-23 months was highest in Northern Midlands and Mountainous area (57.3 per cent) and lowest in South East (27.4 per cent). It was high (64.3 per cent) among children living in households whose heads were ethnic minority.

Table NU.6: Age-appropriate breastfeeding

Percentage of children aged 0-23 months who were appropriately breastfed during the previous day, Viet Nam, 2014

	Children aged 0-5 months		Children aged 6-23 months		Children aged 0-23 months	
	Percentage exclusively breastfed[1]	Number of children	Percentage currently breastfeeding and receiving solid, semi-solid or soft foods	Number of children	Percentage appropriately breastfed[2]	Number of children
Total	**24.3**	**350**	**53.9**	**1128**	**46.9**	**1478**
Sex						
Male	23.8	191	52.8	600	45.8	791
Female	25.0	159	55.1	528	48.2	687
Region						
Red River Delta	28.9	78	58.0	270	51.5	348
Northern Midlands and Mountainous area	41.0	61	63.2	167	57.3	228
North Central and Central coastal area	26.7	77	60.5	233	52.1	309
Central Highlands	28.7	25	65.6	82	57.0	107
South East	7.4	56	33.5	183	27.4	239
Mekong River Delta	(11.1)	54	46.3	193	38.6	246
Area						
Urban	20.8	99	45.8	337	40.1	436
Rural	25.8	251	57.3	790	49.7	1042
Mother's education						
None	*	14	59.4	51	55.5	65
Primary	(24.2)	44	50.7	140	44.4	184
Lower Secondary	25.0	144	58.6	392	49.6	536
Upper Secondary	28.1	72	53.1	272	47.9	344
Tertiary	16.5	76	48.4	272	41.5	349
Wealth Index quintiles						
Poorest	41.6	72	64.0	218	58.4	290
Second	20.6	76	59.7	220	49.7	296
Middle	24.1	79	56.8	218	48.1	296
Fourth	12.0	66	47.9	247	40.3	314
Richest	22.2	57	42.2	225	38.1	282
Ethnicity of household head						
Kinh/Hoa	19.7	283	50.5	949	43.4	1232
Ethnic Minorities	44.0	67	71.9	179	64.3	246

[1] **MICS Indicator 2.7 - Exclusive breastfeeding under six months**

[2] **MICS Indicator 2.12 - Age-appropriate breastfeeding**

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Overall, 90.7 per cent of infants aged 6-8 months received solid, semi-solid or soft foods at least once during the previous day (Table NU.7). Among currently breastfeeding infants this percentage was 90.5.

Table NU.7: Introduction of solid, semi-solid or soft foods

Percentage of infants aged 6-8 months who received solid, semi-solid, or soft foods during the previous day, Viet Nam, 2014

	Currently breastfeeding		Currently not breastfeeding		All	
	Percentage receiving solid, semi-solid or soft foods	Number of children aged 6-8 months	Percentage receiving solid, semi-solid or soft foods	Number of children aged 6-8 months	Percentage receiving solid, semi-solid or soft foods[1]	Number of children aged 6-8 months
Total	**90.5**	**143**	*	**12**	**90.7**	**155**
Sex						
Male	92.7	75	*	5	92.1	81
Female	88.1	67	*	7	89.2	74
Area						
Urban	(98.1)	32	*	4	(95.7)	36
Rural	88.3	111	*	9	89.2	119

1 MICS Indicator 2.13 - Introduction of solid, semi-solid or soft foods

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Overall, nine-in-10 children age 6-23 months were receiving solid, semi-solid and soft foods the minimum number of times, as shown in Table NU.8. There was no sex differential. The proportion of children receiving the minimum dietary diversity or foods from at least four food groups, was much lower than that for minimum meal frequency. This indicates a need to focus on improving quality, dietary diversity and nutrient intake among this vulnerable group. A higher proportion of older (18-23 months old) children (88.9 per cent) achieved the minimum dietary diversity compared to younger (6-8 months old) children (45 per cent).

The overall assessment using the indicator of minimum acceptable diet revealed that only 59.0 per cent were benefiting from a diet sufficient in both diversity and frequency. While there was little difference between urban and rural areas, the percentage of children receiving a minimum acceptable diet was highest in the North Central and Central coastal area (71.2 per cent) and lowest in the Mekong River Delta (44.6 per cent), as well as highest for children whose mother had a tertiary education (74.5 per cent) in contrast to 21.7 per cent for women with no education. There were also noticeable differences between the richest household (73.3 per cent) and the poorest households (32.0 per cent) as well as between Kinh/Hoa (63.0 per cent) and ethnic minorities (38.0 per cent).

Table NU.8: Infant and young child feeding practices

Percentage of children aged 6-23 months who received appropriate liquids and solid, semi-solidor soft foods the minimum number of times or more during the previous day, by breastfeeding status, Viet Nam, 2014

	Currently breastfeeding				Currently not breastfeeding					All			
	Percentage of children who received:				Percentage of children who received:					Percentage of children who received:			
	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[1,c]	Number of children aged 6-23 months	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2,c]	At least two milk feeds[3]	Number of children aged 6-23 months	Minimum dietary diversity[4,a]	Minimum meal frequency[5,b]	Minimum acceptable diet[c]	Number of children age 6-23 months
Total	**66.4**	**87.1**	**62.4**	**633**	**90.2**	**95.1**	**54.5**	**89.5**	**468**	**76.9**	**90.5**	**59.0**	**1128**
Sex													
Male	66.4	87.0	62.1	328	90.1	95.7	52.6	89.2	254	77.0	90.8	57.9	600
Female	66.4	87.1	62.7	305	90.4	94.4	56.7	89.9	214	76.7	90.1	60.3	528
Age													
6-8 months	41.7	84.8	41.2	143	*	*	*	*	11	45.0	85.9	41.9	155
9-11 months	64.6	81.7	57.2	150	(90.1)	(95.1)	(64.0)	(91.4)	29	69.3	83.9	58.3	183
12-17 months	74.2	89.0	70.2	236	90.8	97.4	52.8	92.2	147	80.8	92.2	63.5	395
18-23 months	85.4	93.6	81.7	103	90.3	93.8	54.5	87.5	281	88.9	93.7	61.8	395
Region													
Red River Delta	73.6	90.0	71.3	164	96.3	98.2	66.7	96.2	102	82.6	93.2	69.5	270
Northern Midlands and Mountainous area	52.4	83.7	50.6	114	79.3	92.5	44.3	67.5	51	60.9	86.4	48.7	167
North Central and Central coastal area	79.7	90.6	73.7	142	94.3	92.2	67.2	92.8	87	84.7	91.2	71.2	233
Central Highlands	51.3	84.8	48.0	56	87.7	93.3	55.4	77.5	25	63.3	87.4	50.3	82
South East	74.7	82.6	67.4	65	95.0	98.0	49.6	96.0	107	87.4	92.1	56.3	183
Mekong River Delta	53.5	84.9	48.7	91	81.3	93.2	40.6	87.2	96	68.9	89.2	44.6	193
Area													
Urban	78.3	90.4	73.4	157	94.0	97.1	57.4	95.3	169	86.5	93.9	65.1	337
Rural	62.5	85.9	58.8	476	88.1	94.0	52.8	86.3	299	72.7	89.1	56.5	790

	Currently breastfeeding				Currently not breastfeeding					All			
	Percentage of children who received:				Percentage of children who received:					Percentage of children who received:			
	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[1,c]	Number of children aged 6-23 months	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2,c]	At least two milk feeds[3]	Number of children aged 6-23 months	Minimum dietary diversity[4,a]	Minimum meal frequency[5,b]	Minimum acceptable diet[c]	Number of children age 6-23 months
Mother's education													
None	(24.1)	(73.8)	(24.1)	37	*	*	*	*	12	40.0	74.2	21.7	51
Primary	44.5	78.7	41.5	76	81.7	91.1	36.9	81.4	58	61.1	84.1	39.5	140
Lower Secondary	67.0	90.6	64.7	234	87.5	93.9	42.8	82.8	150	75.5	91.9	56.2	392
Upper Secondary	76.2	89.0	68.4	148	92.8	96.7	59.5	96.1	122	83.9	92.5	64.4	272
Tertiary	78.2	87.0	73.8	138	96.1	98.8	75.4	97.5	126	86.7	92.6	74.5	272
Wealth Index quintiles													
Poorest	38.4	79.8	37.1	148	71.2	78.8	19.9	60.3	63	49.7	79.5	32.0	218
Second	63.9	85.6	58.2	138	89.6	95.7	50.4	85.4	74	73.8	89.2	55.5	220
Middle	68.6	87.7	62.0	128	88.9	95.4	56.2	91.3	88	77.1	90.8	59.6	218
Fourth	86.1	92.7	83.1	124	92.9	98.1	60.8	96.2	117	89.1	95.3	72.3	247
Richest	85.2	92.3	81.5	95	98.6	100	67.1	99.2	126	92.5	96.7	73.3	225
Ethnicity of household head													
Kinh/Hoa	73.2	89.3	68.9	496	91.4	96.1	56.3	92.5	429	81.8	92.4	63.0	949
Ethnic Minorities	41.8	78.9	38.9	137	77.4	84.8	34.7	56.9	39	50.4	80.2	38.0	179

[1] MICS Indicator 2.17a - Minimum acceptable diet (breastfed)

[2] MICS Indicator 2.17b - Minimum acceptable diet (non-breastfed)

[3] MICS i=Indicator 2.14 - Milk feeding frequency for non-breastfed children

[4] MICS Indicator 2.16 - Minimum dietary diversity

[5] MICS Indicator 2.15 - Minimum meal frequency

a Minimum dietary diversity is defined as receiving foods from at least four of seven food groups: 1) Grains, roots and tubers, 2) legumes and nuts, 3) dairy products (milk, yogurt, cheese), 4) flesh foods (meat, fish, poultry and liver/organ meats), 5) eggs, 6) vitamin-A rich fruits and vegetables and 7) other fruits and vegetables.

b Minimum meal frequency among currently breastfeeding children is defined as children who also received solid, semi-solid, or soft foods twice or more daily for children aged 6-8 months and three times or more daily for children aged 9-23 months. For non-breastfeeding children aged 6-23 months it is defined as receiving solid, semi-solid or soft foods, or milk feeds, at least four times.

c The minimum acceptable diet for breastfed children aged 6-23 months is defined as receiving the minimum dietary diversity and the minimum meal frequency, while it for non-breastfed children further requires at least two milk feedings and that the minimum dietary diversity is achieved without counting milk feeds.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

The continued practice of bottle-feeding is a concern because of possible contamination due to unsafe water and lack of hygiene in preparation. Table NU.9 shows that bottle-feeding is prevalent in Viet Nam, with 37.6 per cent of children aged under 6 months fed using a bottle with a nipple. Among children aged 0-23 months, 44.1 per cent were fed using a bottle with a nipple. This practice was observed much more among mothers with tertiary educational levels and those in households in the higher wealth index quintiles. It was also observed among Kinh/Hoa households, where about half of all children aged 0-23 months were fed using a bottle with a nipple in contrast to ethnic minority households (15.7 per cent).

Table NU.9: Bottle-feeding

Percentage of children aged 0-23 months fed with a bottle with a nipple during the previous day, Viet Nam, 2014

	Percentage of children aged 0-23 months fed with a bottle with a nipple[1]	Number of children aged 0-23 months
Total	**44.1**	**1478**
Sex		
Male	44.4	791
Female	43.7	687
Age		
0-5 months	37.6	350
6-11 months	47.2	338
12-23 months	45.6	790
Region		
Red River Delta	35.7	348
Northern Midlands and Mountainous area	20.6	228
North Central and Central coastal area	40.8	309
Central Highlands	35.6	107
South East	68.2	239
Mekong River Delta	62.0	246
Area		
Urban	55.5	436
Rural	39.3	1042
Mother's education		
None	21.1	65
Primary	47.7	184
Lower Secondary	38.3	536
Upper Secondary	46.5	344
Tertiary	52.9	349

	Percentage of children aged 0-23 months fed with a bottle with a nipple[1]	Number of children aged 0-23 months
Wealth Index quintiles		
Poorest	24.9	290
Second	33.9	296
Middle	46.7	296
Fourth	56.0	314
Richest	58.5	282
Ethnicity of household head		
Kinh/Hoa	49.7	1232
Ethnic Minorities	15.7	246

[1] MICS Indicator 2.18 - Bottle feeding

CHAPTER VI

CHILD HEALTH

VI. CHILD HEALTH

Vaccinations

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. In addition, the Global Vaccine Action Plan (GVAP) was endorsed by the 194 Member States of the World Health Assembly in May 2012 to achieve the Decade of Vaccines vision by delivering universal access to immunization. Immunization has saved the lives of millions of children in the four decades since the launch of the Expanded Programme on Immunization (EPI) in 1974. Worldwide there are still millions of children not reached by routine immunization and as a result, vaccine-preventable diseases cause more than two million deaths each year.

According to UNICEF and WHO guidelines, a child should receive a BCG vaccination to protect against tuberculosis, three doses of DPT containing vaccine to protect against diphtheria, pertussis, and tetanus, three doses of Polio vaccine and a first dose of measles vaccination

before a child's first birthday. The recommended number and timing of most other doses also vary slightly with local epidemiology and may include booster doses later in childhood.

The vaccination schedule followed by the Viet Nam National Immunization Programme provides all the above-mentioned vaccinations as well as three doses of vaccine against Hepatitis B, three doses of Haemophilus influenzae type b (Hib) vaccine. All vaccinations should be received during the first year of life. Taking into consideration this vaccination schedule, the estimates for full immunization coverage from Viet Nam MICS 2014 are based on children aged 12-23.

Information on vaccination coverage was collected for all children under three years of age. All mothers or caretakers were asked to provide vaccination cards. If the vaccination card for a child was available, interviewers copied vaccination information from the cards onto the Viet Nam MICS 2014 questionnaire. If no vaccination card was available for the child, the interviewer proceeded to ask the mother to recall whether or not the child had received each of the vaccinations and for Polio, DPT and Hepatitis B, how many doses were received. After this home-based interview, information on vaccinations was also obtained from vaccination records at health facilities for all children. The final vaccination coverage estimates are based on information obtained from vaccination cards and mothers' recall, then supplemented by information from the log books of commune health centres.

Referring to Table DQ.17 in Appendix D, it is seen that 94.4 per cent of children aged 0-35 months had a vaccination card seen by the interviewer in a household or health facility. The percentage of children with vaccination cards seen by the interviewer in a household or health facility was slightly higher in rural areas (95.4 per cent) than in urban areas (92.7 per cent) and lowest in the South East (90.0 per cent) and Mekong River Delta (89.9 per cent).

Table CH.1: Vaccinations in the first years of life

Percentage of children aged 12-23 months and 24-35 months vaccinated against vaccine-preventable childhood diseases at any time before the survey and by their first birthday, Viet Nam, 2014

	Children aged 12-23 months:				Children aged 24-35 months:			
	Vaccinated at any time before the survey according to:				Vaccinated at any time before the survey according to:			
	Thẻ tiêm chủng hoặc trạm y tế	Mẹ khai báo	Thẻ tiêm chủng hoặc mẹ khai báo	Vaccinated by 12 months of age [a]	Vaccination card	Mother's report	Either	Vaccinated by 12 months of age
BCG[1]	**92.8**	**5.2**	**98.0**	**98.0**	**87.2**	**10.5**	**97.7**	**96.9**
Polio								
1	92.2	5.0	97.2	96.9	87.1	9.6	96.8	95.9
2	90.7	4.9	95.6	95.1	86.6	9.0	95.6	94.0
3[2]	88.8	4.3	93.0	91.9	85.6	7.9	93.6	91.7
DPT								
1	89.2	7.1	96.3	96.3	84.3	11.9	96.2	96.2
2	87.6	5.9	93.5	93.5	84.3	10.4	94.7	94.7
3[3]	83.4	5.3	88.6	88.6	84.6	8.6	93.2	93.2
HepB								
At birth	70.9	7.6	78.5	78.5	61.8	9.0	70.8	70.8
1	88.3	6.9	95.2	95.2	81.1	13.6	94.7	94.7
2	86.7	5.6	92.3	92.3	82.7	10.6	93.3	93.3
3[4]	82.5	4.9	87.4	87.4	82.1	9.8	92.0	92.0
Hib								
1	88.8	6.2	95.0	95.0	83.2	12.1	95.3	95.3
2	87.1	5.3	92.3	92.3	83.9	9.4	93.4	93.1
3[5]	82.4	5.0	87.5	87.5	84.1	8.0	92.1	92.1
Measles (MCV1)[7]	85.7	5.2	90.9	86.2	86.5	7.7	94.3	88.8
Fully vaccinated[8, b]	80.3	2.2	82.4	75.6	82.7	4.6	87.3	80.0
No vaccinations	0.0	1.5	1.5	1.5	0.3	1.6	1.9	1.9
Number of children	790	790	790	790	641	641	641	641

[1] **MICS Indicator 3.1 - Tuberculosis immunization coverage**

[2] **MICS Indicator 3.2 - Polio immunization coverage**

[3] **MICS indicator 3.3 - Diphtheria, pertussis and tetanus (DPT) immunization coverage**

[4] **MICS Indicator 3.5 - Hepatitis B immunization coverage**

[5] **MICS indicator 3.6 – Haemophilus influenzae type B (Hib) immunization coverage**

[7] **MICS Indicator 3.4, MDG indicator 4.3 - Measles immunization coverage**

[8] **MICS Indicator 3.8 - Full immunization coverage**

a All MICS indicators refer to results in this column

b Includes: BCG, Polio3, DPT3, HepB3, Hib3, and Measles (MCV1) as per the vaccination schedule in Viet Nam.

The percentage of children aged 12-23 months and 24-35 months who received each of the specific vaccinations by source of information (vaccination card or vaccination records at health facilities and mother's recall) is shown in Table CH.1. The denominators for the table are comprised of children aged 12-23 months and 24-35 months. In the first three columns in each panel of the table, the numerator includes all children who were vaccinated at any time before the survey according to the vaccination card or vaccination records at health facilities or the mother's report. In the last column in each panel, only children who were vaccinated before their first birthday, as recommended, are included. For children without vaccination cards/records, the proportion of vaccinations given before the first birthday is assumed to be the same as for children with vaccination cards/records.

According to Table CH.1, the fully vaccinated rate of children aged 12-23 months was 75.6 per cent and children aged 24-35 months was 80.0 per cent. Information from vaccination cards or health facilities seen as more reliable than mothers' reports, was 80.3 compared to 2.2 per cent, respectively for children aged 12-23 months and 82.7 against 4.6 per cent for children aged 24-35 months.

Regarding vaccinations by 12 months of age against different childhood diseases, the proportion of children vaccinated against Hepatitis B at birth was lowest, 78.5 per cent and 70.8 per cent, respectively for the children aged 12-23 months and 24-35 months. The second lowest vaccinated proportion was for measles, at 86.2 and 88.8 per cent, respectively for the two above-mentioned age groups.

Figure CH.1 shows the proportion of children vaccinated. Approximately 98.0 per cent of children age 12-23 months received a BCG vaccination by the age of 12 months and the first dose of DPT-HepB-Hib vaccine was given to 96.3, 95.2 and 95.0 per cent. The percentage declines to 93.5, 92.3 and 92.3 per cent for the second dose of DPT-HepB-Hib and declines to 88.6, 87.4 and 87.5 per cent, respectively for the third dose. Similarly, 96.9 per cent of children received Polio 1 by age 12 months and this declines to 91.9 per cent by the third dose. The coverage for the first dose of measles vaccine by 12 months is lower than for the other vaccines at 86.2 per cent. The primary reason is that although 90.9 per cent of children 12-23 months received the vaccine, only 86.2 per cent had received it by their first birthday. As a result, the percentage of children who had all the recommended vaccinations by their first birthday is low at only 75.6 per cent.

Figure CH.1: Vaccinations by age of 12 months, Viet Nam MICS 2014

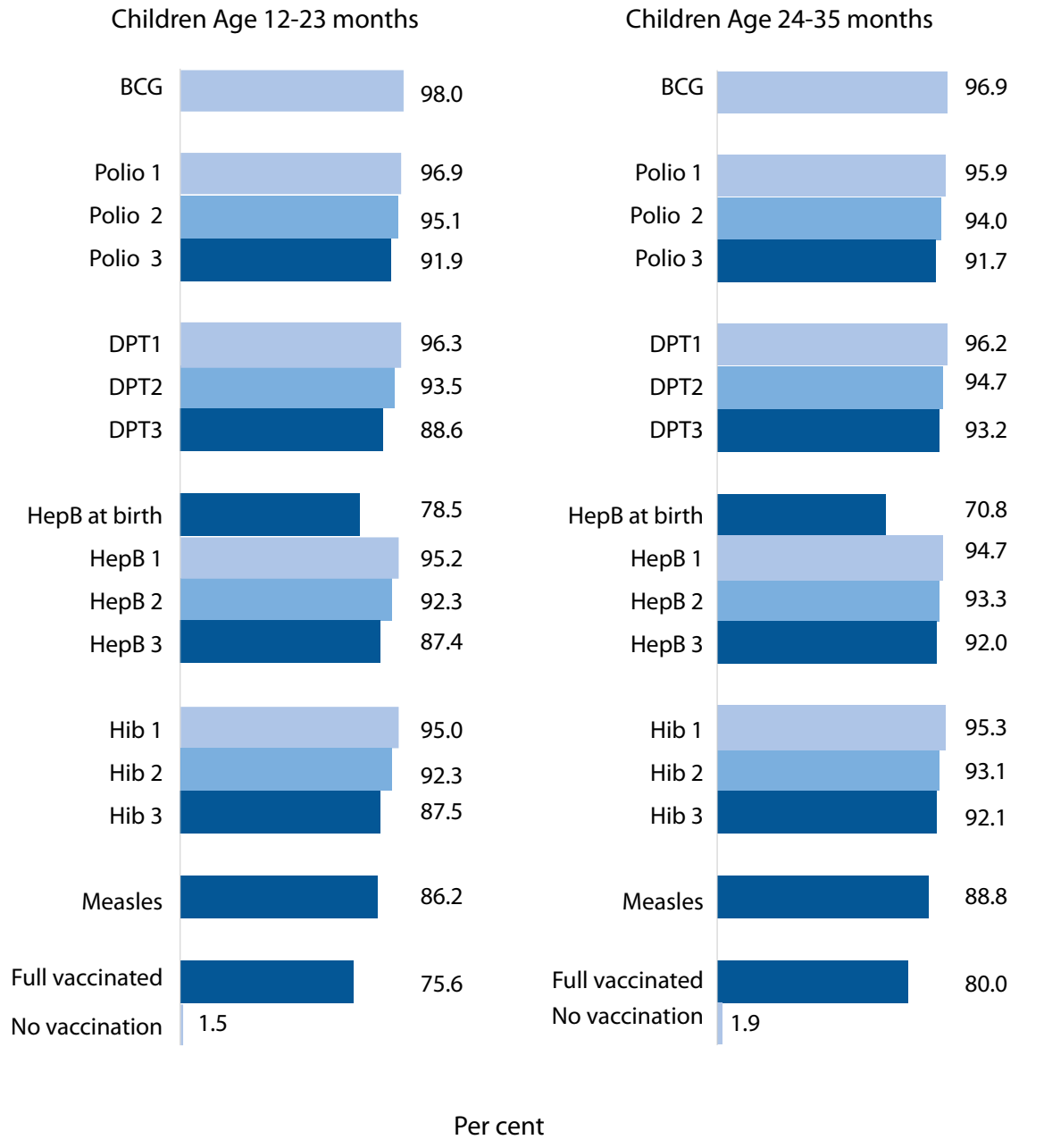


Table CH.2: Vaccinations by background characteristics

Percentage of children aged 12-23 months currently vaccinated against vaccine-preventable childhood diseases, Viet Nam, 2014

	Percentage of children who received:																	Percentage with vaccination card seen	Number of children aged 12-23 months
	BCG	Polio			DPT			HepB				Hib			Measles (MCV1)	Full[a]	None		
		1	2	3	1	2	3	At birth	1	2	3	1	2	3					
Total	**98.0**	**97.2**	**95.6**	**93.0**	**96.3**	**93.5**	**88.6**	**78.5**	**95.2**	**92.3**	**87.4**	**95.0**	**92.3**	**87.5**	**90.9**	**82.4**	**1.5**	**94.1**	**790**
Sex																			
Male	97.5	96.1	94.8	91.8	95.0	92.3	87.5	76.9	93.6	90.6	85.9	93.1	90.5	85.8	89.3	80.9	2.0	94.0	414
Female	98.5	98.4	96.5	94.5	97.7	94.9	89.9	80.2	97.0	94.2	89.1	97.1	94.3	89.3	92.7	84.1	1.0	94.2	376
Region																			
Red River Delta	100	100	98.9	98.3	99.4	98.2	96.0	84.6	99.4	98.9	96.7	99.4	98.2	95.9	97.2	93.7	0.0	96.3	192
Northern Midlands and Mountainous area	94.9	95.3	94.4	90.1	94.8	92.8	83.0	46.5	89.6	87.7	77.1	90.3	88.3	78.4	90.4	71.9	3.0	94.2	113
North Central and Central coastal area	100	98.9	97.2	96.6	97.6	93.1	90.2	87.2	97.1	91.8	88.9	96.0	91.9	88.9	94.0	85.4	0.0	98.4	157
Central Highlands	93.8	92.5	89.9	87.4	89.9	84.2	75.8	61.0	90.0	84.3	76.1	90.5	85.4	77.0	83.6	70.5	5.7	86.5	58
South East	97.2	95.4	92.5	85.7	96.1	92.8	84.7	88.3	97.0	92.8	84.0	96.1	92.8	84.0	82.1	74.7	2.2	90.6	133
Mekong River Delta	98.1	96.5	95.5	93.5	94.5	92.5	90.0	82.4	92.1	90.1	88.6	92.1	90.1	88.6	90.5	83.9	1.9	92.7	137
Area																			
Urban	99.7	99.1	97.6	93.6	98.6	95.6	88.5	84.4	98.0	95.8	88.4	98.0	95.3	87.9	88.8	81.1	0.1	93.8	253
Rural	97.2	96.3	94.6	92.8	95.2	92.5	88.7	75.6	93.9	90.7	86.9	93.6	90.9	87.3	91.9	83.1	2.2	94.3	537

	Percentage of children who received:																Percentage with vaccination card seen	Number of children aged 12-23 months
	BCG	Polio			DPT			HepB				Hib			Measles (MCV1)	Full[a]	None	
		1	2	3	1	2	3	At birth	1	2	3	1	2	3				
Mother's education																		
None	(77.7)	(73.9)	(70.4)	(67.6)	(67.0)	(62.4)	(58.2)	(31.1)	(64.5)	(60.0)	(55.9)	(67.0)	(62.4)	(58.2)	(68.3)	(49.7)	(19.3)	(68.5)	38
Primary	94.9	94.6	90.9	86.5	95.6	89.7	87.8	75.8	95.5	89.6	87.7	95.6	90.0	88.1	87.7	79.8	3.9	86.5	98
Lower Secondary	99.4	97.9	96.3	93.7	96.6	93.9	88.4	78.9	94.7	91.0	85.4	93.8	91.0	85.6	93.3	82.1	0.3	97.1	279
Upper Secondary	100	99.4	99.0	96.0	99.4	98.7	92.5	79.4	98.5	97.9	91.6	98.6	97.9	91.7	92.6	87.6	0.0	96.8	192
Tertiary	99.6	99.9	98.6	97.7	98.1	95.0	90.8	86.6	97.7	95.7	91.4	97.7	94.9	90.6	91.8	84.4	0.1	96.1	184
Wealth Index quintiles																		
Poorest	89.6	88.8	87.1	83.4	87.3	83.9	81.5	55.5	85.9	82.6	80.2	86.6	83.5	81.1	81.8	72.2	8.2	86.5	146
Second	99.5	98.6	94.6	93.6	97.3	92.6	86.4	78.8	96.2	90.9	84.7	95.8	91.1	84.6	93.7	82.5	0.1	93.1	149
Middle	100	98.9	97.9	95.2	97.9	96.2	90.6	80.2	97.5	94.6	89.8	96.4	94.5	89.8	95.5	87.7	0.0	97.6	149
Fourth	100	98.9	98.9	96.4	98.3	95.7	91.3	88.1	96.3	93.7	88.9	96.2	93.6	89.2	93.7	85.1	0.0	96.6	189
Richest	100	100	98.3	95.3	99.3	97.5	91.8	84.6	98.8	98.3	92.0	98.8	97.5	91.3	88.8	83.2	0.0	95.6	158
Ethnicity of household head																		
Kinh/Hoa	99.4	98.5	96.9	94.8	97.6	95.2	90.6	84.0	96.4	93.8	89.1	96.1	93.7	89.2	92.5	84.6	0.5	95.2	672
Ethnic Minorities	89.8	90.1	87.9	83.3	88.3	83.4	76.7	44.4	88.3	83.5	76.8	88.3	83.8	77.1	81.5	69.4	7.4	87.8	118

a Includes: BCG, Polio3, DPT3, HepB3, Hib3, and Measles (MCV1) as per the vaccination schedule in Viet Nam

Note:Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.2 presents vaccination coverage estimates among children 12-23 by background characteristics. The figures indicate children receiving vaccinations at any time up to the date of the survey and are based on information from vaccination cards or health facility records and mothers'/caretakers' reports. Vaccination cards have been seen by the interviewer for 94.1 per cent of children aged 12-23 months, with the highest in North Central and Central coastal area (98.4 per cent) and lowest in the Central Highlands region (86.5 per cent). Overall, this percentage tends to increase in relation to mothers' education, from 68.5 per cent among children of non-educated mothers to 96.1 per cent among children of tertiary-educated mothers.

The proportion of children aged 12-23 months fully vaccinated is 82.4 per cent. Full vaccination coverage was higher among Kinh/Hoa children (84.6 per cent) than ethnic minority children (69.4 per cent). The coverage of full vaccination does not differ significantly between boys (80.9 per cent) and girls (84.1 per cent) and between rural (83.1 per cent) and urban (81.1 per cent) children.

The proportions of children vaccinated in general and by order of doses from first to third dose of Polio, DPT, HepB and Hib are highest in Red River Delta (except for Hepatitis B at birth). The vaccination coverage in the Central Highlands is the lowest of all regions.

By household's wealth index quintile status, full vaccination coverage is lowest among the poorest households (72.2 per cent), while it ranges from 82.5 to 87.7 per cent between households of other wealth categories.

Neonatal Tetanus Protection

One of the MDGs is to reduce by three-quarters the maternal mortality ratio, with one strategy to eliminate maternal tetanus. Following on from the 42nd and 44th World Health Assembly calls for elimination of neonatal tetanus, the global community continues to work to reduce the incidence of neonatal tetanus to less than one case of neonatal tetanus per 1,000 live births in every district by 2015.

The strategy for preventing maternal and neonatal tetanus is to ensure that all pregnant women receive at least two doses of tetanus toxoid vaccine. If a woman has not received at least two doses of tetanus toxoid during a particular pregnancy, she (and her newborn) are also considered to be protected against tetanus if the woman:

- Received at least two doses of tetanus toxoid vaccine, the last within the previous three years
- Received at least three doses, the last within the previous five years
- Received at least four doses, the last within the previous 10 years
- Received five or more doses anytime during her life.

To assess the status of tetanus vaccination coverage, women with a live birth during the two years before the survey were asked if they had received tetanus toxoid injections during the pregnancy for their most recent birth and if so, how many. Women who did not receive two or more tetanus toxoid vaccinations during this recent pregnancy were then asked about tetanus toxoid vaccinations they may have previously received. Interviewers also asked women to present their vaccination cards on which dates of tetanus toxoid were recorded and referred to information from the cards when available.

Table CH.3: Neonatal tetanus protection

Percentage of women aged 15-49 years with a live birth in the last two years protected against neonatal tetanus, Viet Nam, 2014

	Percentage of women who received at least two doses during last pregnancy	Percentage of women who did not receive two or more doses during last pregnancy, but received:				Protected against tetanus[1]	Number of women with a live birth in the last two years
		Two doses, the last within prior three years	Three doses, the last within prior five years	Four doses, the last within prior 10 years	Five or more doses during lifetime		
Total	**59.6**	**22.4**	**0.1**	**0.1**	**0.0**	**82.2**	**1464**
Region							
Red River Delta	52.3	31.8	0.0	0.0	0.0	84.1	343
Northern Midlands and Mountainous area	55.1	15.5	0.0	0.4	0.0	71.0	230
North Central and Central coastal area	67.6	19.6	0.4	0.0	0.0	87.6	300
Central							
Highlands	51.7	12.0	0.0	0.0	0.0	63.7	109
South East	63.7	24.1	0.0	0.0	0.0	87.8	242
Mekong River Delta	63.8	22.1	0.0	0.0	0.0	86.0	239
Area							
Urban	62.7	23.2	0.3	0.0	0.0	86.2	428
Rural	58.3	22.1	0.0	0.1	0.0	80.5	1037
Education							
None	33.1	16.8	0.0	0.0	0.0	49.9	67
Primary	46.5	25.0	0.0	0.0	0.0	71.5	182
Lower Secondary	60.7	21.9	0.0	0.0	0.0	82.6	529
Upper Secondary	65.2	22.3	0.3	0.0	0.0	87.8	340
Tertiary	64.4	23.1	0.0	0.3	0.0	87.7	347
Wealth Index quintiles							
Poorest	51.9	13.2	0.0	0.3	0.0	65.4	294
Second	59.1	20.4	0.0	0.0	0.0	79.5	288
Middle	59.4	24.9	0.0	0.0	0.0	84.3	292
Fourth	66.8	24.1	0.0	0.0	0.0	91.0	314
Richest	60.2	29.9	0.4	0.0	0.0	90.5	275
Ethnicity of household head							
Kinh/Hoa	61.2	24.6	0.1	0.1	0.0	86.0	1215
Ethnic Minorities	51.7	11.7	0.0	0.0	0.0	63.4	250

[1]MICS Indicator 3.9 - Neonatal tetanus protection

Table CH.3 shows the tetanus protection status of women who have had a live birth within the last two years. Overall, 82.2 per cent of women were protected against tetanus, with 59.6 per cent having received at least two doses during the last pregnancy and 22.4 per cent having received two doses within the past three years.

Women living in urban areas (86.2 per cent) were more likely to be better protected against tetanus than those in rural areas (80.5 per cent), while Kinh/Hoa women (86.0 per cent) were more likely to be protected from tetanus than ethnic minority ones (63.4 per cent). Of the six regions, women in the Central Highlands had the lowest levels of protection from tetanus (63.7 per cent). By wealth index quintiles, only 65.4 per cent of women in the poorest quintile were protected from tetanus, compared to 90.5 per cent from the richest quintile.

Care of Illness

A key strategy to accelerate progress towards MDG 4 is to tackle diseases that are the leading killers of children aged under-5. Diarrhoea and pneumonia are two such diseases. The Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD) aims to end preventable pneumonia and diarrhoea death by reducing mortality from pneumonia to three deaths per 1,000 live births and mortality from diarrhoea to one death per 1,000 live births by 2025.

Table CH.4 presents the percentage of children under-5 years of age reported to have had an episode of diarrhoea and symptoms of acute respiratory infection (ARI) during the two weeks preceding the survey. These results are not measures of true prevalence and should not be used as such, but rather the period-prevalence of those illnesses over a two-week time window.

The definition of a case of diarrhoea, in this survey, was the mother's or caretaker's report that the child had such symptoms over the specified period. No other evidence were sought besides the opinion of the mother. A child was considered to have had an episode of ARI if the mother or caretaker reported that the child had, over the specified period, an illness with a cough with rapid or difficult breathing, and whose symptoms were perceived to be due to a problem in the chest or both a problem in the chest and a blocked nose. While this approach is reasonable in the context of the MICS survey, these basically simple case definitions must be kept in mind when interpreting the results, as well as the potential for reporting and recall biases. Further, diarrhoea and ARI are not only seasonal but are also characterized by the often rapid spread of localized outbreaks from one area to another at different points in time. The timing of the survey and the location of the teams might thus considerably affect the results, which must consequently be interpreted with caution. For these reasons, although the period-prevalence over a two-week time window was reported, these data should not be used to assess the epidemiological characteristics of these diseases but rather to obtain denominators for indicators related to use of health services and treatment.

Table CH.4: Reported disease episodes

Percentage of children aged 0-59 months for whom the mother/caretaker reported an episode of diarrhoea, symptoms of acute respiratory infection (ARI), in the last two weeks, Viet Nam, 2014

	Percentage of children who in the last two weeks had:		Number of children aged 0-59 months
	An episode of diarrhoea	Symptoms of ARI	
Total	**8.6**	**3.0**	**3316**
Sex			
Male	9.8	3.2	1719
Female	7.2	2.7	1597

	Percentage of children who in the last two weeks had:		
	An episode of diarrhoea	Symptoms of ARI	Number of children aged 0-59 months
Region			
Red River Delta	6.6	1.8	784
Northern Midlands and Mountainous Area	14.1	2.1	513
North Central and Central coastal area	7.7	3.0	690
Central Highlands	12.7	4.6	241
South East	6.8	2.6	515
Mekong River Delta	7.4	4.9	573
Area			
Urban	6.0	2.5	985
Rural	9.7	3.2	2331
Age			
0-11 months	12.7	2.3	688
12-23 months	11.6	2.1	790
24-35 months	8.0	3.0	641
36-47 months	4.6	4.7	539
48-59 months	4.5	3.2	658
Mother's education			
None	17.8	3.6	197
Primary	10.4	4.2	506
Lower Secondary	8.3	3.4	1219
Upper Secondary	7.3	1.7	683
Tertiary	**6.6**	**2.4**	**710**
Wealth Index quintiles			
Poorest	15.4	5.1	694
Second	7.6	2.5	662
Middle	7.7	2.7	672
Fourth	6.5	2.5	659
Richest	5.2	1.9	628
Ethnicity of household head			
Kinh/Hoa	6.5	2.8	2746
Ethnic Minorities	18.5	4.0	570

Overall, 8.6 per cent of under-5 children were reported to have had diarrhoea in the two weeks preceding the survey, and 3.0 per cent had symptoms of ARI (Table CH.4). Period-prevalence ranges from 4.5 to 18.5 per cent in the case of diarrhoea and 1.8 to 5.1 per cent for ARI. Major differences, as examined in the next section, were observed between urban and rural areas, regions, ages, educational level of mothers, wealth index quintiles and ethnicity, particularly in the case of diarrhoea.

Diarrhoea

Diarrhoea is a leading cause of death among children under-5 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. In addition, provision of zinc supplements has been shown to reduce the duration and severity of the illness as well as the risk of future episodes within the next two or three months. Preventing dehydration and malnutrition by increasing fluid intake and continuing to feed the child are also important strategies for managing diarrhoea.

In Viet Nam MICS 2014, mothers or caretakers were asked whether their child aged under-5 had an episode of diarrhoea in the two weeks prior to the survey. In cases where mothers reported that the child had diarrhoea, a series of questions were asked about the treatment of the illness, including what the child had been given to drink and eat during the episode and whether this was more or less than what was usually given to the child.

The overall period-prevalence of diarrhoea in children under-5 years of age was 8.6 per cent (Table CH.4) and ranges from a low of 6.6 per cent in the Red River Delta region to a high of 14.1 per cent in the Northern Midlands and Mountainous area. A higher prevalence is observed among younger children (12.7 per cent), among those whose mothers have little or no education (17.8 per cent), children living in the poorest wealth index quintile households (15.4 per cent) as well as children living in ethnic minority households (18.5 per cent).

Table CH.5: Care-seeking during diarrhoea

Percentage of children aged 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Viet Nam, 2014

	Percentage of children with diarrhoea for whom:							Number of children aged 0-59 months with diarrhoea in the last two weeks
	Advice or treatment was sought from:						No advice or treatment sought	
	Health facilities or providers			Other source (excluded pharmacy)	A health facility or provider[1],	Pharmacy		
	Public	Private	Community health provider[a]					
Total	**35.5**	**43.8**	**0.0**	**15.5**	**55.1**	**24.5**	**15.4**	**285**
Sex								
Male	41.5	39.7	0.0	16.3	59.4	21.4	14.0	169
Female	26.8	49.7	0.0	14.3	48.8	29.1	17.3	116
Region								
Red River Delta	(21.6)	(54.2)	(0.0)	(12.5)	(46.4)	(33.0)	(12.9)	52
Northern Midlands and Mountainous area	39.1	23.8	0.0	21.6	46.9	15.5	26.2	72
North Central and Central coastal area	(40.4)	(42.2)	(0.0)	(27.1)	(60.6)	(23.9)	(11.4)	53
Central Highlands	41.8	43.9	0.0	11.6	60.3	24.5	13.2	30
South East	(22.6)	(66.4)	(0.0)	(5.6)	(56.6)	(28.5)	(13.2)	35
Mekong River Delta	(46.5)	(48.3)	(0.0)	(5.3)	(68.0)	(27.0)	(8.3)	42
Area								
Urban	22.6	62.9	0.0	15.1	50.8	36.4	9.7	59
Rural	38.9	38.8	0.0	15.6	56.2	21.4	16.9	226
Age								
0-11 months	33.2	40.9	0.0	13.8	54.6	20.0	18.8	87
12-23 months	35.9	46.2	0.0	16.2	55.9	25.1	13.9	92

	Percentage of children with diarrhoea for whom:							Number of children aged 0-59 months with diarrhoea in the last two weeks
	Advice or treatment was sought from:						No advice or treatment sought	
	Health facilities or providers			Other source (excluded pharmacy)	A health facility or provider[1],	Pharmacy		
	Public	Private	Community health provider[a]					
24-35 months	36.7	41.5	0.0	16.5	54.4	28.3	16.5	51
36-47 months	(36.5)	(56.3)	(0.0)	(16.0)	(55.7)	(37.1)	(4.9)	25
48-59 months	(38.5)	(38.0)	(0.0)	(16.3)	(54.8)	(18.6)	(16.7)	29
Mother's education								
None	(24.0)	(35.4)	(0.0)	(19.0)	(31.6)	(24.2)	(29.5)	35
Primary	45.8	36.1	0.0	19.1	60.0	23.2	14.6	52
Lower Secondary	33.2	52.1	0.0	9.9	56.7	30.3	14.8	101
Upper Secondary	45.3	47.4	0.0	16.8	69.0	23.2	0.0	50
Tertiary	(27.3)	(36.8)	(0.0)	(19.4)	(48.9)	(15.2)	(23.3)	47
Wealth Index quintiles								
Poorest	44.4	29.7	0.0	14.3	53.1	18.9	21.6	107
Second	(22.8)	(62.0)	(0.0)	(17.4)	(51.3)	(41.3)	(6.9)	50
Middle	(39.8)	(41.3)	(0.0)	(25.3)	(60.8)	(19.3)	(10.7)	52
Fourth	(29.7)	(56.7)	(0.0)	(6.7)	(58.5)	(27.3)	(8.4)	43
Richest	(27.0)	(48.7)	(0.0)	(12.6)	(54.0)	(21.7)	(24.6)	33
Ethnicity of household head								
Kinh/Hoa	31.2	53.9	0.0	13.0	57.7	28.4	10.8	179
Ethnic Minorities	42.8	26.6	0.0	19.7	50.7	17.9	23.2	106

[1] **MICS Indicator 3.10 - Care-seeking for diarrhea**

a Community health providers, include both public (Community health worker and Mobile/outreach clinic) and private (Mobile clinic) health facilities

b Includes all public and private health facilities and providers, but excludes pharmacies

Note:Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.5 shows the percentage of children with diarrhoea in the two weeks preceding the survey, for whom advice or treatment was sought and where. Overall, 55.1 per cent of all children with diarrhoea sought advice or treatment from a health facility or provider, predominantly in the private sector (43.8 per cent) and public health sector (35.5 per cent)". Surprisingly, the percentage of all children with diarrhoea seeking advice or treatment from a health facility or provider in urban areas (50.8 per cent) was lower than in rural areas (56.2 per cent). This percentage was higher for Kinh/Hoa children (57.7 per cent) than for ethnic minority ones (50.7 per cent). Mothers and caretakers' preference for private health facilities or providers (53.9 per cent) when children had diarrhoea was almost double that for public sector assistance (31.2 per cent), while the trend for ethnic minority children was the reverse (26.6 per cent compared to 42.8 per cent). It is worth noting that children aged under-6 years in Viet Nam can access free health insurance, which could have influenced these results.

No advice or treatment was sought for 15.4 per cent of children with diarrhoea and the proportions were higher among children in rural areas (16.9 per cent), children in the Northern Midlands and Mountainous area (26.2 per cent) and ethnic minority children (23.2 per cent).

Table CH.6: Feeding practices during diarrhea

Percentage distribution of children aged 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea, Viet Nam, 2014

	Drinking practices during diarrhoea						Eating practices during diarrhoea							Number of children aged 0-59 months with diarrhoea in the last two weeks
	Child was given to drink:						Child was given to eat:							
	Much less	Some what less	About the same	More	Nothing	Total	Much less	Somewhat less	About the same	More	Nothing	Missing/ DK	Total	
Total	**6.8**	**16.0**	**45.8**	**30.8**	**0.6**	**100**	**12.6**	**35.4**	**43.2**	**2.3**	**6.2**	**0.4**	**100**	**285**
Sex														
Male	8.1	18.6	40.8	31.5	1.1	100	16.7	38.2	37.8	3.5	3.8	0.0	100	169
Female	4.9	12.2	53.1	29.8	0.0	100	6.6	31.4	51.0	0.5	9.6	0.9	100	116
Region														
Red River Delta	(13.0)	(14.6)	(47.5)	(24.8)	(0.0)	(100)	(9.4)	(29.2)	(52.3)	(5.1)	(4.0)	(0.0)	100	52
Northern Midlands and Mountainous area	6.7	16.7	46.0	30.5	0.0	100	13.6	26.5	57.7	0.6	1.5	0.0	100	72
North Central and Central coastal area	(7.4)	(9.2)	(39.1)	(40.9)	(3.4)	(100)	(23.5)	(30.3)	(30.4)	(3.2)	(12.7)	(0.0)	100	53
Central Highlands	3.2	26.7	44.6	25.6	0.0	100	5.8	49.3	38.4	1.7	4.8	0.0	100	30
South East	(0.0)	(23.0)	(60.2)	(16.8)	(0.0)	(100)	(8.4)	(36.9)	(41.3)	(0.0)	(13.5)	(0.0)	100	35
Mekong River Delta	(6.6)	(11.3)	(40.9)	(41.2)	(0.0)	(100)	(9.6)	(53.6)	(28.1)	(2.8)	(3.4)	(2.5)	100	42
Area														
Urban	5.1	14.1	49.8	31.0	0.0	100	7.2	30.4	49.6	1.7	9.3	1.8	100	59
Rural	7.2	16.5	44.8	30.8	0.8	100	14.0	36.7	41.5	2.4	5.4	0.0	100	226
Age														
0-11 months	4.8	11.7	57.3	26.2	0.0	100	9.1	30.2	42.7	1.9	16.1	0.0	0.0	87
12-23 months	13.4	20.9	39.1	26.5	0.0	100	14.4	35.1	43.8	2.8	3.9	0.0	0.0	92

	Drinking practices during diarrhoea						Eating practices during diarrhoea							Number of children aged 0-59 months with diarrhoea in the last two weeks
	Child was given to drink:					Total	Child was given to eat:						Total	
	Much less	Some what less	About the same	More	Nothing		Much less	Somewhat less	About the same	More	Nothing	Missing/ DK		
24-35 months	3.8	7.7	52.9	35.7	0.0	100	15.3	32.2	46.1	4.3	0.0	2.1	2.1	51
36-47 months	(0.0)	(20.5)	(33.6)	(45.9)	(0.0)	(100)	(8.8)	(61.4)	(29.8	(0.0)	(0.0)	(0.0)	(0.0)	25
48-59 months	(2.7)	(23.8)	(31.0)	(36.4)	(6.1)	(100)	(15.8)	(35.6)	(48.7)	(0.0)	(0.0)	(0.0)	(0.0)	29
Mother's education	(0.0)	(31.5)	(61.8)	(6.7)	(0.0)	(100)	(3.8)	(32.9)	(51.3)	(0.0)	(12.0)	(0.0)	100	35
None	9.1	12.6	46.1	28.8	3.4	100	11.4	49.6	29.8	0.8	6.4	2.0	100	52
Primary	6.1	13.6	48.0	32.3	0.0	100	14.4	33.7	47.2	1.5	3.1	0.0	100	101
Lower Secondary	9.1	14.8	22.1	54.0	0.0	100	21.9	31.3	30.4	9.0	7.4	0.0	100	50
Upper Secondary	(8.3)	(14.4)	(54.1)	(23.2)	(0.0)	100	(6.7)	(29.7)	(56.8)	(0.0)	(6.8)	(0.0)	100	47
Tertiary	(0.0)	(31.5)	(61.8)	(6.7)	(0.0)	(100)	(3.8)	(32.9)	(51.3)	(0.0)	(12.0)	(0.0)	100	35
Wealth Index quintiles														
Poorest	3.0	19.1	49.8	26.5	1.7	100	13.7	37.8	42.4	0.9	4.2	1.0	100	107
Second	(4.8)	(24.2)	(32.0)	(39.0)	(0.0)	(100)	(10.6)	(46.5)	(29.1)	(4.4)	(9.3)	(0.0)	100	50
Middle	(12.1)	(7.4)	(43.8)	(36.7)	(0.0)	(100)	(17.8)	(33.1)	(40.2)	(0.0)	(8.9)	(0.0)	100	52
Fourth	(15.6)	(11.9)	(55.4)	(17.1)	(0.0)	(100)	(10.4)	(27.1)	(54.7)	(3.9)	(3.8)	(0.0)	100	43
Richest	(2.4)	(12.0)	(44.7)	(41.0)	(0.0)	(100)	(6.7)	(25.2)	(56.6)	(4.9)	(6.5)	(0.0)	100	33
Ethnicity of household head														
Kinh/Hoa	8.2	13.9	44.0	32.9	1.0	100	12.2	34.4	44.0	3.1	5.7	0.6	100	179
Ethnic Minorities	4.3	19.5	49.0	27.2	0.0	100	13.3	37.1	41.7	0.9	7.0	0.0	100	106

Note:

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.6 provides statistics on drinking and feeding practices during diarrhoea. Less than one-third (30.8 per cent) of under-5 children with diarrhoea in the last two weeks were given more to drink than usual, 45.8 per cent were given the normal amount and the remaining, 23.4 per cent were given some what less, much less or almost nothing. Regarding food intake, 45.5 per cent were given to eat the same or more (continued feeding), but 54.2 per cent were given some what less, much less or almost nothing.

The percentage of under-5 ethnic minority children with diarrhoea in the last two weeks given less, much less or almost nothing to drink was higher than Kinh/Hoa children (72.8 per cent against 67.1 per cent). However, there is no significant differential of continued feeding (somewhat less, same or more) between Kinh/Hoa (81.5 per cent) children and ethnic minorities (79.7 per cent).

Table CH.7: Oral rehydration solutions, recommended homemade fluids and zinc

Percentage of children aged 0-59 months with diarrhoea in the last two weeks, and treatment with oral rehydration salts (ORS), recommended homemade fluids and zinc, Viet Nam, 2014

	Percentage of children with diarrhoea who received:													Number of children aged 0-59 months with diarrhoea in the last two weeks
	Oral rehydration salts			Recommended homemade fluids					ORS or any recommended homemade fluid	Zinc			ORS and zinc[1]	
	Fluid from packet	Pre-packaged fluid	Any ORS	Rice soup	Lemon/ orange juice	Water from boiled vegetables/ meat	Water from boiled/ fried rice	Any recommended homemade fluid		Tablet	Syrup	Any zinc		
Total	**48.6**	**6.2**	**50.9**	**12.7**	**16.1**	**19.9**	**10.4**	**41.1**	**66.3**	**7.3**	**11.0**	**16.9**	**12.6**	**285**
Sex														
Male	52.1	8.4	54.3	15.0	17.3	20.1	8.8	43.7	70.8	8.2	12.1	19.5	13.8	169
Female	43.5	2.9	46.0	9.4	14.3	19.7	12.9	37.3	59.8	6.1	9.5	13.2	10.8	116
Region														
Red River Delta	(48.3)	(10.4)	(51.9)	(10.2)	(16.5)	(16.4)	(10.6)	(38.8)	(64.2)	(3.7)	(5.6)	(9.4)	(9.4)	52
Northern Midlands and Mountainous area	37.2	3.9	38.6	18.4	11.2	42.9	6.6	53.5	62.0	2.2	3.8	5.2	3.4	72
North Central and Central coastal area	(52.7)	(0.0)	(52.7)	(18.2)	(20.2)	(9.8)	(13.6)	(41.6)	(69.3)	(7.6)	(16.6)	(22.8)	(15.0)	53
Central Highlands	62.7	11.8	65.1	16.3	20.9	17.2	13.5	46.3	77.8	7.3	13.5	16.3	14.0	30
South East	(50.6)	(6.0)	(50.6)	(8.3)	(24.0)	(5.9)	(14.1)	(37.9)	(65.3)	(9.3)	(16.9)	(26.2)	(17.1)	35
Mekong River Delta	(51.7)	(8.7)	(58.6)	(0.0)	(8.6)	(11.2)	(7.8)	(20.7)	(65.4)	(18.6)	(16.4)	(31.6)	(24.6)	42
Area														
Urban	56.1	3.9	58.4	10.5	20.7	19.3	9.8	41.3	69.4	10.4	13.7	22.0	17.7	59
Rural	46.6	6.8	49.0	13.3	14.9	20.1	10.6	41.0	65.6	6.5	10.3	15.6	11.3	226
Age														
0-11 months	36.1	7.0	40.9	9.3	7.5	5.2	5.5	20.6	48.5	7.6	13.3	18.9	12.0	87
12-23 months	56.0	1.6	57.6	13.1	9.4	19.9	6.5	35.8	72.1	6.5	9.9	15.8	15.3	92
24-35 months	46.4	11.1	47.3	15.4	15.3	31.2	20.6	56.6	65.6	9.4	14.0	22.3	14.9	51
36-47 months	(59.8)	(1.8)	(61.6)	(16.1)	(52.0)	(40.9)	(12.5)	(77.4)	(91.9)	(3.1)	(8.6)	(8.6)	(8.6)	25
48-59 months	(57.0)	(13.2)	(57.0)	(13.8)	(33.3)	(26.5)	(17.7)	(60.6)	(81.1)	(9.1)	(4.5)	(11.8)	(5.4)	29

	Percentage of children with diarrhoea who received:													Number of children aged 0-59 months with diarrhoea in the last two weeks
	Oral rehydration salts			Recommended homemade fluids						Zinc				
	Fluid from packet	Pre-packaged fluid	Any ORS	Rice soup	Lemon/ orange juice	Water from boiled vegetables/ meat	Water from boiled/ fried rice	Any recommended homemade fluid	ORS or any recommended homemade fluid	Tablet	Syrup	Any zinc	ORS and zinc[1]	
Mother's education														
None	(30.1)	(4.0)	(30.1)	(14.0)	(2.6)	(14.9)	(6.8)	(38.3)	(53.5)	(3.4)	(3.0)	(6.4)	(3.4)	35
Primary	42.3	6.8	42.3	10.1	18.8	20.8	9.8	38.7	60.9	7.4	3.0	9.3	8.6	52
Lower Secondary	52.5	9.1	57.7	12.2	16.7	20.3	12.0	39.9	68.1	6.8	14.1	20.1	16.4	101
Upper Secondary	63.2	1.5	63.8	17.6	13.9	21.9	8.9	47.1	77.7	14.9	11.9	21.2	14.7	50
Tertiary	(45.6)	(5.7)	(47.8)	(10.3)	(24.0)	(19.8)	(12.1)	(41.9)	(66.3)	(3.5)	(18.4)	(21.9)	(13.7)	47
Wealth Index quintiles														
Poorest	39.1	3.3	39.5	16.5	9.0	19.4	7.5	37.9	58.0	1.8	6.7	8.0	6.9	107
Second	(51.1)	(8.6)	(54.8)	(12.9)	(13.6)	(26.9)	(11.8)	(41.8)	(66.9)	(11.5)	(9.9)	(20.4	(15.2)	50
Middle	(61.8)	(8.9)	(65.1)	(9.3)	(23.1)	(23.8)	(11.3)	(45.1)	(74.1)	(13.8)	(8.6)	(18.1	(17.5)	52
Fourth	(55.1)	(7.0)	(59.8)	(12.9)	(22.1)	(17.2)	(15.2)	(41.6)	(76.3)	(10.4)	(19.3)	(28.5)	(15.0)	43
Richest	(46.6)	(6.4)	(48.1)	(4.9)	(23.7)	(8.4)	(10.2)	(43.3)	(67.4)	(4.9)	(19.6)	(23.5)	(16.2)	33
Ethnicity of household head														
Kinh/Hoa	53.3	7.3	57.0	10.1	18.1	18.2	12.0	41.0	70.1	9.5	12.3	20.9	15.5	179
Ethnic Minorities	40.6	4.3	40.6	17.2	12.6	22.8	7.7	41.1	60.0	3.7	8.9	10.2	7.6	106

[1] **MICS Indicator 3.11 - Diarrhoea treatment with oral rehydration salts and zinc**

Note:

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.7 shows the percentage of children receiving ORS, various types of recommended homemade fluids and zinc during episodes of diarrhoea. Since children may have been given more than one type of liquid, the percentages do not necessarily add to 100.

About 50.9 per cent of children received fluids from ORS packets or pre-packaged ORS fluids and 41.1 per cent of children received recommended homemade fluids (rice soup, lemon/orange juice, water from boiled vegetables/meat, water from boiled/fried rice). Additionally, 16.9 per cent received zinc in one form or another.

Girls as well as children in rural areas, of mothers with lower education and those who are ethnic minority were less likely to receive ORS or recommended fluids than others.

Children in urban areas were more likely to receive zinc (tablet or syrup) than those in rural areas (22.0 compared to 15.6 per cent). In addition, 12.6 per cent of urban and rural children received ORS and zinc. This percentage was lower for girls as well as children in rural areas, children who were ethnic minority. Figure CH.2 summarizes the percentages of children under-5 with diarrhoea who received ORS or recommended home-made liquids among area and ethnic groups.

Figure CH.2: Children under-5 with diarrhoea who received ORS or recommended homemade liquids, Viet Nam MICS 2014

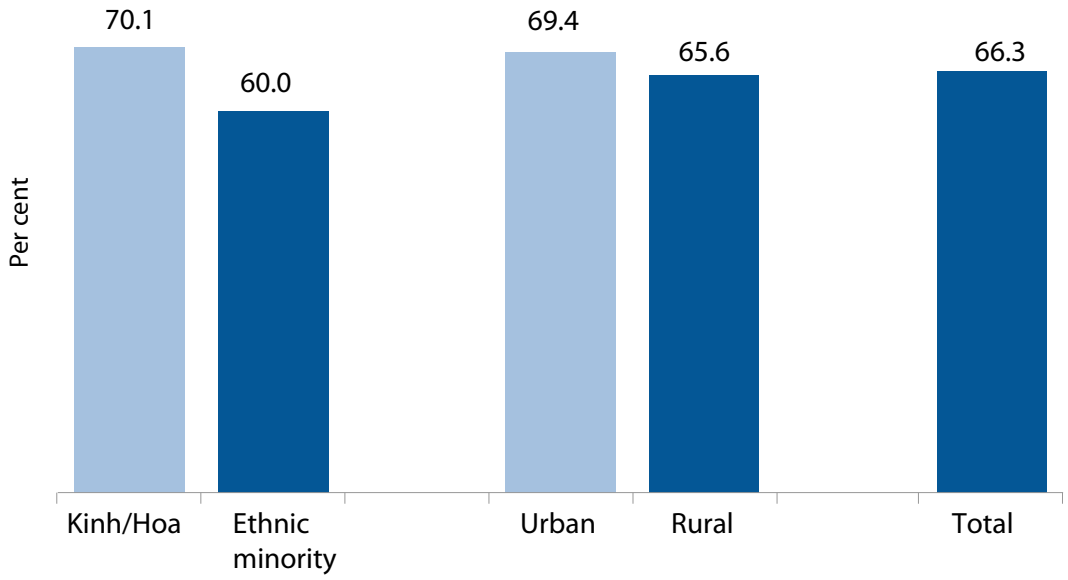


Table CH.8: Oral rehydration therapy with continued feeding and other treatments

Percentage of children aged 0-59 months with diarrhoea in the last two weeks who were given oral rehydration therapy with continued feeding and percentage who were given other treatments, Viet Nam, 2014

	Children with diarrhoea who were given:															Number of children aged 0-59 months with diarrhoea in the last two weeks
					Other treatments											
					Pill or syrup				Injection							
	Zinc	ORS or increased fluids	ORT (ORS or recommended homemade fluids or increased fluids)	ORT with continued feeding[1]	Anti-biotic	Anti-motility	Other	Unknown	Anti-biotic	Non-antibiotic	Unknown	Intra-venoush	Home remedy, herbal medicine	Other	Not given any treatment or drug	
Total	**16.9**	**59.5**	**70.8**	**57.8**	**17.7**	**1.1**	**5.7**	**9.0**	**0.3**	**0.0**	**0.8**	**1.7**	**9.1**	**21.8**	**9.9**	**285**
Sex																
Male	19.5	62.1	74.5	58.3	15.0	1.8	4.7	10.5	0.5	0.0	1.3	2.8	11.0	17.7	8.2	169
Female	13.2	55.8	65.3	57.0	21.8	0.0	7.2	6.9	0.0	0.0	0.0	0.0	6.3	27.7	12.4	116
Region																
Red River Delta	(9.4)	(57.3)	(69.7)	(60.3)	(30.1)	(4.2)	(0.0)	(0.0)	(1.6)	(0.0)	(3.6)	(3.1)	(3.6)	(31.9)	(8.0)	52
Northern Midlands and Mountainous area	5.2	48.4	64.7	57.3	11.5	0.0	8.0	13.3	0.0	0.0	0.0	0.0	19.1	19.7	14.6	72
North Central and Central coastal area	(22.8)	(62.2)	(69.3)	(42.3)	(22.8)	(0.0)	(12.3)	(12.3)	(0.0)	(0.0)	(0.0)	(5.9)	(8.6)	(30.1)	(9.9)	53
Central Highlands	16.3	71.0	80.9	73.9	4.6	0.9	2.0	7.1	0.0	0.0	1.3	0.0	8.1	8.8	3.9	30
South East	(26.2)	(58.7)	(70.5)	(56.8)	(19.3)	(1.8)	(3.6)	(3.1)	(0.0)	(0.0)	(0.0)	(0.0)	(3.0)	(16.0)	(13.3)	35
Mekong River Delta	(31.6)	(70.5)	(77.3)	(64.3)	(15.2)	(0.0)	(5.1)	(14.7)	(0.0)	(0.0)	(0.0)	(0.0)	(4.9)	(16.4)	(5.9)	42
Area																
Urban	22.0	67.8	74.9	64.2	19.1	1.5	10.9	2.1	1.4	0.0	0.0	0.0	13.9	11.0	10.7	59
Rural	15.6	57.4	69.7	56.1	17.4	1.0	4.4	10.8	0.0	0.0	1.0	2.1	7.8	24.6	9.7	226
Age																
0-11 months	18.9	49.4	54.6	43.4	10.3	1.0	4.3	6.0	0.0	0.0	2.1	0.0	7.0	25.8	17.9	87
12-23 months	15.8	61.8	75.7	62.0	21.8	2.4	9.3	9.3	0.9	0.0	0.4	5.2	10.2	21.1	5.7	92

	Children with diarrhoea who were given:															Number of children aged 0-59 months with diarrhoea in the last two weeks
					Other treatments											
					Pill or syrup				Injection							
	Zinc	ORS or increased fluids	ORT (ORS or recommended homemade fluids or increased fluids)	ORT with continued feeding[1]	Anti-biotic	Anti-motility	Other	Unknown	Anti-biotic	Non-antibiotic	Unknown	Intra-venoush	Home remedy, herbal medicine	Other	Not given any treatment or drug	
24-35 months	22.3	62.2	72.6	57.4	24.0	0.0	3.5	8.6	0.0	0.0	0.0	0.0	9.8	14.7	9.2	51
36-47 months	(8.6)	(71.5)	(91.9)	(83.1)	(13.6)	(0.0)	(4.1)	(12.6)	(0.0)	(0.0)	(0.0)	(0.0)	(11.2)	(19.9)	(1.1)	25
48-59 months	(11.8)	(68.0)	(82.4)	(66.6)	(19.5)	(0.0)	(4.1)	(14.4)	(0.0)	(0.0)	(0.0)	(0.0)	(8.4)	(25.6)	(8.3)	29
Mother's education																
None	(6.4)	(33.1)	(56.4)	(43.7)	(15.2)	(0.0)	(0.8)	(8.8)	(0.0)	(0.0)	(1.1)	(0.0)	(15.7)	(7.2)	(14.1)	35
Primary	9.3	60.7	74.0	61.9	17.1	1.2	5.2	16.9	0.0	0.0	0.0	60	60	21.4	13.0	52
Lower Secondary	20.1	58.3	68.1	54.3	13.9	0.3	9.2	8.8	0.8	0.0	0.0	0.0	6.4	22.7	9.4	101
Upper Secondary	21.2	85.5	87.1	67.0	21.4	0	6.1	9.8	0.0	0.0	3.7	3.2	9.8	22.1	0.9	50
Tertiary	(21.9)	(53.1)	(66.3)	(61.5)	(24.8)	(4.7)	(2.2)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(12.6)	(30.6)	(14.2)	47
Wealth Index quintiles																
Poorest	8.0	49.8	62.9	50.5	13.0	0.0	5.5	11.9	0.0	0.0	0.4	0.0	10.6	20.0	12.9	107
Second	(20.4)	(66.7)	(74.7)	(61.2)	(20.2)	(0.5)	(7.7)	(7.5)	(0.0)	(0.0)	(0.0)	(0.0)	(8.5)	(18.4)	(4.9)	50
Middle	(18.1)	(68.1)	(76.0)	(57.5)	(18.4)	(0.0)	(6.7)	(14.9)	(1.6)	(0.0)	(0.0)	(6.1)	(9.7)	(27.7)	(11.3)	52
Fourth	(28.5)	(65.8)	(78.4)	(66.5)	(18.8)	(1.4)	(5.3)	(3.5)	(0.0)	(0.0)	(4.3)	(0.0)	(4.4)	(14.0)	(3.6)	43
Richest	(23.5)	(58.8)	(72.3)	(65.6)	(26.9)	(6.6)	(2.4)	(0.0)	(0.0)	(0.0)	(0.0)	(4.9)	(9.9)	(33.3)	(14.2)	33
Ethnicity of household head																
Kinh/Hoa	20.9	65.3	75.0	60.9	22.5	1.7	6.0	6.6	0.5	0.0	1.0	2.7	6.6	25.8	7.9	179
Ethnic Minorities	10.2	49.7	63.6	52.5	9.6	0.0	5.3	13.1	0.0	0.0	0.4	0.0	13.3	14.9	13.4	106

[1] **MICS Indicator 3.12 - Diarrhoea treatment with oral rehydration therapy and continued feeding**

Note:

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.8 provides the proportion of children aged 0-59 months with diarrhoea in the last two weeks who received oral rehydration therapy with continued feeding and the percentage of children with diarrhoea who received other treatments.

Overall, 59.5 per cent of children with diarrhoea received ORS or increased fluids, 70.8 per cent received ORT (ORS or recommended homemade or increased fluids). Combining the information in Table CH.6 with that of Table CH.7 on oral rehydration therapy, it was observed that 57.8 per cent of children received ORT and at the same time, feeding was continued, as is recommended.

There were notable differences in the home management of diarrhoea by background characteristics. Girls as well as children in rural areas and ethnic minority children were less likely to receive ORT (ORS or recommended homemade or increased fluids) or ORT with continued feeding.

Table CH.8 also shows the percentage of children having had diarrhoea in the two weeks preceding the survey who were given various forms of treatment, leaving 9.9 per cent of them without any treatment or drug.

Overall, 17.7 per cent of children were given antibiotics (pill or syrup) and 0.3 per cent (injection) during episodes of diarrhoea. Kinh/Hoa children (22.5 per cent) were more likely to use antibiotics against diarrhoea than ethnic minority children (9.6 per cent).

The figures also indicate a relatively high proportion of treatment by home remedies and herbal medicines (9.1 per cent), especially in urban areas (13.9 per cent) and among ethnic minorities (13.3 per cent). Figure CH.3 summarizes the percentages of children under-5 with diarrhea who received oral rehydration therapy and continued feeding.

Figure CH.3: Children under-5 with diarrhoea receiving oral rehydration therapy and continued feeding, Viet Nam MICS 2014

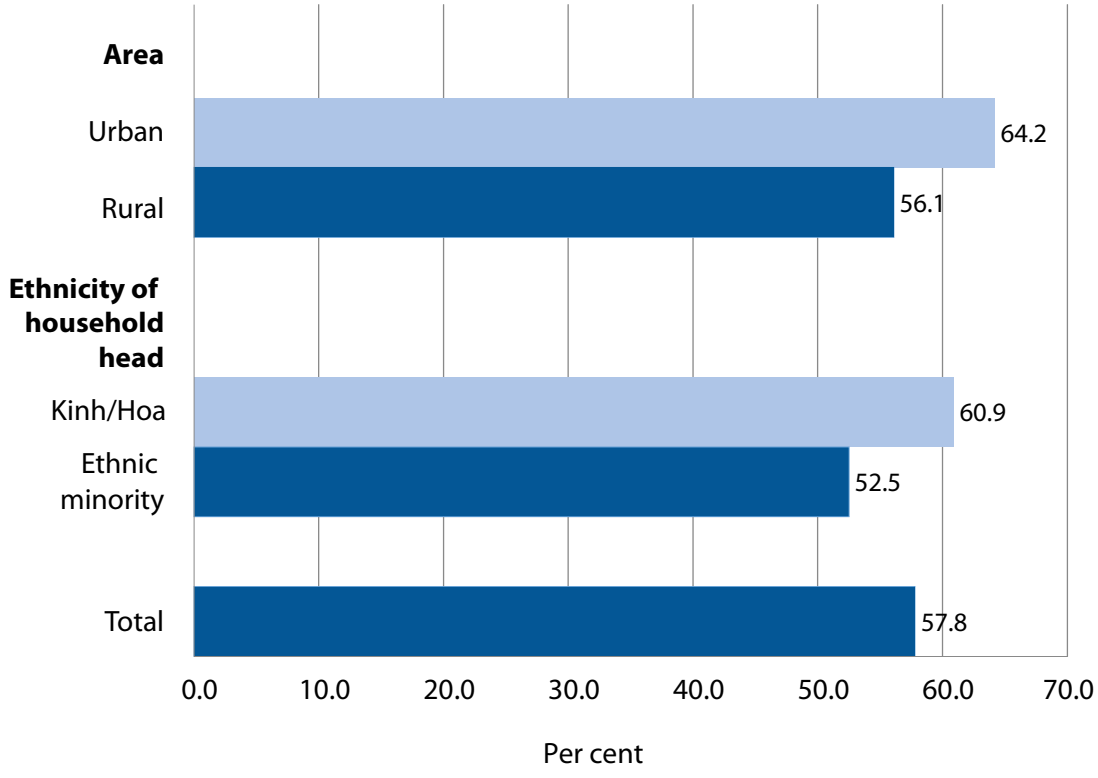


Table CH.9: Source of ORS and zinc

Percentage of children aged 0-59 months with diarrhoea in the last two weeks who were given ORS and percentage given zinc, by the source of ORS and zinc, Viet Nam, 2014

	Percentage of children who were given as treatment for diarrhoea:		Number of children aged0-59 months with diarrhoea in the last two weeks	Percentage of children for whom the source of ORS was:			Number of children aged 0-59 months who were given ORS as treatment for diarrhoea in the last two weeks	Percentage of children for whom the source of zinc was:			Number of children aged 0-59 months who were given zinc as treatment for diarrhoea in the last two weeks
				Health facilities or providers				Health facilities or providers			
	ORS	Zinc		Public	Private	A health facility or providerb		Public	Private	A health facility or providerb	
Total	**50.9**	**16.9**	**285**	**41.7**	**58.3**	**100**	**145**	**(44.3)**	**(55.7)**	**(100)**	**48**
Sex											
Male	54.3	19.5	169	48.9	51.1	100	92	(60.6)	(39.4)	(100)	33
Female	46.0	13.2	116	29.2	70.8	100	53	*	*	*	15
Region											
Red River Delta	(51.9)	(9.4)	52	*	*	*	27	*	*	*	5
Northern Midlands and Mountainous area	38.6	5.2	72	(49.3)	(50.7)	(100)	28	*	*	*	4
North Central and Central coastal area	(52.7)	(22.8)	53	*	*	*	28	*	*	*	12
Central Highlands	65.1	16.3	30	51.8	48.2	100	20	*	*	*	5
South East	(50.6)	(26.2)	35	*	*	*	18	*	*	*	9
Mekong River Delta	(58.6)	(31.6)	42	*	*	*	25	*	*	*	13
Area								*	*	*	
Urban	58.4	22.0	59	19.4	80.6	100	34	*	*	*	13
Rural	49.0	15.6	226	48.6	51.4	100	111	55.4	44.6	100	35
Age											
0-11 months	40.9	18.9	87	(44.6)	(55.4)	(100)	36	*	*	*	17
12-23 months	57.6	15.8	92	38.2	61.8	100	53	*	*	*	15

	Percentage of children who were given as treatment for diarrhoea:		Number of children aged0-59 months with diarrhoea in the last two weeks	Percentage of children for whom the source of ORS was:			Number of children aged 0-59 months who were given ORS as treatment for diarrhoea in the last two weeks	Percentage of children for whom the source of zinc was:			Number of children aged 0-59 months who were given zinc as treatment for diarrhoea in the last two weeks
				Health facilities or providers				Health facilities or providers			
	ORS	Zinc		Public	Private	A health facility or providerb		Public	Private	A health facility or providerb	
24-35 months	47.3	22.3	51	(45.3)	(54.7)	(100)	24	*	*	*	11
36-47 months	(61.6)	(8.6)	25	*	*	*	15	*	*	*	2
48-59 months	(57.0)	(11.8)	29	*	*	*	17	*	*	*	3
Mother's education											
None	(30.1)	(6.4)	35	*	*	*	11	*	*	*	2
Primary	42.3	9.3	52	*	*	*	22	*	*	*	5
Lower Secondary	57.7	20.1	101	36.7	63.3	100	58	*	*	*	20
Upper Secondary	63.8	21.2	50	(45.8)	(54.2)	(100)	32	*	*	*	11
Tertiary	(47.8)	(21.9)	47	*	*	*	22	*	*	*	10
Wealth Index quintiles											
Poorest	39.5	8.0	107	68.8	31.2	100	42	*	*	*	9
Second	(54.8)	(20.4)	50	(17.5)	(82.5)	(100)	27	*	*	*	10
Middle	(65.1)	(18.1)	52	(47.4)	(52.6)	(100)	34	*	*	*	9
Fourth	(59.8)	(28.5)	43	*	*	*	26	*	*	*	12
Richest	(48.1)	(23.5)	33	*	*	*	16	*	*	*	8
Ethnicity of household head											
Kinh/Hoa	57.0	20.9	179	33.5	66.5	100	102	(46.7)	(53.3)	(100)	37
Ethnic Minorities	40.6	10.2	106	61.3	38.7	100	43	*	*	*	11

b Bao gồm tất cả cơ sở y tế của nhà nước và tư nhân

Ghi chú: Số liệu có ký hiệu (*) được tính dựa trên mẫu số của 24 trường hợp không gia quyền

Số liệu trong ngoặc đơn được tính dựa trên mẫu số của 25-49 trường hợp không gia quyền

Table CH.9 provides information on the source of ORS and zinc for children who benefitted from these treatments. The main source of ORS came from the private sector (58.3 per cent) in contrast to the public sector (41.7 per cent) and the same applies for zinc (55.7 per cent from private sources and 44.3 per cent from public).

Acute Respiratory Infections

Reports of symptoms of ARI were collected during the Viet Nam MICS 2014 to examine the incidences of pneumonia, the leading cause of death in children under-5. Once diagnosed, pneumonia is treated effectively with antibiotics. Studies have shown a limitation in the survey approach of measuring pneumonia because many of the suspected cases identified through surveys are in fact, not true pneumonia[19]. While this limitation does not affect the level and patterns of care-seeking for suspected pneumonia, it limits the validity of the level of treatment of pneumonia with antibiotics, as reported through household surveys. The treatment indicator described in this report must, therefore, be taken with caution, keeping in mind that an accurate level is likely higher.

19 Campbell H, el Arifeen S, Hazir T, O'Kelly J, Bryce J, et al. (2013) Measuring Coverage in MNCH: Challenges in Monitoring the Proportion of Young Children with Pneumonia Who Receive Antibiotic Treatment. PLoS Med 10(5): e1001421. doi:10.1371/journal.pmed.1001421.

Table CH.10: Care-seeking for and antibiotic treatment of symptoms of acute respiratory infection (ARI)

Percentage of children aged 0-59 months with symptoms of ARI in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, and percentage of children with symptoms who were given antibiotics, Viet Nam, 2014

	Percentage of children with symptoms of ARI for whom:						Percentage of children with symptoms of ARI in the last two weeks who were given antibiotics[2]	Number of children aged 0-59 months with symptoms of ARI in the last two weeks	Percentage of children with symptoms of ARI for whom the source of antibiotics was:					Number of children with symptoms of ARI in the last two weeks who were given antibiotics
	Advice or treatment was sought from:					No advice or treatment sought			Health facilities or providers					
	Health facilities or providers													
	Public	Private	Community health providera	Other source	A health facility or provider[1,b]				Public	Private	Community health providera	Other source	A health facility or providerc	
Total	**46.2**	**50.0**	**0.0**	**3.2**	**81.1**	**10.0**	**88.2**	**98**	**42.6**	**56.4**	**0.0**	**0.9**	**99.1**	**87**
Sex														
Male	48.0	50.5	0.0	3.0	85.2	7.3	92.5	56	41.0	57.4	0.0	1.6	98.4	51
Female	43.8	49.3	0.0	3.5	75.8	13.5	82.6	43	(45.0)	(55.0)	(0.0)	(0.0)	(100)	35
Region														
Red River Delta	*	*	*	*	*	*	*	14	*	*	*	*	*	14
Northern Midlands and Mountainous area	*	*	*	*	*	*	*	11	*	*	*	*	*	5
North Central and Central coastal area	*	*	*	*	*	*	*	21	*	*	*	*	*	21
Central Highlands	(56.7)	(44.5)	(0.0)	(4.8)	(76.3)	(7.1)	(88.5)	11	45.0	55.0	0.0	0.0	100	10
South East	*	*	*	*	*	*	*	13	*	*	*	*	*	13
Mekong River Delta	*	*	*	*	*	*	*	28	*	*	*	*	*	23
Area														
Urban	(31.6)	(76.9)	(0.0)	(0.8)	(81.2)	(4.9)	(96.5)	24	(33.3)	(66.7)	(0.0)	(0.0)	(100)	23
Rural	51.0	41.2	0.0	4.0	81.1	11.7	85.5	74	46.1	52.6	0.0	1.3	98.7	63
Age														
0-11 months	*	*	*	*	*	*	*	16	*	*	*	*	*	15
12-23 months	*	*	*	*	*	*	*	17	*	*	*	*	*	15
24-35 months	*	*	*	*	*	*	*	19	*	*	*	*	*	19
36-47 months	(36.3)	(55.2)	(0.0)	(5.2)	(72.6)	(10.9)	(79.6)	25	*	*	*	*	*	20
48-59 months	*	*	*	*	*	*	*	21	*	*	*	*	*	17

	Percentage of children with symptoms of ARI for whom:						Percentage of children with symptoms of ARI in the last two weeks who were given antibiotics[2]	Number of children aged 0-59 months with symptoms of ARI in the last two weeks	Percentage of children with symptoms of ARI for whom the source of antibiotics was:					Number of children with symptoms of ARI in the last two weeks who were given antibiotics
	Advice or treatment was sought from:					No advice or treatment sought			Health facilities or providers					
	Health facilities or providers			Other source	A health facility or provider[1,b]				Public	Private	Community health providera	Other source	A health facility or providerc	
	Public	Private	Community health providera											
Mother's education														
None	*	*	*	*	*	*	*	7	*	*	*	*	*	3
Primary	*	*	*	*	*	*	*	21	*	*	*	*	*	17
Lower Secondary	(49.0)	(50.2)	(0.0)	(0.0)	(83.2)	(8.4)	(92.5)	41	(48.1)	(49.8)	(0.0)	(0.0)	(2.1)	38
Upper Secondary	*	*	*	*	*	*	*	12	*	*	*	*	*	12
Tertiary	*	*	*	*	*	*	*	17	*	*	*	*	*	17
Wealth Index quintiles														
Poorest	(49.4)	(38.2)	(0.0)	(3.7)	(68.0)	(20.3)	(70.9)	35	(51.7)	(45.1)	(0.0)	(3.2)	(96.8)	25
Second	*	*	*	*	*	*	*	16	*	*	*	*	*	15
Middle	*	*	*	*	*	*	*	18	*	*	*	*	*	18
Fourth	*	*	*	*	*	*	*	16	*	*	*	*	*	16
Richest	*	*	*	*	*	*	*	12	*	*	*	*	*	12
Ethnicity of household head														
Kinh/Hoa	45.7	55.7	0.0	2.5	90.1	3.5	95.1	76	40.8	59.2	0.0	0.0	100	72
Ethnic Minorities	(47.9)	(30.8)	(0.0)	(5.8)	(50.9)	(31.7)	(65.3)	23	*	*	*	*	*	15

[1] **MICS Indicator 3.13 - Care-seeking for children with acute respiratory infection symptoms**

[2] **MICS Indicator 3.14 - Antibiotic treatment for children with ARI symptoms**

a Community health providers includes public (Community health worker and Mobile/outreach clinic) and private (Mobile clinic) health facilities

b Includes all public and private health facilities and providers, but excludes private pharmacies

c Includes all public and private health facilities and providers

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table CH.10 presents the percentage of children with symptoms of ARI in the two weeks preceding the survey for whom care was sought, by source of care and percentage who received antibiotics.

Overall, 81.1 per cent of children aged 0-59 months with symptoms of ARI were taken to a qualified health provider with the figure slightly higher for private providers. However, treatment or advice was not sought for one-in-10 children with symptoms of ARI. In Viet Nam, 88.2 per cent of under-5 children with symptoms of ARI received antibiotics during the two weeks prior to the survey. Table CH.10 also shows the point of treatment among children with symptoms of ARI who were treated with antibiotics. The treatment was received more from private health facilities (56.4 per cent) than public ones (42.6 per cent).

Table CH.11: Knowledge of the two danger signs of pneumonia

Percentage of women aged 15-49 years who are mothers or caretakers of children aged under-5 by symptoms that would cause them to take a child aged under-5 immediately to a health facility, and percentage of mothers who recognize fast or difficult breathing as signs for seeking care immediately, Viet Nam, 2014

	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:										Mothers/caretakers who recognize at least one of the two danger signs of pneumonia (fast and/or difficult breathing)	Number of women aged 15-49 years who are mothers/ caretakers of children aged under 5
	Is not able to drink or be breastfed	Becomes sicker	Develops a fever	Has fast breathing	Has difficult breathing	Has blood in stool	Is drinking poorly	Has vomiting	Has choking	Has other symptoms		
Total	**7.0**	**27.7**	**90.8**	**4.8**	**25.5**	**2.7**	**4.2**	**16.9**	**1.2**	**55.2**	**28.4**	**2715**
Region												
Red River Delta	5.6	36.3	90.8	8.8	33.7	3.5	5.5	14.1	0.4	49.3	38.8	638
Northern Midlands and Mountainous area	7.7	25.3	90.3	3.5	25.5	4.5	1.9	19.6	2.1	62.8	27.2	419
North Central and Central coastal area	8.8	21.5	92.1	2.2	23.5	2.0	2.8	16.0	0.7	56.1	24.6	566
Central Highlands	9.8	31.8	89.0	5.9	26.0	2.9	5.2	24.1	1.4	55.8	27.8	196
South East	7.5	23.7	91.5	5.3	21.8	1.6	7.1	19.6	1.9	55.9	25.9	435
Mekong River Delta	4.5	27.5	89.7	2.5	19.9	1.7	2.8	13.9	1.5	54.3	22.2	462
Area												
Urban	8.1	22.7	92.1	4.4	25.4	3.3	4.4	20.7	2.0	57.3	27.2	832
Rural	6.6	29.8	90.2	4.9	25.5	2.4	4.1	15.2	0.9	54.2	28.8	1884
Education												
None	5.9	32.7	84.2	4.6	13.8	1.2	3.5	13.4	0.0	47.0	18.4	142
Primary	3.8	30.6	87.4	3.3	20.7	1.5	4.0	13.2	0.2	52.7	23.1	384
Lower Secondary	5.8	28.2	92.2	4.2	24.6	2.4	4.5	15.2	1.5	56.0	27.3	1011
Upper Secondary	7.5	24.5	91.4	6.2	28.0	3.1	3.7	17.6	1.4	57.6	31.9	567
Tertiary	10.9	26.7	91.5	5.2	30.3	3.7	4.3	22.3	1.4	54.9	32.5	611
Wealth Index quintiles												
Poorest	5.6	30.6	87.8	3.6	22.6	2.2	4.3	16.4	1.1	51.2	24.9	552
Second	7.1	24.6	92.4	3.1	24.2	2.5	4.3	15.0	0.8	55.2	26.4	521
Middle	5.9	27.9	91.2	5.4	24.6	1.6	3.1	16.0	0.2	56.0	28.7	543
Fourth	6.8	29.6	91.9	6.7	24.7	2.8	4.3	16.1	1.2	59.0	28.2	565
Richest	9.8	25.2	90.7	4.9	31.6	4.3	4.7	21.1	2.7	54.3	33.7	534
Ethnicity of household head												
Kinh/Hoa	7.0	27.8	91.2	5.1	26.2	2.6	4.2	16.8	1.2	55.0	29.3	2259
Ethnic Minorities	7.4	27.2	88.9	3.0	22.0	3.2	3.8	17.4	1.2	55.8	23.7	457

Mothers' knowledge of danger signs is an important determinant of care-seeking behaviour. In Viet Nam MICS 2014, mothers or caretakers were asked to report symptoms that would cause them to take a child under-5 for care immediately at a health facility. Issues related to knowledge of danger signs of pneumonia are presented in Table CH.11. Overall, 28.4 per cent of mothers or caretakers of children knew at least one of the two danger signs of pneumonia (fast and/or difficult breathing).

The most commonly identified symptom for taking a child to a health facility was "the child develops a fever" (90.8 per cent). Only 4.8 per cent of mothers identified fast breathing and 25.5 per cent difficult breathing as symptoms for taking children immediately to a health facility. The proportion of mothers who knew at least one of the two danger signs was highest in the Red River Delta (38.8 per cent) and lowest in the Mekong River Delta region (22.2 per cent). This knowledge was heightened by a mother's education, with 32.5 per cent of mothers with tertiary educations knowing about such signs in contrast to 18.4 per cent of non-educated mothers. Knowledge about the danger signs of pneumonia increases with higher wealth index quintile status, while Kinh/Hoa households (29.3 per cent) outscored ethnic minority households (23.7 per cent).

Interestingly, about 55.2 per cent of interviewed women recognized other signs (not the nine signs in the survey) that they felt warranted a child to be immediately taken to a health facility.

Solid Fuel Use

More than three billion people around the world rely on solid fuels for their basic energy needs, including cooking and heating. Solid fuels include biomass fuels, such as wood, charcoal, crops or other agricultural waste, dung, shrubs and straw, and coal. Cooking and heating with solid fuels leads to high levels of indoor smoke which contains a complex mix of health-damaging pollutants. The main problem with use of solid fuels is their incomplete combustion, which produces toxic elements such as carbon monoxide, poly aromatic hydrocarbons and sulphur dioxide (SO2), among others. Use of solid fuels increases risks of incurring acute respiratory illness, pneumonia, chronic obstructive lung disease, cancer, and possibly tuberculosis, asthma, or cataracts, and may contribute to low birth weight of babies born to pregnant women exposed to smoke. The primary indicator for monitoring use of solid fuels is the proportion of population using solid fuels as the primary source of domestic energy for cooking, as shown in Table CH.12.

Table CH.12: Solid fuel use

Percentage distribution of household members according to type of cooking fuel mainly used by the household, and percentage of household members living in households using solid fuels for cooking, Viet Nam, 2014

	Percentage of household members in households mainly using:													Number of household members
						Solid fuels					No food cooked in the household	Total	Solid fuels for cooking[1]	
	Electricity	Liquefied Petroleum Gas (LPG)	Natural Gas	Biogas	Kerosene	Coal/ Lignite	Char	Wood	Straw/ Shrubs/ Grass	Agricultural crop residue				
Total	**1.6**	**54.8**	**0.2**	**1.4**	**0.2**	**1.7**	**2.8**	**35.1**	**1.5**	**0.5**	**0.1**	**100**	**41.6**	**38506**
Region														
Red River Delta	2.3	67.8	0.4	3.2	0.0	5.8	0.8	13.1	5.7	0.8	0.1	100	26.2	9091
Northern Midlands and Mountainous area	0.5	26.5	0.1	2.8	0.0	1.0	0.9	67.8	0.4	0.1	0.0	100	70.2	5240
North Central and Central coastal area	0.9	50.4	0.2	0.5	0.3	0.5	6.4	39.7	0.2	0.8	0.2	100	47.6	8214
Central Highlands	1.6	45.2	0.1	0.3	0.0	0.1	1.6	51.0	0.0	0.0	0.1	100	52.7	2432
South East	3.0	79.3	0.3	0.2	0.7	0.2	0.8	15.1	0.0	0.0	0.3	100	16.1	6373
Mekong River Delta	1.1	45.7	0.1	0.6	0.1	0.5	4.9	46.2	0.2	0.6	0.1	100	52.3	7156
Area														
Urban	2.9	77.5	0.2	0.2	0.6	3.1	1.4	13.5	0.1	0.2	0.3	100	18.4	12236
Rural	1.0	44.3	0.2	2.0	0.0	1.1	3.5	45.2	2.1	0.6	0.1	100	52.4	26270
Education of household head														
None	0.8	24.2	0.3	0.1	0.9	0.8	4.1	67.0	1.6	0.1	0.2	100	73.5	2795
Primary	1.0	39.8	0.1	1.1	0.3	1.3	4.1	49.6	1.8	0.7	0.1	100	57.5	9940
Lower Secondary	1.1	53.9	0.2	1.9	0.1	2.4	2.9	34.8	1.9	0.5	0.1	100	42.6	14907
Upper Secondary	2.3	71.9	0.1	1.6	0.1	1.3	1.6	19.6	0.9	0.5	0.2	100	23.9	5987
Tertiary	3.9	84.7	0.5	1.0	0.2	1.5	0.6	7.0	0.4	0.1	0.2	100	9.6	4877
Wealth Index quintiles														
Poorest	0.3	2.4	0	0.3	0.1	0.3	4.6	90.1	1.7	0.2	0.2	100	96.8	7703
Second	0.5	23.4	0.1	1.6	0.2	1.1	6.0	61.5	4.3	1.1	0.4	100	73.8	7696
Middle	1.9	66.8	0.2	3.0	0.5	2.8	2.7	19.8	1.5	0.8	0.1	100	27.5	7702
Fourth	2.5	86.6	0.5	1.8	0.1	3.4	0.7	4.1	0.1	0.3	0.0	100	8.5	7704
Richest	2.9	94.9	0.2	0.5	0.1	1.2	0.1	0.1	0.0	0.0	0.0	100	1.3	7702
Ethnicity of household head														
Kinh/Hoa	1.8	61.9	0.2	1.5	0.2	2.0	2.7	27.2	1.7	0.6	0.2	100	34.1	33102
Ethnic Minorities	0.3	11.3	0.0	1.0	0.0	0.3	3.6	83.6	0.0	0.0	0.0	100	87.4	5404

[1] MICS Indicator 3.15 - Use of solid fuels for cooking

Overall, 41.6 per cent of all households in Viet Nam use solid fuels for cooking, consisting mainly of wood (35.1 per cent). Use of solid fuels was very low in urban areas (18.4 per cent), but very high in rural areas, where they were used by just over half of households (52.4 per cent). Education levels and wealth index quintiles were clear factors for use of solid fuels for cooking, with 73.5 per cent of households with non-educated household heads using solid fuels, compared to less than 10 per cent of households with tertiary-educated household heads. Some 96.8 per cent of poorest wealth index quintile households compared to 1.3 per cent of richest households use solid fuels for cooking. The findings show that use of solid fuels ranged from 16.1 per cent in the South East to 70.2 per cent in the Northern Midlands and Mountainous area. A much higher proportion of ethnic minority households (87.4 per cent) use solid fuel for cooking than Kinh/Hoa households (34.1 per cent).

Table CH.13: Solid fuel use by place of cooking

Percentage distribution of household members in households using solid fuels by place of cooking, Viet Nam, 2014

	Place of cooking:						Number of household members in households using solid fuels for cooking
	In the house		In a separate building	Outdoors	Other place	Total	
	In a separate room used as kitchen	Elsewhere					
Total	**18.1**	**15.7**	**62.3**	**3.7**	**0.1**	**100**	**16021**
Region							
Red River Delta	8.3	1.6	85.0	5.0	0.2	100	2381
Northern Midlands and Mountainous area	14.7	27.0	57.8	0.4	0.1	100	3677
North Central and Central coastal area	18.2	7.6	69.8	4.4	0.0	100	3910
Central Highlands	19.3	19.9	56.5	4.2	0.1	100	1282
South East	31.8	9.9	49.4	8.5	0.3	100	1028
Mekong River Delta	23.5	22.4	50.1	4.0	0.0	100	3742
Area							
Urban	23.7	14.8	51.8	9.5	0.2	100	2250
Rural	17.2	15.9	64.0	2.8	0.1	100	13771
Education of household head							
None	19.5	33.2	43.0	4.3	0.0	100	2056
Primary	20.2	17.1	58.9	3.8	0.1	100	5714
Lower Secondary	15.6	10.8	70.0	3.4	0.1	100	6352
Upper Secondary	20.4	8.9	66.7	4.0	0.0	100	1431
Tertiary	14.3	9.4	71.4	4.8	0.1	100	468
Wealth Index quintiles							
Poorest	18.9	26.7	51.3	3.1	0.1	100	7459
Second	16.9	6.3	72.9	3.9	0.1	100	5683
Middle	19.5	6.4	71.6	2.3	0.3	100	2121
Fourth	16.2	3.0	68.7	12.1	0.0	100	656
Richest	20.0	12.6	47.3	20.2	0.0	100	101
Ethnicity of household head							
Kinh/Hoa	18.6	10.0	67.3	4.1	0.1	100	11296
Ethnic Minorities	17.1	29.5	50.5	2.9	0.0	100	4724

Solid fuel use by place of cooking is depicted in Table CH.13. The presence and extent of indoor pollution were dependent on cooking practices, places used for cooking as well as types of fuel used.

According to Viet Nam MICS 2014, 18.1 per cent of households cook in a separate room used as a kitchen. The percentage of households that cook in a separate room used as a kitchen within the dwelling unit was higher in urban (23.7 per cent) than rural areas (17.2 per cent).

CHAPTER VII

WATER AND SANITATION

VII. WATER AND SANITATION

Safe drinking water is a basic necessity for people's good health. But, unsafe drinking water can be a significant determinant of diseases such as diarrhoea, cholera, typhoid, schistosomiasis, skin related diseases and trachoma. Drinking water can also be contaminated with chemicals, pesticides and physical contaminants (human, animal and industrial wastes) with harmful effects on human health. In addition to preventing disease, access to improved drinking water can be particularly important for women and children, especially in rural areas, who bear the primary responsibility for carrying water, often for long distances[20].

Inadequate disposal of human excreta and personal hygiene are associated with a range of diseases, including diarrhoeal diseases and polio and are important determinants of stunting. Improved sanitation can reduce diarrhoeal diseases by more than a third[21], and can substantially lessen the adverse health impacts of other disorders among millions of children in many countries. The MDG target 7 (7, C) is to reduce by half, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation. For further information on water and sanitation and to access some reference documents, please visit data.unicef.org[22] or the website of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation.

Use of Improved Water Sources

The distribution of the population by main source of drinking water is shown in Table WS.1. The population using improved sources of drinking water are those using any of the following types of supply: piped water (into dwelling, compound, yard or plot, to neighbour, public tap/standpipe), tube well/borehole, protected well, protected spring and rainwater collection. Bottled water is only considered an improved water source if the household is using another improved water source for handwashing and cooking.

20 WHO/UNICEF. 2012. Progress on Drinking water and Sanitation: 2012 update.

21 Cairncross, S et al. 2010. Water, sanitation and hygiene for the prevention of diarrhoea. International Journal of Epidemiology 39: i193-i205.

22 http://data.unicef.org/water-sanitation.

Table WS.1: Use of improved water sources

Percentage distribution of household population according to main source of drinking water and percentage of household population using improved drinking water sources, Viet Nam, 2014

	Main source of drinking water														Total	Percentage using improved sources of drinking water[1]	Number of household members
	Improved sources									Unimproved sources							
	Piped water				Tube-well/ bore-hole	Protected well	Protected spring	Rain-water collection	Bottled watera	Unprotected well	Unprotected spring	Surface water	Bottled watera	Other			
	Into dwelling	Into yard/ plot	To neighbour	Public tap/ stand-pipe													
Total	**24.0**	**1.9**	**0.3**	**0.1**	**19.6**	**11.6**	**4.5**	**15.2**	**15.0**	**3.6**	**2.0**	**1.3**	**1.0**	**0.1**	**100**	**92.0**	**38506**
Region																	
Red River Delta	33.3	2.4	0.1	0.0	24.8	3.2	0.0	27.6	7.9	0.5	0.0	0.1	0.1	0.0	100	99.3	9091
Northern Midlands and Mountainous area	14.0	3.2	0.2	0.1	13.2	26.3	29.3	1.9	1.6	6.0	4.0	0.0	0.1	0.0	100	89.9	5240
North Central and Central coastal area	23.4	3.0	0.6	0.1	22.8	15.9	0.5	10.2	10.0	10.4	3.0	0.0	0.2	0.0	100	86.4	8214
Central Highlands	11.0	0.6	0.0	0.0	6.5	47.7	5.4	0.6	11.6	3.8	11.9	0.4	0.6	0.0	100	83.3	2432
South East	36.6	0.5	0.4	0.1	26.5	5.0	0.3	0.0	28.1	1.1	0.2	0.0	0.8	0.4	100	97.5	6373
Mekong River Delta	13.3	0.8	0.0	0.0	12.2	0.4	0.0	33.1	28.9	0.1	0.0	6.7	4.3	0.0	100	88.9	7156
Area																	
Urban	55.9	2.8	0.4	0.0	8.7	5.8	1.2	3.5	19.9	0.8	0.4	0.2	0.4	0.0	100	98.2	12236
Rural	9.1	1.5	0.2	0.1	24.6	14.3	6.0	20.6	12.7	4.9	2.7	1.8	1.4	0.1	100	89.1	26270
Education of household head																	
None	11.6	3.6	0.2	0.1	14.7	9.9	18.8	11.3	11.9	6.2	6.8	2.6	2.0	0.3	100	82.0	2795
Primary	16.2	1.8	0.4	0.0	20.3	11.0	5.1	17.5	15.7	4.1	3.0	2.8	2.1	0.1	100	88.0	9940
Lower Secondary	18.5	1.9	0.2	0.0	22.2	14.2	3.8	17.9	14.1	4.1	1.4	0.8	0.8	0.0	100	92.9	14907

	Main source of drinking water														Total	Percentage using improved sources of drinking water[1]	Number of household members
	Improved sources									Unimproved sources							
	Piped water				Tube-well/ bore-hole	Protected well	Protected spring	Rain-water collection	Bottled watera	Unprotected well	Unprotected spring	Surface water	Bottled watera	Other			
	Into dwelling	Into yard/ plot	To neighbour	Public tap/ stand-pipe													
Upper Secondary	33.1	1.8	0.3	0.0	19.9	11.2	1.2	11.7	16.7	2.8	0.6	0.3	0.3	0.1	100	95.9	5987
Tertiary	52.5	1.4	0.0	0.3	12.6	6.5	1.3	8.4	15.8	0.5	0.4	0.1	0.1	0.0	100	98.9	4877
Wealth Index quintiles																	
Poorest	2.6	3.0	0.3	0.0	14.0	17.3	19.4	13.4	4.4	10.1	8.9	4.3	2.4	0.0	100	74.3	7703
Second	7.5	2.4	0.3	0.1	24.9	19.3	2.6	23.1	10.4	5.6	0.6	1.5	1.6	0.2	100	90.6	7696
Middle	13.8	1.7	0.4	0.0	28.2	12.2	0.3	20.9	18.6	1.9	0.2	0.5	1.1	0.1	100	96.1	7702
Fourth	28.3	1.8	0.3	0.1	21.2	7.8	0.2	14.5	24.9	0.4	0.1	0.1	0.2	0.0	100	99.2	7704
Richest	67.7	0.7	0.0	0.0	9.5	1.6	0.0	4.0	16.6	0.0	0.0	0	0.0	0.0	100	100	7702
Ethnicity of household head																	
Kinh/Hoa	27.0	1.5	0.3	0.0	21.8	10.1	0.3	17.4	16.4	2.4	0.1	1.4	1.2	0.1	100	94.8	33102
Ethnic Minorities	5.6	4.3	0.2	0.1	5.8	20.9	30.4	1.4	6.3	10.8	13.4	0.5	0.2	0.0	100	75.1	5404

[1] **MICS Indicator 4.1, MDG indicator 7.8 - Use of improved drinking water sources**

a Households using bottled water as the main source of drinking water are classified into improved or unimproved drinking water users, according to the water source used for other purposes such as cooking and handwashing.

Overall, 92 per cent of the population used an improved source of drinking water – 98.2 per cent in urban areas and 89.1 per cent in rural areas. The situation in the Central Highlands and North Central and Central coastal area was worse than other regions, with 83.3 and 86.4 per cent of the populations respectively, using improved sources of drinking water.

The source of drinking water varied significantly by region (Table WS.1). In the South East region, 37.1 per cent of the population used drinking water that was piped into their dwelling, yard or plot. In the Red River Delta region, 35.7 per cent of the population used piped water into their dwelling, yard or plot as did 26.4 per cent of the North Central and Central coastal area. In contrast, only 17.2 per cent of those residing in the Northern Midlands and Mountainous area, 14.1 per cent in the Mekong River Delta and 11.6 per cent in the Central Highlands used piped water into their dwelling, yard or plot. For these latter regions with less usage of piped water, households in the Northern Midlands and Mountainous area used protected springs (29.3 per cent) and protected wells (26.3 per cent) as main sources of water. Meanwhile, rain water collection (33.1 per cent) and bottled water (28.9 per cent) were the two main sources of water for the Mekong River Delta and protected wells (47.7 per cent) were the main source of water for the Central Highlands. Of the three regions with high usage of unimproved sources, unprotected springs (11.9 per cent) were most commonly used in the Central Highlands and unprotected wells (10.4 per cent) in the North Central and Central coastal area, while surface water (6.7 per cent) was typically used in the Mekong River Delta.

Figure WS.1: Percentage distribution of household members by source of drinking water, Viet Nam MICS 2014

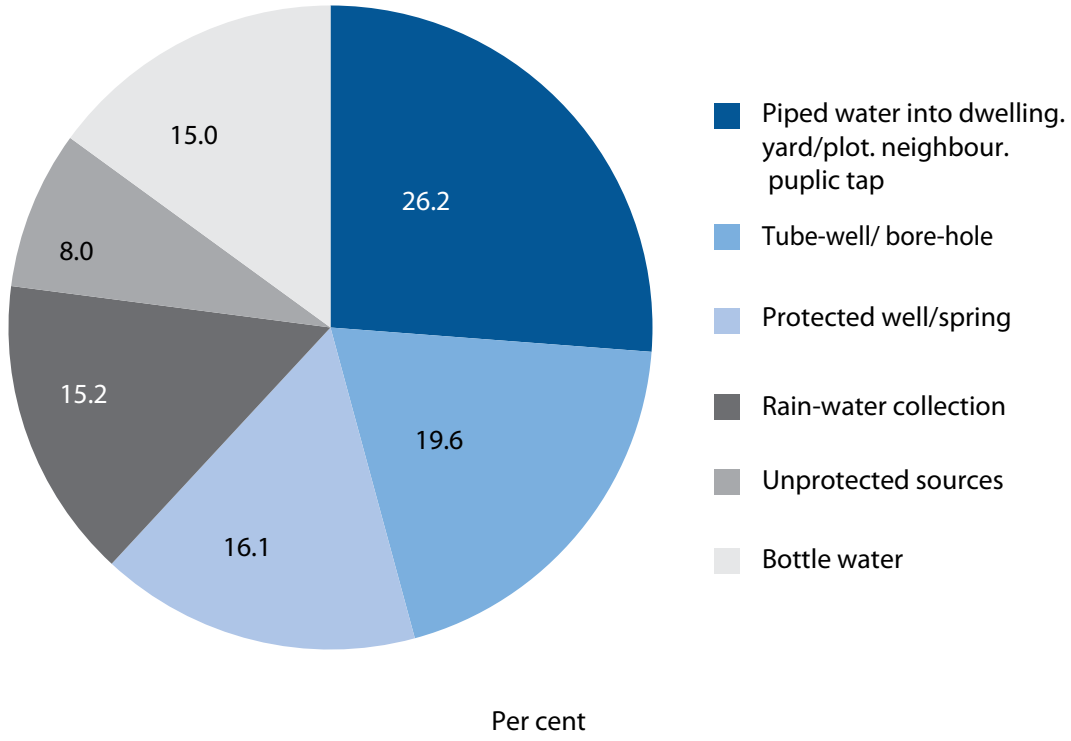


Table WS.2 provides percentages of household members using unimproved drinking water sources and appropriate water treatment methods at home for drinking water. Households were asked about the ways they treat water at home to make it safer to drink. Boiling water, adding bleach or chlorine, using a water filter and solar disinfection are considered effective treatments of drinking water.

The table shows water treatment by all household members and the percentage of those living in households using unimproved water sources, but using appropriate water treatment methods. Overall, the most widely used treatment methods were boiling (81.4 per cent), followed by filtering (18 per cent).

Some 15.3 per cent of households using unimproved drinking water sources did not use any water treatment method before drinking. This rate was high for the Central Highlands (25.9 per cent), South East (26.2 per cent) and highest in the Mekong River Delta (31.4 per cent).

The overall rate was 79 per cent, with significant differences in urban (64.1 per cent) and rural (80.2 per cent) areas. Almost all household members in the Red River Delta (97.3 per cent), Northern Midlands and Mountainous area (100 per cent) and North Central and Central coastal area (94.5 per cent) treated unimproved drinking water sources with an appropriate water treatment method. In contrast, the figures were considerably less in the remaining regions, such as the South East (67.7 per cent), Mekong River Delta (68.3 per cent) and just 31.8 per cent in the Central Highlands. Of note, there was little difference between Kinh/Hoa and ethnic minorities.

Table WS.2: Household water treatment

Percentage of household population by drinking water treatment method used in the household and household members living in households where an unimproved drinking water source is used as well as the percentage using an appropriate treatment method, Viet Nam MICS, 2014

	Water treatment method used in the household						Number of household members	Percentage of household members in households using unimproved drinking water sources and an appropriate water treatment method[1]	Number of household members in households using unimproved drinking water sources
	None	Boil	Use water filter	Add bleach/ chlorine/ Strain through a cloth/Solar disinfection	Let it stand and settle	Other/ DK			
Total	**15.3**	**81.4**	**18.0**	**3.3**	**8.4**	**4.0**	**38506**	**79.0**	**3066**
Region									
Red River Delta	3.1	94.5	34.7	0.8	6.3	4.7	9091	(97.3)	60
Northern Midlands and Mountainous area	0.8	98.6	15.3	0.7	4.3	4.0	5240	100	532
North Central and Central coastal area	12.4	86.6	13.1	0.4	6.6	7.9	8214	94.5	1116
Central Highlands	25.9	73.5	10.9	1.0	2.5	0.5	2432	31.8	407
South East	26.2	70.8	18.2	1.5	0.8	3.2	6373	67.7	158
Mekong River Delta	31.4	58.0	6.5	14.3	25.2	0.4	7156	68.3	794
Area									
Urban	17.9	77.9	22.4	1.7	4.2	5.1	12236	64.1	215
Rural	14.1	83.0	15.9	4.1	10.4	3.5	26270	80.2	2851
Main source of drinking water									
Improved	14.8	81.7	19.1	2.4	8.4	4.2	35440	na	na
Unimproved	21.0	77.4	4.8	14.1	8.6	2.0	3066	79.0	3066
Education of household head									
None	24.1	73.0	4.0	4.0	9.1	1.0	2795	62.5	504
Primary	19.6	76.3	11.1	5.6	12.4	2.0	9940	75.0	1195
Lower Secondary	13.0	84.3	18.1	3.0	8.2	3.6	14907	86.7	1064

	Water treatment method used in the household						Number of household members	Percentage of household members in households using unimproved drinking water sources and an appropriate water treatment method[1]	Number of household members in households using unimproved drinking water sources
	None	Boil	Use water filter	Add bleach/ chlorine/ Strain through a cloth/Solar disinfection	Let it stand and settle	Other/ DK			
Upper Secondary	12.9	83.5	24.7	2.2	6.7	4.6	5987	96.0	247
Tertiary	11.3	84.6	31.2	1.0	2.9	10.3	4877	95.8	56
Wealth Index quintiles									
Poorest	14.9	81.0	2.8	7.0	12.4	1.3	7703	78.7	1977
Second	13.2	83.7	11.5	4.3	13.0	2.0	7696	79.0	725
Middle	16.8	80.7	17.4	2.0	9.3	3.7	7702	77.7	303
Fourth	19.9	77.8	22.1	2.1	5.7	5.0	7704	(100)	59
Richest	11.5	83.5	36.1	1.3	1.9	7.9	7702	*	2
Ethnicity of household head									
Kinh/Hoa	15.3	80.9	20.3	3.7	8.9	4.1	33102	79.9	1719
Ethnic Minorities	15.4	83.9	3.9	1.2	5.4	3.3	5404	78.0	1347

[1] **MICS Indicator 4.2 - Water treatment**

NA: not applicable

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

The amount of time it takes to obtain water is presented in Table WS.3 and the person who usually collects the water is shown in Table WS.4. Note that for Table WS.3, household members using water on premises are also shown in this table. For others, the results refer to one roundtrip from home to drinking water source.

Table WS.3 shows that for 94.1 per cent of households, the drinking water source was on the premises. The availability of water on premises is associated with higher use, better family hygiene and better health outcomes. For a water collection round trip of 30 minutes or more it has been observed that households carry progressively less water and were likely to compromise on the minimal basic drinking water needs of the household[23]. Only a very small percentage of households take more than 30 minutes (0.8 per cent) to get to the water source and bring water. One striking finding was the comparatively high percentage of household members in the Central Highlands (8.8 per cent), who live in households spending 30 minutes or more to go to the source of drinking water compared to the other regions. Ethnic minorities are more likely to spend more than 30 minutes collecting water (4.9 per cent) than Kinh/Hoa.

Meanwhile, households with non-educated heads and who belong to the poorest wealth index quintiles are likely to spend more time per day collecting water.

23 Cairncross, S and Cliff, JL. 1987. Water use and Health in Mueda, Mozambique. Transactions of the Royal Society of Tropical Medicine and Hygiene 81: 51-4.

Table WS.3: Time to source of drinking water

Percentage distribution of household population according to time to go to source of drinking water, get water and return, for users of improved and unimproved drinking water sources, Viet Nam, 2014

	Time to source of drinking water								Total	Number of household members
	Users of improved drinking water sources				Users of unimproved drinking water sources					
	Water on premises	Less than 30 minutes	30 minutes or more	Missing/DK	Water on premises	Less than 30 minutes	30 minutes or more	Missing/DK		
Total	**89.5**	**2.3**	**0.2**	**0.1**	**4.6**	**2.5**	**0.6**	**0.2**	**100**	**38506**
Region										
Red River Delta	98.7	0.6	0.0	0.0	0.6	0.0	0.0	0.0	100	9091
Northern Midlands and Mountainous area	83.5	5.4	0.7	0.3	8.2	1.6	0.3	0.1	100	5240
North Central and Central coastal area	84.0	2.1	0.3	0.0	10.8	2.6	0.2	0.0	100	8214
Central Highlands	75.9	6.4	0.8	0.1	2.9	5.2	8.0	0.7	100	2432
South East	95.7	1.8	0.0	0.0	1.3	1.0	0.0	0.2	100	6373
Mekong River Delta	87.4	1.3	0.1	0.0	3.4	6.8	0.1	0.7	100	7156
Area										
Urban	97.2	0.9	0.1	0.0	1.0	0.5	0.2	0.0	100	12236
Rural	85.8	2.9	0.3	0.1	6.3	3.5	0.8	0.3	100	26270
Education of household head										
None	73.8	7.5	0.7	0.0	6.8	6.1	4.1	1.0	100	2795
Primary	84.9	2.7	0.3	0.0	6.1	4.8	0.7	0.5	100	9940
Lower Secondary	90.7	1.9	0.2	0.1	4.9	1.8	0.4	0.1	100	14907
Upper Secondary	94.6	1.2	0.1	0.0	3.4	0.7	0.0	0.0	100	5987
Tertiary	97.9	0.8	0.1	0.0	1.0	0.2	0.0	0.0	100	4877
Wealth Index quintiles										
Poorest	65.7	7.3	1.0	0.3	12.7	9.1	3.0	0.9	100	7703
Second	88.1	2.3	0.2	0.0	6.9	2.3	0.1	0.1	100	7696
Middle	95.1	0.9	0.0	0.0	2.7	1.1	0.0	0.1	100	7702
Fourth	98.5	0.7	0.0	0.0	0.6	0.1	0.0	0.1	100	7704
Richest	99.9	0.1	0.0	0.0	0.0	0.0	0.0	0.0	100	7702
Ethnicity of household head										
Kinh/Hoa	93.2	1.4	0.1	0.0	3.2	1.8	0.1	0.2	100	33102
Ethnic Minorities	66.4	7.5	0.8	0.3	13.1	7.2	4.1	0.5	100	5404

Table WS.4: Person collecting water

Percentage of households without drinking water on premises and percentage distribution of households without drinking water on premises according to person usually collecting drinking water used in the household, Viet Nam, 2014

	Percentage of households without drinking water on premises	Number of households	Person usually collecting drinking water							Number of households without drinking water on premises
			Adult woman (age 15+ years)	Adult man (age 15+ years)	Female child (under 15)	Male child (under 15)	DK	Missing	Total	
Total	**6.0**	**9979**	**64.5**	**31.1**	**1.9**	**0.9**	**1.0**	**0.6**	**100**	**596**
Region										
Red River Delta	0.7	2468	*	*	*	*	*	*	*	18
Northern Midlands and Mountainous area	8.4	1292	64.1	31.0	4.0	0.0	0.0	0.9	100	108
North Central and Central coastal area	5.9	2245	80.5	16.2	1.4	1.3	0.0	0.6	100	133
Central Highlands	18.9	558	70.9	21.3	5.2	1.7	0.6	0.5	100	106
South East	3.2	1557	50.9	42.0	0.0	0.0	5.1	2.0	100	51
Mekong River Delta	9.7	1859	50.7	46.8	0.0	1.1	1.4	0.0	100	181
Area										
Urban	1.7	3102	69.2	21.9	1.5	1.8	2.2	3.5	100	53
Rural	7.9	6877	64.1	32.0	2.0	0.8	0.8	0.3	100	543
Education of household head										
None	18.7	680	72.5	21.2	3.9	2.2	0.2	0.0	100	127
Primary	9.1	2534	64.3	31.3	2.2	0.1	1.2	0.9	100	230
Lower Secondary	4.7	3853	65.1	31.5	0.8	1.3	1.1	0.3	100	182
Upper Secondary	2.4	1578	(53.7)	(42.1)	(0.0)	(0.0)	(2.0)	(2.2)	(100)	38
Tertiary	1.4	1333	*	*	*	*	*	*	*	18
Wealth Index quintiles										
Poorest	20.5	2078	68.8	26.9	2.6	0.8	0.7	0.2	100	427
Second	5.2	2076	60.9	36.6	0.0	1.6	0.0	0.9	100	107
Middle	2.0	2040	(44.6)	(49.4)	(0.0)	(0.6)	(4.2)	(1.2)	(100)	41
Fourth	0.9	1956	*	*	*	*	*	*	*	18
Richest	0.1	1829	*	*	*	*	*	*	*	3
Ethnicity of household head										
Kinh/Hoa	4.0	8772	57.7	38.9	0.2	0.9	1.7	0.7	100	348
Ethnic Minorities	20.6	1207	74.2	20.1	4.5	0.9	0.0	0.4	100	248

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table WS.4 shows that among households without a water source on the premises, the majority of households (64.5 per cent), an adult female was usually the person who collected drinking water, while adult men collected water in only 31.1 per cent of cases and in 2.8 per cent of the households female or male children aged under 15 years did so. The percentage of households with adult women collecting water was higher for ethnic minorities (74.2 per cent) than Kinh/Hoa (57.7 per cent).

Use of Improved Sanitation

An "improved sanitation" facility is defined as one that hygienically separates human excreta from human and animal contact. Improved sanitation facilities for excreta disposal include flush or pour flush to a piped sewer system, septic tank or pit latrine, ventilated improved pit latrine, pit latrine with slab and use of a composting toilet. Data on the use of improved sanitation facilities in Viet Nam is provided in Table WS.5.

About 82.9 per cent of the population of Viet Nam live in households that used improved sanitation facilities (Table WS.5). This percentage was 93.7 per cent in urban areas and 77.7 per cent in rural areas. Most of the urban population use flush toilets connected to a sewerage system or septic tank. Residents of the Mekong River Delta (59.1 per cent) were less likely than those in other regions to use improved facilities. Table WS.5 also indicates that use of improved sanitation facilities was strongly correlated with wealth and different between urban and rural areas. The proportion of household population using improved sanitation facilities was 38.4 per cent in the poorest wealth index quintile, yet the percentage climbed to 99.9 per cent in the richest wealth index quintile. An unimproved sanitation facility or no facility was quite high among ethnic minorities (48.5 per cent) compared to Kinh/Hoa households (12.1 per cent).

Overall, 5.8 per cent of households practice open defecation (disposal of faeces in bushes, water surfaces and fields). This practice was highest in the Central Highlands region (21.9 per cent) followed by Northern Midlands and Mountainous area (12.9 per cent). The highest proportion was also observed in households whose heads have no education (26.9 per cent) and whose heads have primary education (9.0 per cent). Ethnic minorities have much higher rates of open defecation than Kinh/Hoa (26.8 per cent verses 2.4 per cent). One-in-four households in the poorest wealth index quintile practice open defecation.

Table WS.5: Types of sanitation facilities

Percentage distribution of household population according to type of toilet facility used by the household, Viet Nam, 2014

	Type of toilet facility used by householdg														
	Improved sanitation facility								Unimproved sanitation facility						
	Flush/pour flush to:														
	Piped sewer system	Septic tank	Pit latrine	Elsewhere	Unknown place/not sure/DK where	Ventilated improved pit latrine	Pit latrine with slab	Compos-ting toilet	Pit latrine without slab/ open pit	Bucket	Hanging toilet/ latrine	Other	Open defecation (no facility, bush, field)	Total	Number of household members
Total	**0.7**	**64.5**	**3.0**	**1.0**	**0.1**	**0.4**	**6.8**	**6.4**	**3.6**	**0.1**	**7.1**	**0.5**	**5.8**	**100**	**38506**
Region															
Red River Delta	0.6	79.7	3.6	0.4	0.0	0.1	4.8	9.0	1.1	0.1	0.3	0.3	0.1	100	9091
Northern Midlands and Mountainous area	0.6	34.7	4.2	0.9	0.1	0.1	12.5	20.3	10.7	0.2	0.4	2.4	12.9	100	5240
North Central and Central coastal area	0.1	63.4	2.7	0.6	0.0	0.3	15.0	6.0	4.5	0.1	0.4	0.1	6.8	100	8214
Central Highlands	2.4	50.4	3.3	0.2	0.0	0.1	8.4	3.6	9.4	0.0	0.1	0.2	21.9	100	2432
South East	0.9	86.9	2.7	0.4	0.2	1.3	1.1	0.1	1.4	0.0	1.0	0.0	4.0	100	6373
Mekong River Delta	0.7	53.2	1.7	2.9	0.0	0.3	0.2	0.1	0.7	0.0	36.5	0.6	3.0	100	7156
Area															
Urban	1.3	87.7	1.0	0.6	0.1	0.3	1.4	1.3	0.9	0.0	2.6	0.2	2.6	100	12236
Rural	0.4	53.7	3.9	1.1	0.1	0.4	9.3	8.8	4.9	0.1	9.3	0.7	7.3	100	26270
Education of household head															
None	0.8	37.2	2.4	1.4	0.1	0.7	5.2	3.6	8.5	0.0	11.5	1.5	26.9	100	2795
Primary	0.8	53.9	3.4	1.0	0.0	0.6	5.9	6.2	4.6	0.1	13.5	0.9	9.0	100	9940
Lower Secondary	0.7	62.3	3.7	0.9	0.0	0.3	9.6	8.9	3.8	0.0	5.8	0.5	3.6	100	14907
Upper Secondary	0.5	77.5	2.6	0.8	0.1	0.3	6.1	6.2	1.8	0.1	2.9	0.2	0.9	100	5987
Tertiary	0.4	92.6	0.7	0.7	0.1	0.1	1.9	1.3	0.5	0.2	0.9	0.0	0.4	100	4877
Wealth Index quintiles															
Poorest	0.5	11.0	3.8	0.8	0.1	0.2	11.8	10.2	14.2	0.2	19.5	2.1	25.6	100	7703
Second	0.9	41.0	6.7	1.5	0.0	0.7	15.1	14.8	3.2	0.1	12.6	0.5	2.8	100	7696
Middle	0.7	76.8	3.4	1.4	0.0	0.4	6.3	6.3	0.6	0.0	3.1	0.1	8.0	100	7702
Fourth	0.7	94.7	1.0	0.9	0.1	0.5	0.7	0.8	0	0.0	0.5	0.0	0.0	100	7704
Richest	0.5	99.1	0.1	0.1	0.0	0.1	0.0	0.0	0	0.0	0.1	0.0	0.0	100	7702
Ethnicity of household head															
Kinh/Hoa	0.7	71.1	2.8	1.0	0.0	0.4	6.2	5.7	1.5	0.1	7.8	0.3	2.4	100	33102
Ethnic Minorities	0.6	24.0	4.1	1.0	0.1	0.4	10.1	11.1	16.5	0.1	2.9	2.2	26.8	100	5404

The MDGs and the WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation classify acceptable sanitation facilities, which are public or shared between two or more households as "unimproved". Therefore, "use of improved sanitation" is used in the context of this report and as an MDG indicator (MDG indicator 7.9) to refer to improved sanitation facilities, which are not public or shared. Data on the use of improved sanitation is presented in Tables WS.6 and WS.7.

As shown in Table WS.6, 79.2 per cent of the household population use improved sanitation facilities and do not share them with other households. Most of the household population in the Red River Delta (94.1 per cent), South East (90.9 per cent) and North Central and Central coastal area (83.8 per cent) use improved sanitation facilities and do not share them with others, with the rate was lowest in the Mekong River Delta. There were also significant differences between urban (90.9 per cent) and rural (73.8 per cent) areas and between Kinh/Hoa (84.4 per cent) and ethnic minorities (47.2 per cent).

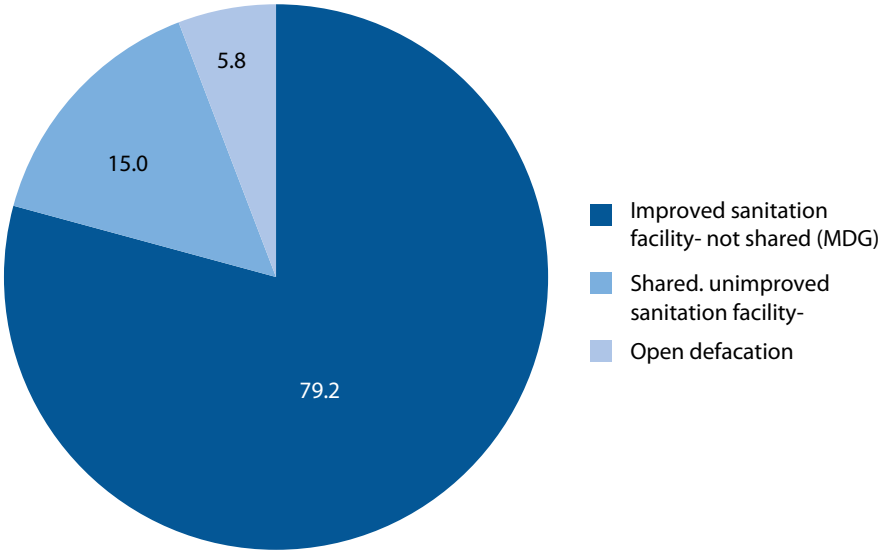
Table WS.6: Use and sharing of sanitation facilities

Percentage distribution of household population by use of private and public sanitation facilities and shared facilities, by users of improved and unimproved sanitation facilities, Viet Nam, 2014

	Users of improved sanitation facilities				Users of unimproved sanitation facilities					Open defecation (no facility, bush, field)	Total	Number of household members
			Shared by				Shared by					
	Not shared[1]	Public facility	Five households or less	More than five households	Not shared	Public facility	Five households or less	More than five households	Missing/DK			
Total	**79.2**	**0.2**	**3.3**	**0.1**	**7.8**	**0.7**	**2.6**	**0.3**	**0.1**	**5.8**	**100**	**38506**
Region												
Red River Delta	94.1	0.7	3.4	0.0	1.4	0.0	0.3	0.0	0.0	0.1	100	9091
Northern Midlands and Mountainous area	68.8	0.2	4.3	0.0	12.1	0.0	1.5	0.0	0.0	12.9	100	5240
North Central and Central coastal area	83.8	0.0	4.3	0.0	4.0	0.2	0.9	0.0	0.0	6.8	100	8214
Central Highlands	65.4	0.1	2.9	0.0	7.9	0.0	1.8	0.0	0.0	21.9	100	2432
South East	90.9	0.0	2.5	0.2	1.2	0.1	0.8	0.0	0.2	4.0	100	6373
Mekong River Delta	56.8	0.0	2.1	0.2	22.6	3.3	10.2	1.5	0.2	3.0	100	7156
Area												
Urban	90.9	0.1	2.5	0.2	2.2	0.3	1.1	0.0	0.0	2.6	100	12236
Rural	73.8	0.3	3.7	0.0	10.3	0.8	3.3	0.4	0.1	7.3	100	26270
Education of household head												
None	47.4	0.0	4.0	0.2	15.4	1.9	3.9	0.3	0.0	26.9	100	2795
Primary	67.2	0.2	4.5	0.1	12.1	1.5	4.5	1.0	0.2	9.0	100	9940
Lower Secondary	82.8	0.1	3.4	0.0	7.3	0.3	2.4	0.0	0.1	3.6	100	14907
Upper Secondary	91.8	0.3	1.9	0.1	3.8	0.2	1.0	0.0	0.0	0.9	100	5987
Tertiary	95.4	0.6	1.9	0.1	1.0	0.0	0.6	0.0	0.0	0.4	100	4877
Wealth Index quintiles												
Poorest	32.1	0.0	6.1	0.1	23.9	2.1	8.8	0.8	0.3	25.6	100	7703
Second	74.5	0.4	5.7	0.1	11.8	1.0	3.1	0.5	0.0	2.8	100	7696
Middle	92.3	0.3	2.8	0.1	2.6	0.2	1.0	0.1	0.0	0.8	100	7702
Fourth	97.7	0.4	1.4	0.0	0.4	0.1	0.0	0.0	0.0	0.0	100	7704
Richest	99.5	0.0	0.4	0.0	0.0	0.1	0.0	0.0	0.0	0.0	100	7702
Ethnicity of household head												
Kinh/Hoa	84.4	0.2	3.2	0.1	6.2	0.7	2.4	0.3	0.1	2.4	100	33102
Ethnic Minorities	47.2	0.2	4.1	0.0	17.5	0.3	3.9	0.1	0.0	26.8	100	5404

[1] MICS Indicator 4.3, MDG indicator 7.9 - Use of improved sanitation

Figure WS.2: Percentage distribution of household members by use and sharing of sanitation facilities, Viet Nam MICS 2014



Per cent

In its 2008 report[24], the JMP developed a new way of presenting the access figures, by disaggregating and refining the data on drinking water and sanitation and reflecting them in a "ladder" format. This ladder allows for a disaggregated analysis of trends in a three-rung ladder for drinking water and a four-rung ladder for sanitation. For sanitation, this gives an understanding of the proportion of population with no sanitation facilities at all – who revert to open defecation, of those reliant on technologies defined by the JMP as "unimproved," of those sharing sanitation facilities of otherwise acceptable technology and those using "improved" sanitation facilities.

Having access to an improved drinking water source and sanitation facility brings the largest public health benefits to a household[25]. Table WS.7 presents the percentages of household population by drinking water and sanitation ladders. It also shows the percentages of household members using both improved sources of drinking water[26] and an improved sanitary means of excreta disposal.

Overall, 75.7 per cent of the household population use improved sources of drinking water and improved sanitation facilities. There were significant regional, urban-rural and ethnicity differences in this indicator. The Red River Delta (93.5 per cent) and South East (90.1 per cent) were the highest regions and Mekong River Delta (53.5 per cent) the lowest, while urban (90.2 per cent) outscored rural areas (68.9 per cent) as did Kinh/Hoa (81.7 per cent) over ethnic minorities (38.7 per cent). The percentages of household members using improved drinking water sources and improved sanitation facilities increases with the levels of education of household heads. A similar trend is observed in households in the richest wealth index quintile, with almost universal usage compared to less than a quarter of households in the poorest wealth index quintile.

24 WHO/UNICEF JMP (2008), MDG assessment report – http://www.wssinfo.org/fileadmin/user_upload/resources/1251794333-JMP_08_en.pdf

25 Wolf, J et al. 2014. Systematic review: Assessing the impact of drinking water and sanitation on diarrhoeal disease in low- and middle-income settings: systematic review and meta-regression. Tropical Medicine and International Health 2014. DfID. 2013. Water, Sanitation and Hygiene: Evidence Paper. DfID: http://r4d.dfid.gov.uk/pdf/outputs/sanitation/WASH-evidence-paper-april2013.pdf

26 Those indicating bottled water as the main source of drinking water are distributed according to the water source used for other purposes, such as cooking and handwashing.

Table WS.7: Drinking water and sanitation ladders

Percentage of household population by drinking water and sanitation ladders, Viet Nam, 2014

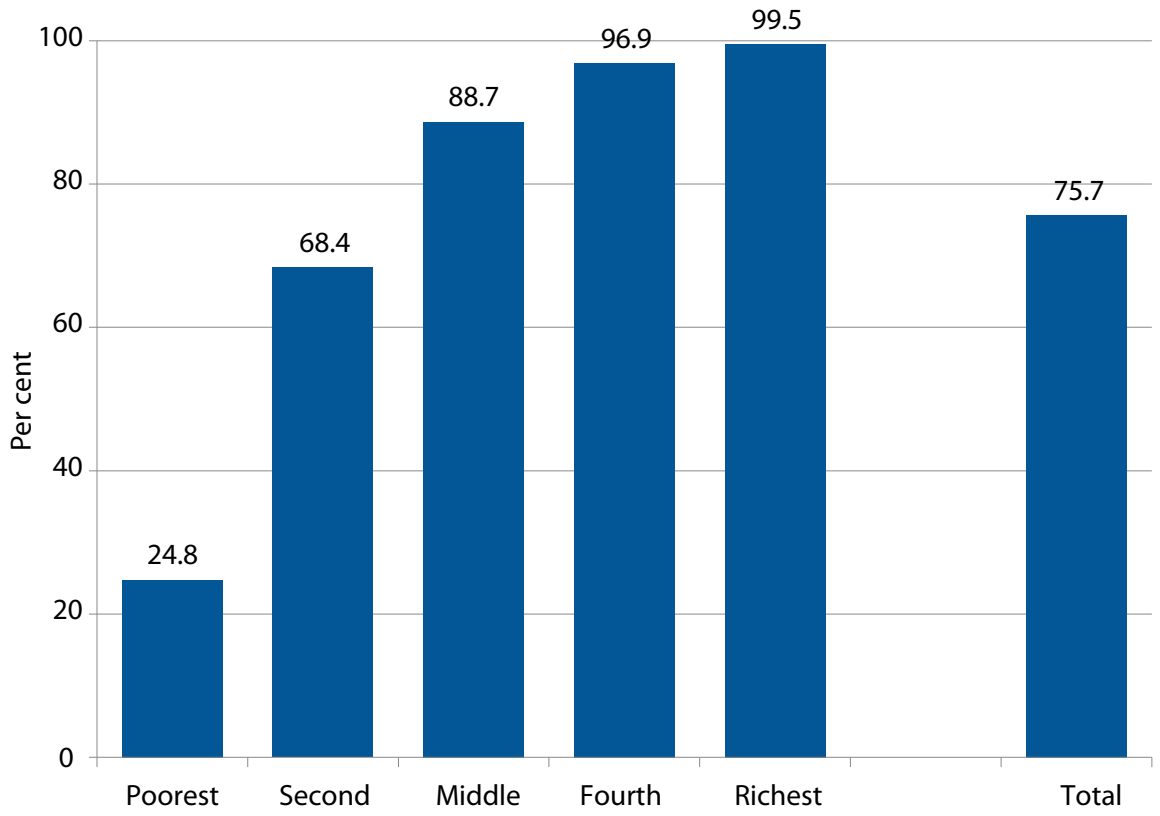
	Percentage of household population using:									Improved drinking water sources and improved sanitation	Number of household members
	Improved drinking water[1, a]		Unimproved drinking water	Total	Improved sanitation[2]	Unimproved sanitation			Total		
	Piped into dwelling, plot or yard	Other improved				Shared improved facilities	Unimproved facilities	Open defecation			
Total	**33.4**	**58.7**	**8.0**	**100**	**79.2**	**3.6**	**11.4**	**5.8**	**100**	**75.7**	**38506**
Region											
Red River Delta	39.4	59.9	0.7	100	94.1	4.1	1.7	0.1	100	93.5	9091
Northern Midlands and Mountainous area	17.9	72.0	10.1	100	68.8	4.6	13.7	12.9	100	63.4	5240
North Central and Central coastal area	31.4	55.0	13.6	100	83.8	4.3	5.1	6.8	100	76.1	8214
Central Highlands	13.5	69.8	16.7	100	65.4	3.0	9.7	21.9	100	61.2	2432
South East	49.6	48.0	2.5	100	90.9	2.7	2.4	4.0	100	90.1	6373
Mekong River Delta	31.6	57.3	11.1	100	56.8	2.3	37.8	3.0	100	53.5	7156
Area											
Urban	73.3	25.0	1.8	100	90.9	2.8	3.7	2.6	100	90.2	12236
Rural	14.8	74.4	10.9	100	73.8	3.9	15.0	7.3	100	68.9	26270
Education of household head											
None	21.7	60.2	18.0	100	47.4	4.2	21.5	26.9	100	43.1	2795
Primary	26.3	61.7	12.0	100	67.2	4.8	19.1	9.0	100	62.5	9940
Lower Secondary	26.0	66.9	7.1	100	82.8	3.5	10.1	3.6	100	79.1	14907
Upper Secondary	44.2	51.6	4.1	100	91.8	2.3	5.0	0.9	100	88.7	5987
Tertiary	63.9	35.0	1.1	100	95.4	2.6	1.6	0.4	100	94.6	4877
Wealth Index quintiles											
Poorest	6.7	67.6	25.7	100	32.1	6.2	36.1	25.6	100	24.8	7703
Second	14.0	76.6	9.4	100	74.5	6.2	16.5	2.8	100	68.4	7696
Middle	22.6	73.5	3.9	100	92.3	3.2	3.8	0.8	100	88.7	7702
Fourth	43.0	56.2	0.8	100	97.7	1.8	0.5	0.0	100	96.9	7704
Richest	80.6	19.4	0.0	100	99.5	0.4	0.1	0.0	100	99.5	7702
Ethnicity of household head											
Kinh/Hoa	36.6	58.2	5.2	100	84.4	3.5	9.7	2.4	100	81.7	33102
Ethnic Minorities	13.8	61.3	24.9	100	47.2	4.2	21.8	26.8	100	38.7	5404

[1] **MICS Indicator 4.1, MDG indicator 7.8 - Use of improved drinking water sources**

[2] **MICS Indicator 4.3, MDG indicator 7.9 - Use of improved sanitation**

a Those indicating bottled water as the main source of drinking water are distributed according to the water source used for other purposes,such as cooking and handwashing.

Figure WS.3: Use of improved drinking water sources and improved sanitation facilities by household members, Viet Nam MICS 2014



Safe disposal of a child's faeces is disposing of the stool, by the child using a toilet or by rinsing the stool into a toilet or latrine. Putting disposable diapers with solid waste, a common practice throughout the world, has thus far been classified as an inadequate means of disposal of children's faeces due to concern about poor disposal of solid waste itself. But, this classification is currently under review. Disposal of faeces of children 0-2 years of age is presented in Table WS.8.

Overall, only 57.7 per cent of 0-2 year old children's stools were disposed of safely and more than 40 per cent unsafely. "Unsafely" includes thrown into garbage (14.4 per cent), put/rinsed into drain or ditch (9.1 per cent), buried (2.7 per cent), left in the open (6.2 per cent) and others (9.3 per cent)[27].

There were marked differences among regions, as the South East (73.8 per cent) had the highest proportion of safe disposal of children's faeces, while the Northern Midlands and Mountainous area (3.6 per cent) was the lowest.

Households using improved sanitary facilities tend to have higher percentages of children whose stools were disposed of safely. There were also observed differences among urban and rural populations, education attainment and wealth levels as well as ethnicity in the safe disposal of children's faeces. Urban areas (71.9 per cent) had higher safe disposal rates than rural areas (51.7 per cent), as did tertiary-educated mothers (74.1 per cent) compared with mothers with little or no education (28.2 per cent). One-in-five of the poorest households (20.9 per cent) safely disposed of children's faeces compared to 78.9 per cent of households in the richest wealth index quintile.

27 DK/missing is 0.7 per cent.

Table WS.8: Disposal of children's faeces

Percentage distribution of children aged 0-2 years according to place of disposal of child's faeces and percentage of children aged 0-2 years whose stools were disposed of safely the last time the child passed stools, Viet Nam, 2014

	Place of disposal of child's faeces									Percentage of children whose last stools were disposed of safely[1]	Number of children aged 0-2 years
	Child used toilet/ latrine	Put/rinsed into toilet or latrine	Put/rinsed into drain or ditch	Thrown into garbage	Buried	Left in the open	Other	DK/	Chung		
Total	**5.3**	**52.5**	**9.1**	**14.4**	**2.7**	**6.2**	**9.3**	**0.7**	**100**	**57.7**	**2139**
Type of sanitation facility used by household members											
Improved	6.2	61.4	3.9	16.5	1.5	2.5	7.3	0.7	100	67.6	1746
Unimproved	1.2	19.6	45.1	4.4	3.0	8.3	18.1	0.3	100	20.7	239
Open defecation	0.8	3.0	11.6	7.1	15.5	43.5	17.8	0.7	100	3.7	155
Region											
Red River Delta	4.8	65.1	2.9	20.7	0.0	0.0	5.7	0.8	100	69.9	507
Northern Midlands and Mountainous area	1.8	34.5	7.1	13.8	1.8	19.6	19.8	1.7	100	36.3	331
North Central and Central coastal area	4.4	53.8	5.4	14	5.2	4.6	12.1	0.6	100	58.2	436
Central Highlands	3.8	42.2	4.4	10.9	9.7	24.1	4.7	0.2	100	45.9	149
South East	8.3	65.5	1.9	16.3	2.3	1.9	3.2	0.6	100	73.8	347
Mekong River Delta	7.7	41.6	32.3	6.7	1.8	1.2	8.8	0.0	100	49.3	369
Area											
Urban	7.0	65.0	3.8	18.1	1.6	1.0	3.0	0.6	100	71.9	639
Rural	4.5	47.1	11.3	12.9	3.1	8.4	11.9	0.7	100	51.7	1500
Mother's education											
None	4.7	23.5	14.6	2.4	7.5	36.5	10.1	0.7	100	28.2	117
Primary	4.6	41.8	18.7	7.4	4.2	10.9	10.3	2.1	100	46.4	291
Lower Secondary	2.8	50.4	11.0	15.1	2.4	5.1	12.8	0.4	100	53.2	761
Upper Secondary	7.5	54.8	5.0	17.6	2.5	3.7	8.5	0.5	100	62.2	481
Tertiary	7.4	66.6	3.0	17.3	1.3	0.2	3.8	0.4	100	74.1	489
Wealth Index quintiles											
Poorest	1.9	19.0	19.3	8.1	6.5	26.3	17.4	1.5	100	20.9	434
Second	5.0	48.6	15.5	10.5	2.2	2.8	15.4	0.1	100	53.6	431
Middle	5.1	56	7.5	18.1	2.9	0.8	9.2	0.5	100	61.0	424
Fourth	6.0	69.2	1.2	17.3	1.5	0.4	3.6	0.9	100	75.2	441
Richest	8.4	70.4	1.6	18.5	0.3	0.0	0.3	0.5	100	78.9	410
Ethnicity of household head											
Kinh/Hoa	5.9	57.9	8.9	15.6	2.2	1.3	7.7	0.5	100	63.9	1779
Ethnic Minorities	2.0	25.5	9.8	8.6	5.1	30.3	16.9	1.8	100	27.5	360

[1] MICS Indicator 4.4 - Safe disposal of child's faeces

Handwashing

Handwashing with water and soap is the most cost effective health intervention to reduce incidences of diarrhoea and pneumonia in children aged under-5[28]. This use of water and soap is most effective after visiting a toilet or cleaning a child, before eating or handling food and before feeding a child. Monitoring correct handwashing behaviour at these critical times is challenging. A reliable alternative to observations or self-reported behaviour is assessing the likelihood that correct handwashing behaviour takes place by observing if a household has a specific place where people most often wash their hands and if water and soap (or other local cleansing materials) are present at a specific place for handwashing[29].

28 Cairncross, S. Valdmanis V. 2006. Water supply, sanitation and hygiene promotion. Chapter 41. 'Disease Control Priorities in Developing Countries'. Second Edition. Edt. Jameson et al 2006. The World Bank. Washington DC: National Institutes of Health.

29 Ram P, Halder A, Granger S, Hall P, Jones T, Hitchcock D, Nygren B, Islam M, Molyneaux J, Luby S, editors. *Use of a novel method to detect reactivity to structured observation for measurement of handwashing behavior.* American Society of Tropical Medicine and Hygiene; 2008; New Orleans, LA.

Table WS.9: Water and soap at place for handwashing

Percentage of households where place for handwashing was observed, percentage with no specific place for handwashing and percentage distribution of households by availability of water and soap at specific place for handwashing, Viet Nam, 2014

	Percentage of households:			Place for handwashing observed							
				Water is available and:		Water is not available and:					
	Where place for handwashing was observed	With no specific place for handwashing in the dwelling, yard, or plot	Number of households	Soap present	No other cleansing agent present	Soap present	No other cleansing agent present	No specific place for handwashing in the dwelling, yard, or plot	Total	Percentage of households with a specific place for handwashing where water and soap or other cleansing agent are present[1]	Number of households where place for handwashing was observed or with no specific place for handwashing in the dwelling, yard, or plot
Total	**97.3**	**1.0**	**9979**	**86.3**	**12.1**	**0.1**	**0.5**	**1.0**	**100**	**86.3**	**9811**
Region											
Red River Delta	99.9	0.0	2468	94.4	5.4	0.1	0.0	0.0	100	94.4	2465
Northern Midlands and Mountainous area	95.7	1.6	1292	75.5	21.9	0.2	0.7	1.6	100	75.5	1257
North Central and Central coastal area	98.0	0.4	2245	86.0	12.7	0.1	0.8	0.4	100	86.0	2210
Central Highlands	95.4	3.0	558	81.4	14.6	0.2	0.7	3.1	100	81.4	549
South East	95.2	1.5	1557	90.4	7.1	0	1.0	1.5	100	90.4	1506
Mekong River Delta	96.5	1.6	1859	80.9	17.2	0.1	0.1	1.7	100	80.9	1826
Area											
Urban	98.1	0.5	3102	91.8	7.5	0.0	0.1	0.5	100	91.8	3057
Rural	97.0	1.2	6877	83.7	14.2	0.1	0.6	1.2	100	83.7	6754
Education of household head											
None	92.7	3.1	680	64.8	29.2	0.2	2.5	3.3	100	64.8	652
Primary	96.3	1.5	2534	80.2	17.4	0.2	0.6	1.5	100	80.2	2479
Lower Secondary	97.9	0.9	3853	88.3	10.5	0.1	0.3	0.9	100	88.3	3807
Upper Secondary	98.2	0.3	1578	91.9	7.5	0.1	0.2	0.3	100	91.9	1555
Tertiary	98.7	0.2	1333	95.6	4.1	0.0	0.1	0.2	100	95.6	1319
Wealth Index quintiles											
Poorest	91.6	3.6	2078	65.6	28.2	0.3	2.1	3.8	100	65.6	1979
Second	98.2	0.6	2076	84.0	15.1	0.1	0.2	0.6	100	84.0	2052
Middle	99.1	0.2	2040	90.7	8.9	0.1	0.1	0.2	100	90.7	2025
Fourth	98.7	0.3	1956	94.4	5.2	0.0	0.0	0.4	100	94.4	1939
Richest	99.3	0.0	1829	97.7	2.3	0.0	0.0	0.0	100	97.7	1817
Ethnicity of household head											
Kinh/Hoa	98.1	0.7	8772	89.0	10.0	0.1	0.2	0.7	100	89.0	8667
Ethnic Minorities	91.7	3.1	1207	65.6	28.5	0.5	2.2	3.3	100	65.6	1144

[1] MICS Indicator 4.5 - Place for handwashing

In Viet Nam, 97.3 per cent of households were observed with a specific place for handwashing, while 1 per cent had no specific place for handwashing (Table WS.9). Among households where a place for handwashing was observed or in which there was no specific place for handwashing, 86.3 per cent had water and soap (or other cleansing agent) present at the specific place. Some 12.1 per cent of households only had water available at the specific place, while 0.1 per cent of households had soap, but no water. The remaining 0.5 per cent of households had neither water nor soap available at the specific place for handwashing.

There were significant differences in ethnicity, regions, education of household heads as well as wealth index quintiles in the percentages of households with a specific place for handwashing as well as presence of water and soap. For example, the richest wealth index quintile (97.7 per cent) and households with tertiary-educated heads (95.6 per cent) outperformed the poorest households (65.6 per cent) and those with non-educated heads (64.8 per cent).

Table WS.10 shows the percentage (92.4) of households with soap or other cleansing agents anywhere in the dwelling. Households were less likely to have soap or other cleansing agents if they were in rural areas, headed by a lower educated person, from an ethnic minority group, less wealthy households or the Central Highlands, Mekong River Delta or Northern Midlands and Mountainous area. In particular, soap was less likely to be available in the poorest households (78.0 per cent) than the richest ones (99.2 per cent) and in households with non-educated household heads (76.7 per cent) compared to tertiary-educated ones (97.8 per cent).

Table WS.10: Availability of soap or other cleansing agent

Percentage distribution of households by availability of soap or other cleansing agent in the dwelling, Viet Nam, 2014

	Place for handwashing observed				Place for handwashing not observed			Total	Percentage of households with soap or other cleansing agent anywhere in the dwelling[1]	Number of households
		Soap or other cleansing agent not observed at place for handwashing								
	Soap or other cleansing agent observed	Soap or other cleansing agent shown	No soap or other cleansing agent in household	Not able/ Declined to show soap or other cleansing agent	Soap or other cleansing agent shown	No soap or other cleansing agent in household	Not able/ Declined to show soap or other cleansing agent			
Total	**84.9**	**6.3**	**5.4**	**0.7**	**1.2**	**1.0**	**0.5**	**100**	**92.4**	**9979**
Region										
Red River Delta	94.5	1.7	3.3	0.4	0.1	0.0	0.1	100	96.2	2468
Northern Midlands and Mountainous area	73.7	13.1	7.7	1.1	2.2	1.9	0.3	100	89.0	1292
North Central and Central coastal area	84.8	8.8	3.9	0.6	0.9	0.7	0.4	100	94.6	2245
Central Highlands	80.3	5.0	9.9	0.2	2.6	1.6	0.4	100	87.9	558
South East	87.4	2.1	5.6	0.1	1.8	1.9	1.1	100	91.3	1557
Mekong River Delta	79.5	8.7	6.9	1.4	1.3	1.0	1.1	100	89.5	1859
Area										
Urban	90.6	4.2	3.0	0.3	0.8	0.4	0.7	100	95.6	3102
Rural	82.4	7.3	6.5	0.8	1.4	1.2	0.4	100	91.0	6877
Education of household head										
None	62.3	12.5	16.7	1.3	1.9	4.8	0.5	100	76.7	680
Primary	78.7	8.1	8.8	0.7	2.0	1.3	0.5	100	88.8	2534
Lower Secondary	87.3	6.0	3.9	0.6	0.9	0.7	0.5	100	94.3	3853
Upper Secondary	90.6	4.7	2.4	0.5	0.8	0.3	0.7	100	96.1	1578
Tertiary	94.6	2.5	1.0	0.6	0.6	0.1	0.6	100	97.8	1333
Wealth Index quintiles										
Poorest	62.8	11.4	16.1	1.3	3.8	3.8	0.7	100	78.0	2078
Second	83.1	8.5	6.0	0.6	0.8	0.6	0.4	100	92.4	2076
Middle	90.2	5.4	2.9	0.6	0.4	0.1	0.4	100	95.9	2040
Fourth	93.6	3.8	1.0	0.5	0.5	0.1	0.6	100	97.8	1956
Richest	97.0	1.9	0.1	0.3	0.3	0.0	0.4	100	99.2	1829
Ethnicity of household head										
Kinh/Hoa	88.0	5.3	4.2	0.6	0.7	0.6	0.5	100	94.0	8772
Ethnic Minorities	62.6	14.1	14.0	0.9	4.3	3.6	0.4	100	81.1	1207

[1] MICS Indicator 4.6 - Availability of soap or other cleansing agent

CHAPTER VIII

REPRODUCTIVE HEALTH

VIII. REPRODUCTIVE HEALTH

Fertility

Measures of current fertility are presented in Table RH.1 for the three-year period preceding the survey. A three-year period was chosen to calculate rates to provide the most current information, while also allowing for the rates to be calculated for a sufficient number of cases to not compromise the statistical precision of the estimates. Age-specific fertility rates (ASFRs), expressed as the number of births per 1,000 women in a specified age group, illustrate the age pattern of fertility. Numerators for ASFRs were calculated by identifying live births that occurred in the three-year period preceding the survey classified according to the age of the mother (in five-year age groups) at the time of the child's birth. The denominators of the rates represent the number of women-years lived by the survey respondents in each of the five-year age groups during the specified period. The general fertility rate (GFR) is the number of live births during the specified period per 1,000 women aged 15-49. The crude birth rate (CBR) is the number of live births per 1,000 population during the specified period.

Table RH.1: Fertility rates

Adolescent birth rate, general fertility rate and crude birth rate for the three-year period preceding the survey, by area, Viet Nam, 2014

	Urban	Rural	Total
Adolescent birth rate			
(15-19 years old)[1]	24	56	45
GFRa	66.0	77.0	73.3
CBRb	16.9	18.5	17.9

[1] **MICS Indicator 5.1, MDG Indicator 5.4 - Adolescent birth rate**

a GFR: General fertility rate expressed per 1000 women aged 15-49

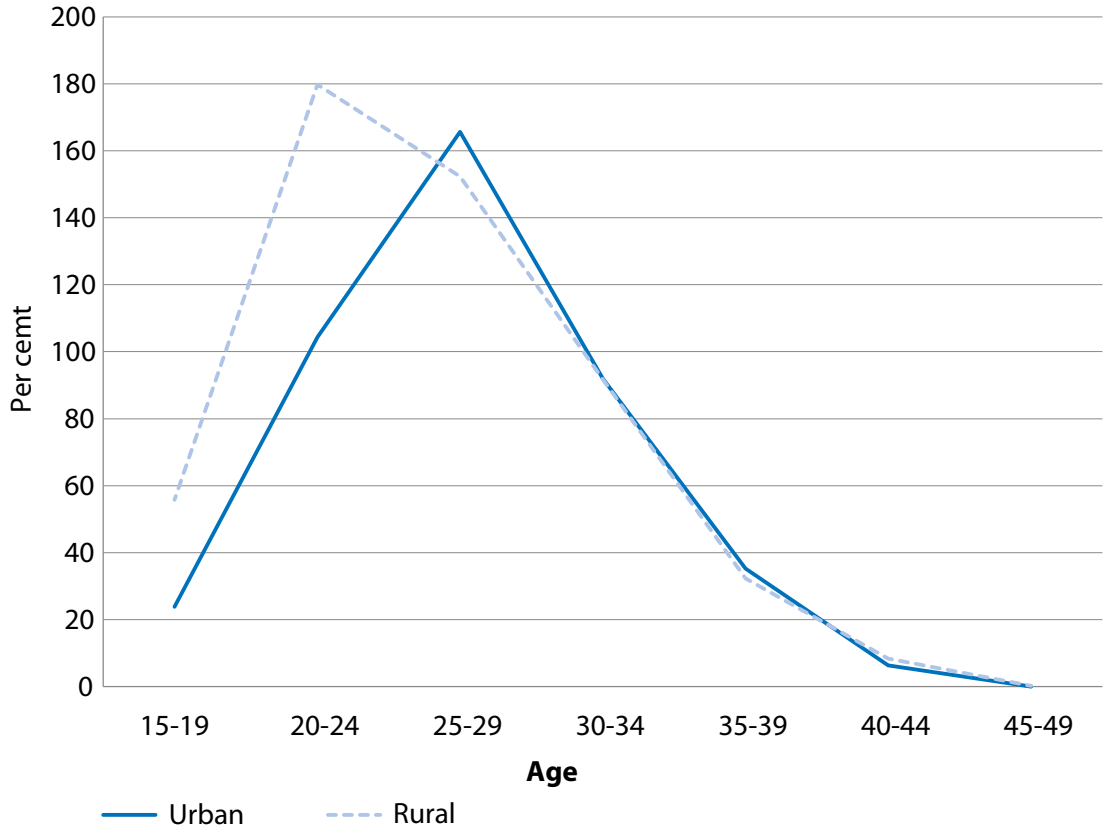
b CBR: Crude birth rate expressed per 1000 population

Table RH.1 shows the current fertility rates in Viet Nam at national level and by urban-rural areas. The adolescent birth rate for the three years preceding Viet Nam MICS 2014 was 45 births per 1,000 women aged 15-19 years. The rate in rural areas (56 births per 1,000 women) is more than double that of urban areas (24 births per 1,000 women).

The TFR estimated from Viet Nam MICS 2014 is not presented in this report because the TFR estimate from IPS2014[30] is used as an official source of fertility for Viet Nam, pursuant to the National Statistical Indicator System (NSIS) issued by the Prime Minister.

30 IPS 2014 was conducted by the GSO with a sample size of 361,650 households (for short form questionnaire with questions on fertility of women aged 15-49), on 1 April 2014.

Figure RH.1: Age-specific fertility rates by area, Viet Nam MICS 2014



Rates refer to the three years period preceding the survey

Figure RH.1 shows that the urban-rural difference in fertility was most pronounced for women in the 20-24 age group, around 100 births per 1,000 women in urban areas versus 180 births per 1,000 women in rural areas. The overall age pattern of fertility, as reflected in the ASFRs, indicates that childbearing begins early in urban and rural areas. Fertility was low among adolescents, but increases to peaks of 180 births per 1,000 among women aged 20-24 years in rural and 166 among those aged 25-29 years in urban areas, before declining to nearly the same as the five-year age groups from 30-34.

Table RH.2 shows adolescent birth rates. The adolescent birth rate (age-specific fertility rate for women aged 15-19), is defined as the number of births by women aged 15-19 years during the three-year period preceding the survey, divided by the average number of women aged 15-19 (number of women-years lived between ages 15 through 19, inclusive) during the same period, expressed per 1,000 women.

Table RH.2: Adolescent birth rate

Adolescent birth rates for the three-year period preceding the survey, Viet Nam, 2014

	Adolescent birth rate[1] (Age-specific fertility rate for women aged 15-19)
Total	**45**
Region	
Red River Delta	24
Northern Midlands and Mountainous area	107
North Central and Central coastal area	37
Central Highlands	65
South East	24
Mekong River Delta	49
Education	
None	135
Primary	177
Lower Secondary	111
Upper Secondary	26
Tertiary	2
Wealth Index quintiles	
Poorest	108
Second	45
Middle	34
Fourth	32
Richest	9
Ethnicity of household head	
Kinh/Hoa	30
Ethnic Minorities	115

[1] MICS Indicator 5.1, MDG Indicator 5.4 - Adolescent birth rate

Across the country, adolescent fertility rates were closely correlated with living conditions. The fertility was highest for the poorest wealth index quintile (108 births per 1,000 women), but declined for better-off quintiles with nine births per 1,000 women for the richest wealth index quintiles or 12 times lower than the poorest wealth index quintiles. Adolescent fertility rates were highest among women in the Northern Midlands and Mountainous area (107) and Central Highlands (65) home to high concentrations of ethnic minority people. The adolescent birth rate was 30 births per 1,000 women, nearly four times lower than for ethnic minorities (115).

Sexual activity and childbearing early in life carry significant risks for young people all around the world. Table RH.3 presents some early childbearing indicators for women aged 15-19 and 20-24, while Table RH.4 presents the trends for early childbearing.

Table RH.3: Early childbearing

Percentage of women aged 15-19 years who have had a live birth, are pregnant with a first child, have begun childbearing and who have had a live birth before the age of 15 as well as percentage of women aged 20-24 years who have had a live birth before the age of 18, Viet Nam, 2014

	Percentage of women aged 15-19 who:				Number of women aged 15-19	Percentage of women aged 20-24 who have had a live birth before the age of 18[1]	Number of women aged 20-24
	Have had a live birth	Are pregnant with first child	Have begun childbearing	Have had a live birth before the age of 15			
Total	**6.3**	**1.9**	**8.2**	**0.2**	**1374**	**4.7**	**1333**
Region							
Red River Delta	2.4	0.4	2.8	0.0	313	1.6	296
Northern Midlands and Mountainous area	15.4	3.2	18.6	1.3	185	8.1	182
North Central and Central coastal area	4.9	2.1	6.9	0.0	329	4.6	287
Central Highlands	9.2	3.4	12.6	0.0	109	9.5	96
South East	5.8	2.0	7.7	0.0	222	1.5	250
Mekong River Delta	5.6	1.9	7.5	0.0	216	8.0	223
Area							
Urban	4.4	1.3	5.8	0.0	428	3.2	440
Rural	7.2	2.2	9.3	0.3	946	5.5	893
Education							
None	23.5	3.8	27.4	(8.5)	28	26.5	43
Primary	32.1	7.0	39.1	(0.0)	36	18.7	79
Lower Secondary	16.5	4.7	21.2	0.0	290	8.7	321
Upper Secondary	2.3	0.9	3.2	0.0	875	2.4	329
Tertiary	0.6	0.9	1.5	0.0	145	0.2	561
Wealth Index quintiles							
Poorest	16.2	4.5	20.8	0.9	277	15.3	241
Second	5.7	1.7	7.3	0.0	263	5.3	245
Middle	4.1	1.4	5.5	0.0	314	0.7	267
Fourth	3.9	1.7	5.7	0.0	284	2.9	321
Richest	1.2	0.0	1.2	0.0	236	0.8	259
Ethnicity of household head							
Kinh/Hoa	3.9	1.2	5.1	0.0	1144	3.0	1120
Ethnic Minorities	18.3	5.6	23.9	1.0	230	13.8	213

[1] **MICS Indicator 5.2 - Early childbearing**

Note: Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table RH.4: Trends in early childbearing

Percentage of women who have had a live birth, by age of 15 and 18, by area and age group, Viet Nam, 2014

	Urban				Rural				All			
	Percentage of women with a live birth before age of 15	Number of women aged15-49 years	Percentage of women with a live birth before age of 18	Number of women aged 20-49 years	Percentage of women with a live birth before age of 15	Number of women aged15-49 years	Percentage of women with a live birth before age of 18	Number of women aged 20-49 years	Percentage of women with a live birth before age of 15	Number of women aged15-49 years	Percentage of women with a live birth before age of 18	Number of women aged 20-49 years
Total	**0.0**	**3259**	**2.5**	**2831**	**0.3**	**6568**	**5.0**	**5622**	**0.2**	**9827**	**4.2**	**8453**
Age												
15-19	0.0	428	na	0	0.3	946	na	0	0.2	1374	na	0
20-24	0.0	440	3.2	440	0.2	893	5.5	893	0.1	1333	4.7	1333
25-29	0.0	476	1.1	476	0.2	883	4.7	883	0.1	1359	3.4	1359
30-34	0.0	527	1.9	527	0.4	1011	4.3	1011	0.3	1539	3.5	1539
35-39	0.0	479	3.7	479	0.3	912	5.8	912	0.2	1391	5.0	1391
40-44	0.0	477	3.4	477	0.2	965	5.4	965	0.1	1442	4.7	1442
45-49	0.0	432	2.0	432	0.4	958	4.4	958	0.3	1390	3.7	1390

As shown in Table RH.3, 6.3 per cent of women aged 15-19 have already had a birth, 1.9 per cent are pregnant with their first child, 8.2 per cent have begun childbearing and 0.2 per cent have had a live birth before the age of 15. The percentage of ethnic minority women aged 15-19 years who have had a live birth was 18.3 per cent, in stark contrast to 3.9 per cent for Kinh/Hoa women.

On the other hand, some 4.7 per cent of women aged 20-24 have had a live birth before the age of 18 and this proportion was higher in the Central Highlands (9.5 per cent) and Northern Midlands and Mountainous area (8.1 per cent) than the other regions. The differentials are relatively similar to those for the 15-19 age group discussed earlier.

Table RH.4 suggests that early childbearing has remained similar over the last two decades. The percentage of women aged 20-24 years with a live birth before the age 18 was 4.7 per cent, against 3.4 and 3.5 per cent for those aged 25-29 years and 30-34 years respectively, but 5.0 per cent for women aged 35-39 years. The percentage of urban women with a live birth before age 18 was 2.5 per cent, but it was half of the value in rural areas (5.0 per cent).

Contraception

Appropriate family planning is important to the health of women and children, as it prevents pregnancies too early or late, extends the period between births and limits the total number of children. Access by all couples to information and services to prevent pregnancies that are too early, too closely spaced, too late or too common is critical.

Table RH.5: 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, Viet Nam, 2014

	Percentage of women currently married or in union who are using (or whose partner is using):															Number of women aged 15-49 currently married or in union
	No method	Female sterilization	Male sterilization	IUD	Injectables	Implants	Pill	Male condom	Female condom	Diaphragm/ Foam/Jelly	Periodic abstinence	Withdrawal	Any modern method	Any traditional method	Any method1	
Total	**24.3**	**2.8**	**0.1**	**28.2**	**1.7**	**0.2**	**11.9**	**11.8**	**0.2**	**0.0**	**13.4**	**5.4**	**57.0**	**18.8**	**75.7**	**7038**
Region																
Red River Delta	23.3	1.8	0.0	26.8	0.8	0.2	9.0	15.5	0.5	0.1	16.9	5.2	54.6	22.1	76.7	1632
Northern Midlands and Mountainous area	27.2	3.4	0.0	29.9	1.3	0.0	13.1	9.3	0.1	0.0	9.5	6.2	57.1	15.7	72.8	1034
North Central and Central coastal area	23.3	4.2	0.2	35.4	1.5	0.1	6.3	10.0	0.2	0.0	12.8	6.1	57.8	18.9	76.7	1445
Central Highlands	28.7	3.5	0.1	22.8	7.8	0.2	11.0	11.2	0.0	0.0	11.9	2.9	56.5	14.8	71.3	421
South East	25.3	3.0	0.0	21.2	1.0	0.2	12.8	15.1	0.5	0.0	16.0	4.9	53.7	20.9	74.7	1161
Mekong River Delta	22.1	1.8	0.3	28.7	1.8	0.3	20.2	8.5	0.1	0.0	10.8	5.5	61.6	16.3	77.9	1346
Area																
Urban	24.0	2.6	0.1	22.4	1.0	0.3	10.5	17.6	0.1	0.0	15.6	5.8	54.7	21.3	76.0	2154
Rural	24.4	2.9	0.1	30.8	1.9	0.1	12.6	9.2	0.3	0.0	12.4	5.2	58.0	17.6	75.6	4884
Age																
15-19	61.6	0	0.0	8.5	2.6	0.0	14.4	4.0	0.0	0.0	6.0	3.0	29.4	9.0	38.4	133
20-24	44.5	0.3	0.0	16.5	2.3	0.2	13.2	10.8	0.6	0.0	6.6	5.0	43.8	11.6	55.5	687
25-29	29.1	0.5	0.0	23.7	1.2	0.5	12.6	17.4	0.5	0.0	10.3	4.3	56.4	14.6	70.9	1102
30-34	18.5	1.2	0.0	29.6	2.1	0.1	17.7	14.2	0.5	0.1	11.0	5.0	65.4	16.0	81.5	1396
35-39	10.6	2.4	0.4	35.8	1.6	0.2	13.2	12.4	0.1	0.0	17.3	6.0	66.1	23.3	89.4	1260
40-44	16.0	3.6	0.0	35.3	1.8	0.1	10.0	10.8	0.0	0.0	15.9	6.4	61.6	22.3	84.0	1279
45-49	34.1	8.3	0.1	24.2	1.0	0.0	4.3	5.5	0.0	0.0	16.9	5.6	43.4	22.5	65.9	1182

	Percentage of women currently married or in union who are using (or whose partner is using):															Number of women aged 15-49 currently married or in union
	No method	Female sterilization	Male sterilization	IUD	Injectables	Implants	Pill	Male condom	Female condom	Diaphragm/ Foam /Jelly	Periodic abstinence	Withdrawal	Any modern method	Any traditional method	Any method1	
Number of living children																
0	93.9	0.0	0.0	0.3	0.0	0.0	1.5	2.4	0.5	0.0	1.0	0.5	4.6	1.6	6.1	396
1	32.5	0.4	0.0	18.9	1.3	0.3	12.8	16.4	0.6	0.0	12.1	4.8	50.7	16.9	67.5	1609
2	13.8	2.0	0.1	34.0	1.6	0.1	13.5	12.6	0.1	0.0	15.5	6.6	64.0	22.2	86.2	3480
3	19.7	5.3	0.1	33.4	2.0	0.0	11.4	8.8	0.2	0.1	14.1	4.7	61.5	18.8	80.3	1106
4+	25.6	14.0	0.4	29.0	3.8	0.7	7.7	4.6	0.0	0.0	10.2	3.9	60.2	14.2	74.4	447
Education																
None	29.3	8.0	0.1	28.9	3.7	0.1	18.7	3.8	0.0	0.0	5.0	2.5	63.2	7.5	70.7	392
Primary	21.2	4.5	0.5	29.9	3.2	0.2	16.1	5.9	0.2	0.0	11.9	6.5	60.5	18.3	78.8	1290
Lower Secondary	21.7	2.7	0.0	32.6	1.5	0.1	11.3	9.0	0.1	0.0	15.0	5.9	57.3	20.9	78.3	2885
Upper Secondary	26.1	1.9	0.0	26.5	0.9	0.2	11.6	13.9	0.5	0.1	13.2	5.3	55.5	18.4	73.9	1272
Tertiary	30.2	0.6	0.0	17.5	0.4	0.2	7.3	25.2	0.5	0.0	13.9	4.1	51.8	18.0	69.8	1199
Wealth Index quintiles																
Poorest	27.4	4.4	0.4	30.7	4.6	0.3	15.8	4.9	0.0	0.0	7.9	3.5	61.2	11.4	72.6	1343
Second	23.3	3.8	0.0	32.2	1.6	0.1	13.6	7.4	0.3	0.0	12.0	5.7	58.9	17.8	76.7	1327
Middle	24.0	2.8	0.0	31.5	0.6	0.1	10.6	10.0	0.1	0.0	14.0	6.3	55.7	20.3	76.0	1384
Fourth	24.9	1.7	0.1	25.9	1.2	0.0	10.0	13.4	0.6	0.0	15.7	6.4	53.0	22.1	75.1	1521
Richest	21.9	1.5	0.0	21.7	0.4	0.3	10.2	22.1	0.2	0.1	16.6	4.9	56.7	21.5	78.1	1463
Ethnicity of household head																
Kinh/Hoa	23.4	2.4	0.1	28.0	1.0	0.2	11.4	12.8	0.3	0.0	14.6	5.7	56.2	20.4	76.6	5988
Ethnic Minorities	29.4	5.0	0.3	29.6	5.1	0.1	14.9	6.1	0.0	0.0	6.1	3.4	61.1	9.5	70.6	1051

[1] MICS Indicator 5.3, MDG Indicator 5.3 - Contraceptive prevalence rate

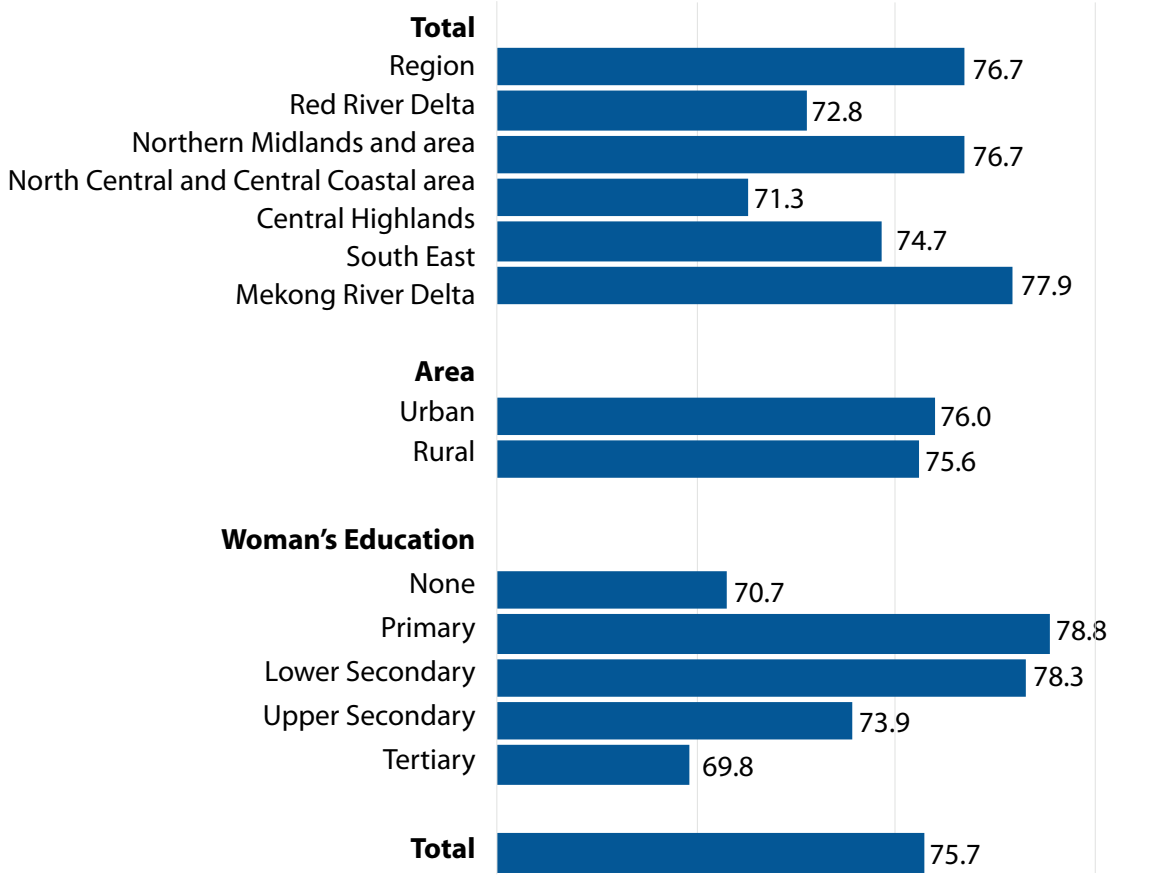
Current use of contraception was reported by 75.7 per cent of women currently married or in union (Table RH.5). The most popular method was use of IUDs (28.2 per cent) in Viet Nam. The next most popular method was periodic abstinence (13.4 per cent) of women in marriage/union. Use of the male condom (11.8 per cent) and pills (11.9 per cent) were more commonly used than the withdrawal method (5.4 per cent), female sterilization (2.8 per cent) and use of injectables (1.7 per cent).

Contraceptive prevalence did not differ between regions, urban-rural areas and ethnicity. But, differences emerge between age groups. Adolescent women in marriage/union were far less likely to use contraception (38.4 per cent) than older married or in union women. One-in-two married or in union women aged 20-24 reported using contraceptives.

Overall, contraception was associated with the number of children within a marriage or union. This was reflected in the 86.2 per cent of women who use contraception with two children, a figure 10 times higher than for women with no children and 19 per cent greater than women with one child.

The percentage of ethnic minority women using any method (70.6 per cent) was lower than that of Kinh/Hoa women (76.6 per cent), but interestingly the percentage of ethnic minority women using modern methods (61.1 per cent) was higher than for Kinh/Hoa women (56.2 per cent) who favour traditional methods (20.4 per cent) more than ethnic minority women (9.5 per cent).

Figure RH.2: Differentials in contraceptive use, Viet Nam MICS 2014



Unmet Need

An "unmet need" for contraception refers to fecund women in marriage/union not using any method of contraception, but who wish to postpone the next birth (spacing) or who wish to stop childbearing altogether (limiting). Unmet need is identified in Viet Nam MICS 2014 by using a set of questions eliciting current behaviours and preferences pertaining to contraceptive use, fecundity and fertility preferences.

Table RH.6 shows the levels of "met"needs for contraception, unmet need and the demand for contraception satisfied.

Unmet need for "spacing" is defined as the percentage of women in marriage/union not using a contraception method and:

- Are not pregnant, not postpartum amenorrheic[31] and are fecund[32], but want to wait two or more years for another birth, or:
- Are not pregnant and not postpartum amenorrheic, are fecund and unsure whether to have another child, or:
- Are pregnant and say pregnancy was mistimed and would have wanted to wait, or:
- Are postpartum amenorrheic and say birth was mistimed and would have wanted to wait.

Unmet need for "limiting" is defined as percentage of women in marriage/union not using a contraception method and:

- Are not pregnant, not postpartum amenorrheic, are fecund and say they do not want any more children, or:
- Are pregnant and say they did not want to have a child, or:
- Are postpartum amenorrheic and say they did not want the birth.

Total unmet need for contraception is the sum of unmet need for spacing and limiting. Overall, the unmet need for spacing and limiting amounted to 2.5 and 3.6 per cent, respectively among women aged 15-49 years married or in union. The total unmet need for contraception was 6.1 per cent or six-in-100 women aged 15-49 married or in union with an unmet need for contraception.

This indicator defines unmet need for family planning and is an indicator to track progress towards Millennium Development Goal 5 (MDG5) on improved maternal health.

31 A woman is postpartum amenorrheic if she had a birth in the last two years and is not currently pregnant, and her menstrual period has not returned since the birth of the last child.

32 A woman is considered fecund if she is neither pregnant nor postpartum amenorrheic, and:

(1a) Has not had menstruation for at least six months, or (1b) never menstruated, or (1c) her last menstruation occurred before her last birth, or (1d) in menopause/has had hysterectomy, or:

(2) She declares having had hysterectomy, or has never menstruated, or she is at the time of survey she is not physically able to get pregnant, or:

(3) She declares she cannot get pregnant when asked about desire for future birth, or:

(4) She has not had a birth in the preceding five years, is currently not using contraception and is currently married and was continuously married during the last five years preceding the survey..

Table RH.6: Unmet need for contraception

Percentage of women aged 15-49 years currently married or in union with an unmet need for family planning and percentage of demand for contraception satisfied, Viet Nam, 2014

	Met need for contraception			Unmet need for contraception			Number of women currently married or in union	Percentage of demand for contraception satisfied	Number of women currently married or in union with need for contraception
	For spacing	For limiting	Total	For spacing	For limiting	Total			
Total	**18.2**	**57.6**	**75.7**	**2.5**	**3.6**	**6.1**	**7038**	**92.5**	**5759**
Region									
Red River Delta	18.8	57.9	76.7	2.4	3.4	5.8	1632	92.9	1348
Northern Midlands and Mountainous area	15.8	57.0	72.8	2.8	5.4	8.2	1034	89.9	837
North Central and Central coastal area	17.6	59.1	76.7	2.8	2.4	5.2	1445	93.7	1184
Central Highlands	21.0	50.3	71.3	4.1	4.5	8.6	421	89.2	336
South East	20.2	54.5	74.7	1.8	4.4	6.2	1161	92.3	939
Mekong River Delta	17.2	60.8	77.9	2.1	2.9	4.9	1346	94.1	1115
Area									
Urban	18.6	57.4	76.0	1.9	4.0	5.9	2154	92.8	1765
Rural	18.0	57.6	75.6	2.7	3.5	6.2	4884	92.4	3994
Age									
15-19	29.3	9.1	38.4	10.1	0.6	10.8	133	78.1	66
20-24	42.9	12.6	55.5	10.1	1.3	11.4	687	82.9	459
25-29	40.7	30.2	70.9	4.5	1.7	6.2	1102	92.0	850
30-34	24.7	56.8	81.5	2.5	3.5	6.1	1396	93.1	1222
35-39	9.5	79.9	89.4	0.5	2.6	3.0	1260	96.7	1164
40-44	2.2	81.8	84.0	0.1	5.6	5.7	1279	93.7	1147
45-49	0.4	65.6	65.9	0.0	6.2	6.2	1182	91.4	852

	Met need for contraception			Unmet need for contraception			Number of women currently married or in union	Percentage of demand for contraception satisfied	Number of women currently married or in union with need for contraception
	For spacing	For limiting	Total	For spacing	For limiting	Total			
Education									
None	10.2	60.6	70.7	1.9	6.6	8.5	392	89.3	311
Primary	12.5	66.4	78.8	1.7	3.1	4.8	1290	94.2	1079
Lower Secondary	16.0	62.2	78.3	1.8	4.0	5.8	2885	93.1	2425
Upper Secondary	23.1	50.8	73.9	4.1	3.1	7.3	1272	91.1	1032
Tertiary	26.8	43.1	69.8	3.3	2.9	6.2	1199	91.8	911
Wealth Index quintiles									
Poorest	17.0	55.5	72.6	2.8	4.5	7.4	1343	90.8	1074
Second	17.9	58.8	76.7	3.3	2.6	5.9	1327	92.9	1096
Middle	19.3	56.7	76.0	2.8	3.9	6.7	1384	91.9	1144
Fourth	19.0	56.1	75.1	2.0	3.6	5.6	1521	93.0	1228
Richest	17.5	60.6	78.1	1.7	3.4	5.1	1463	93.9	1217
Ethnicity of household head									
Kinh/Hoa	18.0	58.6	76.6	2.4	3.3	5.7	5988	93.1	4929
Ethnic Minorities	19.0	51.6	70.6	3.1	5.3	8.4	1051	89.4	830

[1] **MICS Indicator 5.4, MDG Indicator 5.6 - Unmet need**

Met need for limiting includes women in marriage/union using (or whose partner is using) a contraceptive method[33], who want no more children, are using male or female sterilization or declare themselves as fecund. The met need for spacing includes women using (or whose partner is using) a contraceptive method, who want to have another child or are undecided whether to have another child. The total met need for spacing and limiting adds up to the total met need for contraception. Among women in marriage/union aged 15-49 years, 18.2 per cent indicated their need for birth spacing was met, whilst 57.6 per cent also reported their need to limit the number of births was met. Overall, two-thirds of women stated their contraceptive needs were met.

Using such information on contraception and unmet need allows for the percentage of satisfied contraception demand estimated from Viet Nam MICS 2014 data. The percentage of satisfied demand is defined as the proportion of women in marriage/union currently using contraception over the total demand for contraception. The total demand for contraception includes women who currently have an unmet need (for spacing or limiting), plus those currently using contraception.

Table RH.6 points to the total met need being higher than the total unmet need for family planning. Six per cent of women in marriage/union indicated their contraceptive needs were unmet. Unmet need was also highest among women in the Central Highlands and Northern Midlands and Mountainous area. However, the overall value of this indicator was quite small, hence the insignificant differentials.

The results also show the satisfied demand for contraception was high (92.5 per cent), with a lower percentage for young women (78.1 and 82.9 per cent of women aged 15-19 and 20-24 years, respectively).

33 In this chapter, whenever reference is made to the use of a contraceptive by a woman, this may refer to her partner using a contraceptive method (such as male condom).

Antenatal Care

The antenatal period offers important opportunities to reach pregnant women with a number of interventions potentially vital to their health and wellbeing and that of their infants. A better understanding of foetal growth, development and its relationship to the mother's health has resulted in increased awareness of antenatal care's potential as an intervention to improve maternal and newborn health. For example, antenatal care can be used to inform women and families about the risks and symptoms in pregnancy and about the risks of labour and delivery. Therefore, it may provide a route to ensure pregnant women do, in practice, deliver with the assistance of a skilled health care provider. Antenatal visits also provide an opportunity to supply information on birth spacing, recognized as an important factor for infant survival. It can also highlight the potentially life-saving roles tetanus immunization plays during pregnancy for mother and infant. The prevention and treatment of malaria, management of anaemia and treatment of sexually transmitted infections (STIs) during pregnancy can significantly improve foetal outcomes and maternal health. Adverse outcomes such as low birth weights can be reduced through a combination of interventions to improve women's nutritional status and prevent infections, such as malaria and STIs, during pregnancy. More recently, antenatal care's potential 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 antenatal care models. WHO guidelines specifically outline content on antenatal care visits, which include:

- Blood pressure measurement
- Urine testing for bateriuria and proteinuria
- Blood testing to detect syphilis and severe anaemia
- Weight and height measurements (optional).

Antenatal care coverage indicators (at least one visit to a skilled health provider and four or more visits to any provider) are used to track progress towards MDG5 on improved maternal health.

Table RH.7: Antenatal care coverage

Percentage distribution of women aged 15-49 years with a live birth in the last two years by antenatal care provider during pregnancy for the last birth, Viet Nam, 2014

	Provider of antenatal care[a]					Total	Any skilled provider[1,b]	Number of women with a live birth in the last two years
	Medical doctor	Nurse/ Midwife	Village health worker	Other/ Missing	No antenatal care			
Total	**88.8**	**7.0**	**0.1**	**0.0**	**4.0**	**100**	**95.8**	**1464**
Region								
Red River Delta	92.2	6.3	0.0	0.0	1.4	100	98.6	343
Northern Midlands and Mountainous area	71.2	11.5	0.5	0.0	16.8	100	82.7	230
North Central and Central coastal area	92.5	6.6	0.0	0.0	0.9	100	99.1	300
Central Highlands	87.7	2.2	0.9	0.2	8.9	100	89.9	109
South East	93.6	5.6	0.0	0.0	0.7	100	99.3	242
Mekong River Delta	91.7	7.7	0.0	0.0	0.6	100	99.4	239
Area								
Urban	96.4	2.7	0.3	0.1	0.5	100	99.1	428
Rural	85.6	8.8	0.1	0.0	5.5	100	94.4	1037
Mother's age at birth								
Less than 20	82.3	8.3	0.0	0.0	9.3	100	90.7	124
20-34	89.5	6.9	0.2	0.0	3.4	100	96.4	1212
35-49	88.7	6.6	0.0	0.0	4.6	100	95.4	128
Education								
None	45.7	11.7	0.6	0.4	41.7	100	57.4	67
Primary	80.5	13.0	0.3	0.0	6.1	100	93.5	182
Lower Secondary	86.6	10.1	0.2	0.0	3.0	100	96.8	529
Upper Secondary	96.1	3.3	0.0	0.0	0.6	100	99.4	340
Tertiary	97.6	1.8	0.0	0.0	0.6	100	99.4	347
Wealth Index quintiles								
Poorest	69.5	11.9	0.7	0.1	17.9	100	81.3	294
Second	88.5	9.7	0.0	0.0	1.7	100	98.3	288
Middle	92.3	7.4	0.0	0.0	0.3	100	99.7	292
Fourth	95.9	4.1	0.0	0.0	0.0	100	100	314
Richest	97.9	1.8	0.0	0.0	0.3	100	99.7	275
Ethnicity of household head								
Kinh/Hoa	93.2	6.1	0.0	0.0	0.8	100	99.2	1215
Ethnic Minorities	67.5	11.5	0.8	0.1	20.0	100	79.0	250

[1] **MICS Indicator 5.5a, MDG Indicator 5.5 - Antenatal care coverage**

[a] Only the most qualified provider is considered in cases where more than one provider was reported.

[b] Skilled providers include Medical doctor and Nurse/Midwife

The type of personnel providing antenatal care to women aged 15-49 years who gave birth in the two years preceding the survey is presented in Table RH.7, which shows a relatively small percentage of women did not receive antenatal care (4 per cent). In Viet Nam, 95.8 per cent of women aged 15-49 with a live birth in the last two years received antenatal care from skilled providers. In which, the majority of antenatal care was provided by medical doctors (88.8 per cent), with nurses/midwives (7 per cent) as a second option.

This proportion was lowest in the Northern Midlands and Mountainous area (82.7 per cent), 16 per cent below the Red River Delta which had the highest percentage.

The percentage of women who received antenatal care strongly correlated with education levels, with higher education levels such as tertiary education (99.4 per cent) down to primary education (93.5 per cent) sharply contrasting with the 57.4 per cent of women with no education who received antenatal care from a skilled health worker.

UNICEF and WHO recommend a minimum of four antenatal care visits during a pregnancy. It is of crucial importance for pregnant women to attend antenatal care visits early to prevent and detect conditions that could affect woman and baby. Antenatal care should continue throughout the entire pregnancy.

Table RH.8: Number of antenatal care visits and timing of first visit

Percentage distribution of women aged 15-49 years with a live birth in the last two years by number of antenatal care visits by any provider and by the timing of first antenatal care visits, Viet Nam, 2014

	Percentage distribution of women who had:							Percentage distribution of women by number of months pregnant at the time of first antenatal care visit:							Number of women with a live birth in the last two years	Median months pregnant at first ANC visit	Number of women with a live birth in the last two years who had at least one ANC visit
	No antenatal care visits	1 visit	2 visits	3 visits	4+ visits[1]	Missing/DK	Total	First trimester	4-5 months	6-7 months	8+ months	DK/Missing	Missing/DK	Total			
Total	**4.0**	**2.7**	**4.6**	**14.6**	**73.7**	**0.4**	**100**	**4.0**	**84.7**	**8.3**	**2.2**	**0.5**	**0.2**	**100**	**1464**	**5**	**1402**
Region																	
Red River Delta	1.4	1.7	3.7	7.4	85.2	0.5	100	1.4	91.6	4.7	1.1	0.6	0.5	100	343	5	336
Northern Midlands and Mountainous area	16.8	4.9	6.1	20.5	51.7	0.0	100	16.8	67.8	10.0	4.5	0.9	0.0	100	230	5	192
North Central and Central coastal area	0.9	2.8	3.5	22.4	70.4	0.0	100	0.9	87.9	9.1	1.3	0.5	0.3	100	300	5	297
Central Highlands	8.9	7.4	15.2	20.8	47.7	0.0	100	8.9	67.4	15.1	6.5	2.1	0.0	100	109	5	99
South East	0.7	0.7	2.1	5.6	90.0	0.8	100	0.7	93.1	5.4	0.8	0.0	0.0	100	242	4	241
Mekong River Delta	0.6	1.8	3.4	15.7	78.0	0.6	100	0.6	86.2	10.9	2.4	0.0	0.0	100	239	4	237
Area																	
Urban	0.5	1.0	2.2	9.9	86.3	0.1	100	0.5	94.9	3.8	0.5	0.0	0.2	100	428	4	424
Rural	5.5	3.4	5.6	16.5	68.5	0.4	100	5.5	80.4	10.2	3.0	0.8	0.2	100	1037	5	978
Mother's age at birth																	
Less than 20	9.3	4.7	8.1	23.4	54.5	0.0	100	9.3	70.4	11.8	7.0	1.5	0.0	100	124	5	112
20-34	3.4	2.3	4.2	14.0	75.6	0.4	100	3.4	86.2	7.7	1.9	0.5	0.2	100	1212	5	1168
35-49	4.6	4.3	4.8	11.7	74.6	0.0	100	4.6	84.1	10.6	0.6	0.0	0.0	100	128	5	122

	Percentage distribution of women who had:							Percentage distribution of women by number of months pregnant at the time of first antenatal care visit:							Number of women with a live birth in the last two years	Median months pregnant at first ANC visit	Number of women with a live birth in the last two years who had at least one ANC visit
	No antenatal care visits	1 visit	2 visits	3 visits	4+ visits[1]	Missing/DK	Total	First trimester	4-5 months	6-7 months	8+ months	DK/Missing	Missing/DK	Total			
Education																	
None	41.7	15.4	12.0	11.8	19.1	0.0	100	41.7	36.4	11.0	8.0	2.9	0.0	100	67	(5)	39
Primary	6.1	5.1	8.9	19.3	60.5	0.0	100	6.1	74.3	15.1	4.2	0.2	0.0	100	182	5	170
Lower Secondary	3.0	3.3	5.8	20.6	66.6	0.6	100	3.0	82.5	10.5	3.0	0.8	0.2	100	529	5	512
Upper Secondary	0.6	0.8	3.1	13.7	81.9	0.0	100	0.6	90.8	7.1	0.5	0.5	0.5	100	340	4	336
Tertiary	0.6	0.0	0.4	4.4	94.1	0.5	100	0.6	96.8	2.1	0.5	0.0	0.0	100	347	4	345
Wealth Index quintiles																	
Poorest	17.9	8.6	9.7	25.2	38.6	0.0	100	17.9	58.4	15.3	6.7	1.4	0.3	100	294	5	241
Second	1.7	3.1	6.2	21.6	67.4	0.0	100	1.7	83.9	12.0	1.7	0.6	0.0	100	288	5	283
Middle	0.3	1.6	4.2	16.0	77.4	0.5	100	0.3	87.3	9.8	1.9	0.7	0.0	100	292	4	291
Fourth	0.0	0.3	2.6	7.0	89.4	0.6	100	0.0	95.1	3.5	0.8	0.0	0.6	100	314	4	312
Richest	0.3	0.0	0.1	3.0	95.9	0.7	100	0.3	98.8	0.9	0.0	0.0	0.0	100	275	4	275
Ethnicity of household head																	
Kinh/Hoa	0.8	1.6	2.8	12.4	82.1	0.3	100	0.8	90.2	7.3	1.3	0.3	0.2	100	1215	4	1204
Ethnic Minorities	20.0	8.2	13.1	25.4	32.7	0.6	100	20.0	57.8	13.3	6.8	1.7	0.4	100	250	5	199

[1] **MICS Indicator 5.5b, MDG Indicator 5.5 - Antenatal care coverage**

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Table RH.8 shows the number of antenatal care visits during the latest pregnancy that took place within two years preceding the survey, regardless of provider, by selected characteristics. Among 100 women with a live birth during the last two years, 74 received antenatal care at least four times, 22 received such care up to three times and four women received no antenatal care. Mothers from rural areas, mountain regions, those with lower education, from poorer households and among ethnic minority groups were less likely to receive antenatal care four or more times.

The table also presents information on the timing of first antenatal care visit. Overall, 84.7 per cent of women with a live birth in the last two years had their first antenatal care visit during the first trimester of their last pregnancy, with a median of two months of pregnancy at the first visit among those who received antenatal care.

Wealth index quintiles, mothers' education and age at giving birth strongly correlated to antenatal care visits. Especially, only 70.4 per cent of women under 20 received their first antenatal care visit during the first trimester against about 85 per cent of women aged 20 and above.

Table RH.9: Content of antenatal care

Percentage of women aged 15-49 years with a live birth in the last two years who, at least once, had their blood pressure measured, urine sample taken and blood sample taken as part of antenatal care, during the pregnancy for the last birth, Viet Nam, 2014

	Percentage of women who, during the pregnancy of their last birth, had:					Number of women with a live birth in the last two years
	Blood pressure measured	Urine sample taken	Blood sample taken	Blood pressure measured, urine and blood sample taken[1]	Blood pressure measured, urine sample taken	
Total	**82.3**	**72.0**	**61.8**	**56.2**	**68.0**	**1464**
Region						
Red River Delta	85.1	80.2	66.3	63.2	75.5	343
Northern Midlands and Mountainous area	60.3	50.5	38.5	28.4	43.6	230
North Central and Central coastal area	86.6	70.8	60.8	53.8	67.6	300
Central Highlands	70.8	43.5	32.4	25.0	39.2	109
South East	94.5	90.3	85.5	83.8	88.6	242
Mekong River Delta	87.2	77.1	68.4	62.1	73.7	239
Area						
Urban	90.7	83.6	75.9	69.7	79.6	428
Rural	78.9	67.3	56.0	50.6	63.3	1037
Mother's age at birth						
Less than 20	71.3	62.2	47.8	42.9	56.9	124
20-34	83.8	73.0	62.4	57.0	69.0	1212
35-49	79.0	72.9	69.7	61.9	69.8	128

	Percentage of women who, during the pregnancy of their last birth, had:					Number of women with a live birth in the last two years
	Blood pressure measured	Urine sample taken	Blood sample taken	Blood pressure measured, urine and blood sample taken[1]	Blood pressure measured, urine sample taken	
Education						
None	41.1	34.6	22.7	17.4	29.5	67
Primary	72.1	61.0	43.3	39.4	54.8	182
Lower Secondary	81.4	67.4	56.9	51.5	63.9	529
Upper Secondary	85.4	75.7	66.8	60.0	70.9	340
Tertiary	94.2	88.6	81.7	75.9	85.9	347
Wealth Index quintiles						
Poorest	60.7	44.6	32.3	24.8	38.9	294
Second	79.3	74.1	55.8	49.8	66.5	288
Middle	85.8	70.4	62.5	56.5	66.9	292
Fourth	90.2	79.3	73.3	68.4	77.3	314
Richest	96.0	92.8	85.6	82.2	91.4	275
Ethnicity of household head						
Kinh/Hoa	87.4	77.6	68.8	63.1	74.1	1215
Ethnic Minorities	57.8	44.8	27.7	22.5	38.6	250

[1] MICS Indicator 5.6 - Content of antenatal care

The coverage of key services pregnant women are expected to receive during antenatal care is shown in Table RH.9. Among women who had a live birth during two years preceding Viet Nam MICS 2014, 61.8 per cent reported that a blood sample was taken during antenatal care visits, 82.3 per cent had their blood pressure checked and 72 per cent had a urine specimen taken. Overall, 56.2 per cent of women had access to three aspects of antenatal care. Women from the Central Highlands (25.0 per cent) and Northern Midlands and Mountainous area (28.4 per cent), rural areas (50.6 per cent), those from poor households (24.8 per cent) and ethnic minority groups (22.5 per cent) had less access to three aspects of antenatal care than their counterparts. More strikingly, only 17.4 per cent of women with no education received the three services as opposed to 75.9 per cent of tertiary-educated women.

Assistance at Delivery

Three-quarters of all maternal deaths occur during delivery or the immediate post-partum period. The single most critical intervention for safe motherhood is to ensure that a competent health worker with midwifery skills is present at every birth and in case of emergency that transport is available to a referral facility for obstetric care. The skilled attendant at delivery indicator is used to track progress towards MDG5 of improving maternal health.

Viet Nam MICS 2014 included a number of questions to assess the proportion of births attended by a skilled attendant. A skilled attendant could be a doctor, nurse or midwife.

Table RH.10: Assistance during delivery and caesarian section

Percentage distribution of women aged 15-49 years with a live birth in the last two years by person providing assistance at delivery and percentage of births delivered by C-section, Viet Nam, 2014

	Person assisting at delivery									Percentage delivered by C-section			
	Medical doctor	Nurse/ Midwife	Traditional birth attendant	Community health worker	Relative/Friend	Other/Missing	No attendant	Total	Delivery assisted by any skilled attendant[1,a]	Decided before onset of labour pains	Decided after onset of labour pains	Total[2]	Number of women who had a live birth in the last two years
Total	**86.9**	**6.8**	**0.8**	**0.7**	**3.6**	**0.7**	**0.3**	**100**	**93.8**	**14.2**	**13.3**	**27.5**	**1464**
Region													
Red River Delta	92.9	4.7	0.0	1.4	0.0	1.0	0.0	100	97.6	13.4	12.1	25.5	343
Northern Midlands and Mountainous area	72.6	4.9	0.0	1.9	16.6	3.1	0.9	100	77.5	11.4	10.8	22.2	230
North Central and Central coastal area	87.9	10.6	0.0	0.0	0.9	0.0	0.6	100	98.5	14.8	17.5	32.3	300
Central Highlands	75.2	5.8	7.9	1.4	8.7	0.0	1.1	100	81.0	6.8	7.7	14.5	109
South East	92.6	5.6	0.7	0.0	1.1	0.0	0.0	100	98.1	21.2	13.7	34.8	242
Mekong River Delta	90.6	8.8	0.6	0.0	0.0	0.0	0.0	100	99.4	13.4	14.6	28.1	239
Area													
Urban	95.3	3.7	0.2	0.3	0.5	0.0	0.0	100	99.0	24.4	18.9	43.3	428
Rural	83.5	8.1	1.1	0.9	4.9	1.0	0.5	100	91.6	10.0	11.1	21.0	1037
Mother's age at birth													
Less than 20	77.6	9.2	1.9	0.7	8.9	1.6	0.0	100	86.9	6.6	9.8	16.3	124
20-34	87.8	6.7	0.7	0.7	3.2	0.7	0.2	100	94.5	13.9	13.5	27.4	1212
35-49	87.4	5.5	1.1	1.0	2.5	0.0	2.5	100	93.0	24.6	15.4	40.0	128
Place of delivery													
Public sector health facility	92.4	7.2	0.0	0.4	0.0	0.0	0.0	100	99.6	14.7	14.2	28.9	1313
Private sector health facility	93.5	6.5	0.0	0.0	0.0	0.0	0.0	100	100	24.6	16.2	40.8	58

	Person assisting at delivery						No attendant	Total	Delivery assisted by any skilled attendant[1,a]	Percentage delivered by C-section			Number of women who had a live birth in the last two years
	Medical doctor	Nurse/ Midwife	Traditional birth attendant	Community health worker	Relative/Friend	Other/Missing				Decided before onset of labour pains	Decided after onset of labour pains	Total[2]	
Home	5.9	2.8	14.3	6.6	64.2	0.0	6.2	100	8.7	0.0	0.0	0.0	82
Missing/DK	*	*	*	*	*	*	*	*	*	*	*	*	10
Education													
None	33.1	3.7	7.7	2.8	43.6	4.7	4.4	100	36.8	1.4	5.2	6.6	67
Primary	77.6	10.5	1.6	1.2	8.9	0.0	0.2	100	88.1	11.2	11.6	22.8	182
Lower Secondary	87.7	8.3	0.5	0.9	1.4	0.8	0.3	100	96.1	11.9	9.0	20.9	529
Upper Secondary	91.5	7.2	0.3	0.5	0.1	0.3	0.0	100	98.7	15.4	17.1	32.5	340
Tertiary	96.5	2.9	0.0	0	0.0	0.6	0.0	100	99.4	20.5	18.9	39.3	347
Wealth Index quintiles													
Poorest	66.0	7.4	3.5	2.0	17.8	1.7	1.6	100	73.4	6.2	8.6	14.8	294
Second	87.0	9.8	0.5	0.7	0.3	1.6	0.2	100	96.8	12.2	12.3	24.5	288
Middle	89.3	10.4	0.0	0.0	0.0	0.3	0.0	100	99.7	10.6	15.2	25.9	292
Fourth	94.2	4.8	0.0	1.0	0.0	0.0	0.0	100	99.0	14.6	12.6	27.3	314
Richest	98.4	1.6	0.0	0.0	0.0	0.0	0.0	100	100	28.0	18.3	46.3	275
Ethnicity of household head													
Kinh/Hoa	92.7	6.3	0.1	0.4	0.0	0.4	0.1	100	99.0	15.6	15.0	30.6	1215
Ethnic Minorities	58.8	9.5	4.4	2.3	21.2	2.4	1.3	100	68.3	7.2	5.4	12.6	250

[1] **MICS Indicator 5.7, MDG Indicator 5.2 - Skilled attendant at delivery**

[2] **MICS Indicator 5.9 - Caesarean section**

a Skilled attendants include Medical doctor and Nurse/Midwife.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Some 93.8 per cent of births in the two years preceding Viet Nam MICS 2014 were delivered by skilled personnel (Table RH.10). These percentages were lowest in the Central Highlands (81.0 per cent) and Northern Midlands and Mountainous area (77.5 per cent). Nearly all women with a tertiary education delivered with assistance from a skilled attendant as opposed to 36.8 per cent of those with no education, with a 30 per cent differential between Kinh/Hoa and ethnic minority women.

More than eight-in-10 children born in the two years preceding Viet Nam MICS 2014 were delivered with a doctor's assistance (86.9 per cent), while a nurse/midwife assisted with only 6.8 per cent of births as did a traditional birth attendant (0.8 per cent) and a relative/friend (3.6 per cent).

Whereas nurses/midwives were more active in rural than urban areas (8.1 against 3.7 per cent), doctor-assisted births were more common in urban than rural areas (95.3 against 83.5 per cent). The doctor-assisted proportion was different among regions, with the lowest proportion in the Northern Midlands and Mountainous area (72.6 per cent) and the highest in the Red River Delta (92.9 per cent). Moreover, this proportion was also significantly different among ethnic groups (58.8 per cent for ethnic minorities and 92.7 per cent for Kinh/Hoa births), mother's education (33.1 per cent for no education and 96.5 per cent for tertiary education) and wealth index quintiles (66.0 per cent for poorest quintile and 98.4 per cent for richest quintile).

Figure RH.3: Person assisting at delivery, Viet Nam MICS 2014

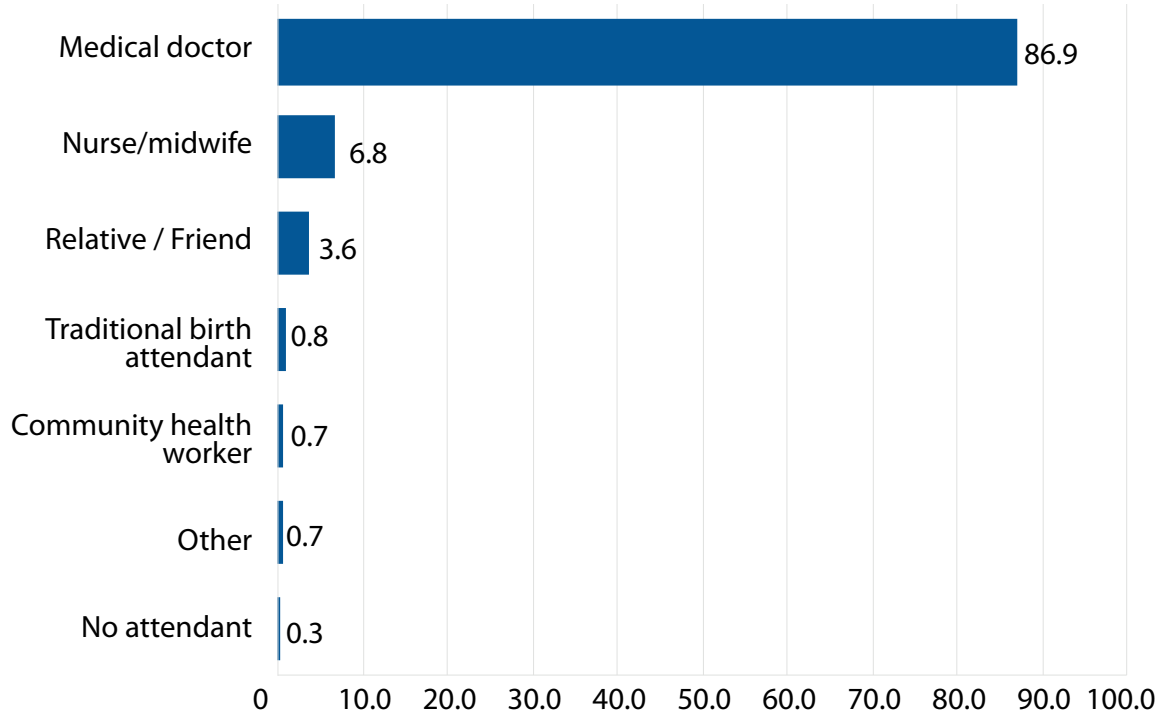


Table RH.10 also shows information on women who delivered by caesarean section (C-section) and provides additional information on the timing of the decision to conduct a C-section (before or after labour pains began) to better assess if such decisions are driven by medical or non-medical reasons.

Overall, 27.5 per cent of women who delivered in the last two years had a C-section, for 14.2 per cent of women the decision was taken before the onset of labour pains and 13.3 per cent after.

The proportion of C-sections was high in the South East (34.8 per cent), but low (14.5 per cent) in the Central Highlands region. Nearly 43.3 per cent of urban women opted for a C-section, with 24.4 per cent taking the decision before the onset of labour pains and 18.9 per cent after. Just 21 per cent of rural women delivered by C-section, half the value in urban areas. The proportion of C-sections increased with mother's education levels, with 6.6 per cent for women with no education compared to 39.6 per cent for tertiary-educated ones. Across wealth index quintiles, this proportion was lowest in the poorest quintile (14.8 per cent), but increased to 46.3 per cent for the richest quintile. This means half of the richest women delivered by C-section.

Place of Delivery

The increased proportion of births delivered at health facilities is an important factor to reduce health risks to mother and baby. Proper medical attention and hygienic conditions during delivery can reduce risks of complications and infections that can cause morbidity and mortality to mother or baby. Table RH.11 presents the percentage distribution of women aged 15-49 who had a live birth in the two years preceding the survey by place of delivery and the percentage of births delivered in a health facility, according to background characteristics.

Table RH.11: Place of delivery

Percentage distribution of women aged 15-49 years with a live birth in the last two years by place of delivery of their last birth, Viet Nam, 2014

	Place of delivery					Total	Delivered in health facility[1]	Number of women with a live birth in the last two years
	Health facility		Home	Other	Missing/ DK			
	Public sector	Private sector						
Total	**89.7**	**3.9**	**5.6**	**0.0**	**0.7**	**100**	**93.6**	**1464**
Region								
Red River Delta	97.8	1.2	0.0	0.0	1.0	100	99.0	343
Northern Midlands and Mountainous area	76.9	0.0	20.0	0.0	3.1	100	76.9	230
North Central and Central coastal area	92.5	4.9	2.5	0.0	0.0	100	97.5	300
Central Highlands	74.2	6.5	19.0	0.4	0.0	100	80.7	109
South East	91.6	5.7	2.7	0.0	0.0	100	97.3	242
Mekong River Delta	91.9	7.5	0.6	0.0	0.0	100	99.4	239
Area								
Urban	92.1	7.1	0.7	0.0	0.0	100	99.3	428
Rural	88.7	2.6	7.6	0.0	1.0	100	91.3	1037
Mother's age at birth								
Less than 20	82.9	2.9	12.6	0.0	1.6	100	85.8	124
20-34	90.5	4.2	4.6	0.0	0.7	100	94.7	1212
35-49	88.6	2.8	8.7	0.0	0.0	100	91.3	128
Number of antenatal care visits								
None	18.6	1.4	62.3	0.0	17.7	100	20.0	59
1-3 visits	86.6	2.2	11.2	0.0	0.0	100	88.8	321
4+ visits	94.5	4.6	0.9	0.0	0.0	100	99.1	1079
Missing/DK	*	*	*	*	*	*	*	5
Education								
None	32.4	3.9	59.0	0.0	4.7	100	36.2	67
Primary	82.1	3.7	14.2	0.0	0.0	100	85.8	182
Lower Secondary	93.6	2.7	2.9	0.0	0.8	100	96.3	529
Upper Secondary	94.7	4.6	0.3	0.1	0.3	100	99.2	340
Tertiary	94.0	5.4	0.0	0.0	0.6	100	99.4	347
Wealth Index quintiles								
Poorest	69.3	2.3	26.5	0.1	1.7	100	71.6	294
Second	94.5	2.4	1.5	0.0	1.6	100	97.0	288
Middle	95.5	4.2	0.0	0.0	0.3	100	99.7	292
Fourth	96.7	3.3	0.0	0.0	0.0	100	100	314
Richest	92.3	7.7	0.0	0.0	0.0	100	100	275
Ethnicity of household head								
Kinh/Hoa	94.7	4.5	0.5	0.0	0.4	100	99.1	1215
Ethnic Minorities	65.5	1.3	30.7	0.0	2.4	100	66.9	250

[1] **MICS Indicator 5.8 - Institutional deliveries**

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Table RH.11 reveals that 93.6 per cent of births in Viet Nam were delivered in health facilities, with 89.7 per cent in public sector facilities and 3.9 per cent with private sector services. Of note, just 5.6 per cent of births took place at home and this proportion was highest in the poorest wealth quintile (26.5 per cent) and ethnic minority group (30.7 per cent). Women in urban areas were more likely to deliver in a health facility than women who are living in rural areas (99.3 per cent compared to 91.3 per cent). The proportion of institutional deliveries varies from 76.9 per cent in Northern Midlands and Mountainous area to 99.4 per cent in the Mekong River Delta. Women with higher levels of education attainment were more likely to deliver in a health facility than women with less or no education. The proportion of births occurring at a health facility increases steadily among women with higher wealth index and women with higher education. Women who received antenatal care at least four times were more likely to delivered at health facilities than others.

Post-natal Health Checks

The time of birth and immediately after is a critical window of opportunity to deliver lifesaving interventions for mother and newborn. Across the world, approximately three million newborns annually die in the first month of life[34] and the majority of these deaths occur within a day or two of birth[35], which is also the time when the majority of maternal deaths occur[36].

Despite the importance of the first few days following birth, large-scale and nationally representative household survey programmes in Viet Nam have not systematically included questions on the post-natal period and care for the mother and newborn. In 2008, the Countdown to 2015 initiative, which monitors progress on maternal, newborn and child health interventions, highlighted this data gap, and called not only for post-natal care (PNC) programmes to be strengthened, but also for better data availability and quality[37].

Following the establishment and discussions of an Inter-Agency Group on PNC and drawing on lessons learned from earlier attempts to collect PNC data, a new questionnaire module for MICS was developed and validated. Named the Post-natal Health Checks module, the objective is to collect information on newborns' and mothers' contact with a provider, not content of care. The rationale for this is that as PNC programmes scale up, it is important to measure the coverage of that increase and ensure platforms for providing essential services are in place. Content is considered more difficult to measure, particularly because the respondent was asked to recall services delivered up to two years preceding the interview.

Table RH.12 presents the percentage distribution of women aged 15-49 who gave birth in a health facility in the two years preceding the survey by duration of stay in the facility following the delivery, according to background characteristics.

34 UN Interagency Group for Child Mortality Estimation, 2013. Levels and Trends in Child Mortality: Report 2013

35 Lawn JE, Cousens S, Zupan J. 4 million neonatal deaths: When? Where? Why? Lancet 2005; 365:891-900

36 WHO, UNICEF, UNFPA, World Bank. Trends in Maternal Mortality: 1990-2010. Geneva: World Health Organization 2012

37 Countdown to 2015: Tracking Progress in Maternal, Newborn & Child Survival, The 2008 Report. New York: UNICEF 2008.

Table RH.12: Post-partum stay in health facility

Percentage distribution of women aged 15-49 years with a live birth in the last two years who had their last birth delivered in a health facility by duration of stay in health facility, Viet Nam, 2014

	Duration of stay in health facility							
	Less than 6 hours	6-11 hours	12-23 hours	1-2 days	3 days or more	Total	12 hours or more[1]	Number of women who had their last birth delivered in a health facility in the last two years
Total	**0.6**	**1.1**	**0.2**	**27.4**	**70.6**	**100**	**98.2**	**1371**
Region								
Red River Delta	1.1	2.4	0.3	43.9	52.3	100	96.5	340
Northern Midlands and Mountainous area	1.6	1.6	1.0	40.7	55.1	100	96.8	177
North Central and Central coastal area	0.0	1.2	0.0	31.4	67.4	100	98.8	293
Central Highlands	2.2	1.2	0.4	29.1	67.1	100	96.6	88
South East	0.0	0.0	0.0	8.0	92.0	100	100	236
Mekong River Delta	0.0	0.0	0.0	7.8	92.2	100	100	237
Area								
Urban	0.1	0.6	0.2	20.5	78.6	100	99.3	424
Rural	0.8	1.4	0.2	30.5	67.0	100	97.7	947
Mother's age at birth								
Less than 20	2.9	0.3	0.0	25.0	71.8	100	96.7	106
20-34	0.4	1.3	0.3	28.3	69.7	100	98.3	1148
35-49	0.5	0.9	0.0	21.0	77.6	100	98.6	117
Type of health facility								
Public	0.6	1.1	0.2	27.7	70.4	100	98.3	1313
Private	0.0	2.9	0.7	21.3	75.0	100	97.1	58
Type of delivery								
Vaginal birth	0.9	1.6	0.3	38.6	58.6	100	97.5	968
C-section	0.0	0.0	0.0	0.7	99.3	100	100	403
Education								
None	(0.0)	(0.0)	(0.0)	(23.7)	(76.3)	(100)	(100)	24
Primary	0.5	1.8	0.0	23.4	74.4	100	97.8	156
Lower Secondary	1.1	1.8	0.3	30.7	66.2	100	97.2	509
Upper Secondary	0.5	0.7	0.0	27.7	71.1	100	98.8	337
Tertiary	0.1	0.5	0.6	24.5	74.4	100	99.4	345
Wealth Index quintiles								
Poorest	0.7	1.7	0.0	29.1	68.5	100	97.6	211
Second	1.2	1.6	0.0	28.3	68.9	100	97.2	279
Middle	0.1	0.6	0.8	25.3	73.2	100	99.3	291
Fourth	1.0	1.6	0.3	30.0	67.1	100	97.4	314
Richest	0.0	0.4	0.0	24.6	74.9	100	99.6	275
Ethnicity of household head								
Kinh/Hoa	0.5	1.1	0.3	26.2	71.9	100	98.4	1204
Ethnic Minorities	1.7	1.6	0.0	36.0	60.7	100	96.8	167

[1] **MICS Indicator 5.10 - Post-partum stay in health facility**

Note: Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Overall, 98.2 per cent women who gave birth in a health facility stayed 12 hours or more after delivery in the facility and this percentage varies slightly across regions, areas, mother's education, ethnicity or wealth index quintiles or types of facilities, public or private.

Nearly 70.6 per cent of women stayed three days or more at a health facility, of whom many had delivered by C-section (99.3 per cent). The proportion that stayed three or more days was high in the Mekong River Delta and South East regions (more than 92 per cent).

Safe motherhood programmes have recently increased emphasis on the importance of PNC, recommending that all women and newborns receive a health check within two days of delivery. To assess the extent of PNC utilization, women were asked whether they and their newborn received a health check after delivery, the timing of the first check and type of health provider for the woman's last birth in the two years preceding the survey.

Table RH.13 shows the percentage of newborns born in the last two years who received health checks and PNC visits from any health provider after birth. It must be noted that health checks following birth while at a facility or home refer to checks provided by any health provider regardless of timing (column 1). Whereas post natal care visits refer to a separate visit to check on the health of the newborn and provide preventive care services and therefore do not include health checks following birth while at a facility or home. The indicator for post-natal health checks includes any health check after birth received while in a health facility and at home (column 1), regardless of timing, as well as PNC visits within two days of delivery (columns 2, 3 and 4).

Table RH.13: Post-natal health checks for newborns

Percentage of women aged 15-49 years with a live birth in the last two years whose last live birth received health checks while in facility or at home following birth, percentage distribution whose last live birth received post-natal care (PNC) visits from any health provider after birth, by timing of visit, and percentage who received post-natal health checks, Viet Nam, 2014

	Health check following birth while in facility or at home[a]	PNC visit for newborns[b]								Post-natal health check for the newborn[1, c]	Number of last live births in the last two years
		Same day	Oneday following birth	Two days following birth	Three-six days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
Total	**88.9**	**0.1**	**0.2**	**1.1**	**9.2**	**14.5**	**74.7**	**0.1**	**100**	**89.1**	**1464**
Region											
Red River Delta	94.9	0.3	0.4	2.1	10.1	9.4	77.7	0.0	94.9	95.5	343
Northern Midlands and Mountainous area	73.3	0.0	0.0	1.1	4.6	5.8	88.5	0.0	73.3	73.3	230
North Central and Central coastal area	87.2	0.0	0.0	1.4	17.1	25.4	55.8	0.3	87.2	87.2	300
Central Highlands	81.3	0.9	0.7	1.2	8.0	5.9	83.2	0.0	81.3	82.3	109
South East	95.7	0.0	0.0	0.5	6.8	25.5	67.3	0.0	95.7	95.7	242
Mekong River Delta	94.0	0.0	0.5	0.0	5.5	9.5	84.5	0.0	94.0	94.0	239
Area											
Urban	94.1	0.3	0.2	0.9	10.9	20.4	67.1	0.2	94.1	94.1	428
Rural	86.8	0.1	0.2	1.2	8.5	12.1	77.8	0.0	86.8	87.1	1037
Mother's age at birth											
Less than 20	81.2	0.0	0.4	1.6	8.8	9.9	79.2	0.0	81.2	82.8	124
20-34	89.6	0.2	0.2	1.0	9.5	14.3	74.8	0.1	89.6	89.7	1212
35-49h	89.8	0.0	0.6	1.9	7.1	21.0	69.3	0.0	89.8	89.8	128
Place of delivery											
Home	14.8	0.5	0.5	1.2	2.2	3.7	92.0	0.0	14.8	15.3	82
Health facility	94.1	0.1	0.2	1.1	9.7	15.3	73.5	0.1	94.1	94.2	1371

	Health check following birth while in facility or at home[a]	PNC visit for newborns[b]								Post-natal health check for the newborn[1, c]	Number of last live births in the last two years
		Same day	Oneday following birth	Two days following birth	Three-six days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
Public	94.0	0.1	0.2	1.2	9.3	15.7	73.4	0.1	94.0	94.2	1313
Private	95.5	0.0	0.0	0.0	19.0	6.4	74.6	0.0	95.5	95.5	58
Other/DK/Missing	*	*	*	*	*	*	*	*	*	*	11
Education											
None	33.7	0.0	0.0	0.0	2.3	9.6	88.0	0.0	33.7	33.7	67
Primary	83.9	0.2	0.7	0.0	4.9	18.8	74.9	0.4	83.9	84.1	182
Lower Secondary	89.3	0.0	0.4	1.5	7.7	10.3	80.2	0.0	89.3	89.3	529
Upper Secondary	95.0	0.5	0.0	2.1	12.0	16.9	68.5	0.0	95.0	95.7	340
Tertiary	95.7	0.1	0.0	0.4	12.4	17.5	69.6	0.0	95.7	95.7	347
Wealth Index quintiles											
Poorest	69.1	0.1	0.3	1.8	4.8	6.7	86.3	0.0	69.1	69.4	294
Second	89.3	0.2	0.0	1.1	6.5	14.9	77.3	0.0	89.3	89.4	288
Middle	94.1	0.0	0.4	1.0	9.6	18.1	70.6	0.3	94.1	94.1	292
Fourth	96.4	0.0	0.4	1.1	10.8	12.9	74.9	0.0	96.4	96.4	314
Richest	95.5	0.4	0.0	0.6	14.6	20.7	63.7	0.0	95.5	95.5	275
Ethnicity of household head											
Kinh/Hoa	94.3	0.1	0.2	1.2	10.1	15.7	72.6	0.1	94.3	94.5	1215
Ethnic Minorities	62.6	0.2	0.3	0.9	4.8	8.8	85.0	0.0	62.6	62.9	250

[1] **MICS Indicator 5.11 - Post-natal health check for the newborn**

a Health checks by any health provider following facility births (before discharge from facility) or following home births (before departure of provider from home).

b PNC visits refer to a separate visit by any health provider to check on the health of the newborn and provide preventive care services. PNC visits do not include health checks following birth while in facility or at home (see note a above).

c Post-natal health checks include any health check performed while in the health facility or at home following birth (see note a above), as well as PNC visits (see note b above) within two days of delivery.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Overall, 88.9 per cent of newborns received a health check following birth at a facility or home (column 1). This proportion was lowest in the Northern Midlands and Mountainous area and highest in the South East. A difference emerged between urban (94.1 per cent) and rural (86.8 per cent) areas, while the figure for Kinh/Hoa (94.3 per cent) was 1.5 times higher than for ethnic minorities. This proportion tended to increase by women's education and wealth quintiles.

Table RH.13 shows 89.1 per cent of newborns received a post-natal health check. A similar trend was observed as with the proportion of newborns who received health checks following birth while at a health facility or home.

Table RH.14: Post-natal care visits for newborns within one week of birth

Percentage distribution of women aged 15-49 years with a live birth in the last two years whose last live birth received a post-natal care (PNC) visit within one week of birth, by location and provider of the first PNC visit, Viet Nam, 2014

	Location of first PNC visit for newborns:				Provider of first PNC visit for newborns:				Number of last live births in the last two years with a PNC visit within the first week of life
	Home	Public sector	Private sector	Total	Home	Public sector	Private sector	Total	
Total	**79.9**	**19.1**	**1.1**	**100**	**95.3**	**3.5**	**1.2**	**100**	**157**
Region									
Red River Delta	(72.1)	(27.9)	(0.0)	(100)	(94.7)	(1.1)	(4.2)	(100)	44
Northern Midlands and Mountainous area	*	*	*	*	*	*	*	*	13
North Central and Central coastal area	(100)	(0.0)	(0.0)	(100)	(100)	(0.0)	(0.0)	(100)	56
Central Highlands	*	*	*	*	*	*	*	*	12
South East	*	*	*	*	*	*	*	*	17
Mekong River Delta	*	*	*	*	*	*	*	*	14
Area									
Urban	86.3	13.7	0.0	100	98.9	1.1	0.0	100	52
Rural	76.6	21.7	1.6	100	93.4	4.8	1.8	100	104
Mother's age at birth									
Less than 20	*	*	*	*	*	*	*	*	13
20-34	78.9	20.1	1.0	100	96.5	3.5	0.0	100	131
35-49	*	*	*	*	*	*	*	*	12
Place of delivery									
Home	*	*	*	*	*	*	*	*	4
Health facility	79.9	19.0	1.1	100	95.4	3.4	1.2	100	153
Public	79.8	20.2	0.0	100	95.4	3.3	1.3	100	142
Private	*	*	*	*	*	*	*	*	11

	Location of first PNC visit for newborns:				Provider of first PNC visit for newborns:				Number of last live births in the last two years with a PNC visit within the first week of life
	Home	Public sector	Private sector	Total	Home	Public sector	Private sector	Total	
Education									
None	*	*	*	*	*	*	*	*	2
Primary	*	*	*	*	*	*	*	*	11
Lower Secondary	(80.6)	(16.7)	(2.6)	(100)	(94.4)	(1.9)	(3.7)	(100)	50
Upper Secondary	78.1	21.9	0.0	100	93.6	6.4	0.0	100	50
Tertiary	(79.1)	(20.9)	(0.0)	(100)	(100)	(0.0)	(0.0)	(100)	45
Wealth Index quintiles									
Poorest	*	*	*	*	*	*	*	*	20
Second	*	*	*	*	*	*	*	*	22
Middle	(76.5)	(22.3)	(1.2)	(100)	(92.8)	(1.4)	(5.8)	(100)	32
Fourth	(79.4)	(20.6)	(0.0)	(100)	(98.8)	(1.2)	(0.0)	(100)	38
Richest	(82.7)	(17.3)	(0.0)	(100)	(98.9)	(1.1)	(0.0)	(100)	43
Ethnicity of household head									
Kinh/Hoa	80.8	18.3	0.9	100	97.3	1.4	1.3	100	141
Ethnic Minorities	*	*	*	*	*	*	*	*	16

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table RH.14 shows that 80 per cent of first PNC visits for newborns occurred at home, some 19.1 per cent of first PNC visits for newborns happened at public health facilities and only 1.1 per cent at private health facilities. The majority of such visits were provided by doctors/nurses (95.3 per cent), a community health worker (3.5 per cent) and traditional birth attendant (1.2 per cent).

Tables RH.15 and RH.16 present information collected on post-natal health checks and visits of mothers that were identical to Tables RH.13 and RH.14, that presented data on newborns.

Table RH.15: Post-natal health checks for mothers

Percentage of women aged 15-49 years with a live birth in the last two years who received health checks while in facility or at home following birth, percentage distribution who received post-natal care (PNC) visits from any health provider after birth at the time of last birth, by timing of visit, and percentage who received post-natal health checks, Viet Nam, 2014

	Health check following birth while in facility or at home[a]	PNC visit for mothers[b]								Post-natal health check for the mother[1,c]	Number of women with a live birth in the last two years
		Same day	One day following birth	Two days following birth	Three-six days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
Total	**89.7**	**0.0**	**0.2**	**0.7**	**6.3**	**13.1**	**79.6**	**0.1**	**100**	**89.8**	**1464**
Region											
Red River Delta	94.7	0.0	0.2	1.8	5.6	7.2	85.2	0.0	100	94.7	343
Northern Midlands and Mountainous area	75.3	0.0	0.0	0.0	2.5	5.8	91.7	0.0	100	75.3	230
North Central and Central coastal area	88.9	0.0	0.0	0.8	14.1	23.0	62.0	0.0	100	88.9	300
Central Highlands	79.1	0.5	0.7	0.7	6.2	5.2	86.7	0.0	100	79.8	109
South East	95.5	0.0	0.0	0.0	2.1	19.5	78.4	0.0	100	95.5	242
Mekong River Delta	96.5	0.0	0.5	0.4	5.2	13.1	80.3	0.6	100	96.5	239
Area											
Urban	95.8	0.0	0.2	1.1	7.5	19.5	71.7	0.0	100	95.8	428
Rural	87.2	0.0	0.2	0.5	5.8	10.4	82.9	0.1	100	87.3	1037
Mother's age at birth											
Less than 20	82.6	0.0	0.0	1.6	4.0	11.3	83.1	0.0	100	82.6	124
20-34	90.5	0.0	0.2	0.5	6.6	13.1	79.5	0.1	100	90.5	1212
35-49	89.5	0.0	0.6	1.9	5.3	14.8	77.4	0.0	100	89.5	128
Place of delivery											
Home	17.0	0.0	0.5	0.0	0.3	1.1	98.1	0.0	100	17.0	82
Health facility	94.8	0.0	0.2	0.7	6.7	13.9	78.4	0.1	100	94.8	1371
Public	94.8	0.0	0.2	0.8	6.4	14.2	78.3	0.1	100	94.9	1313

	Health check following birth while in facility or at home[a]	PNC visit for mothers[b]								Post-natal health check for the mother[1, c]	Number of women with a live birth in the last two years
		Same day	One day following birth	Two days following birth	Three-six days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
Private	94.1	0.0	0.0	0.0	13.9	6.4	79.7	0.0	100	94.1	58
Other/DK/Missing	*	*	*	*	*	*	*	*	*	*	11
Type of delivery											
Vaginal birth	86.5	0.1	0.3	1.0	6.7	7.1	84.8	0.1	100	86.6	1061
C-section	98.1	0.0	0.0	0.0	5.2	28.8	66.0	0.0	100	98.1	403
Education											
None	35.0	0.0	0.0	1.3	1.0	6.5	91.2	0.0	100	35.0	67
Primary	82.5	0.0	0.7	0.0	3.0	11.2	85.1	0.0	100	82.5	182
Lower Secondary	91.0	0.0	0.3	0.5	4.6	9.7	84.6	0.3	100	91.1	529
Upper Secondary	96.5	0.1	0.0	1.6	9.4	14.9	73.9	0.0	100	96.6	340
Tertiary	95.5	0.1	0.0	0.3	8.5	18.6	72.6	0.0	100	95.5	347
Wealth Index quintiles											
Poorest	69.2	0.1	0.3	0.5	2.1	4.9	92.1	0.0	100	69.4	294
Second	90.2	0.1	0.0	0.7	5.4	14.1	79.8	0.0	100	90.2	288
Middle	96.7	0.0	0.3	0.1	6.3	14.3	78.6	0.5	100	96.7	292
Fourth	95.5	0.0	0.4	1.3	8.8	11.7	77.8	0.0	100	95.5	314
Richest	97.1	0.0	0.0	0.9	8.8	21.0	69.4	0.0	100	97.1	275
Ethnicity of household head											
Kinh/Hoa	95.2	0.0	0.2	0.7	7.2	14.7	77.1	0.0	100	95.2	1215
Ethnic Minorities	63.2	0.0	0.3	0.4	1.5	5.4	91.8	0.6	100	63.3	250

[1] **MICS Indicator 5.12 - Post-natal health check for the mother**

a Health checks by any health provider following facility births (before discharge from facility) or following home births (before departure of provider from home).

b PNC refers to a separate visit by any health provider to check on the health of the mother and provide preventive care services. PNC visits do not include health checks following birth while in facility or at home (see note a above).

c Post-natal health checks include any health check performed while in ahealth facility or at home following birth (see note a above), as well as PNC visits (see note b above) within two days of delivery.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Table RH.15 presents a pattern similar to Table RH.13. Overall, 89.7 per cent of mothers received a health check following birth at a facility or at home. The percentages ranged from 75.3 per cent in the Northern Midlands and Mountainous area to 96.5 per cent in the Mekong River Delta. Differences were also observed between urban (95.8 per cent) and rural (87.2 per cent) areas, while the figure for Kinh/Hoa (95.2 per cent) was 1.5 times higher than for ethnic minorities. This proportion increased with women's education and wealth index quintiles, but was different between C-section and varginal births.

Table RH.15 shows that 89.8 per cent of mothers received post-natal health checks and followed a similar pattern to the proportions of mothers who received a health check following birth at a facility or home.

Table RH.16: Post-natal care visits for mothers within one week of birth

Percentage distribution of women aged 15-49 years with a live birth in the last two years who received a post-natal care (PNC) visit within one week of birth, by location and provider of the first PNC visit, Viet Nam, 2014

	Location of first PNC visit for mothers:				Provider of first PNC visit for mothers:			Number of women with a live birth in the last two years who received a PNC visit within one week of birth
	Home	Public sector	Private sector	Total	Doctor/nurse/ midwife	Community health worker	Total	
Total	**92.9**	**6.8**	**0.4**	**100**	**94.2**	**5.8**	**100**	**105**
Region								
Red River Delta	*	*	*	*	*	*	*	26
Northern Midlands and Mountainous area	*	*	*	*	*	*	*	6
North Central and Central coastal area	(100)	(0.0)	(0.0)	(100)	(100)	(0.0)	(100)	45
Central Highlands	(78.3)	(17.4)	(4.2)	(100)	(90.2)	(9.8)	(100)	9
South East	*	*	*	*	*	*	*	5
Mekong River Delta	*	*	*	*	*	*	*	14
Area								
Urban	99.0	1.0	0.0	100	96.6	3.4	100	38
Rural	89.4	10.0	0.6	100	92.9	7.1	100	67
Mother's age at birth								
Less than 20	*	*	*	*	*	*	*	7
20-34	92.3	7.7	0.0	100	94.8	5.2	100	88
35-49	*	*	*	*	*	*	*	10
Place of delivery								
Home	*	*	*	*	*	*	*	1
Health facility	93.2	6.5	0.4	100	94.5	5.5	100	104
Public	93.5	6.5	0.0	100	94.6	5.4	100	96
Private	*	*	*	*	*	*	*	8
Other/DK/Missing	*	*	*	*	*	*	*	0.0

	Location of first PNC visit for mothers:			Total	Provider of first PNC visit for mothers:		Total	Number of women with a live birth in the last two years who received a PNC visit within one week of birth
	Home	Public sector	Private sector		Doctor/nurse/ midwife	Community health worker		
Type of delivery								
Vaginal birth	91.1	8.5	0.4	100	93.6	6.4	100	84
C-section	*	*	*	*	*	*	*	21
Education								
None	*	*	*	*	*	*	*	2
Primary	*	*	*	*	*	*	*	7
Lower Secondary	(91.7)	(8.3)	(0.0)	(100)	(93.0)	(7.0)	(100)	28
Upper Secondary	(95.0)	(5.0)	(0.0)	(100)	(92.9)	(7.1)	(100)	38
Tertiary	(95.9)	(4.1)	(0.0)	(100)	(100)	(0.0)	(100)	31
Wealth Index quintiles								
Poorest	*	*	*	*	*	*	*	9
Second	*	*	*	*	*	*	*	18
Middle	*	*	*	*	*	*	*	19
Fourth	(90.0)	(10.0)	(0.0)	(100)	(100)	(0.0)	(100)	33
Richest	(98.8)	(1.2)	(0.0)	(100)	(98.2)	(1.8)	(100)	27
Ethnicity of household head								
Kinh/Hoa	93.3	6.7	0.0	100	95.3	4.7	100	100
Ethnic Minorities	*	*	*	*	*	*	*	6

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table RH.16 matches Table RH.14, but deals with PNC visits for mothers by location and type of provider. Overall, 92.9 per cent of first PNC visits occurred at home and only 6.8 per cent at a public facility and 0.4 per cent at a private facility. Almost 94.2 per cent of mothers received post-natal health checks by doctors/nurses and only 5.8 per cent by community health workers.

Table RH.17: Post-natal health checks for mothers and newborns

Percentage distribution of women aged 15-49 years with a live birth in the last two years by post-natal health checks for the mother and newborn, within two days of the most recent birth, Viet Nam, 2014

	Post-natal health checks within two days of birth for:					
	Both mothers and newborns	Mothers only	Newborns only	Neither mother	Total	Number of women with a live birth in the last two years
Total	**87.0**	**2.8**	**2.1**	**8.1**	**100**	**1464**
Region						
Red River Delta	93.1	1.6	2.5	2.9	100	343
Northern Midlands and Mountainous area	72.8	2.5	0.4	24.2	100	230
North Central and Central coastal area	83.8	5.1	3.4	7.7	100	300
Central Highlands	79.0	0.8	3.4	16.9	100	109
South East	94.8	0.6	0.9	3.6	100	242
Mekong River Delta	91.8	4.7	2.2	1.3	100	239
Area						
Urban	92.8	3.0	1.2	3.0	100	428
Rural	84.6	2.7	2.5	10.3	100	1037
Mother's age at birth						
Less than 20	80.8	1.7	2.0	15.5	100	124
20-34	87.5	3.0	2.2	7.3	100	1212
35-49	88.4	1.1	1.4	9.1	100	128
Place of delivery						
Home	14.2	2.9	1.2	81.8	100	82
Health facility	92.1	2.8	2.2	3.0	100	1371
Public	92.0	2.8	2.1	3.0	100	1313
Private	92.6	1.5	2.9	2.9	100	58
Other/DK/Missing	*	*	*	*	*	11
Type of delivery						
Vaginal birth	83.7	2.9	2.5	10.9	100	1061
C-section	95.7	2.4	0.9	1.0	100	403
Education						
None	30.3	4.6	3.4	61.6	100	67
Primary	81.4	1.2	2.8	14.7	100	182
Lower Secondary	87.3	3.8	2.1	6.9	100	529
Upper Secondary	94.4	2.2	1.3	2.1	100	340
Tertiary	93.4	2.2	2.3	2.1	100	347

	Post-natal health checks within two days of birth for:				Total	Number of women with a live birth in the last two years
	Both mothers and newborns	Mothers only	Newborns only	Neither mother		
Wealth Index quintiles						
Poorest	66.7	2.7	2.7	27.9	100	294
Second	87.3	3.0	2.8	6.9	100	288
Middle	93.4	3.3	0.7	2.6	100	292
Fourth	93.8	1.7	2.6	1.9	100	314
Richest	93.9	3.2	1.7	1.2	100	275
Ethnicity of household head						
Kinh/Hoa	92.5	2.7	2.0	2.8	100	1215
Ethnic Minorities	60.1	3.2	2.8	33.9	100	250

Note:
Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Table RH.17 presents the distribution of women with a live birth in the two years preceding the survey by receipt of health checks or PNC visits within two days of birth for mother and newborn, thus combining the indicators presented in Tables RH.13 and RH.15.

Viet Nam MICS 2014 revealed that for 87 per cent of live births, both mothers and newborns received a health check following birth or a timely PNC visit, whereas 8.1 per cent of births received neither health checks nor timely visits. Urban births (92.8 per cent) were largely better served with health checks or timely visits as compared to rural births (84.6 per cent). The figures between regions vary from 72.8 per cent in the Northern Midlands and Mountainous area to 94.8 per cent in the South East. This proportion was 1.5 times higher for Kinh/Hoa than ethnic minorities and there were also clear correlations to household wealth and education of women.

CHAPTER IX

EARLY CHILDHOOD DEVELOPMENT

IX. EARLY CHILDHOOD DEVELOPMENT

Early Childhood Care and Education

Children's readiness for primary school can be improved through attendance at early childhood education programmes or through pre-school attendance. Early childhood education programmes, include those for children that have organized learning components, as opposed to just baby-sitting and day-care functions which do not typically have such education and learning opportunities.

Viet Nam's Education Law, which came into force in 2005 and was revised in 2009, regulated that early childhood education in the country should be focussed on nurturing, caring and educating children three months to six years old. The objectives of early childhood education under the law are to help children develop physically, emotionally, intellectually and aesthetically, to shape the initial elements of personality as well as to prepare children for first grade of primary school.

Early childhood development is also supported by the Early Childhood Education Compulsory Strategy 2010-2015, which aims for 95 per cent of children aged under-5 to participate in two

courses per school day, 70 per cent of children aged 3-4 years to be in pre-school and 25 per cent of children to be in kindergarten by 2015. The early childhood education under-5 indicator should be taken into account in provincial-level socio-economic development programmes annually.

Some 71.3 per cent of children aged 36-59 months attend an organized early childhood education programme (Table CD.1). Regional differentials were notable, with such programmes more prevalent in the Red River Delta (85.5 per cent) and least in the Mekong River Delta (39.0 per cent). No significant sex difference existed. However, differences by urban (79.7 per cent) and rural areas (67.8 per cent), wealth index quintiles (85.7 per cent of children from the richest households against 53.4 per cent from the poorest) and mother's education levels (88.7 per cent for children with tertiary-educated mothers and 46.1 per cent for those with non-educated mothers) were more pronounced. Differentials by age group were also significant, with 57.2 per cent of children aged 36-47 months attending early childhood education compared to 82.8 per cent for those aged 48-59 months.

Table CD.1: Early childhood education

Percentage of children aged 36-59 months attending an organized early childhood education programme, Viet Nam, 2014

	Percentage of children aged 36-59 months attending early childhood education[1]	Number of children aged 36-59 months
Total	**71.3**	**1197**
Sex		
Male	73.6	591
Female	69.0	606
Region		
Red River Delta	85.5	282
Northern Midlands and Mountainous area	83.8	188
North Central and Central coastal area	74.6	257
Central Highlands	65.0	93
South East	71.2	172
Mekong River Delta	39.0	205
Area		
Urban	79.7	350
Rural	67.8	847
Age of child		
36-47 months	57.2	539
48-59 months	82.8	658
Mother's education		
None	46.1	81
Primary	51.2	220
Lower Secondary	72.7	466
Upper Secondary	80.7	207
Tertiary	88.7	223

	Percentage of children aged 36-59 months attending early childhood education[1]	Number of children aged 36-59 months
Wealth Index quintiles		
Poorest	53.4	269
Second	66.4	235
Middle	73.8	252
Fourth	81.0	220
Richest	85.7	220
Ethnicity of household head		
Kinh/Hoa	72.4	983
Ethnic Minorities	66.2	215

[1] MICS Indicator 6.1 - Attendance to early childhood education

Quality of Care

It is well recognized that a period of rapid brain development occurs in the first three to four years of life and the quality of homecare is a major determinant of a child's development during this period[38]. In this context the engagement of adults in activities with children, the presence of children's books in the home and the conditions of care are important indicators of homecare quality. As set out in *A World Fit for Children*, "children should be physically healthy, mentally alert, emotionally secure, socially competent and ready to learn"[39].

To build a more comprehensive picture of early learning in Viet Nam, 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 songs, taking children outside the home/compound/yard, playing with children and spending time with children naming, counting or drawing items of interest.

With three-fourths (75.9 per cent) of children aged 36-59 months, an adult household member engaged in four or more activities that promoted learning and school readiness during the three days preceding the survey (Table CD.2). The mean number of activities adults engaged in with children was 4.5. The table also indicates that fathers' involvement in such activities was somewhat limited. In fact, a father's involvement in four or more activities was restricted to 14.9 per cent, while 14.2 per cent of children aged 36-59 months live without their biological father. In contrast, the percentage of mothers involved in such activities was 45 per cent, with just 7.7 per cent of children aged 36-59 months living without their biological mother.

38 Grantham-McGregor, S et al. 2007.Developmental Potential in the First 5 Years for Children in Developing Countries. The Lancet 369: 60–70

Belsky, J et al. 2006.Socio-economic Risk, Parenting During the Preschool Years and Child Health Age 6 Years. European Journal of Public Health 17(5): 511–2.

39 UNICEF, A World Fit For Children, adopted by the UN General Assembly at the 27th Special Session, 10 May 2002, p. 2.

Table CD.2: Support for learning

Percentage of children aged 36-59 months with whom adult household members engaged in activities that promote learning and school readiness during the last three days and engagement in such activities by biological fathers and mothers, Viet Nam, 2014

	Percentage of children with whom adult household members have engaged in four or more activities[1]	Mean number of activities with adult household members	Percentage of children living with their:		Number of children aged 36-59 months	Percentage of children with whom biological fathers have engaged in four or more activities[2]	Mean number of activities with biological fathers	Number of children aged 36-59 months living with their biological fathers	Percentage of children with whom biological mothers have engaged in four or more activities[3]	Percentage of children with whom biological fathers have engaged in one or more activities	Percentage of children with whom biological mothers have engaged in one or more activities	Mean number of activities with biological mothers	Number of children aged 36-59 months living with their biological mothers
			Biological father	Biological mother									
Total	**75.9**	**4.5**	**85.8**	**92.3**	**1197**	**14.9**	**1.6**	**1027**	**45.0**	**61.6**	**82.1**	**3.0**	**1105**
Sex													
Male	76.3	4.5	83.5	91.7	591	14.3	1.5	493	45.0	60.6	81.1	3.0	542
Female	75.6	4.4	88.1	92.9	606	15.6	1.6	534	45.0	62.6	83.0	3.1	563
Region													
Red River Delta	86.5	5.0	90.5	95.2	282	21.1	2.0	256	53.9	70.3	85.7	3.5	269
Northern Midlands and Mountainous area	65.3	4.0	91.3	94.3	188	9.1	1.4	171	37.0	57.9	75.6	2.7	177
North Central and Central coastal area	78.5	4.5	75.7	89.1	257	14.4	1.3	195	45.1	49.2	81.4	2.9	229
Central Highlands	62.3	3.9	93.1	97.8	93	12.9	1.5	87	36.8	66.5	82.6	2.8	91
South East	80.7	4.6	88.1	94.9	172	19.6	1.8	152	51.6	66.0	89.1	3.3	163
Mekong River Delta	70.0	4.1	81.7	85.8	205	9.5	1.4	167	38.0	62.6	77.6	2.6	176
Area													
Urban	85.0	4.9	88.0	96.3	350	22.7	2.0	308	61.9	68.7	89.7	3.8	337
Rural	72.2	4.3	84.9	90.6	847	11.7	1.4	719	38.0	58.6	78.9	2.7	768
Age													
36-47 months	74.8	4.4	85.7	92.0	539	14.3	1.5	462	43.4	58.9	80.7	3.0	496
48-59 months	76.9	4.5	85.9	92.6	658	15.4	1.6	565	46.2	63.7	83.1	3.1	609
Mother's education[a]													
None	30.6	2.7	79.9	83.9	81	3.3	0.9	65	7.4	46.3	63.8	1.4	68
Primary	55.3	3.7	82.9	82.9	220	7.7	1.1	183	20.8	50.9	68.0	2.0	183

	Percentage of children with whom adult household members have engaged in four or more activities[1]	Mean number of activities with adult household members	Percentage of children living with their:		Number of children aged 36-59 months	Percentage of children with whom biological fathers have engaged in four or more activities[2]	Mean number of activities with biological fathers	Number of children aged 36-59 months living with their biological fathers	Percentage of children with whom biological mothers have engaged in four or more activities[3]	Percentage of children with whom biological fathers have engaged in one or more activities	Percentage of children with whom biological mothers have engaged in one or more activities	Mean number of activities with biological mothers	Number of children aged 36-59 months living with their biological mothers
			Biological father	Biological mother									
Lower Secondary	79.7	4.5	86.8	94.5	466	11.6	1.5	404	41.3	60.0	83.9	2.9	440
Upper Secondary	85.6	4.8	83.3	93.7	207	16.0	1.7	172	58.6	66.2	86.2	3.5	194
Tertiary	95.9	5.4	90.9	98.7	223	32.2	2.5	203	77.6	76.7	94.9	4.5	220
Father's education													
None	40.8	2.8	100	97.3	42	2.7	1.0	42	11.8	53.7	77.9	1.9	41
Primary	55.9	3.6	100	94.4	161	7.2	1.2	161	28.4	60.0	78.2	2.4	152
Lower Secondary	74.1	4.4	100	98.9	424	12.6	1.6	424	42.1	67.9	85.6	3.0	419
Upper Secondary	83.4	4.8	100	98.8	223	19.5	2.1	223	50.9	76.5	88.2	3.3	220
Tertiary	95.2	5.4	100	98.9	178	38.5	2.9	178	75.4	86.8	96.5	4.5	176
Father not in household	78.0	4.5	0.0	57.2	170	na	na	na	36.3	3.2	54.9	2.1	97
Wealth Index quintiles													
Poorest	51.8	3.4	86.2	90.0	269	4.6	1.1	232	23.5	49.5	72.8	2.1	243
Second	77.0	4.4	80.9	88.7	235	12.8	1.3	190	34.1	55.9	76.3	2.5	209
Middle	73.6	4.3	82.6	90.1	252	12.7	1.4	208	39.4	59.3	80.0	2.8	227
Fourth	87.5	5.0	87.9	95.3	220	15.7	1.7	194	60.2	66.0	88.6	3.5	210
Richest	95.5	5.4	92.1	98.4	220	31.6	2.5	203	74.0	80.6	95.3	4.4	217
Ethnicity of household head													
Kinh/Hoa	80.8	4.6	85.3	91.8	983	16.6	1.7	838	48.8	63.4	83.7	3.2	902
Ethnic Minorities	53.7	3.6	88.2	94.7	215	7.1	1.1	189	27.4	53.0	74.6	2.3	203

[1] **MICS Indicator 6.2 - Support for learning**

[2] **MICS Indicator 6.3 - Father's support for learning**

[3] **MICS Indicator 6.4 - Mother's support for learning**

na: not applicable

a The background characteristic "Mother's education" refers to the education level of the respondent to the Questionnaire for Children Under Five and covers mothers and primary caretakers, who were interviewed when the mother was not listed in the same household. Since Indicator 6.4 reports on the biological mother's support for learning, this background characteristic only refers to the educational levels of biological mothers when calculated for the indicator in question.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

No sex and age differentials were present in terms of engagement of adults in four activities or more with children. This rate for children living in urban areas (85.0 per cent) was greater than rural areas (72.2 per cent). Differentials by region and wealth index quintile status were also observed. Adult engagement in activities with children was greatest in the Red River Delta (86.5 per cent) and lowest in the Central Highlands (62.3 per cent), while the proportion was 95.5 per cent for children living in the richest households, as opposed to 51.8 per cent for the poorest households. Parents' education provided a significant differential in their engagement in activities with children whose mothers had a tertiary education (95.9 per cent), outweighing that of mothers with no education (30.6 per cent). Such engagement in activities was also greater among Kinh/Hoa households than among ethnic minority ones.

Exposure to books in early years not only provides children with a greater understanding of the nature of print and the concept of reading, but may also provide opportunities to see others reading, such as older siblings doing school work. The presence of books is also important for later school performance. The mothers or caretakers of all children aged under-5 years were asked about the number of children's books or picture books they have for the child, household or outside objects, and homemade toys or toys that came from a shop available at home.

In Viet Nam, only 26.2 per cent of children aged 0-59 months live in households where at least three children's books were present for the child (Table CD.3). The proportion of children with 10 or more books declines to just 13.0 per cent. While no sex differentials were observed, urban children appear to have more access to children's books than those living in rural households. The proportion of under-5 children who have three or more children's books was 43.1 per cent in urban areas, but only 19.1 per cent in rural areas. The presence of children's books positively correlated with the child's age, as the homes of 38.0 per cent of children aged 24-59 months had three or more children's books, which declined to 11.6 per cent for children aged 0-23 months.

The three regions with very low percentages of children living in households with 10 or more books for children were the Central Highlands (6.0 per cent), Northern Midlands and Mountainous area (7.3 per cent) and Mekong River Delta (6.6 per cent).There were significant differences across the range of variables. Urban (28.7 per cent) contrasted with rural areas (6.4 per cent), Kinh/Hoa (15.1 per cent) outscored ethnic minorities (2.7 per cent), as did tertiary-educated mothers (35.1 per cent) over those with no education (0 per cent). This trend was also seen in wealth index quintiles, with the richest households (40.8 per cent) posting a much higher percentage than the poorest (1.0 per cent).

Table CD.3: Learning materials

Percentage of children aged under-5 by the number of children's books present in the household and by playthings that child plays with, Viet Nam, 2014

	Percentage of children living in households that have for the child:		Percentage of children who play with:				Number of children aged under-5
	Three or more children's books[1]	10 or more children's books	Homemade toys	Toys from a shop / manufactured toys	Household objects/ objects found outside	Two or more types of playthings[2]	
Total	**26.2**	**13.0**	**24.2**	**78.3**	**50.5**	**51.5**	**3316**
Sex							
Male	25.3	12.7	24.6	79.7	50.4	52.2	1719
Female	27.2	13.3	23.7	76.8	50.6	50.8	1597
Region							
Red River Delta	38.4	22.7	29.6	88.2	52.3	59.7	784
Northern Midlands and Mountainous area	15.2	7.3	20.8	64.9	50.0	44.8	513
North Central and Central coastal area	23.5	10.5	27.9	75.1	53.9	55.5	690
Central Highlands	14.8	6.0	25.6	67.4	64.5	53.3	241
South East	36.0	17.5	22.1	85.5	38.9	45.0	515
Mekong River Delta	18.7	6.6	16.4	78.8	48.7	46.8	573
Area							
Urban	43.1	28.7	23.8	88.3	44.5	52.2	985
Rural	19.1	6.4	24.3	74.1	53.0	51.2	2331
Age							
0-23 months	11.6	5.6	16.0	68.4	37.5	37.9	1478
24-59 months	38.0	18.9	30.7	86.2	60.9	62.5	1838
Mother's education							
None	1.7	0.00	14.9	29.2	64.5	29.4	197
Primary	10.6	2.8	19.7	70.8	54.4	48.3	506
Lower Secondary	19.8	5.7	24.8	78.2	49.1	50.8	1219
Upper Secondary	31.1	14.4	24.4	85.8	49.3	55.2	683
Tertiary	50.6	35.1	28.6	90.3	47.2	57.6	710
Wealth Index quintiles							
Poorest	5.7	1.0	21.0	52.9	59.7	43.7	694
Second	14.4	3.8	23.9	74.2	53.0	51.1	662
Middle	21.5	5.4	22.6	83.3	49.1	52.7	672
Fourth	34.1	16.1	27.0	89.9	45.3	56.8	659
Richest	58.2	40.8	26.6	93.4	44.5	53.9	628
Ethnicity of household head							
Kinh/Hoa	29.9	15.1	24.6	83.8	49.4	53.5	2746
Ethnic Minorities	8.7	2.7	21.9	52.1	55.8	42.0	570

[1] MICS Indicator 6.5 - Availability of children's books

[2] MICS Indicator 6.6 - Availability of playthings

Table CD.3 also shows that 51.5 per cent of children aged 0-59 months had two or more types of playthings to engage with in their homes. Playthings were defined in the questionnaires as homemade toys (such as dolls and cars, or other toys made at home), toys that came from a store, and household objects (such as pots and bowls) or objects and materials found outside the home (such as sticks, rocks, animal shells or leaves). Interestingly, 78.3 per cent of children played with toys that came from a store, 50.5 per cent with household objects/objects found outside, 24.2 per cent with homemade toys and 51.2 per cent had two or more types of playthings.

Leaving children alone or in the presence of other young children is known to increase the risk of injuries[40]. In Viet Nam MICS 2014, two questions were asked to discover 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.4 reveals that 6.0 per cent of children aged 0-59 months were left in the care of other children, while 1.5 per cent were left alone during the week preceding the interview. Combining the two care indicators, it is calculated that 7.0 per cent of children were left with inadequate care during the past week, either by being left alone or in the care of another child. This rate in rural areas was 8.1 per cent, twice that of urban areas and closely correlated with mother's education levels (18.5 per cent of non-educated mothers compared to 1.4 per cent of tertiary-educated mothers) as well as wealth index quintiles (13.6 per cent in the poorest households compared to 1.5 per cent of the richest households).

Table CD.4: Inadequate care

Percentage of children aged under-5 left alone or left in the care of another child younger 10 years of age for more than one hour at least once during the past week, Viet Nam, 2014

	Percentage of children aged under-5:			
	Left alone in the past week	Left in the care of another child younger than 10 years of age in the past week	Left with inadequate care in the past week[1]	Number of children aged under-5
Total	**1.5**	**6.0**	**7.0**	**3316**
Sex				
Male	1.0	5.1	5.9	1719
Female	2.0	7.0	8.1	1597
Region				
Red River Delta	1.4	4.3	5.1	784
Northern Midlands and Mountainous area	2.5	10.1	11.5	513
North Central and Central coastal area	1.8	9.2	10.3	690
Central Highlands	3.2	7.6	9.4	241
South East	0.6	2.8	3.4	515
Mekong River Delta	0.4	3.1	3.5	573

40 Grossman, David C. (2000). The History of Injury Control and the Epidemiology of Child and Adolescent Injuries. The Future of Children, 10(1), 23-52.

	Percentage of children aged under-5:			
	Left alone in the past week	Left in the care of another child younger than 10 years of age in the past week	Left with inadequate care in the past week[1]	Number of children aged under-5
Area				
Urban	1.0	3.6	4.4	985
Rural	1.7	7.1	8.1	2331
Age				
0-23 months	0.2	3.2	3.4	1478
24-59 months	2.6	8.2	9.8	1838
Mother's education				
None	3.4	18.1	18.5	197
Primary	2.8	9.0	11.0	506
Lower Secondary	1.7	6.8	7.8	1219
Upper Secondary	0.9	4.2	4.8	683
Tertiary	0.4	1.1	1.4	710
Wealth Index quintiles				
Poorest	3.6	11.6	13.6	694
Second	2.3	7.9	9.6	662
Middle	0.6	5.5	5.9	672
Fourth	0.5	3.3	3.7	659
Richest	0.4	1.3	1.5	628
Ethnicity of household head				
Kinh/Hoa	1.1	4.8	5.6	2746
Ethnic Minorities	3.3	11.9	13.6	570

[1] **MICS Indicator 6.7 - Inadequate care**

Early childhood development is defined as an orderly, predictable process along a continuous path, in which a child learns to handle more complicated levels of moving, thinking, speaking, feeling and communicating to others. Physical growth, literacy and numeracy skills, socio-emotional development and readiness to learn are vital domains of a child's overall development, which is a basis for overall human development[41].

A 10-item module was used to calculate the Early Child Development Index (ECDI). Its primary purpose is to inform public policy regarding the developmental status of children in Viet Nam. The ECDI is based on selected milestones that children are expected to achieve by the ages of 3 and 4 years. The 10 items are used to determine if children are developmentally on track in four domains:

- Literacy-numeracy: Children are identified as being developmentally on track based on whether they can identify/name at least 10 letters of the alphabet, whether they can read at least four simple, popular words, and whether they know the name and recognize the symbols of all numbers from one to 10. If at least two of these are true, then the child is considered developmentally on track.

41 Shonkoff J, and Phillips D, (eds), From neurons to neighborhoods: the science of early childhood development, Committee on Integrating the Science of Early Childhood Development, National Research Council, 2000.2.

- Physical: If the child can pick up a small object with two fingers, like a stick or a rock from the ground and/or the mother/caretaker does not indicate that the child is sometimes too sick to play, then the child is regarded as being developmentally on track in the physical domain.
- Social-emotional: Children are considered to be developmentally on track if two of the following are true: If the child gets along well with other children, if the child does not kick, bite, or hit other children and if the child does not get easily distracted.
- Learning: If the child follows simple directions on how to do something correctly and/or when given something to do, is able to do it independently, then the child is considered to be developmentally on track in this domain.

The ECDI is then calculated as the percentage of children who are developmentally on track in at least three of these four domains.

Table CD.5: Early child development index

Percentage of children aged 36-59 months developmentally on track in literacy-numeracy, physical, social-emotional and learning domains, and the early child development index score, Viet Nam, 2014

	Percentage of children aged 36-59 months who are developmentally on track for indicated domains				Early child development index score[1]	Number of children aged 36-59 months
	Literacy-numeracy	Physical	Social -Emotional	Learning		
Total	**29.4**	**96.5**	**91.2**	**94.2**	**88.7**	**1197**
Sex						
Male	30.6	96.4	90.5	94.4	88.2	591
Female	28.1	96.6	91.9	93.9	89.2	606
Region						
Red River Delta	36.4	98.0	91.5	97.3	93.7	282
Northern Midlands and Mountainous area	22.6	96.1	90.1	85.5	81.8	188
North Central and Central coastal area	40.4	95.4	89.5	94.3	87.0	257
Central Highlands	24.6	96.5	91.9	94.1	90.4	93
South East	25.3	94.3	93.0	94.3	89.1	172
Mekong River Delta	17.7	97.9	92.1	97.5	89.2	205
Area						
Urban	33.0	97.7	91.4	95.5	90.8	350
Rural	27.9	96.0	91.1	93.6	87.8	847
Age						
36-47 months	18.3	94.1	87.3	91.5	83.7	539
48-59 months	38.5	98.4	94.5	96.4	92.8	658
Attendance to early childhood education						
Attending	36.8	98.5	93.6	97.1	92.7	853
Not attending	10.9	91.6	85.3	86.9	78.9	344

	Percentage of children aged 36-59 months who are developmentally on track for indicated domains				Early child development index score[1]	Number of children aged 36-59 months
	Literacy-numeracy	Physical	Social -Emotional	Learning		
Mother's education						
None	5.7	94.9	91.9	78.7	74.9	81
Primary	20.4	93.7	86.4	94.3	82.8	220
Lower Secondary	33.7	97.2	93.0	95.3	91.5	466
Upper Secondary	32.3	96.8	91.7	95.3	91.5	207
Tertiary	35.2	98.2	91.7	96.3	91.1	223
Wealth Index quintiles						
Poorest	18.4	93.9	90.2	85.2	81.1	269
Second	27.3	96.6	92.9	97.1	90.1	235
Middle	33.8	96.5	90.2	97.3	90.8	252
Fourth	35.1	98.4	90.3	95.8	90.6	220
Richest	34.3	97.6	92.8	96.8	92.2	220
Ethnicity of household head						
Kinh/Hoa	30.8	96.9	92.1	96.4	91.2	983
Ethnic Minorities	22.6	94.7	87.2	84.0	77.1	215

[1] MICS Indicator 6.8 - Early child development index

Table CD.5 shows that 88.7 per cent of children aged 36-59 months in Viet Nam were developmentally on track. No difference was observed by sex. As expected, the ECDI was higher for the older age group (92.8 per cent among those 48-59 months old compared to 83.7 per cent among 36-47 months old), since children's skills mature with age. However, a higher ECDI was also seen in children attending an early childhood education programme at 92.7 per cent compared to 78.9 per cent among those not attending. Children living in poorest households have a lower ECDI (81.1 per cent) than those living in the richest households (92.2 per cent of children developmentally on track).

The analysis of four domains of child development shows that 29.4 per cent of children were on track in the literacy-numeracy domain, but more so in the physical (96.5 per cent), learning (94.2 per cent) and social-emotional (91.2 per cent) domains. In each individual domain the higher score was associated with children living in richest households, with children attending an early childhood education programme and older children.

CHAPTER X

LITERACY AND EDUCATION

X. LITERACY AND EDUCATION

Literacy among Young Women

The Youth Literacy Rate reflects the outcomes of primary education over the previous 10 years. As a measure of the effectiveness of the primary education system, it is often seen as a proxy measure of social progress and economic achievement. In Viet Nam MICS 2014, since only a women's questionnaire was administered, the results were based on females aged 15-24. Literacy was assessed on the ability of the respondent to read a short, simple statement or based on school attendance.

Overall, Table ED.1 indicates that a high proportion (96.5 per cent) of women aged 15-24 in Viet Nam were literate. Of women who stated that primary school was their highest level of education, 79 per cent were actually able to read the statement shown to them. Regarding literacy, there were no significant differences between rural and urban areas or between women aged 15-19 and 20-24 years old. This rate was lowest in the Northern Midlands and Mountainous area (87.3 per cent) and Central Highlands (92.3 per cent). Women from ethnic minority groups and the poorest households also had low percentages of literacy. Relatively large differences emerged between the poorest wealth index quintile (84.2 per cent) and the remaining groups (98.6 per cent for the second and 100 per cent for the richest quintile) as well as between Kinh/Hoa (99.1 per cent) and ethnic minority (83.2 per cent) women.

Table ED.1: Literacy (young women)

Percentage of women aged 15-24 years who are literate, Viet Nam, 2014

	Percentage literate[1]	Percentage not known	Number of women aged 15-24 years
Total	**96.5**	**0.1**	**2707**
Region			
Red River Delta	99.3	0.0	609
Northern Midlands and Mountainous area	87.3	0.0	367
North Central and Central coastal area	98.5	0.0	615
Central Highlands	92.3	0.1	206
South East	98.7	0.6	472
Mekong River Delta	97.0	0.0	439
Area			
Urban	98.6	0.0	868
Rural	95.5	0.2	1839
Education			
None	0.0	4.3	71
Primary	79.0	0.0	115
Lower Secondary	100	0.0	611
Upper Secondary	100	0.0	1204
Tertiary	100	0.0	706
Age			
15-19	97.4	0.2	1374
20-24	95.6	0.0	1333
Wealth Index quintiles			
Poorest	84.2	0.5	518
Second	98.6	0.0	508
Middle	99.4	0.0	581
Fourth	99.6	0.0	605
Richest	100	0.0	494
Ethnicity of household head			
Kinh/Hoa	99.1	0.0	2264
Ethnic Minorities	83.2	0.6	443

[1] MICS Indicator 7.1,MDG Indicator 2.3 - Literacy rate among young women

School Readiness

Pre-school education is important for a child's readiness for school. Table ED.2 shows the proportion of children in Grade 1 of primary school (regardless of age) who attended pre-school the previous year[42]. Overall, 96.8 per cent of children in Grade 1 of primary school attended pre-school the previous year. There was no disparity found between boys and girls or Kinh/Hoa and ethnic minority pupils to access pre-school education. However, fewer children from the Mekong River Delta attended pre-school than other regions (10 per cent gap). Wealth

42 The computation of the indicator does not exclude repeaters, and therefore is inclusive of both children who are attending primary school for the first time, as well as those who were in Grade 1 of primary school the previous school year and are repeating. Children repeating may have attended pre-school prior to the school year during which they attended Grade 1 of primary school for the first time. These children are not captured in the numerator of the indicator..

index quintile status appears to have a positive correlation with school readiness – while the percentage was 92.3 among the poorest households, it was universal for those children living in the richest households.

Table ED.2: School readiness

Percentage of children attending Grade 1 of primary school who attended pre-school the previous year, Viet Nam, 2014

	Percentage of children attending Grade 1 who attended pre-school the previous year[1]	Number of children attending Grade 1 of primary school
Total	**96.8**	**694**
Sex		
Male	97.3	367
Female	96.2	327
Region		
Red River Delta	99.1	179
Northern Midlands and Mountainous area	98.0	94
North Central and Central coastal area	98.1	131
Central Highlands	97.9	56
South East	98.6	111
Mekong River Delta	88.8	122
Area		
Urban	96.6	210
Rural	96.9	484
Mother's education		
None	90.3	42
Primary	91.4	152
Lower Secondary	98.4	264
Upper Secondary	99.1	116
Tertiary	100	118
Wealth Index quintiles		
Poorest	92.3	147
Second	96.7	137
Middle	96.5	131
Fourth	98.5	126
Richest	100	153
Ethnicity of household head		
Kinh/Hoa	96.9	590
Ethnic Minorities	96.3	104

[1] MICS Indicator 7.2 - School readiness

Primary and Secondary School Participation

Universal access to basic education and completion of primary education by the world's children is an important MDG. Education plays an important role in a range of issues central to a country's development, a vital prerequisite for combating poverty, protecting children from hazardous labour and sexual exploitation, empowering women, promoting human rights and democracy, protecting the environment and influencing population growth.

In Viet Nam, children enter primary school aged 6 years, enter lower secondary school at 11 and upper secondary school at 15. There are five grades in primary school (Grades 1 to 5), four in lower secondary school (Grades 6 to 9) and three in upper secondary school (Grades 10 to 12). The school year typically runs from early September to late May the following year.

Of children who are of primary school entry age (aged 6 years) in Viet Nam, a high proportion (96.1 per cent) attended Grade 1 of primary school (Table ED.3). Sex and area differentials do not exist. However, the Central Highlands, Mekong River Delta and Northern Midlands and Mountainous area emerge as disadvantaged regions, compared to the nearly 100 per cent entry rates for children in the North Central and Central coastal area and Red River Delta. This rate in the poorest wealth index quintile was 89.2 per cent compared to 98.1 per cent of richest households.

Table ED.3: Primary school entry

Percentage of children of primary school entry age entering Grade 1 (net intake rate), Viet Nam, 2014

	Percentage of children of primary school entry age entering Grade 1[1]	Number of children of primary school entry age
Total	**96.1**	**678**
Sex		
Male	96.7	359
Female	95.5	320
Region		
Red River Delta	99.5	177
Northern Midlands and Mountainous area	91.3	94
North Central and Central coastal area	100.0	126
Central Highlands	93.4	54
South East	95.6	107
Mekong River Delta	92.6	121
Area		
Urban	97.4	204
Rural	95.6	474
Mother's education		
None	68.8	45
Primary	98.4	142
Lower Secondary	97.9	255
Upper Secondary	97.8	116
Tertiary	98.4	119
Wealth Index quintiles		
Poorest	89.2	145
Second	98.3	133
Middle	97.2	125
Fourth	98.4	121
Richest	98.1	154
Ethnicity of household head		
Kinh/Hoa	97.9	571
Ethnic Minorities	86.6	107

[1] MICS Indicator 7.3 - Net intake rate in primary education

Table ED.4 provides the percentage of children of primary school aged 6 to 10 years who were attending primary or secondary school[43], and those who were out of school. The majority of primary school aged children attended school (97.9 per cent) and sex differentials do not exist. However, there were still a small proportion of children aged 6-10 years, not currently attending school (either attended school and then dropped out or never attended school). They are referred to as children "out of school". Some 2.1 per cent of children were out of school (1.9 per cent for boys and 2.3 per cent for girls). In the Central Highlands and Northern Midlands and Mountainous area, the proportion of children out of school was higher than in other regions. In the Central Highlands, 5.2 per cent of children aged 6-10 years were out of school (6.4 per cent for boys and 3.8 per cent for girls). In the Northern Midlands and Mountainous area, 6.1 per cent of girls were out of school against 2.9 per cent of boys totaling 4.5 per cent for all children.

Children out of school were mainly those with a non-educated mother (12.3 per cent), from the poorest households (5.6 per cent) and households with an ethnic minority household head (6.6 per cent).

43 Ratios presented in this table are "adjusted" since they include not only primary school attendance, but also secondary school attendance in the numerator.

Table ED.4: Primary school attendance and out of school children

Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), percentage attending pre-school, and percentage out of school, Viet Nam, 2014

	Male					Female					Total				
		Percentage of children:					Percentage of children:					Percentage of children:			
	Net attendance ratio (adjusted)	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children	Net attendance ratio (adjusted)	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children	Net attendance ratio (adjusted)[1]	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children
Total	**98.1**	**1.4**	**0.6**	**1.9**	**1697**	**97.7**	**1.8**	**0.5**	**2.3**	**1567**	**97.9**	**1.5**	**0.6**	**2.1**	**3265**
Region															
Red River Delta	98.8	0.7	0.5	1.2	379	99.0	1.0	0.0	1.0	367	98.9	0.9	0.3	1.1	746
Northern Midlands and Mountainous area	97.1	1.5	1.4	2.9	251	93.9	5.2	0.9	6.1	238	95.5	3.3	1.2	4.5	489
North Central and Central coastal area	100.0	0.0	0.0	0.0	343	99.7	0.3	0.0	0.3	300	99.9	0.1	0.0	0.1	643
Central Highlands	93.6	5.4	1.0	6.4	126	96.2	3.2	0.6	3.8	117	94.8	4.3	0.8	5.2	244
South East	97.6	2.0	0.4	2.4	274	98.1	1.1	0.8	1.9	229	97.8	1.6	0.6	2.2	503
Mekong River Delta	98.0	1.3	0.6	2.0	324	97.5	1.4	1.1	2.5	316	97.8	1.3	0.9	2.2	640
Area															
Urban	98.4	1.0	0.6	1.6	509	98.4	1.2	0.4	1.6	484	98.4	1.1	0.5	1.6	994
Rural	97.9	1.5	0.6	2.1	1188	97.4	2.0	0.6	2.6	1083	97.7	1.8	0.6	2.3	2271
Age at beginning of school year															
6	96.8	1.1	2.1	3.2	359	95.5	2.1	2.4	4.5	320	96.2	1.6	2.2	3.8	678
7	98.0	1.6	0.4	2.0	348	98.4	1.5	0.1	1.6	307	98.2	1.5	0.3	1.8	655
8	98.2	1.5	0.3	1.8	330	98.2	1.8	0.0	1.8	313	98.2	1.6	0.2	1.8	643
9	98.8	1.2	0.0	1.2	311	99.0	1.0	0.0	1.0	331	98.9	1.1	0.0	1.1	642
10	98.6	1.4	0.0	1.4	350	97.4	2.4	0.1	2.6	297	98.1	1.9	0.1	1.9	647

	Male					Female					Total				
		Percentage of children:					Percentage of children:					Percentage of children:			
	Net attendance ratio (adjusted)	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children	Net attendance ratio (adjusted)	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children	Net attendance ratio (adjusted)[1]	Not attending school or pre-school	Attending pre-school	Out of school[a]	Number of children
Mother's education															
None	89.4	8.4	2.2	10.6	160	85.5	12.5	2.0	14.5	127	87.7	10.2	2.1	12.3	287
Primary	99.2	0.8	0.0	0.8	371	98.3	1.3	0.4	1.7	376	98.7	1.1	0.2	1.3	747
Lower Secondary	99.2	0.3	0.5	0.8	668	99.2	0.3	0.5	0.8	644	99.2	0.3	0.5	0.8	1313
Upper Secondary	98.9	0.6	0.5	1.1	269	97.6	1.9	0.4	2.4	228	98.3	1.2	0.5	1.7	497
Tertiary	97.9	1.2	0.8	2.1	229	99.7	0.3	0.0	0.3	191	98.8	0.8	0.5	1.2	419
Wealth Index quintiles															
Poorest	95.0	3.8	1.2	5.0	390	93.9	5.2	0.9	6.1	380	94.4	4.5	1.1	5.6	769
Second	98.3	1.5	0.3	1.7	339	99.3	0.7	0.0	0.7	308	98.8	1.1	0.1	1.2	647
Middle	99.5	0.1	0.3	0.5	307	99.1	0.0	0.9	0.9	280	99.3	0.1	0.6	0.7	588
Fourth	99.7	0.1	0.2	0.3	293	98.4	1.1	0.5	1.6	299	99.1	0.6	0.3	0.9	591
Richest	98.5	0.7	0.8	1.5	369	98.9	0.8	0.3	1.1	301	98.7	0.7	0.6	1.3	670
Ethnicity of household head															
Kinh/Hoa	98.8	0.8	0.4	1.2	1410	98.9	0.7	0.4	1.1	1294	98.8	0.7	0.4	1.2	2704
Ethnic Minorities	94.5	4.1	1.3	5.5	287	92.1	6.9	0.9	7.9	274	93.4	5.5	1.1	6.6	561

[1] **MICS Indicator 7.4, MDG Indicator 2.1 - Primary school net attendance ratio (adjusted)**

a The percentage of children of primary school age out of school are those not attending school and those attending pre-school.

The lower secondary school net attendance ratio (NAR) and the out-of-school rate for children aged 11-14 are presented in Table ED.5[44] and the upper secondary NAR and the out-of-school rate for those aged 15-17 years are shown in Table ED.5A. Overall, the net attendance ratios at lower and upper secondary levels were less than primary school rates.

In Table ED.5, 90.4 per cent of children aged 11-14 years attended lower secondary school or higher, while 3.5 per cent of them were still in primary school and 6 per cent were out of school[45]. In particular, the lower secondary school net attendance ratio was lowest in the Central Highlands (81.6 per cent) and Mekong River Delta (84.4 per cent) which also had the highest proportion of children out of school (11.5 and 10.8 per cent, respectively). Moreover, only 65.3 per cent of children whose mothers had no education attended lower secondary school, 20 percentage points lower than those whose mothers had primary school education. This trend is also observed among the different wealth index quintiles.

Table ED.5A shows that 70.7 per cent of children aged 15-17 years attended upper secondary school or higher, 4.9 per cent attended primary or lower secondary school and 24.1 per cent of children were out of school[46]. A sex differential was observed in upper secondary school with 67.1 per cent attendance of males aged 15-17 contrasting with 74.3 per cent of females. It shows that the percentage of out-of-school children increases with age and level of education. Nearly 60 per cent of ethnic minority children aged 15-17 years did not attend upper secondary school, similar to children living in the poorest households. Also, the high rate of out-of-school children was strongly related to the educational levels of mothers, with 62 per cent of children with non-educated mothers currently out of school.

44 Ratios presented in this table are "adjusted" since they include not only secondary school attendance, but also attendance at higher levels in the numerator.

45 0.1 per cent of missing information on current education level and current grade

46 0.3 per cent of missing information on current education level and current grade.

Table ED.5[47]: Lower secondary school attendance and out of school children

Percentage of children of lower secondary school age attending lower secondary school or higher (adjusted net attendance ratio), percentage attending primary school, and percentage out of school, Viet Nam, 2014

	Male				Female				Total			
	Net attendance ratio (adjusted)	Percentage of children:		Number of childre	Net attendance ratio (adjusted)	Percentage of children:		Number of childre	Net attendance ratio (adjusted)[1]	Percentage of children:		Number of childre
		Attending primary school	Out of school[a]			Attending primary school	Out of school[a]			Attending primary school	Out of school[a]	
Total	**89.1**	**4.8**	**6.2**	**1207**	**91.7**	**2.3**	**5.9**	**1170**	**90.4**	**3.5**	**6.0**	**2377**
Region												
Red River Delta	97.2	1.2	1.5	231	99.1	0.9	0.0	225	98.1	1.1	0.8	456
Northern Midlands and Mountainous area	88.4	6.3	5.3	172	86.9	4.3	8.9	151	87.7	5.4	7.0	323
North Central and Central coastal area	93.9	3.9	2.2	278	94.2	1.0	4.8	272	94.1	2.5	3.5	551
Central Highlands	76.7	8.6	14.7	105	86.7	5.2	8.1	100	81.6	6.9	11.5	205
South East	88.2	4.2	7.6	198	91.7	2.9	5.4	190	89.9	3.6	6.5	388
Mekong River Delta	81.7	7.0	11.3	223	87.1	2.0	10.3	231	84.4	4.5	10.8	454
Area												
Urban	93.6	2.6	3.8	346	95.9	1.5	2.5	337	94.8	2.1	3.2	683
Rural	87.3	5.6	7.1	861	90.0	2.6	7.2	833	88.6	4.1	7.2	1694
Age at beginning of school year												
11	84.5	13.5	2.0	292	91.3	6.1	2.7	271	87.8	9.9	2.3	563
12	93.1	2.9	4.1	266	93.0	2.9	3.6	306	93.1	2.9	3.8	573
13	91.2	2.0	6.9	374	92.7	0.1	7.2	295	91.8	1.2	7.0	669
14	87.2	1.1	11.6	273	89.8	0.4	9.8	298	88.6	0.7	10.7	572
Mother's education												
None	63.8	13.9	22.3	127	67.1	6.9	26.0	114	65.3	10.6	24.1	241
Primary	79.5	9.8	10.7	292	86.6	4.6	8.3	308	83.2	7.1	9.5	600
Lower Secondary	96.0	1.8	2.2	524	97.5	0.4	2.2	493	96.7	1.1	2.2	1017
Upper Secondary	97.7	0.6	1.7	157	97.6	1.8	0.6	156	97.6	1.2	1.1	313
Tertiary	98.4	0.8	0.8	104	97.9	0.0	2.1	92	98.2	0.4	1.4	196
Cannot be determined[b]	*	*	*	3	*	*	*	8	*	*	*	11
Wealth Index quintiles												
Poorest	71.6	11.7	16.6	286	78.6	5.2	16.2	289	75.1	8.5	16.4	575
Second	92.1	4.1	3.8	247	93.8	0.0	5.6	225	92.9	2.1	4.6	472
Middle	92.1	3.6	4.3	223	96.5	1.8	1.6	202	94.2	2.8	3.0	425
Fourth	95.8	1.7	2.6	243	96.4	2.8	0.8	225	96.1	2.2	1.7	468
Richest	98.3	0.8	0.9	207	97.4	0.8	1.9	229	97.8	0.8	1.4	436
Ethnicity of household head												
Kinh/Hoa	92.1	3.4	4.5	1011	94.3	1.6	4.0	968	93.2	2.5	4.2	1979
Ethnic Minorities	73.5	11.6	14.9	196	79.5	5.4	15.0	202	76.6	8.5	14.9	398

[1] **MICS Indicator 7.S1–Lower secondary school net attendance ratio (adjusted)**

a The percentage of children of secondary school age out of school are those who are not attending primary, secondary or higher education

b Children aged 15 or higher at the time of the interview whose mothers were not living in the household.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

47 Tables ED.5, ED.5A are provided to highlight Viet Nam-specific information related to upper and lower secondary school that is different to the international education system.

Table ED.5A: Upper secondary school attendance and out of school children

Percentage of children of upper secondary school age attending upper secondary school or higher (adjusted net attendance ratio), percentage attending primary, lower secondary school and percentage out of school, Viet Nam, 2014

	Male				Female				Total			
		Percentage of children:				Percentage of children:				Percentage of children:		
	Net attendance ratio (adjusted)	Attending primary, lower secondary school	Out of school [a]	Number of children	Net attendance ratio (adjusted)	Attending primary, lower secondary school	Out of school [a]	Number of children	Net attendance ratio (adjusted)[1]	Attending primary, lower secondary school	Out of school [a]	Number of children
Total	**67.1**	**6.3**	**26.4**	**903**	**74.3**	**3.5**	**21.8**	**921**	**70.7**	**4.9**	**24.1**	**1824**
Region												
Red River Delta	87.3	2.3	10.4	196	85.6	1.9	12.5	204	86.4	2.1	11.5	399
Northern Midlands and Mountainous area	61.1	9.4	29.5	119	59.9	7.2	32.9	127	60.5	8.3	31.3	246
North Central and Central coastal area	75.2	6.2	18.2	205	85.0	1.4	12.9	236	80.4	3.7	15.3	441
Central Highlands	43.9	7.9	48.2	77.0	58.8	7.2	33.5	73	51.1	7.6	41.0	151
South East	61.8	3.8	33.7	130	70.8	1.6	27.6	125	66.2	2.7	30.7	255
Mekong River Delta	53.3	9.9	36.8	176	65.0	5.7	28.3	156	58.8	7.9	32.9	332
Area												
Urban	75.1	4.7	19.8	239	82.7	1.6	15.7	268	79.1	3.1	17.6	507
Rural	64.1	6.9	28.8	663	70.8	4.3	24.3	654	67.4	5.6	26.6	1317
Age at beginning of school year												
15	66.1	14.3	19.6	264	70.2	10.3	18.9	266	68.2	12.3	19.2	530
16	68.3	4.9	26.5	323	78.4	1.1	20.5	316	73.3	3.0	23.5	638
17	66.6	1.0	32.2	315	73.6	0.5	25.4	340	70.2	0.7	28.6	655
Mother's education												
None	23.2	8.4	65.9	72	26.1	15.8	58.1	71	24.6	12.1	62.0	142
Primary	52.3	8.6	39.1	204	62.1	6.0	31.7	195	57.1	7.3	35.5	399

	Male				Female				Total			
		Percentage of children:				Percentage of children:				Percentage of children:		
	Net attendance ratio (adjusted)	Attending primary, lower secondary school	Out of school [a]	Number of children	Net attendance ratio (adjusted)	Attending primary, lower secondary school	Out of school [a]	Number of children	Net attendance ratio (adjusted)[1]	Attending primary, lower secondary school	Out of school [a]	Number of children
Lower Secondary	75.3	5.9	18.8	377	86.5	1.3	11.8	363	80.8	3.6	15.4	740
Upper Secondary	88.0	4.6	7.3	101	96.5	0.9	2.6	93	92.1	2.8	5.0	194
Tertiary	97.7	1.0	1.3	59	96.1	0.3	3.5	62	96.9	0.7	2.4	121
Cannot be determined b	57.0	6.5	36.5	90	59.1	3.0	36.8	137	58.2	4.4	36.7	228
Wealth Index quintiles												
Poorest	38.6	10.8	49.7	209	42.2	8.8	48.2	191	40.4	9.8	49.0	400
Second	64.2	6.8	29.0	197	70.6	5.2	24.0	179	67.3	6.0	26.6	376
Middle	70.3	7.0	22.7	194	78.1	1.1	20.8	204	74.3	4.0	21.8	399
Fourth	80.8	3.5	15.7	155	89.2	2.1	8.0	189	85.4	2.7	11.5	344
Richest	92.3	1.4	6.3	148	94.3	0.3	5.4	157	93.3	0.8	5.8	306
Ethnicity of household head												
Kinh/Hoa	72.5	5.6	21.9	747	79.9	2.5	17.2	775	76.3	4.0	19.5	1522
Ethnic Minorities	41.2	9.5	48.2	156	44.2	9.3	46.3	146	42.6	9.4	47.2	302

[1] **MICS Indicator 7.S2–Upper secondary school net attendance ratio (adjusted)**

a The percentage of children of upper secondary school age out of school are those who are not attending primary, secondary or higher education

b Children aged 15 or higher at the time of the interview whose mothers were not living in the household.

Note: Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table ED.5B: Secondary school attendance and out of school children

Percentage of children of secondary school age attending secondary school or higher (adjusted net attendance ratio), percentage attending primary school, and percentage out of school, Viet Nam, 2014

	Male				Female				Total			
	Net attendance ratio (adjusted)	Percentage of children:		Number of children	Net attendance ratio (adjusted)	Percentage of children:		Number of children	Net attendance ratio (adjusted)	Percentage of children:		Number of children
		Attending primary school	Out of school[a]			Attending primary school	Out of school[a]			Attending primary school	Out of school[a]	
Total	82.3	2.8	14.8	2109	85.6	1.3	12.9	2091	83.9	2.0	13.9	4201
Region												
Red River Delta	93.4	0.7	5.6	427	93.6	0.5	5.9	429	93.5	0.6	5.8	856
Northern Midlands and Mountainous area	81.1	3.7	15.2	291	77.7	2.5	19.8	278	79.4	3.1	17.5	569
North Central and Central coastal area	88.6	2.2	9.0	483	90.6	0.5	8.6	508	89.6	1.4	8.8	992
Central Highlands	66.1	4.9	28.9	182	77.8	3.0	18.9	174	71.8	4.0	24.0	356
South East	79.1	2.7	17.9	327	84.0	1.7	14.2	316	81.5	2.2	16.1	643
Mekong River Delta	73.5	3.9	22.6	399	80.5	1.2	17.6	387	76.9	2.6	20.1	786
Area												
Urban	87.7	1.6	10.3	585	90.7	0.9	8.4	605	89.2	1.2	9.3	1190
Rural	80.2	3.2	16.6	1525	83.5	1.5	14.7	1487	81.8	2.3	15.7	3011
Age at beginning of school year												
11	84.5	13.5	2.0	292	91.3	6.1	2.7	271	87.8	9.9	2.3	563
12	93.1	2.9	4.1	266	93.0	2.9	3.6	306	93.1	2.9	3.8	573
13	91.2	2.0	6.9	374	92.7	0.1	7.2	295	91.8	1.2	7.0	669
14	86.8	1.1	11.6	273	89.7	0.4	9.8	298	88.3	0.7	10.7	572
15	80.4	0.0	19.6	264	80.5	0.0	18.9	266	80.5	0.0	19.2	530
16	73.2	0.0	26.5	323	79.4	0.1	20.5	316	76.3	0.1	23.5	638
17	67.4	0.2	32.2	315	74.1	0.0	25.4	340	70.8	0.1	28.6	655

	Male				Female				Total			
	Net attendance ratio (adjusted)	Percentage of children:		Number of children	Net attendance ratio (adjusted)	Percentage of children:		Number of children	Net attendance ratio (adjusted)	Percentage of children:		Number of children
		Attending primary school	Out of school[a]			Attending primary school	Out of school[a]			Attending primary school	Out of school[a]	
Mother's education												
None	52.2	8.9	38.0	198	57.1	4.5	38.3	185	54.6	6.8	38.2	383
Primary	71.9	5.8	22.4	495	79.5	2.8	17.4	504	75.7	4.3	19.8	999
Lower Secondary	89.8	1.0	9.1	901	93.3	0.2	6.3	856	91.5	0.6	7.7	1757
Upper Secondary	95.7	0.4	3.9	258	97.5	1.2	1.4	249	96.6	0.8	2.6	507
Tertiary	97.4	0.9	0.9	164	97.3	0.0	2.7	153	97.4	0.5	1.8	317
Cannot be determined[b]	64.6	0.0	35.4	93	64.1	0.0	34.8	145	64.3	0.0	35.1	238
Wealth Index quintiles												
Poorest	62.3	6.8	30.6	494	64.1	0.0	34.8	145	64.8	5.0	29.7	974
Second	82.7	2.3	15.0	444	67.5	3.2	28.9	480	84.2	1.2	14.4	848
Middle	85.2	1.9	12.9	418	85.8	0.0	13.7	404	86.5	1.4	12.1	824
Fourth	91.3	1.0	7.7	398	87.8	0.9	11.3	407	92.7	1.3	5.9	813
Richest	95.9	0.6	3.1	355	94.0	1.5	4.1	415	96.1	0.5	3.2	741
Ethnicity of household head												
Kinh/Hoa	86.0	2.0	11.9	1757	89.0	0.9	9.9	1743	87.5	1.5	10.9	3501
Ethnic Minorities	63.4	6.5	29.6	352	68.4	3.3	28.1	348	65.9	4.9	28.9	700

[1] **MICS Indicator 7.5–Secondary school net attendance ratio (adjusted)**

a The percentage of children of secondary school age out of school are those who are not attending primary, secondary or higher education

bChildren aged 15 or higher at the time of the interview whose mothers were not living in the household.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

The percentage of children entering first grade who eventually reach the last grade of primary school is presented in Table ED.6. Of all children who started Grade 1, the vast majority (98.6 per cent) reach Grade 5. It should be noted that Viet Nam MICS 2014 included only questions on school attendance in the current and previous year. Thus, the indicator was calculated synthetically by computing the cumulative probability of survival from the first to the last grade of primary school, as opposed to calculating the indicator for a real cohort, which would need to be followed from the time a cohort of children entered primary school, up to the time they reached the last grade of primary school. Repeaters are excluded from the calculation of the indicator, because it is not known whether they would eventually graduate. As an example, the probability that a child will move from Grade 1 to 2 was computed by dividing the number of children who moved from Grade 1 to 2 (during the two consecutive school years covered by the survey) by the number of children who have moved from Grade 1 to 2, plus the number of children who were in Grade 1 the previous school year, but dropped out. Both the numerator and denominator exclude children who repeated during the two school years under consideration.

Table ED.6: Children reaching last grade of primary school

Percentage of children entering Grade 1 of primary school who eventually reach the last grade of primary school (Survival rate to last grade of primary school), Viet Nam, 2014

	Percentage attending Grade 1 last school year who are in Grade 2 this school year	Percentage attending Grade 2 last school year who are attending Grade 3 this school year	Percentage attending Grade 3 last school year who are attending Grade 4 this school year	Percentage attending Grade 4 last school year who are attending Grade 5 this school year	Percentage who reach Grade 5 of those who enter Grade1[1]
Total	**99.7**	**99.9**	**99.6**	**99.4**	**98.6**
Sex					
Male	99.9	100	99.7	100	99.6
Female	99.4	99.9	99.4	98.7	97.4
Region					
Red River Delta	100	100	100	100	100
Northern Midlands and Mountainous area	100	100	100	97.8	97.8
North Central and Central coastal area	100	100	99.3	100	99.3
Central Highlands	98.5	98.9	99.3	100	96.8
South East	100	100	98.5	100	98.5
Mekong River Delta	99.1	100	100	98.9	98.0
Area					
Urban	100	100	99.2	100	99.2
Rural	99.5	99.9	99.7	99.1	98.3
Mother's education					
None	98.7	100	99.5	97.2	95.4

	Percentage attending Grade 1 last school year who are in Grade 2 this school year	Percentage attending Grade 2 last school year who are attending Grade 3 this school year	Percentage attending Grade 3 last school year who are attending Grade 4 this school year	Percentage attending Grade 4 last school year who are attending Grade 5 this school year	Percentage who reach Grade 5 of those who enter Grade1[1]
Primary	99.1	99.7	98.5	99.4	96.7
Lower Secondary	100	100	100	99.6	99.6
Upper Secondary	100	100	100	100	100
Tertiary	100	100	100	100	100
Wealth Index quintiles					
Poorest	98.8	99.6	99.3	97.6	95.4
Second	100	100	98.6	100	98.6
Middle	100	100	100	100	100
Fourth	100	100	100	100	100
Richest	100	100	100	100	100
Ethnicity of household head					
Kinh/Hoa	99.7	100	99.7	99.7	99.2
Ethnic Minorities	99.4	99.5	99.0	97.9	95.8

[1] MICS Indicator 7.6, MDG Indicator 2.2 - Children reaching last grade of primary

The primary school completion and transition rates to lower secondary education are presented in Table ED.7. The primary school completion rate is the ratio of the total number of students, regardless of age, entering the last grade of primary school for the first time, to the number of children of the primary school graduation age at the beginning of the current (or most recent) school year.

Table ED.7 indicates a 95.9 per cent primary school completion rate, with 98 per cent of children from the last grade of primary school in the previous school year found to be attending first grade of lower secondary school in the survey school year. The "effective" transition rate, which takes the presence of repeaters in the final primary school grade into account, is also reflected in the table. This indicator better reflects situations in which pupils repeat the last grade of primary education, but eventually make the transition to secondary level. The simple transition rate tends to under estimate pupils' progression to secondary school as it assumes repeaters never reach lower secondary school. The table reveals that 98.5 per cent of children in the last grade of primary school were expected to move onto lower secondary school.

Few differentials clearly emerge in transition rate to lower secondary school, but a large differential was observed in the primary school completion rate between Kinh/Hoa and ethnic minority groups. Only 87.7 per cent of ethnic minority children completed primary school versus 97.6 per cent of Kinh/Hoa.

Table ED.7: Primary school completion and transition to lower secondary school

Primary school completion rates and transition and effective transition rates to lower secondary school, Viet Nam, 2014

	Primary school completion rate[1]	Number of children of primary school completion age	Transition rate to lower secondary school[2]	Number of children who were in the last grade of primary school the previous year	Effective transition rate to lower secondary school	Number of children who were in the last grade of primary school the previous year and are not repeating that grade in the current school year
Total	**95.9**	**647**	**98.0**	**588**	**98.5**	**585**
Sex						
Male	98.0	350	98.3	297	99.2	295
Female	93.4	297	97.8	290	97.8	290
Region						
Red River Delta	93.7	133	100.0	105	100	105
Northern Midlands and Mountainous area	93.4	100	98.7	82	98.7	82
North Central and Central coastal area	100.7	124	97.1	124	98.4	123
Central Highlands	90.2	48	94.8	46	96.8	45
South East	100.0	98	97.9	97	97.9	97
Mekong River Delta	94.6	143	98.3	133	98.3	133
Area						
Urban	99.0	207	100.0	182	100.0	182
Rural	94.4	440	97.2	405	97.8	403
Mother's education						
None	81.8	63	90.0	57	91.5	56
Primary	107.1	153	97.5	150	98.7	148
Lower Secondary	93.3	269	99.2	251	99.2	251
Upper Secondary	92.4	101	100.0	72	100	72
Tertiary	99.8	60	100.0	58	100	58
Wealth Index quintiles						
Poorest	91.9	159	94.8	152	96.4	150
Second	94.7	129	97.5	97	97.5	97
Middle	102.4	111	99.0	108	99.0	108
Fourth	95.9	109	100.0	110	100.0	110
Richest	96.4	140	100.0	120	100.0	120
Ethnicity of household head						
Kinh/Hoa	97.6	537	98.7	488	98.7	488
Ethnic Minorities	87.7	109	94.8	100	97.4	97

[1] MICS Indicator 7.7 - Primary completion rate

[2] MICS Indicator 7.8 - Transition rate to lower secondary school

Table ED.7A shows the lower secondary school completion and transition rates to upper secondary education.

A large proportion (90 per cent) of children had completed lower secondary school (Table ED.7A), while 89.5 per cent of children who completed the last grade of lower secondary school in the previous school year were found to be attending first grade of upper secondary school in the survey school year. The effective transition rate to upper secondary school was 89.6 per cent, meaning this proportion of children in the last grade of lower secondary school was expected to attend upper secondary school. Disparities were observed among ethnicity, with the 70.2 per cent of ethnic minority children completing lower secondary school, being 24.2 percentage points below that of Kinh/Hoa children. While ethnic minority children's upper secondary school transition rate is 76.7 per cent, that of Kinh/Hoa is 91.8 per cent.

Table ED.7A[48]: Lower secondary school completion and transition to upper secondary school

Lower secondary school completion rates and transition and effective transition rates to upper secondary school, Viet Nam, 2014

	Lower secondary school completion rate	Number of children of lower secondary school completion age	Transition rate to upper secondary school[1]	Number of children who were in the last grade of lower secondary school the previous year	Effective transition rate to upper secondary school	Number of children who were in the last grade of lower secondary school the previous year and are not repeating that grade in the current school year
Total	**90.0**	**572**	**89.5**	**468**	**89.6**	**467**
Sex						
Male	90.6	273	88.2	248	88.2	248
Female	89.4	298	90.9	220	91.1	219
Region						
Red River Delta	98.0	117	93.0	109	93.0	109
Northern Midlands and Mountainous area	97.4	80	86.5	63	86.5	63
North Central and Central coastal area	97.0	136	85.8	126	85.8	126
Central Highlands	71.1	58	93.9	34	95.4	34
South East	79.8	90	97.9	53	97.9	53
Mekong River Delta	85.0	90	85.3	83	85.3	83
Area						
Urban	91.0	157	94.7	124	94.7	124
Rural	89.6	415	87.6	344	87.7	344

48 Table ED.7A is provided to highlight Viet Nam-specific information related to upper and lower secondary school that is different to the international education system.

	Lower secondary school completion rate	Number of children of lower secondary school completion age	Transition rate to upper secondary school[1]	Number of children who were in the last grade of lower secondary school the previous year	Effective transition rate to upper secondary school	Number of children who were in the last grade of lower secondary school the previous year and are not repeating that grade in the current school year
Mother's education						
None	62.8	67	67.1	28	68.4	28
Primary	78.6	130	89.9	106	89.9	106
Lower Secondary	97.3	236	91.1	200	91.1	200
Upper Secondary	98.7	87	95.6	68	95.6	68
Tertiary	(86.8)	41	(93.3)	28	(93.3)	28
Cannot be determined [b]	*	11	(90.1)	33	(90.1)	33
Wealth Index quintiles						
Poorest	65.5	135	77.4	100	77.8	100
Second	97.5	118	87.6	116	87.6	116
Middle	100.6	97	91.5	85	91.5	85
Fourth	101.1	132	94.2	89	94.2	89
Richest	89.4	90	100	79	100	79
Ethnicity of household head						
Kinh/Hoa	94.4	468	91.8	395	91.8	395
Ethnic Minorities	70.2	104	76.7	73	77.3	72

[1]**MICS Indicator 7.S3 - Transition rate to upper secondary school**

b Children aged 15 years or higher at the time of the interview whose mothers were not living in the household.

The ratio of girls to boys attending primary and secondary education, better known as the Gender Parity Index (GPI) is illustrated in Table ED.8. It should be noted that the ratios were obtained from net attendance ratios, rather than gross attendance ratios. The latter provides an erroneous description of the GPI, mainly because the majority of over-age children attending primary education tend to be boys.

The table shows that gender parity for primary school was 1.00, indicating no difference in the attendance of girls and boys at primary school. The GPI for lower secondary school was 1.03 and 1.11 for upper secondary school, indicating that there are more females than males at secondary school level.

Table ED.8: Education gender parity

Ratio of adjusted net attendance ratios of girls to boys, in primary and secondary school, Viet Nam, 2014

	Primary school			Lower secondary school			Upper secondary school			Secondary school		
	Adjusted net attendance ratio (NAR), girls	Adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for adjusted NAR[1]	Adjusted net attendance ratio (NAR), girls	Adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for adjusted NAR[2]	Adjusted net attendance ratio (NAR), girls	Adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for adjusted NAR[3]	Adjusted net attendance ratio (NAR), girls	Adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for adjusted NAR[4]
Total	**97.7**	**98.1**	**1.00**	**91.7**	**89.1**	**1.03**	**74.3**	**67.1**	**1.11**	**85.6**	**82.3**	**1.04**
Region												
Red River Delta	99.0	98.8	1.00	99.1	97.2	1.02	85.6	87.3	0.98	93.6	93.7	1.00
Northern Midlands and Mountainous area	93.9	97.1	0.97	86.9	88.4	0.98	59.9	61.1	0.98	77.7	81.1	0.96
North Central and Central coastal area	99.7	100.0	1.00	94.2	93.9	1.00	85.0	75.2	1.13	90.6	88.6	1.02
Central Highlands	96.2	93.6	1.03	86.7	76.7	1.13	58.8	43.9	1.34	77.9	66.1	1.18
South East	98.1	97.6	1.01	91.7	88.2	1.04	70.8	61.8	1.15	84.0	79.1	1.06
Mekong River Delta	97.5	98.0	0.99	87.1	81.7	1.07	65.0	53.3	1.22	80.5	73.5	1.09
Area												
Urban	98.4	98.4	1.00	95.9	93.6	1.02	82.7	75.1	1.10	90.8	87.9	1.03
Rural	97.4	97.9	0.99	90.0	87.3	1.03	70.8	64.1	1.10	83.5	80.2	1.04
Mother's education												
None	85.5	89.4	0.96	67.1	63.8	1.05	26.1	23.2	1.12	57.2	52.2	1.10
Primary	98.3	99.2	0.99	86.6	79.5	1.09	62.1	52.3	1.19	79.5	71.9	1.11
Lower Secondary	99.2	99.2	1.00	97.5	96.0	1.01	86.5	75.3	1.15	93.3	89.8	1.04
Upper Secondary	97.6	98.9	0.99	97.6	97.7	1.00	96.5	88.0	1.10	97.5	95.7	1.02
Tertiary	99.7	97.9	1.02	97.9	98.4	0.99	96.1	97.7	0.98	97.3	98.2	0.99
Cannot be determined [a]	*	*		*	*	59.1	57.0	1.04	64.1	64.6	0.99	
Wealth Index quintiles												
Poorest	93.9	95.0	0.99	78.6	71.6	1.10	42.2	38.6	1.09	67.5	62.3	1.08
Second	99.3	98.3	1.01	93.8	92.1	1.02	70.6	64.2	1.10	85.8	82.7	1.04
Middle	99.1	99.5	1.00	96.5	92.1	1.05	78.1	70.3	1.11	87.8	85.2	1.03
Fourth	98.4	99.7	0.99	96.4	95.8	1.01	89.2	80.8	1.10	94.0	91.3	1.03
Richest	98.9	98.5	1.00	97.4	98.3	0.99	94.3	92.3	1.02	96.2	96.2	1.00
Ethnicity of household head												
Kinh/Hoa	98.9	98.8	1.00	94.3	92.1	1.02	79.9	72.5	1.10	89.0	86.1	1.03
Ethnic Minorities	92.1	94.5	0.97	79.5	73.5	1.08	44.2	41.2	1.07	68.5	63.4	1.08

[1] **MICS Indicator 7.9, MDG Indicator 3.1 - Gender parity index (primary school)**
[4] **MICS Indicator 7.10, MDG indicator 3.1 - Gender parity index (secondary school)**
[2] **MICS Indicator 7.S4 - Gender parity index (lower secondary school)**
[3] **MICS Indicator 7.S5 - Gender parity index (upper secondary school)**
a Children aged 15 or higher at the time of the interview whose mothers were not living in the household
Na: not applicable

Children out of school are presented in Tables ED.4, ED.5 and ED.5A, while the percentage of girls in the total out-of-school population in primary, lower and upper secondary schools is provided in Table ED.9. The latter table shows that at primary level, girls account for about half (52 per cent) of the out-of-school population. This proportion decreases to 48.1 per cent at lower secondary level and 45.7 per cent at upper secondary school, which points to boys being the majority of out-of-school children at these levels.

In general, the percentage of girls in the total out-of-school population of lower and upper secondary levels was less than half in most regions and in both urban and rural areas. It is especially low (39.8 per cent) in the Central Highlands, which highlights the higher number of boys out of school. However, the opposite trend was found in the Northern Midlands and Mountainous area where girls were the majority of out-of-school children (54.3 per cent) at upper secondary level.

Table ED.9: Out of school gender parity

Percentage of girls in the total out of school population, in primary and secondary school, Viet Nam, 2014

	Primary school				Lower Secondary school				Upper Secondary school			
	Percentage of out of school children	Number of children of primary school age	Percentage of girls in the total out of school population of primary school age	Number of children of primary school age out of school	Percentage of out of school children	Number of children of secondary school age	Percentage of girls in the total out of school population of secondary school age	Number of children of secondary school age out of school	Percentage of out of school children	Number of children of upper secondary school age	Percentage of girls in the total out of school population of upper secondary school age	Number of children of upper secondary school age out of school
Total	**2.1**	**3265**	**52.0**	**69**	**6.0**	**2377**	**48.1**	**143**	**24.1**	**1824**	**45.7**	**440**
Region												
Red River Delta	1.1	746	*	8	0.8	456	*	4	11.5	399	(55.5)	46
Northern Midlands and Mountainous area	4.5	489	(66.3)	22	7.0	323	(59.3)	23	31.3	246	54.3	77
North Central and Central coastal area	0.1	643	*	1	3.5	551	*	19	15.3	441	45.0	68
Central Highlands	5.2	244	(35.6)	13	11.5	205	34.7	24	41.0	151	39.8	62
South East	2.2	503	*	11	6.5	388	(40.7)	25	30.7	255	44.2	78
Mekong River Delta	2.2	640	*	14	10.8	454	(48.7)	49	32.9	332	40.5	109
Area												
Urban	1.6	994	*	16	3.2	683	(39.3)	22	17.6	507	47.0	89
Rural	2.3	2271	53.0	53	7.2	1694	49.6	121	26.6	1317	45.4	350
Mother's education												
None	12.3	287	(52.1)	35	24.1	241	51.1	58	62.0	142	46.5	88
Primary	1.3	747	*	9	9.5	600	45.1	57	35.5	399	43.7	141
Lower Secondary	0.8	1313	*	10	2.2	1017	*	22	15.4	740	37.8	114
Upper Secondary	1.7	497	*	8	1.1	313	*	4	5.0	194	*	10
Tertiary	1.2	419	*	5	1.4	196	*	3	2.4	121	*	3
Cannot be determined[a]	*	2		*	11		36.7	228	60.5	84		
Wealth Index quintiles												
Poorest	5.6	769	(54.2)	43	16.4	575	49.6	94	49.0	400	47.0	196
Second	1.2	647	*	8	4.6	472	*	22	26.6	376	42.9	100
Middle	0.7	588	*	4	3.0	425	*	13	21.8	399	49.1	87
Fourth	0.9	591	*	5	1.7	468	*	8	11.5	344	(38.2)	39
Richest	1.3	670	*	9	1.4	436	*	6	5.8	306	*	18
Ethnicity of household head												
Kinh/Hoa	1.2	2704	(45.2)	32	4.2	1979	45.9	84	19.5	1522	44.9	297
Ethnic Minorities	6.6	561	(57.9)	37	14.9	398	51.0	59	47.2	302	47.3	143

a Children aged 15 or higher at the time of the interview whose mothers were not living in the household

Na: not applicable

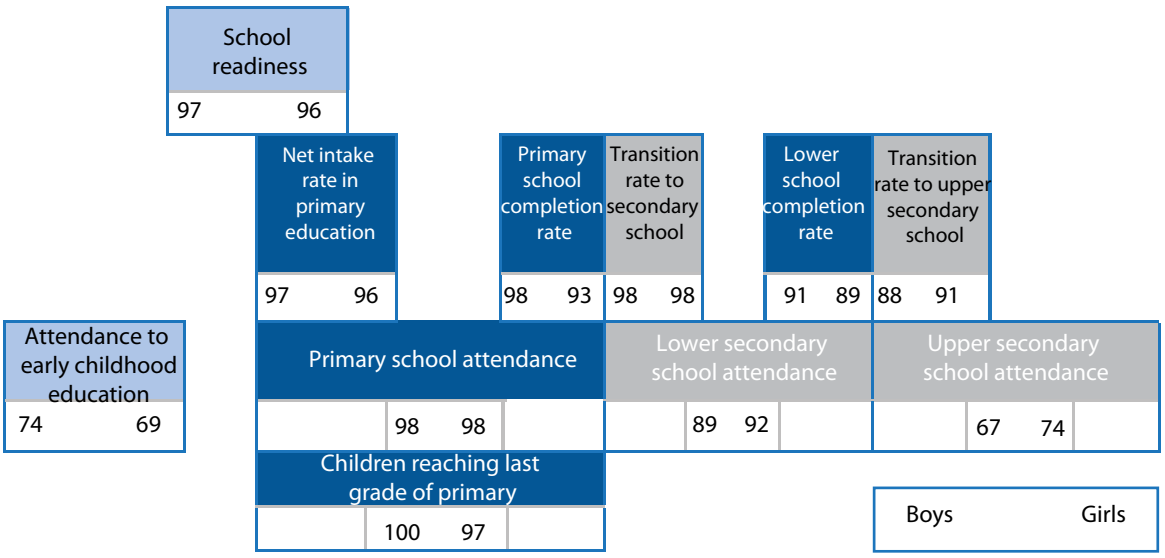
Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Figure ED.1 brings together percentages of all the attendance and progression-related education indicators covered in this chapter by sex. Information on early childhood education attendance is also included and covered in Chapter 9, Table CD.1.

The sex differential at all levels was less than 5 percentage points, with the same percentage differential observed in early childhood education attendance and primary school completion rates.

Figure ED.1: Education indicators by sex, Viet Nam MICS 2014



Note: All indicator values are in per cent

CHAPTER XI

CHILD PROTECTION

XI. CHILD PROTECTION

Birth Registration

A name and nationality is every child's right, enshrined in the Convention on the Rights of the Child (CRC) and other international treaties. Yet the births of approximately 230 million children under the age of five worldwide (around one-in-three) have never been recorded[49]. This lack of formal recognition by a State usually means that a child is unable to obtain a birth certificate. As a result, he or she may be denied healthcare or education, social assistance. Later in life, the lack of official identification documents can mean that a child may enter into marriage or the labour market, or be conscripted into the armed forces, before the legal age. In adulthood, birth certificates may be required to obtain social assistance or a job in the formal sector, to buy or prove the right to inherit property, to vote and to obtain a passport. Registering children at birth is the first step in securing their recognition before the law, safeguarding their rights, and ensuring that any violation of these rights does not go unnoticed[50].

The birth registration rate in Viet Nam has risen in recent years, largely due to a number of policies and initiatives gaining traction. Birth registration is actively encouraged and supported by the Government, with the birth registration document having been simplified and now applicable to insurance for children under-6 and resident registration. Birth registration is now free of charge.

49 UNICEF, The State of the World's Children 2015.

50 UNICEF, Every Child's Birth Right: Inequities and trends in birth registration, New York, 2013.

On a procedural level, birth registration is implemented by a Commune People's Committee, the lowest level of administrative authority in Viet Nam. An applicant submits a birth declaration or certificate and produces the marriage certificate of the parents of the child to the committee. These papers are recorded in birth registration books and the commune-level People's Committee chairperson shall sign and grant the birth certificate.

Birth declaration or certification provided by medical establishment where child was born; if child was not born in the health facility then the parent/relatives have responsible to fill in the request for provision of birth certification (or declaration) which regulated by Circular 17/2012/TT-BYT then submit it to Commune Health Station for issuing the birth certificate. The marriage certificate is not necessarily produced if a civil status judicial officer clearly knows about the marriage of the child's parents. A birth certificate can still be issued for an out-of-wedlock infant if his/her father cannot be identified or the infant is recognized by another person.

Table CP.1: Birth registration

Percentage of children aged under 5 by whether birth is registered and percentage of children not registered whose mothers/caretakers know how to register birth, Viet Nam, 2014

	Children aged under 5 whose birth is registered with civil authorities				Number of children aged under 5	Children aged under 5 whose birth is not registered	
	Has birth certificate		No birth certificate	Total registered[1]		Percentage of children whose mother/caretaker knows how to register birth	Number of children aged under 5 without birth registration
	Seen	Not seen					
Total	**72.2**	**23.2**	**0.7**	**96.1**	**3316**	**63.9**	**131**
Sex							
Male	70.7	24.5	0.6	95.9	1719	65.2	71
Female	73.7	21.8	0.7	96.3	1597	62.2	60
Region							
Red River Delta	72.9	25.9	0.0	98.8	784	*	9
Northern Midlands and Mountainous area	66.2	27.4	1.4	95.0	513	(51.2)	26
North Central and Central coastal area	76.5	20.9	0.7	98.1	690	*	13
Central Highlands	70.4	20.3	1.4	92.1	241	(61.0)	19
South East	77.3	17.3	0.6	95.2	515	*	25
Mekong River Delta	67.7	24.9	0.7	93.2	573	(68.1)	39
Area							
Urban	71.2	25.4	0.2	96.7	985	(72.5)	32
Rural	72.6	22.3	0.9	95.8	2331	61.0	99
Age							
0-11 months	70.0	15.9	2.2	88.1	688	67.3	82
12-23 months	72.0	25.0	0.0	97.1	790	(74.2)	23
24-35 months	71.0	26.7	0.3	98.1	641	*	12
36-47 months	75.6	22.6	0.2	98.4	539	*	9
48-59 months	73.0	25.7	0.6	99.3	658	*	5
Mother's education							
None	50.2	33.7	2.6	86.6	197	(47.6)	26
Primary	70.0	22.9	1.2	94.1	506	(52.9)	30

	Children aged under 5 whose birth is registered with civil authorities				Number of children aged under 5	Children aged under 5 whose birth is not registered	
	Has birth certificate		No birth certificate	Total registered[1]		Percentage of children whose mother/ caretaker knows how to register birth	Number of children aged under 5 without birth registration
	Seen	Not seen					
Lower Secondary	75.8	20.0	0.6	96.4	1219	(68.2)	44
Upper Secondary	73.7	22.8	0.3	96.8	683	(85.7)	22
Tertiary	72.3	26.3	0.2	98.9	710	*	8
Wealth Index quintiles							
Poorest	68.0	20.9	1.6	90.5	694	47.4	66
Second	75.6	20.1	0.4	96.1	662	(74.4)	26
Middle	71.2	25.4	0.4	97.0	672	(86.0)	20
Fourth	74.5	23.6	0.7	98.8	659	*	8
Richest	71.8	26.2	0.2	98.2	628	*	11
Ethnicity of household head							
Kinh/Hoa	73.9	22.8	0.4	97.1	2746	72.3	80
Ethnic Minorities	64.0	25.2	1.9	91.1	570	50.5	51

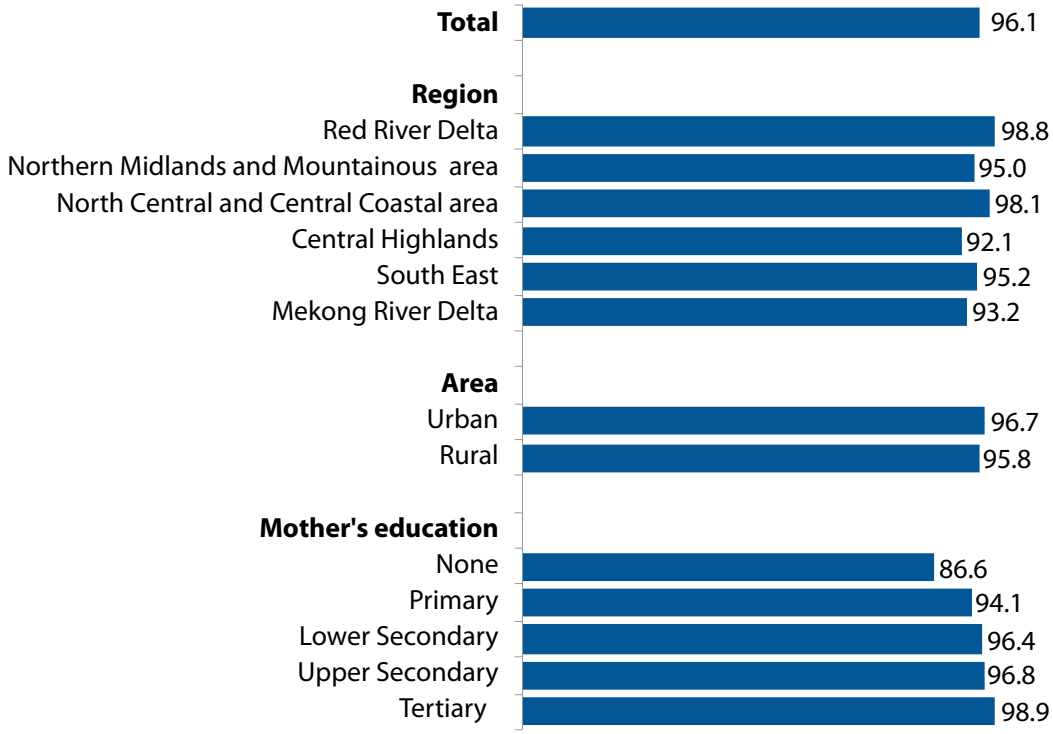
[1] **MICS Indicator 8.1 - Birth registration**

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

The births of 96.1 per cent of children aged under-5 in Viet Nam MICS 2014 have been registered (Table CP.1). Registration of births is more likely as a child grows older and there were no significant sex variations. Children in the Central Highlands and Mekong River Delta were less likely to have their births registered compared to children in other regions, as were those from the poorer households.

Figure CP.1: Children under-5 whose births were registered, Viet Nam MICS 2014



Data shows that 36.1 per cent of mothers of unregistered children reported not knowing how to register a child's birth, which points to birth registration barriers.

Child Labour

Children around the world are routinely engaged in paid and unpaid forms of work that are not harmful to them. However, they are classified as "child labourers" when they are either too young to work or are involved in hazardous activities that may compromise their physical, mental, social or educational development. Article 32 (1) of the CRC 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".

Viet Nam has promulgated legal documents on child labour and met international commitments on this issue. For example, the revised Labour Code 2012 strictly prohibits child labour under the age of 15 years (excluding several occupations already regulated). Circular No.10/2013/TT/LDTBXH, issued on June 10, 2013, catalogues the occupations and locations where adolescent labour is prohibited. The implementation of the Education Law, introduced in 2005 and revised in 2009, as well as support programmes for special needs children have led to all children aged 5-17 in the country to attend school.

The child labour module was administered to children aged 5-17 and included questions on the type of work a child does and numbers of hours worked. Data were collected on economic

activities (paid or unpaid work for someone who is not a member of the household, works for a family farm or business) and domestic work (household chores such as cooking, cleaning or caring for children, as well as collecting firewood or fetching water). The module also collected information on hazardous working conditions [51],[52].

Table CP.2 presents children's involvement in economic activities. The methodology of the MICS Indicator on Child Labour uses three age-specific thresholds for the number of hours a child can perform an economic activity without it being classified as in child labour. A child that performed economic activities during the last week preceding the survey for more than the age-specific number of hours is classified as in child labour:

i. If aged 5-11: 1 hour or more

ii. If aged 12-14: 14 hours or more

iii. If aged 15-17: 43 hours or more.

Table CP.2 shows the proportion of children who engaged in some form of economic activity more than the age-specific number of hours. Some 14.9 per cent of children aged 5-11 years were involved in an economic activity for at least one hour (column 2), 10.2 per cent aged 12-14 years for more than 14 hours (column 5) and 6.8 per cent aged 15-17 for more than 43 hours (column 8).

The combined results of the three age groups (Table CP.4), show that 12.1 per cent of children aged 5-17 years were involved in economic activities for more than the age-specific number of hours. There were no significant differences in the proportion between males and females. However, there was a large differential among regions, with the Red River Delta (3.0 per cent) in contrast to the Northern Midlands and Mountainous area (25.5 per cent). Meanwhile, there were differences between rural (14.0 per cent) and urban areas (7.5 per cent) as well as ethnic minorities (26.1 per cent) and Kinh/Hoa (9.2 per cent). Children not attending school (32.0 per cent) were more likely to be involved in economic activities than those attending school (10.4 per cent). The proportion of children involved in economic activities more than the age-specific number of hours correlated to wealth index quintiles and education levels of mothers.

51 UNICEF, How Sensitive Are Estimates of Child Labour to Definitions?, MICS Methodological Paper No. 1, New York, 2012.

52 The Child Labour module and the Child Discipline module were administered using random selection of a single child in all households with one or more children aged 1-17 (See Appendix F: Questionnaires). The Child Labour module was administered if the selected child was aged 5-17 and the Child Discipline module if the child was aged 1-14 years old. To account for the random selection, the household sample weight was multiplied by the total number of children aged 1-17 in each household.

Table CP.2: Children's involvement in economic activities

Percentage of children by involvement in economic activities during the last week, according to age groups, Viet Nam, 2014

	Percentage of children aged 5-11 years involved in economic activity for at least one hour	Number of children aged 5-11 years	Percentage of children aged 12-14 years involved in:		Number of children aged 12-14 years	Percentage of children aged 15-17 years involved in:		Number of children aged 15-17 years
			Economic activity less than 14 hours	Economic activity for 14 hours or more		Economic activity less than 43 hours	Economic activity for 43 hours or more	
Total	**14.9**	**4810**	**33.2**	**10.2**	**1879**	**43.2**	**6.8**	**1889**
Sex								
Male	14.5	2502	33.0	9.7	936	47.9	7.2	946
Female	15.4	2308	33.3	10.7	944	38.5	6.4	943
Region								
Red River Delta	3.3	1063	25.5	2.7	367	26.7	2.7	389
Northern Midlands and Mountainous area	31.3	711	44.7	30.5	252	67.8	5.5	266
North Central and Central coastal area	17.4	964	43.8	6.2	441	50.3	5.2	474
Central Highlands	19.3	363	30.6	12.6	169	47.1	7.9	162
South East	7.9	772	18.1	5.9	315	26.2	13.5	253
Mekong River Delta	17.2	937	34.2	11.4	335	43.9	8.9	345
Area								
Urban	9.4	1487	19.1	5.3	514	27.1	4.4	537
Rural	17.4	3323	38.5	12.0	1365	49.6	7.7	1352
School attendance								
Yes	14.5	4681	34.4	7.3	1757	40.4	1.0	1475
No	28.5	129	15.4	51.9	123	53.1	27.3	414

	Percentage of children aged 5-11 years involved in economic activity for at least one hour	Number of children aged 5-11 years	Percentage of children aged 12-14 years involved in:		Number of children aged 12-14 years	Percentage of children aged 15-17 years involved in:		Number of children aged 15-17 years
			Economic activity less than 14 hours	Economic activity for 14 hours or more		Economic activity less than 43 hours	Economic activity for 43 hours or more	
Mother's education								
None	39.9	430	29.9	35.8	184	63.7	15.2	169
Primary	17.2	1082	33.2	11.2	475	47.1	9.5	421
Lower Secondary	14.3	1946	40.7	8.4	815	44.5	6.0	771
Upper Secondary	7.4	738	23.7	0.9	256	30.7	2.2	213
Tertiary	4.5	613	12.3	1.4	149	14.5	0	141
Cannot be determined[a]	na	na	na	na	na	46.6	6.5	175
Wealth Index quintiles								
Poorest	26.8	1166	42.4	23.6	434	58.2	12.5	415
Second	18.9	895	44.0	12.7	386	52.5	9.2	422
Middle	12.2	890	33.1	6.7	351	42.8	6.0	377
Fourth	8.7	877	28.8	2.7	384	35.3	3.9	359
Richest	5.2	983	13.2	2.0	325	20.7	0.0	316
Ethnicity of household head								
Kinh/Hoa	11.5	3974	31.6	6.3	1555	39.9	6.2	1575
Ethnic Minorities	31.1	836	40.7	29.0	324	59.8	9.8	314

a Children aged 15 or higher at the time of the interview whose mothers were not living in the household

na: not applicable

Table CP.3 presents children's involvement in household chores. As with economic activity highlighted earlier, the methodology also used age-specific thresholds for the number of hours a child can perform household chores without it being classified as child labour. A child that performed household chores during the week preceding the survey for more than the age-specific number of hours is classified as in child labour:

i. Aged 5-11 and 12-14: 28 hours or more

ii. Aged 15-17: 43 hours or more.

Table CP.3 presents children's involvement in household chores more than the age-specific threshold for number of hours. Overall, the proportion was not high among the three age groups. The proportion of children aged 5-11 years and 12-14 years involved in household chores for at least 28 hours was 0.3 per cent and 1.6 per cent, respectively and children aged 15-17 years involved in household chores at least 43 hours amounted to 0.7 per cent. In general, for children aged 5-17 years, the proportion of children involved in household chores more than the age-specific threshold number of hours was 0.7 per cent (Table CP.4).

Table CP.3: Children's involvement in household chores

Percentage of children by involvement in household chores during the last week, according to age groups, Viet Nam, 2014

	Percentage of children aged 5-11 years involved in:		Number of children aged 5-11 years	Percentage of children aged 12-14 years involved in:		Number of children aged 12-14 years	Percentage of children aged 15-17 years involved in:		Number of children aged 15-17 years
	Household chores less than 28 hours	Household chores for 28 hours or more		Household chores less than 28 hours	Household chores for 28 hours or more		Household chores less than 28 hours	Household chores for 28 hours or more	
Total	**69.7**	**0.3**	**4810**	**91.2**	**1.6**	**1879**	**90.6**	**0.7**	**1889**
Sex									
Male	66.8	0.0	2502	89.1	1.5	936	87.3	0.4	946
Female	72.7	0.6	2308	93.2	1.6	944	93.9	0.9	943
Region									
Red River Delta	63.5	0.0	1063	96.5	1.0	367	90.6	0.6	389
Northern Midlands and Mountainous area	77.8	1.3	711	89.9	7.0	252	91.8	1.1	266
North Central and Central coastal area	78.1	0.0	964	95.2	0.0	441	94.0	0.0	474
Central Highlands	71.3	0.5	363	91.1	2.7	169	90.8	2.2	162
South East	54.9	0.0	772	81.7	0.0	315	88.3	0.1	253
Mekong River Delta	73.3	0.3	937	89.9	1.0	335	86.6	1.1	345
Area									
Urban	61.4	0.1	1487	86.4	0.5	514	90.0	0.6	537
Rural	73.4	0.4	3323	93.0	2.0	1365	90.8	0.7	1352
School attendance									
Yes	70.4	0.3	4681	92.3	1.2	1757	92.6	0.0	1475
No	42.8	1.3	129	75.0	6.2	123	83.4	3.1	414
Mother's education									
None	78.8	2.5	430	84.5	8.0	184	85.6	2.8	169
Primary	75.8	0.0	1082	90.5	1.0	475	88.8	0.9	421
Lower Secondary	72.4	0.2	1946	94.0	0.4	815	92.7	0.0	771
Upper Secondary	62.1	0.0	738	89.6	2.2	256	90.2	0.0	213
Tertiary	52.9	0.0	613	88.7	0.5	149	91.5	0.0	141
Cannot be determined [a]	na	na	na	na	na	na	89.8	2.5	175
Wealth Index quintiles									
Poorest	77.4	0.8	1166	89.4	4.7	434	83.6	2.4	415
Second	76.9	0.2	895	94.2	0.7	386	92.0	0.0	422
Middle	73.7	0.3	890	94.0	1.8	351	94.3	0.6	377
Fourth	65.0	0.0	877	90.5	0.0	384	93.9	0.2	359
Richest	54.4	0.0	983	87.7	0.0	325	89.6	0.0	316
Ethnicity of household head									
Kinh/Hoa	68.0	0.1	3974	92.0	0.6	1555	91.0	0.3	1575
Ethnic Minorities	77.6	1.2	836	87.1	6.4	324	88.5	2.4	314

a Children aged 15 or higher at the time of the interview whose mothers were not living in the household

na: not applicable

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Table CP.4 combines children involved in economic activities and performing household chores at or above and below the age-specific thresholds detailed in the previous tables as well as those children reported working under hazardous conditions, into the total child labour indicator. It reveals that 16.4 per cent of children aged 5-17 years were involved in household chores and economic activities (considered as child labour).

Importantly, 7.8 per cent worked in hazardous conditions and this percentage for children aged 5-11 years was 3.7 per cent for children aged 12-14 years (10.6 per cent) and children aged 15-17 (15.7 per cent). This proportion was not significantly different between males and females. However, differentials were observed in regions, with the lowest proportion in the Red River Delta (1.4 per cent) in contrast to the Northern Midlands and Mountainous area (20.8 per cent), rural areas (9.7 per cent) verses urban areas (3.3 per cent), ethnic minorities (4.5 per cent) outscored by Kinh/Hoa (23.8 per cent) and children not attending school (32.7 per cent) in contrast to those attending school (5.7 per cent). The proportion of children aged 5-17 years working in hazardous conditions correlated with wealth index quintiles and education levels of mothers.

Table CP.4: Child labour

Percentage of children aged 5-17 years by involvement in economic activities or household chores during the last week, percentage working under hazardous conditions during the last week and percentage engaged in child labour during the last week, Viet Nam, 2014

	Children involved in economic activities for a total number of hours during last week:		Children involved in household chores for a total number of hours during last week:		Children working under hazardous conditions	Total child labour[1]	Number of children aged 5-17 years
	Below the age specific threshold	At or above the age specific threshold	Below the age specific threshold	At or above the age specific threshold			
Total	**18.4**	**12.1**	**79.0**	**0.7**	**7.8**	**16.4**	**8578**
Sex							
Male	18.6	11.9	76.0	0.4	8.6	16.6	4383
Female	18.2	12.3	82.1	0.9	7.0	16.2	4195
Region							
Red River Delta	11.9	3.0	75.9	0.3	1.4	4.2	1818
Northern Midlands and Mountainous area	27.0	25.5	83.3	2.4	20.8	36.2	1229
North Central and Central coastal area	23.8	11.7	86.1	0.0	6.5	15.2	1879
Central Highlands	19.1	15.0	80.7	1.4	15.4	25.3	694
South East	9.7	8.5	67.5	0.0	4.1	10.3	1340
Mekong River Delta	19.8	14.3	79.6	0.6	6.5	17.9	1618
Area							
Urban	10.6	7.5	72.5	0.3	3.3	9.6	2538
Rural	21.7	14.0	81.7	0.8	9.7	19.3	6040
Age							
5-11	2.8	14.9	69.7	0.3	3.7	15.4	4810
12-14	33.2	10.2	91.2	1.6	10.6	17.0	1879
15-17	43.2	6.8	90.6	0.7	15.7	18.5	1889

	Children involved in economic activities for a total number of hours during last week:		Children involved in household chores for a total number of hours during last week:		Children working under hazardous conditions	Total child labour[1]	Number of children aged 5-17 years
	Below the age specific threshold	At or above the age specific threshold	Below the age specific threshold	At or above the age specific threshold			
School attendance							
Yes	16.9	10.4	79.4	0.4	5.7	13.6	7912
No	35.9	32.0	74.0	3.3	32.7	50.1	666
Mother's education							
None	22.5	33.6	81.6	3.9	31.4	47.8	783
Primary	20.4	14.1	82.1	0.4	9.7	19.9	1978
Lower Secondary	20.5	11.1	81.8	0.2	5.2	14.0	3532
Upper Secondary	12.1	5.1	72.9	0.5	1.3	6.3	1206
Tertiary	5.2	3.3	64.8	0.1	0.9	4.1	903
Cannot be determined[a]	46.6	6.5	89.8	2.5	14.6	19.4	175
Wealth Index quintiles							
Poorest	23.6	23.2	81.3	2.0	19.1	33.6	2014
Second	24.3	15.1	84.6	0.3	7.6	18.7	1702
Middle	19.1	9.6	82.9	0.7	5.9	13.2	1618
Fourth	15.7	6.2	77.5	0.1	3.0	8.4	1620
Richest	7.7	3.5	67.9	0.0	0.7	4.0	1624
Ethnicity of household head							
Kinh/Hoa	17.3	9.2	78.4	0.3	4.5	11.7	7104
Ethnic Minorities	23.6	26.1	82.0	2.6	23.8	39.3	1475

[1] **MICS Indicator 8.2 - Child labour**

a Children aged 15 or higher at the time of the interview whose mothers were not living in the household.

Child Discipline

Teaching children self-control and acceptable behaviour is an integral part of child discipline in all cultures. Positive parenting practices involve providing guidance on how to handle emotions or conflicts in manners that encourage judgment and responsibility and preserve children's self-esteem, physical and psychological integrity and dignity. Too often, however, children are raised through the use of punitive methods that rely on the use of physical force or verbal intimidation to obtain desired behaviours. Studies[53] have found that exposing children to violent discipline have harmful consequences, which range from immediate impacts to long-term harm that children carry forward into adult life. Violence hampers children's development, learning abilities and school performance. It also inhibits positive relationships, provokes low self-esteem, emotional distress and depression and, at times, leads to risk-taking and self-harm.

In Viet Nam MICS 2014, respondents to the household questionnaire were asked a series of questions on the methods adults in the household used to discipline a selected child during the past month.

53 Straus, M.A., and M.J. Paschall, 'Corporal Punishment by Mothers and Development of Children's Cognitive Ability: A longitudinal study of two nationally representative age cohorts', Journal of Aggression, Maltreatment & Trauma, vol. 18, no. 5, 2009, pp. 459-483; Erickson, M.F., and B. Egeland, 'A Developmental View of the Psychological Consequences of Maltreatment', School Psychology Review, vol. 16, 1987, pp. 156-168; Schneider, M.W., A. Ross, J.C. Graham and A. Zielinski, 'Do Allegations of Emotional Maltreatment Predict Developmental Outcomes Beyond that of Other Forms of Maltreatment?', Child Abuse & Neglect, vol. 29, no. 5, 2005, pp. 513–532.

Table CP.5: Child discipline

Percentage of children aged 1-14 years by child disciplining methods experienced during the last one month, Viet Nam, 2014

	Percentage of children aged 1-14 years who experienced:					
	Only non-violent discipline	Psychological aggression	Physical punishment		Any violent discipline method[1]	Number of children aged 1-14 years
			Any	Severe		
Total	**27.2**	**58.2**	**42.7**	**2.1**	**68.4**	**9257**
Sex						
Male	23.6	59.6	48.5	2.8	71.6	4743
Female	31.1	56.7	36.6	1.4	65.0	4514
Region						
Red River Delta	34.6	48.4	39.8	1.7	62.6	2052
Northern Midlands and Mountainous area	33.1	52.5	35.0	1.6	60.9	1347
North Central and Central coastal area	24.4	60.9	45.0	2.7	71.2	1933
Central Highlands	17.9	70.6	52.8	2.8	79.4	709
South East	26.4	60.1	41.5	1.5	68.2	1488
Mekong River Delta	21.6	64.5	46.7	2.6	73.8	1728
Area						
Urban	28.2	55.2	42.9	2.4	66.8	2781
Rural	26.8	59.5	42.7	2.0	69.1	6476
Age						
1-2 years	30.0	39.1	44.0	.6	55.2	1414
3-4 years	23.5	55.4	56.2	2.3	73.8	1154
5-9 years	24.5	63.0	49.2	2.4	73.7	3502
10-14 years	30.3	62.4	30.2	2.4	66.4	3187
Education of household head						
None	21.1	61.3	48.7	5.5	70.3	768
Primary	21.9	67.0	46.3	2.2	74.7	2389
Lower Secondary	28.1	57.7	41.4	1.8	68.0	3626
Upper Secondary	29.5	54.7	40.9	1.4	66.9	1352
Tertiary	37.2	43.3	37.6	1.7	56.8	1122
Wealth Index quintiles						
Poorest	22.8	64.0	47.3	3.7	71.9	2135
Second	24.2	63.6	45.9	1.9	72.5	1770
Middle	23.6	61.4	44.6	2.2	72.5	1751
Fourth	31.5	53.4	39.4	1.4	64.6	1781
Richest	34.7	47.8	35.7	1.1	60.2	1819
Ethnicity of household head						
Kinh/Hoa	27.6	57.4	42.6	1.7	68.2	7678
Ethnic Minorities	25.3	62.0	43.5	4.3	69.2	1579

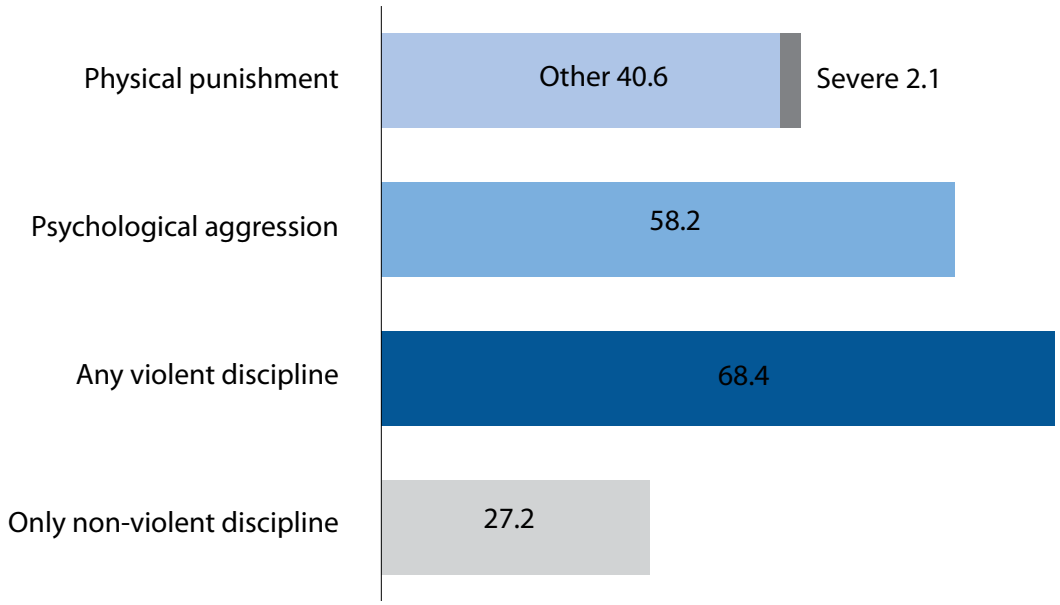
[1] MICS Indicator 8.3 - Violent discipline

Table CP.5 shows that 68.4 per cent of children aged 1-14 years in Viet Nam were subjected to at least one form of psychological or physical punishment by household members during the month preceding the survey.

For the most part, household members employed a combination of violent disciplinary practices, reflecting caregivers' motivation to control children's behaviour by any means possible. While 58.2 per cent of children faced psychological aggression, 42.7 per cent experienced physical punishment. The most severe forms of physical punishment (hitting the child on the head, bottom, ears or face or hard and repeatedly) were overall less common, as 2.1 per cent of children were subjected to severe punishment.

Male children experienced physical discipline (48.5 per cent) more than female children (36.6 per cent). Differentials with respect to many of the background variables were relatively small. Children from the poorer households and children whose mothers had low education were more likely to experience at least one violent psychological or physical punishment.

Figure CP.2: Child disciplining methods, children aged 1-14 years, Viet Nam MICS 2014



While violent methods were common forms of discipline, Table CP.6 reveals that only 14.6 per cent of respondents believed that children should be physically punished. There were notable differentials across background variables of respondents. Overall, respondents with lower educational attainment and those residing in poorer households were more likely to find physical punishment an acceptable method of disciplining children. The respondent's relationship to the child also matters, as 16.1 per cent of mothers believed that children should be physically punished compared to 13.1 per cent of fathers and 12.6 per cent among other adult household members.

Table CP.6: Attitudes toward physical punishment

Percentage of respondents to the child discipline module who believe that physical punishment is needed to bring up, raise, or educate a child properly, Viet Nam, 2014

	Respondent believes that a child needs to be physically punished	Number of respondents to the child discipline module
Total	**14.6**	**5060**
Sex		
Male	11.5	1276
Female	15.7	3784
Region		
Red River Delta	14.7	1135
Northern Midlands and Mountainous area	13.7	716
North Central and Central coastal area	19.5	1029
Central Highlands	18.6	326
South East	6.9	844
Mekong River Delta	15.5	1010
Area		
Urban	11.5	1586
Rural	16.1	3474
Age		
<25	15.7	240
25-39	15.4	2483
40-59	13.9	1863
60+	13.2	473
Respondent's relationship to selected child		
Mother	16.1	2865
Father	13.1	876
Other	12.6	1319
Respondent's education		
None	22.3	292
Primary	19.3	1120
Lower Secondary	15.1	2086
Upper Secondary	9.5	828
Tertiary	9.2	732
Wealth Index quintiles		
Poorest	19.3	1052
Second	18.5	967
Middle	15.9	946
Fourth	11.7	1025
Richest	8.3	1070
Ethnicity of household head		
Kinh/Hoa	13.9	4313
Ethnic Minorities	18.7	747

Early Marriage and Polygyny

Marriage before the age of 18 is a reality for many young girls. In many parts of the world, parents encourage the marriage of their daughters, while they are still children in hope that the marriage will benefit them financially and socially. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy, the dropping out of school and social isolation, with little education and poor vocational training reinforcing the gendered 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. 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 a leading cause of mortality for married and unmarried girls aged 15-19, particularly the youngest of this cohort. 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. 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 married at before the ages of 15 and 18 years are provided in Table CP.7. Of women aged 15-49 years in Viet Nam, 0.9 per cent was married before the age of 15 and about one-in-10 women aged 20-49 were married before their 18th birthday.

Table CP.7 also shows one-in-10 women aged 15-19 were currently married/in union. Small variations in proportions were observed between urban (7.4 per cent) and rural (11.7 per cent) areas. However, there was a strong correlation with education and wealth index quintiles, as 26.0 per cent of women aged 15-19 from the poorest households were married/in union compared with 2.3 per cent of those from the richest households, as were three-in-10 of less educated women versus just 3 per cent of tertiary-educated women from this age bracket. Among all women aged 15-49 years in union, 0.7 per cent were in polygynous unions.

Table CP.7: Early marriage and polygyny (women)

Percentage of women aged 15-49 years who first married or entered a marital union before their 15th birthday, percentages of women aged 20-49 years who first married or entered a marital union before their 15th and 18th birthdays, percentage of women aged 15-19 years currently married or in union, and the percentage of women who are in a polygynous marriage or union, Viet Nam, 2014

	Women aged 15-49 years		Women aged 20-49 years			Women aged 15-19 years		Women aged 15-49 years	
	Percentage married before age 15[1]	Number of women aged 15-49 years	Percentage married before age 15	Percentage married before age 18[2]	Number of women aged 20-49 years	Percentage currently married/in union[3]	Number of women aged 15-19 years	Percentage in polygynous marriage/ union[4]	Number of women aged 15-49 years currently married/in union
Total	**0.9**	**9827**	**0.9**	**11.1**	**8453**	**10.3**	**1374**	**0.7**	**7038**
Region									
Red River Delta	0.3	2221	0.3	7.9	1908	4.3	313	0.7	1632
Northern Midlands and Mountainous area	2.1	1325	1.9	18.8	1140	22.6	185	1.2	1034
North Central and Central coastal area	0.5	2082	0.7	8.5	1754	8.7	329	0.5	1445
Central Highlands	1.9	619	1.9	15.8	510	14.8	109	0.7	421
South East	0.5	1768	0.6	7.8	1546	7.7	222	0.9	1161
Mekong River Delta	1.1	1811	1.1	13.8	1595	11.4	216	0.3	1346
Area									
Urban	0.4	3259	0.4	6.7	2831	7.4	428	0.8	2154
Rural	1.1	6568	1.2	13.3	5622	11.7	946	0.7	4884
Age									
15-19	0.7	1374	na	na	na	10.3	1374	0.0	133
20-24	0.9	1333	0.9	10.6	1333	na	na	0.3	687
25-29	0.8	1359	0.8	7.5	1359	na	na	0.2	1102
30-34	0.8	1539	0.8	10.9	1539	na	na	0.6	1396
35-39	0.9	1391	0.9	12.7	1391	na	na	0.8	1260

	Women aged 15-49 years		Women aged 20-49 years			Women aged 15-19 years		Women aged 15-49 years	
	Percentage married before age 15[1]	Number of women aged 15-49 years	Percentage married before age 15	Percentage married before age 18[2]	Number of women aged 20-49 years	Percentage currently married/in union[3]	Number of women aged 15-19 years	Percentage in polygynous marriage/ union[4]	Number of women aged 15-49 years currently married/in union
40-44	1.0	1442	1.0	11.9	1442	na	na	0.5	1279
45-49	0.9	1390	0.9	12.7	1390	na	na	1.6	1182
Education									
None	6.5	475	6.0	33.2	447	32.8	28	2.2	392
Primary	1.6	1483	1.6	19.4	1447	40.2	36	0.8	1290
Lower Secondary	0.7	3516	0.6	13.3	3226	27.6	290	0.7	2885
Upper Secondary	0.1	2382	0.2	4.5	1507	3.9	875	0.4	1272
Tertiary	0.1	1971	0.1	0.5	1826	3.0	145	0.4	1199
Wealth Index quintiles									
Poorest	3.1	1773	3.0	20.2	1496	26.0	277	0.8	1343
Second	0.7	1814	0.8	13.1	1552	9.3	263	0.7	1327
Middle	0.4	2003	0.5	11.4	1688	5.7	314	0.5	1384
Fourth	0.4	2171	0.4	9.3	1886	7.8	284	0.9	1521
Richest	0.2	2067	0.2	3.4	1831	2.3	236	0.6	1463
Ethnicity of household head									
Kinh/Hoa	0.5	8456	0.5	9.2	7312	6.5	1144	0.6	5988
Ethnic Minorities	3.3	1371	3.4	23.1	1141	29.5	230	1.5	1051

[1] **MICS Indicator 8.4 - Marriage before age 15**

[2] **MICS Indicator 8.5 - Marriage before age 18**

[3] **MICS Indicator 8.6 - Young women aged 15-19 years currently married or in union**

[4] **MICS Indicator 8.7 – Polygyny**

na: not applicable

Table CP.8 presents the proportion of women who were first married or entered into a marital union before the ages of 15 and 18 by area and age groups. Examining the percentages of those married before the ages of 15 and 18 by different age groups allows for trends to be observed in early marriage.

Overall, the percentage of women married/in union before the age of 15 years has decreased a little over time, from 0.9 per cent of women aged 45-49 to 0.7 for those aged 15-19. The reason for this small decrease is the strong decrease in the percentage of women married before the age of 15 years in urban areas, but almost no change in the percentage in rural areas. The percentage of women married/in union before the age of 18 years has also decreased over time, from 12.7 per cent of those aged 45-49 compared to 10.6 per cent of those aged 20-24 years. An area differential was observed with marriage before the age of 18 years, with rural (13.3 per cent) higher than urban (6.7 per cent).

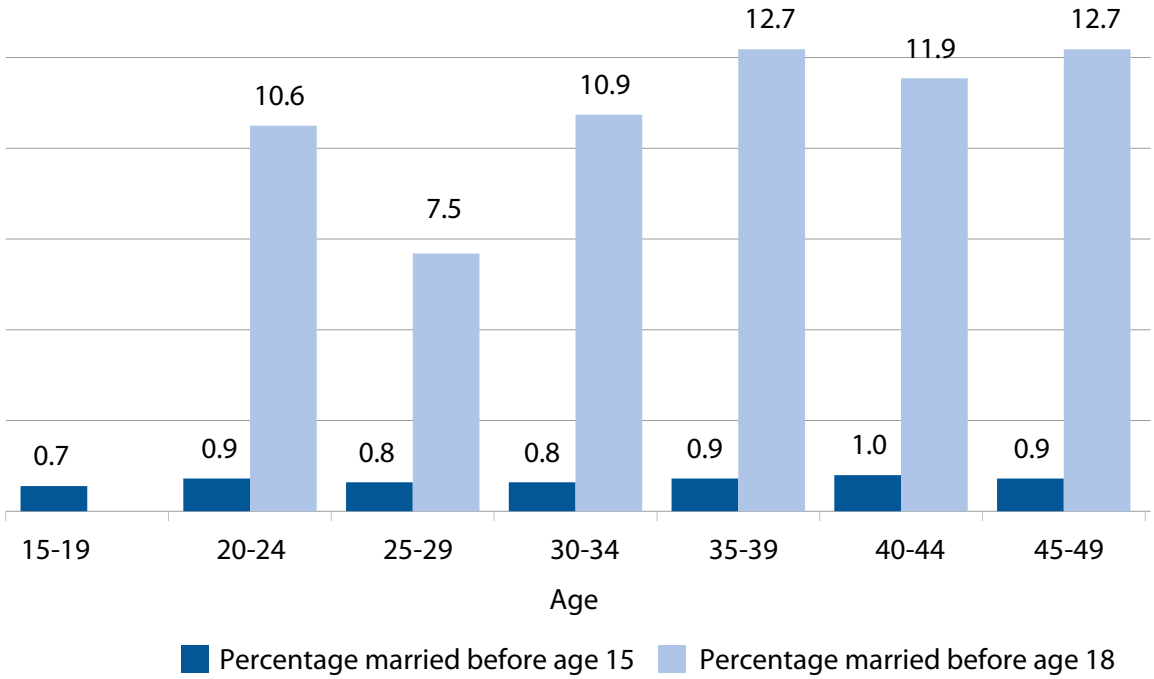
Table CP.8: Trends in early marriage (women)

Percentage of women who were first married or entered into a marital union before age 15 and 18, by area and age groups, Viet Nam, 2014

	Urban				Rural				All			
	Percentage of women married before age 15	Number of women aged 15-49 years	Percentage of women married before age 18	Number of women aged 20-49 years	Percentage of women married before age 15	Number of women aged 15-49 years	Percentage of women married before age 18	Number of women aged 20-49 years	Percentage of women married before age 15	Number of women aged 15-49 years	Percentage of women married before age 18	Number of women aged 20-49 years
Total	**0.4**	**3259**	**6.7**	**2831**	**1.1**	**6568**	**13.3**	**5622**	**0.9**	**9827**	**11.1**	**8453**
Age												
15-19	0.2	428	na	0	1.0	946	na	0	0.7	1374	na	0
20-24	0.4	440	5.3	440	1.2	893	13.2	893	0.9	1333	10.6	1333
25-29	0.0	476	3.2	476	1.2	883	9.8	883	0.8	1359	7.5	1359
30-34	0.2	527	6.8	527	1.1	1011	13.1	1011	0.8	1539	10.9	1539
35-39	0.2	479	7.7	479	1.3	912	15.4	912	0.9	1391	12.7	1391
40-44	0.5	477	9.3	477	1.3	965	13.2	965	1.0	1442	11.9	1442
45-49	1.2	432	7.9	432	0.8	958	14.8	958	0.9	1390	12.7	1390

na: not applicable

Figure CP.3: Early marriage among women, Viet Nam MICS 2014



Spousal age difference is another important component, with the indicator being the percentage of married/in union women 10 or more years younger than their current spouse. Table CP.9 presents the results of the age difference between husbands and wives. The results show that there are some important spousal age differences in Viet Nam. Of women aged 20-24 years married/in union, only 4.7 per cent have a husband or partner who is 10 or more years older, while the majority (58.9 per cent) have husbands or partners up to four years older.

A similar pattern was observed among women aged 15-19 years. Small differentials were observed across background variables, but more Kinh/Hoa women have husbands or partners more than 10 years older. A similar pattern might be observed among women aged 15-19 years. But, caution must be exercised with reaching any conclusions due to the small number of observations for this group.

Table CP.9: Spousal age difference

Percentage distribution of women currently married/in union aged 15-19 and 20-24 years according to the age difference with their husband or partner, Viet Nam, 2014

	Percentage of currently married/in union women aged 15-19 years whose husband or partner is:					Number of women aged15-19 years currently married/ in union	Percentage of currently married/in union women aged 20-24 years whose husband or partner is:						Number of women aged 20-24 years currently married/ in union
	Younger	0-4 years older	5-9 years older	10+ years older[1]	Total		Younger	0-4 years older	5-9 years older	10+ years older[2]	Husband/ Partner's age unknown	Total	
Total	**4.2**	**54.1**	**35.9**	**5.8**	**100**	**133**	**8.7**	**58.9**	**27.4**	**4.7**	**0.3**	**100**	**687**
Region													
Red River Delta	*	*	*	*	*	13	8.9	62.9	24.4	3.8	0.0	100	150
Northern Midlands and Mountainous area	(8.9)	(54.8)	(33.9)	(2.5)	(100)	40	9.1	68.9	20.0	1.1	0.8	100	127
North Central and Central coastal area	*	*	*	*	*	27	5.1	54.9	34.5	4.8	0.7	100	143
Central Highlands	(10.2)	(58.3)	(24.8)	(6.6)	(100)	15	13.1	57.9	21.8	7.3	0.0	100	55
South East	*	*	*	*	*	16	10.7	44.9	36.3	8.2	0.0	100	76
Mekong River Delta	*	*	*	*	*	22	9.2	57.5	27.4	5.9	0.0	100	136
Area													
Urban	(3.5)	(49.5)	(43.4)	(3.7)	(100)	30	9.0	53.3	30.0	7.0	0.7	100	137
Rural	4.4	55.5	33.6	6.5	100	103	8.7	60.3	26.7	4.1	0.2	100	549
Age													
15-19	4.2	54.1	35.9	5.8	100	133	na	na	na	na	na	na	na
20-24	na	na	na	na	na	0	8.7	58.9	27.4	4.7	0.3	100	687
Education													
None	*	*	*	*	*	8	(8.5)	(65.7)	(19.3)	(6.5)	(0.0)	(100)	34
Primary	*	*	*	*	*	14	4.4	64.4	30.4	0.7	0.0	100	57
Lower Secondary	3.7	48.9	39.0	8.4	100	74	8.3	54.8	33.3	3.7	0.0	100	238
Upper Secondary	(1.7)	(64.7)	(29.8)	(3.8)	(100)	33	9.2	62.1	21.7	6.5	0.5	100	217
Tertiary	*	*	*	*	*	4	10.7	57.0	26.9	4.7	0.7	100	140
Wealth Index quintiles													
Poorest	7.8	58.3	29.7	4.2	100	67	12.5	59.5	24.9	3.1	0.0	100	181
Second	*	*	*	*	*	23	5.3	63.9	26.2	4.5	0.0	100	160
Middle	*	*	*	*	*	17	5.3	59.0	29.3	4.8	1.6	100	130
Fourth	*	*	*	*	*	21	10.3	61.0	24.5	4.2	0.0	100	147
Richest	*	*	*	*	*	5	10.0	40.7	39.2	10.1	0.0	100	68
Ethnicity of household head													
Kinh/Hoa	0.0	50.9	40.2	8.9	100	72	7.6	57.5	28.8	5.7	0.4	100	528
Ethnic Minorities	9.1	57.9	30.7	2.2	100	61	12.6	63.5	22.6	1.2	0.0	100	159

[1] **MICS Indicator 8.8a - Spousal age difference (among women aged 15-19)**
[2] **MICS Indicator 8.8b - Spousal age difference (among women aged 20-24)**
Na: not applicable
Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases
Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Attitudes toward Domestic Violence

Viet Nam MICS 2014 assessed the attitudes of women aged 15-49 years towards wife/partner beating by asking respondents whether husbands/partners were justified to hit or beat their wives/partners in a variety of situations. The purpose of these questions was to capture the social justification of violence (in contexts where women have a lower status in society) as a disciplinary action when a woman does not comply with certain expected gender roles.

The responses to these questions can be found in Table CP.13, which shows 28.2 per cent of women felt a husband/partner was justified in hitting or beating his wife in at least one of five situations, and 50.0 per cent in at least one of the eight situations, of which three ("If she had uncompleted housework", "If she was doubted to be faithful", "If she disclosed unfaithfulness") have been added to Viet Nam MICS 2014 to provide a more specific country context. Such women believed violence was justified if a wife neglected the children (20.8 per cent) or argued with him (14.8 per cent). Some 3.6 per cent believed wife-beating was justified if sex was refused and 1.4 per cent if food was burnt. Such justifications were more common in poor households and by less educated women as well as in the North Central and Central coastal area (40.5 per cent) and lowest in the Red River Delta (17.8 per cent).

Table CP.13[54]: Attitudes toward domestic violence

Percentage of women aged 15-49 years who believe a husband is justified in beating his wife in various circumstances, Viet Nam, 2014

	Percentage of women aged 15-49 years who believe a husband is justified in beating his wife:										Number of women aged 15-49 years
	If she went out without telling him	If she neglected the children	If she argued with him	If she refused sex with him	If she burnt the food	For any of these five reasons [1]	If she had uncompleted housework	If she was doubted to be faithful	If she disclosed unfaithfulness	For any of these eight reasons[2]	
Total	**10.0**	**20.8**	**14.8**	**3.6**	**1.4**	**28.2**	**6.6**	**13.4**	**44.7**	**50.0**	**9827**
Region											
Red River Delta	4.2	12.3	10.0	2.2	0.6	17.8	2.9	10.2	36.4	40.0	2221
Northern Midlands and Mountainous area	13.0	26.2	17.4	6.1	1.7	34.6	9.6	13.1	43.9	52.4	1325
North Central and Central coastal area	15.1	30.0	23.7	3.6	1.9	40.5	8.8	17.1	55.6	62.5	2082
Central Highlands	10.2	22.6	19.7	2.9	1.2	34.0	8.0	19.9	54.4	59.5	619
South East	6.0	14.1	8.6	2.5	1.1	19.2	4.0	11.0	36.7	40.8	1768
Mekong River Delta	12.6	22.7	13.1	4.7	2.2	29.2	8.2	13.5	47.2	51.6	1811
Area											
Urban	7.1	17.8	10.7	2.3	1.2	23.3	5.0	10.8	39.0	43.3	3259
Rural	11.3	22.3	16.9	4.2	1.6	30.7	7.4	14.8	47.5	53.3	6568
Age											
15-19	6.3	21.6	12.3	2.9	1.0	28.1	5.4	9.5	38.7	44.5	1374
20-24	7.2	19.4	14.0	2.0	0.7	26.0	6.2	12.2	40.0	45.0	1333
25-29	8.5	18.6	13.6	2.7	1.0	25.3	5.1	14.1	43.9	48.4	1359
30-34	10.2	19.1	14.2	3.6	1.4	26.4	5.7	12.0	47.0	51.5	1539
35-39	12.5	22.9	15.5	4.3	2.1	30.9	7.9	15.9	46.1	52.5	1391
40-44	11.8	21.7	16.6	3.9	1.2	30.3	7.5	15.4	47.8	53.6	1442
45-49	12.9	22.5	17.5	5.7	2.7	30.8	8.1	15.0	48.7	53.6	1390

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	Percentage of women aged 15-49 years who believe a husband is justified in beating his wife:										Number of women aged 15-49 years
	If she went out without telling him	If she neglected the children	If she argued with him	If she refused sex with him	If she burnt the food	For any of these five reasons [1]	If she had uncompleted housework	If she was doubted to be faithful	If she disclosed unfaithfulness	For any of these eight reasons[2]	
Marital/Union status											
Currently married/in union	11.4	22.0	16.4	4.0	1.6	30.1	7.4	14.8	47.6	53.1	7038
Formerly married/in union	14.6	23.5	17.5	5.6	2.6	31.6	5.4	14.7	50.0	55.5	481
Never married/in union	4.7	16.8	9.5	2.0	0.7	21.8	4.4	9.2	34.6	39.2	2308
Education											
None	17.5	28.8	22.2	7.5	6.0	39.7	13.6	20.7	48.9	58.0	475
Primary	18.4	29.1	22.0	5.9	3.6	39.5	12.1	19.1	56.9	63.2	1483
Lower Secondary	11.9	23.7	17.9	4.3	1.2	32.0	7.3	15.3	51.4	56.9	3516
Upper Secondary	6.7	18.6	11.5	2.4	0.5	25.2	4.5	10.6	40.3	45.8	2382
Tertiary	2.2	10.2	6.3	1.1	0.3	14.1	1.9	7.5	27.7	30.6	1971
Wealth Index quintiles											
Poorest	16.4	28.5	21.5	6.4	3.0	38.0	11.8	17.0	51.7	60.0	1773
Second	13.5	26.3	20.0	4.4	1.9	36.1	8.3	16.5	51.6	58.1	1814
Middle	11.4	23.6	15.0	3.9	1.3	30.5	7.6	14.4	49.5	53.6	2003
Fourth	6.5	16.3	12.2	2.4	1.0	23.5	4.1	12.1	41.4	46.2	2171
Richest	3.6	11.4	7.1	1.3	0.4	15.8	2.1	8.1	31.4	34.7	2067
Ethnicity of household head											
Kinh/Hoa	9.1	19.5	13.8	3.2	1.2	26.5	5.7	12.9	43.9	48.5	8456
Ethnic Minorities	15.0	28.7	21.2	6.3	2.8	39.1	11.7	16.6	49.8	58.6	1371

[1] MICS Indicator 8.12 - Attitudes towards domestic violence

[2] MICS Indicator 8.S1 - Attitudes towards domestic violence

Children's Living Arrangements

The CRC recognizes that "the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding". Millions of children around the world grow up without the care of their parents for several reasons, including the premature death of parents or their migration for work. In most cases, these children are cared for by members of their extended families, while others may live in households other than their own, as live-in domestic workers for instance. Understanding children's living arrangements, including composition of the households where they live and relationships with their primary caregivers, is key to design targeted interventions aimed at promoting a child's care and wellbeing.

Table CP.14 presents information on the living arrangements and orphanhood status of children under the age of 18. It shows that 84.3 per cent of children aged 0-17 years in Viet Nam live with both parents, 7.7 per cent with only mothers and 2.3 per cent with fathers only. Very few children have lost one or both parents.

Table CP.14: Children's living arrangements and orphan hood

Percentage distribution of children aged 0-17 years according to living arrangements, percentage of children aged 0-17 years not living with a biological parent and percentage of children who have one or both parents dead, Viet Nam, 2014

	Living with both parents	Living with neither biological parent:				Living with mother only:		Living with father only:		Missing information on father/ mother	Total	Living with neither biological parent[1]	One or both parents dead [2]	Number of children aged0-17 years
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead					
Total	**84,3**	**0,2**	**0,4**	**4,4**	**0,2**	**5,4**	**2,3**	**1,9**	**0,4**	**0,5**	**100**	**5,2**	**3,5**	**11283**
Sex														
Male	84,5	0,1	0,4	3,9	0,2	5,6	2,5	1,9	0,3	0,6	100	4,7	3,6	5820
Female	84,1	0,2	0,4	4,8	0,3	5,3	2,1	1,9	0,4	0,5	100	5,7	3,4	5463
Region														
Red River Delta	87,9	0,2	0,3	3,5	0,2	4,4	1,7	1,3	0,2	0,3	100	4,2	2,5	2477
Northern Midlands and Mountainous area	86,0	0,1	0,7	4,0	0,2	3,7	2,3	1,6	0,8	0,7	100	5,0	4,0	1648
North Central and Central coastal area	80,7	0,3	0,6	4,8	0,1	7,5	3,1	1,8	0,3	0,8	100	5,7	4,3	2436
Central Highlands	87,2	0,1	0,1	1,6	0,2	5,2	3,7	1,0	0,8	0	100	2,0	5,0	878
South East	84,7	0,1	0,3	2,9	0,4	7,6	1,4	1,9	0,4	0,2	100	3,8	2,7	1761
Mekong River Delta	81,2	0,1	0,4	7,6	0,3	3,8	2,2	3,4	0,2	0,8	100	8,4	3,1	2082
Area														
Urban	84,5	0,3	0,3	3,6	0,2	6,6	2,0	1,6	0,3	0,4	100	4,4	3,1	3343
Rural	84,2	0,1	0,5	4,7	0,2	4,9	2,4	2,0	0,4	0,6	100	5,5	3,6	7941

	Living with both parents	Living with neither biological parent:				Living with mother only:		Living with father only:		Missing information on father/ mother	Total	Living with neither biological parent[1]	One or both parents dead [2]	Number of children aged0-17 years
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead					
Age group														
0-4	87,3	0,1	0,1	3,5	0,1	7,1	0,7	0,9	0,1	0,1	100	3,8	1,1	3206
5-9	84,3	0,1	0,3	5,4	0,1	5,2	1,7	2,0	0,4	0,5	100	5,8	2,5	3242
10-14	83,4	0,3	0,7	3,8	0,5	4,4	2,8	2,7	0,6	0,7	100	5,3	4,9	3010
15-17	80,3	0,3	0,6	4,9	0,3	4,5	5,2	2,3	0,6	0,9	100	6,1	7,0	1825
Wealth Index quintiles														
Poorest	82,1	0,1	0,7	4,6	0,2	5,0	3,1	2,3	0,8	1,0	100	5,7	4,9	2566
Second	83,2	0,2	0,5	6,4	0,2	4,2	2,5	2,0	0,3	0,4	100	7,3	3,7	2227
Middle	84,0	0,1	0,2	5,2	0,1	5,6	2,2	1,8	0,2	0,4	100	5,6	2,9	2168
Fourth	85,5	0,4	0,3	3,0	0,4	6,2	2,2	1,5	0,3	0,3	100	4,0	3,5	2167
Richest	87,1	0,0	0,3	2,4	0,3	6,3	1,3	1,7	0,3	0,4	100	3,1	2,1	2156
Ethnicity of household head														
Kinh/Hoa	84,0	0,2	0,4	4,5	0,2	5,6	2,2	2,1	0,2	0,5	100	5,3	3,3	9357
Ethnic Minorities	85,7	0,2	0,5	3,5	0,2	4,4	2,5	1,2	1,1	0,6	100	4,4	4,4	1926

[1] MICS Indicator 8.13 - Children's living arrangements

[2] MICS Indicator 8.14 - Prevalence of children with one or both parents dead

Viet Nam MICS 2014 included a simple measure of one particular aspect of migration where one or both parents have moved abroad. While the amount of literature is growing, the long-term effects of the benefits of remittances versus the potential adverse psycho-social effects on children are not yet conclusive, as there is somewhat conflicting evidence available as to the effects on children.

Besides presenting simple prevalence rates, the results of Viet Nam MICS 2014 presented in Table CP.15 will greatly help fill the data gap on migration. As expected, only a small percentage (1.3 per cent) of children aged 0-17 had one or both parents living abroad. However, there were differences between groups of children, as the percentage of at least one parent abroad in rural areas (1.5 per cent) was almost double that of urban areas (0.8 per cent), while the North Central and Central coastal area (2.5 per cent) also had a high percentage.

Table CP.15: Children with parents living abroad

Percentage distribution of children aged 0-17 years by residence of parents in another country, Viet Nam, 2014

	Percentage distribution of children aged 0-17 years:					Percentage of children aged 0-17 years with at least one parent living abroad[1]	Number of children aged 0-17 years
	With at least one parent living abroad			With neither parent living abroad	Total		
	Only mother abroad	Only father abroad	Both mother and father abroad				
Total	**0.7**	**0.5**	**0.2**	**98.7**	**100**	**1.3**	**11283**
Sex							
Male	0.5	0.5	0.2	98.8	100	1.2	5820
Female	0.8	0.5	0.1	98.6	100	1.4	5463
Region							
Red River Delta	1.1	0.7	0.2	98.0	100	2.0	2477
Northern Midlands and Mountainous area	0.9	0.3	0.0	98.8	100	1.2	1648
North Central and Central coastal area	1.2	1.0	0.3	97.5	100	2.5	2436
Central Highlands	0.0	0.0	0.0	100	100	0.0	878
South East	0.3	0.1	0.1	99.6	100	0.4	1761
Mekong River Delta	0.0	0.1	0.2	99.7	100	0.3	2082
Area							
Urban	0.3	0.4	0.1	99.2	100	0.8	3343
Rural	0.8	0.5	0.2	98.5	100	1.5	7941
Age group							
0-4	0.1	0.7	0.2	99.0	100	1.0	3206
5-9	0.7	0.4	0.2	98.7	100	1.3	3242
10-14	0.8	0.4	0.1	98.7	100	1.3	3010
15-17	1.3	0.2	0.2	98.4	100	1.6	1825
Wealth Index quintiles							
Poorest	0.8	0.2	0.1	98.9	100	1.1	2566
Second	0.9	0.4	0.4	98.4	100	1.6	2227
Middle	0.5	0.4	0.1	99.0	100	1.0	2168
Fourth	0.4	0.7	0.0	98.9	100	1.1	2167
Richest	0.8	0.7	0.1	98.4	100	1.6	2156
Ethnicity of household head							
Kinh/Hoa	0.6	0.5	0.2	98.7	100	1.3	9357
Ethnic Minorities	0.8	0.0	0.1	99.0	100	1.0	1926

[1] MICS Indicator 8.15 - Children with at least one parent living abroad

CHAPTER XII

HIV/AIDS

XII. HIV/AIDS

Knowledge about HIV Transmission and Misconceptions about HIV

One of the most important prerequisites for reducing the rate of HIV infection is accurate knowledge of how HIV is transmitted and strategies to prevent transmission. Correct information is the first step towards raising awareness and giving adolescents and young people the tools to protect themselves from infection. Misconceptions about HIV are common and can confuse adolescents and young people and hinder prevention efforts. Different regions are likely to have variations in misconceptions although some appear universal (such as sharing food 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/AIDS. 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/AIDS and its prevention and changing behaviours to prevent the further spread of the disease. HIV/AIDS module(s) were administered to women 15-49 years of age. It should be noted that questions in this module sometimes refer to "AIDS". This terminology is used strictly as a method of data collection to assist respondents, preferred over the correct terminology of "HIV" used here in reporting the results, where appropriate.

Table HA.1: Knowledge about HIV transmission, misconceptions about HIV/AIDS and comprehensive knowledge about HIV transmission

Percentage of women aged 15-49 years who know the main ways of preventing HIV transmission, percentage who know that a healthy looking person can be HIV-positive, percentage who reject common misconceptions, and percentage who have comprehensive knowledge about HIV transmission, Viet Nam, 2014

	Percentage who have heard of AIDS	Percentage who know transmission can be prevented by:			Percentage who know that a healthy looking person can be HIV-positive	Percentage who know that HIV cannot be transmitted by:			Percentage who reject the two most common misconceptions and know that a healthy looking person can be HIV-positive	Percentage with comprehensive knowledge[1]	Number of women aged 15-49
		Having only one faithful uninfected sex partner	Using a condom every time	Both		Mosquito bites	Supernatural means	Sharing food with someone with HIV			
Total	94.5	84.3	86.7	79.7	72.3	61.6	87.1	84.4	47.8	43.4	9827
Region											
Red River Delta	98.5	92.7	95.8	90.8	88.8	71.2	92.7	90.8	63.0	59.1	2221
Northern Midlands and Mountainous area	89.8	78.0	82.8	74.6	72.3	51.0	82.0	78.9	40.3	36.3	1325
North Central and Central coastal area	91.5	77.3	82.2	71.8	66.3	55.6	82.7	79.3	39.5	33.7	2082
Central Highlands	91.5	76.9	79.7	70.7	62.1	59.8	82.8	78.3	41.6	36.7	619
South East	96.8	90.4	89.3	84.9	79.3	68.4	91.3	90.5	57.4	52.9	1768
Mekong River Delta	95.2	83.3	83.7	77.1	55.5	58.6	86.0	82.7	36.8	33.6	1811
Area											
Urban	96.9	87.8	90.5	83.5	79.2	72.4	91.9	90.2	59.5	53.5	3259
Rural	93.3	82.6	84.9	77.8	68.9	56.3	84.6	81.5	42.0	38.4	6568
Age											
15-24[1]	95.8	85.2	88.7	80.4	77.6	68.6	91.0	87.0	55.0	49.3	2707
15-19	95.7	84.3	86.9	78.4	77.7	70.7	91.0	86.7	56.5	50.5	1374
20-24	95.9	86.1	90.6	82.5	77.5	66.5	91.0	87.3	53.4	48.1	1333
25-29	96.8	88.6	89.5	84.4	77.7	67.3	90.4	88.4	54.4	50.6	1359

	Percentage who have heard of AIDS	Percentage who know transmission can be prevented by:			Percentage who know that a healthy looking person can be HIV-positive	Percentage who know that HIV cannot be transmitted by:			Percentage who reject the two most common misconceptions and know that a healthy looking person can be HIV-positive	Percentage with comprehensive knowledge[1]	Number of women aged 15-49
		Having only one faithful uninfected sex partner	Using a condom every time	Both		Mosquito bites	Supernatural means	Sharing food with someone with HIV			
30-39	94.3	84.5	86.6	80.5	71.2	58.8	85.9	85.2	45.6	41.8	2929
40-49	92.4	81.2	83.6	76.0	65.7	55.2	82.9	79.3	40.0	36.0	2832
Marital status											
Ever married/in union	93.8	83.5	85.9	79.0	69.9	58.1	85.6	82.8	44.0	40.1	7519
Never married/in union	96.9	86.9	89.6	81.9	80.1	73.4	91.9	89.7	60.2	54.1	2308
Education											
None	56.8	38.7	36.4	30.7	22.7	24.3	40.2	36.9	9.3	6.5	475
Primary	88.7	72.0	73.8	64.3	51.2	40.0	75.2	70.6	22.8	19.5	1483
Lower Secondary	96.2	85.9	88.7	81.2	70.4	56.1	87.9	84.3	39.6	35.4	3516
Upper Secondary	98.8	90.7	93.3	86.6	82.6	72.3	93.9	92.2	60.0	55.0	2382
Tertiary	100	94.1	97.3	92.1	90.9	84.0	97.5	97.0	75.7	70.5	1971
Wealth Index quintiles											
Poorest	82.1	67.4	68.6	60.8	48.7	40.9	70.2	64.7	24.4	21.5	1773
Second	94.6	83.3	85.6	78.4	67.0	54.6	84.6	82.5	39.6	35.6	1814
Middle	96.3	85.5	88.6	80.6	74.1	60.6	88.9	85.9	45.4	40.7	2003
Fourth	98.2	89.1	92.5	85.0	79.6	68.4	92.1	90.5	55.3	50.2	2171
Richest	99.5	93.6	95.5	90.8	87.7	79.5	96.5	95.3	69.5	64.6	2067
Ethnicity of household head											
Kinh/Hoa	96.9	87.4	89.8	82.9	75.3	64.6	89.9	87.5	50.8	46.3	8456
Ethnic Minorities	79.9	65.2	67.9	59.8	53.9	43.2	69.5	65.3	29.4	25.9	1371

[1]MICS Indicator 9.1, MDG Indicator 6.3 - Knowledge about HIV prevention among young women

One indicator that is a key part of the MDGs and Global AIDS Response Progress Reporting (GARPR, formerly UNGASS) is the percentage of young people who have comprehensive and correct knowledge about HIV prevention and transmission. This is defined as: 1) knowing that consistent use of a condom during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, 2) knowing that a healthy looking person can have HIV and 3) rejecting the two most common local misconceptions about transmission/prevention of HIV. In Viet Nam MICS 2014, all women who have heard of AIDS were asked questions on these three components and the results are detailed in Table HA.1.

In Viet Nam, the vast majority of women (94.5 per cent) aged 15-49 years had heard of HIV/AIDS. However, the percentage of those who knew both of the main ways to prevent HIV transmission - having only one faithful uninfected sex partner and using a condom every time - was 79.7 per cent. About 84.3 per cent knew about having one faithful, uninfected sex partner and 86.7 per cent knew about using a condom every time as a main way to prevent HIV transmission.

The proportions of women who knew both the main ways to prevent HIV transmission in three regions, the Central Highlands (70.7 per cent), North Central and Central coastal area (71.8 per cent) and Northern Midlands and Mountainous area (74.6 per cent) were lower than the country average (79.7 per cent). This proportion was highest in the Red River Delta (90.8 per cent). The proportions of women who knew both the main ways to prevent HIV transmission, in rural areas (77.8 per cent) as well as women aged 40-49 (76.0 per cent) were lower than in urban areas and younger women, respectively. Women with higher levels of education and those in higher wealth index quintiles knew more about the main ways to prevent HIV transmission. There was a relatively large difference between non-educated and poorest women, compared to tertiary-educated and richest women, respectively.

Table HA.1 also presents the percentage of women who could correctly identify misconceptions concerning HIV/AIDS. The indicator was based on the two most common and relevant misconceptions in Viet Nam, that HIV could be transmitted by mosquito bites and sharing food with someone with HIV. The table also provides information on whether women knew HIV could not be transmitted by supernatural means.

Overall, just under half (47.8 per cent) of women rejected the two most common misconceptions that HIV could be transmitted by mosquito bites and sharing food with someone with HIV and knew a healthy looking person could be HIV-positive. About 61.6 per cent of women knew that HIV could not be transmitted by mosquito bite and 84.4 per cent of women knew that HIV could not be transmitted by sharing food with someone who was HIV-positive, while 72.3 per cent of women knew that a healthy looking person could be HIV-positive.

The proportions of women who rejected the two most common misconceptions were lower in four regions than the country average. These regions were the Mekong River Delta (36.8 per cent), North Central and Central coastal area (39.5 per cent), Northern Midlands and Mountainous area (40.3 per cent) and Central Highlands (41.6 per cent). Women from rural areas, those older, ever married/in union women, lower educated, from lower wealth index quintiles and ethnic minorities were also less likely to reject the two most common misconceptions and recognize a healthy looking person could be HIV-positive.

Finally, Table HA.1 provides information on comprehensive knowledge about HIV prevention. Women who have comprehensive knowledge about HIV prevention include those who knew of the two main ways of HIV prevention, who knew that a healthy looking person could be HIV-positive and who rejected the two most common misconceptions. Comprehensive knowledge of HIV/AIDS prevention methods and transmission was fairly low although there

were differences by region, area, education, wealth index quintiles and ethnicity. Overall, 43.4 per cent of women were found to have comprehensive knowledge. Four regions with the proportions lower than the country average are the Northern Midlands and Mountainous area (36.3 per cent), North Central and Central coastal area (33.7 per cent), Central Highlands (36.7 per cent) and Mekong River Delta (33.6 per cent), while the proportion is lowest for the Mekong River Delta among all regions. The proportions of women who have comprehensive knowledge about HIV prevention were lower for rural area, older, ever married/in union, lower educated, lower wealth Index quintile and ethnic minority women.

Table HA.2: 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, Viet Nam, 2014

	Percentage of women aged 15-49 who have heard of AIDS and:						
	Know HIV can be transmitted from mother to child:					Do not know any of the specific means of HIV transmission from mother to child	Number of women aged15-49
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1]		
Total	**88**	**73.9**	**53.3**	**90.6**	**46.8**	**3.9**	**9827**
Region							
Red River Delta	94	85.4	58.1	96	54.6	2.5	2221
Northern Midlands and Mountainous area	82.9	70.4	46.8	85.5	41.7	4.3	1325
North Central and Central coastal area	85.1	69.6	46.1	87.4	40.1	4.2	2082
Central Highlands	84.2	68	42.6	85.6	37.8	5.9	619
South East	90	74.1	57.2	93.2	49.1	3.6	1768
Mekong River Delta	87.2	68.9	60.5	90.4	49.6	4.8	1811
Area							
Urban	91	76.6	52.5	94	46.2	3	3259
Rural	86.6	72.5	53.7	88.9	47.1	4.4	6568
Age group							
15-24	90.6	75.8	55.9	93	49.3	2.8	2707
15-19	89.7	75.3	55.4	92.4	48.8	3.3	1374
20-24	91.5	76.4	56.5	93.7	49.8	2.3	1333
25-29	89.3	76.1	55.6	93.4	46.9	3.4	1359
30-39	87.4	73.2	51.1	90.2	44.5	4.1	2929
40-49	85.7	71.5	52.1	87.2	46.9	5.2	2832
Marital status							
Ever married/in union	87.1	73	52.8	89.6	46.2	4.2	7519
Never married/in union	91	76.6	55	93.7	48.8	3.2	2308

	Percentage of women aged 15-49 who have heard of AIDS and:						
	Know HIV can be transmitted from mother to child:					Do not know any of the specific means of HIV transmission from mother to child	Number of women aged15-49
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1]		
Education							
None	44.4	36.4	32.2	45.5	28.1	11.3	475
Primary	77.1	61.9	52.8	79.8	44.7	8.9	1483
Lower Secondary	90.1	75.3	55.5	92.4	49.2	3.8	3516
Upper Secondary	94.4	78.5	53.9	97.1	46.5	1.6	2382
Tertiary	95.4	83.7	54.3	98.4	49.1	1.5	1971
Wealth Index quintiles							
Poorest	71.9	59	48.2	74.5	41.5	7.6	1773
Second	88.6	71.7	55.7	90.3	48.9	4.3	1814
Middle	89.9	75.9	56.6	92.7	48.8	3.6	2003
Fourth	92.4	77.7	52.9	95.2	46.7	3	2171
Richest	95	82.4	53	97.7	47.7	1.8	2067
Ethnicity of household head							
Kinh/Hoa	90.8	76	54.2	93.3	47.6	3.6	8456
Ethnic Minorities	71.2	61	48.1	73.7	42.1	6.2	1371

[1] MICS Indicator 9.2 - Knowledge of mother-to-child transmission of HIV

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 of the baby. Women should know that HIV could be transmitted during pregnancy, during delivery and through breastfeeding. The level of knowledge among women aged 15-49 years concerning mother-to-child transmission is presented in Table HA.2. Overall, 90.6 per cent of women aged 15-49 years know that HIV can be transmitted from mother to child. The percentage of women who know all three ways of mother-to-child transmission was 46.8 per cent, while 3.9 per cent of women did not know any specific ways

A clear differential was observed with regards to educational levels for women, with just 28.1 per cent of non-educated women knowing HIV could be transmitted from mother to child by all three means against 49.1 per cent for tertiary-educated ones.

The percentage of women aged 15-49 years who know that HIV can be transmitted from mother to child (i.e., at least one of the three means) was lower in the Northern Midlands and Mountainous area and Central Highlands, and was highest in the Red River Delta. Women below the age of 40 years, those in urban areas, with higher education, richer women and Kinh/Hoa women were more aware that HIV can be transmitted from mother to child than other women.

Nationally, some 88 per cent of women from 15-49 years old knew that HIV could be transmitted during pregnancy and 73.9 per cent knowing HIV could be transmitted during delivery and 53.3 per cent knew HIV could be transmitted through breastfeeding

The percentage of women who did not know any specific means of HIV transmission from mother to child was highest among non-educated women (11.3 per cent) and those from the poorest wealth index quintile (7.6 per cent) and lowest among the tertiary educated (1.5 per cent) and women from the richest wealth index quintile (1.8 per cent).

Accepting Attitudes towards People Living with HIV

Indicators on attitudes towards people living with HIV measure stigma and discrimination in the community. Stigma and discrimination were considered low if respondents reported an accepting attitude to the following four questions: 1) would care be provided for a family member who is living with HIV in the home, 2) would fresh vegetables be bought from a vendor who is HIV-positive, 3) should a HIV-positive female teacher be allowed to teach at school and 4) would not keep a family member's HIV-positive status secret. Viet Nam MICS 2014 included two further questions: 5) should a child with HIV, but not sick be allowed to continue schooling and 6) should a child who has a parent with HIV be allowed to continue schooling?

Table HA.3: Accepting attitudes toward people living with HIV

Percentage of women aged 15-49 years who have heard of AIDS who express an accepting attitude towards people living with HIV, Viet Nam, 2014

	Percentage of women who:										
	Are willing to care for a family member with the HIV virus in own home	Would buy fresh vegetables from a shopkeeper or vendor who has the HIV virus	Believe that a female teacher with the HIV virus and is not sick should be allowed to continue teaching	Would not want to keep secret that a family member got infected with the HIV virus	Agree with at least one accepting attitude	Express accepting attitudes on first four indicators[1]	Believe that a child with the HIV virus and is not sick should be allowed to continue schooling	Believe that a child who has parent with the HIV virus should be allowed to continue schooling	Agree with at least one accepting attitude over six questions	Express accepting attitudes on all six indicators[1]	Number of women aged 15-49 who have heard of AIDS
Total	**94.7**	**68.2**	**72.2**	**50.4**	**99.1**	**30.0**	**80.1**	**91.6**	**99.6**	**14.5**	**9288**
Region											
Red River Delta	97.5	77.3	81.1	50.0	99.7	35.7	87.7	95.0	100	11.8	2188
Northern Midlands and Mountainous area	92.4	69.5	74.7	58.5	98.6	34.9	82.9	91.1	99.5	14.7	1190
North Central and Central coastal area	94.2	65.4	67.2	56.3	99.3	31.7	75.7	90.0	99.6	14.5	1906
Central Highlands	91.3	62.3	68.7	54.4	97.6	28.5	71.7	88.8	99.0	14.2	567
South East	94.8	71.0	71.2	42.1	99.1	25.7	81.1	92.7	99.6	15.6	1712
Mekong River Delta	94.4	57.9	66.6	45.9	98.7	22.3	75.0	88.9	99.2	16.6	1724
Area											
Urban	95.6	72.5	74.2	46.1	99.1	29.2	82.7	93.5	99.6	15.1	3159
Rural	94.3	66.0	71.1	52.7	99.1	30.4	78.7	90.6	99.6	14.1	6129
Age											
15-24	95.7	71.1	78.6	47.3	99.4	30.5	83.4	93.7	99.7	14.8	2593
15-19	95.6	71.9	82.1	47.3	99.7	31.7	85.6	94.5	99.8	14.5	1315
20-24	95.8	70.3	74.9	47.2	99.1	29.3	81.2	93.0	99.6	15.1	1278
25-29	96.2	69.9	71.4	48.4	99.1	28.7	80.7	91.7	99.7	13.5	1316
30-39	93.9	69.9	72.1	50.7	99.1	30.6	80.7	91.7	99.7	14.6	2763
40-49	94.0	62.6	66.3	54.3	98.7	29.5	75.8	89.2	99.2	14.6	2616

	Percentage of women who:										Number of women aged 15-49 who have heard of AIDS
	Are willing to care for a family member with the HIV virus in own home	Would buy fresh vegetables from a shopkeeper or vendor who has the HIV virus	Believe that a female teacher with the HIV virus and is not sick should be allowed to continue teaching	Would not want to keep secret that a family member got infected with the HIV virus	Agree with at least one accepting attitude	Express accepting attitudes on first four indicators[1]	Believe that a child with the HIV virus and is not sick should be allowed to continue schooling	Believe that a child who has parent with the HIV virus should be allowed to continue schooling	Agree with at least one accepting attitude over six questions	Express accepting attitudes on all six indicators[1]	
Marital status											
Ever married/in union	94.3	66.3	69.1	51.7	99.0	29.4	78.0	90.4	99.5	14.6	7051
Never married/in union	96.0	74.2	81.8	46.4	99.3	31.9	86.5	95.3	99.7	14.1	2237
Education											
None	76.8	25.1	44.7	54.8	94.1	8.4	49.8	71.5	96.6	17.4	270
Primary	91.9	50.1	55.6	48.2	98.2	20.7	65.5	82.4	99.0	15.8	1315
Lower Secondary	94.9	66.4	69.4	53.4	99.3	29.8	78.3	90.9	99.6	14.5	3381
Upper Secondary	96.1	75.2	78.9	50.2	99.3	33.7	86.4	94.9	99.9	14.6	2352
Tertiary	97.2	80.7	83.6	46.3	99.6	35.1	89.4	97.5	99.9	12.9	1970
Wealth Index quintiles											
Poorest	90.4	52.5	60.8	56.1	97.7	25.1	68.1	83.9	98.8	14.9	1455
Second	94.7	63.7	68.4	53.5	99.2	28.6	77.8	90.0	99.6	14.6	1717
Middle	94.8	67.9	72.5	51.1	99.3	30.8	80.6	92.1	99.8	15.0	1928
Fourth	95.6	74.4	77.0	49.3	99.3	32.4	83.1	93.5	99.5	12.4	2132
Richest	97.0	76.8	78.1	44.3	99.5	31.3	86.7	95.8	99.9	15.7	2056
Ethnicity of household head											
Kinh/Hoa	95.7	69.6	73.3	49.1	99.3	30.1	81.1	92.3	99.6	14.6	8192
Ethnic Minorities	87.5	57.5	63.8	60.1	97.3	29.3	72.1	85.8	99.0	13.8	1096

[1] MICS Indicator 9.3 - Accepting attitudes towards people living with HIV

Table HA.3 spotlights women's attitudes towards people living with HIV. In Viet Nam, almost all women 15-49 years old (99.1 per cent) who had heard of HIV/AIDS agreed with at least one accepting attitude over the four original questions or the two additional questions in Viet Nam MICS 2014. The most common accepting attitude was willing to care for a family member with HIV in the home (94.7 per cent), more commonly held by tertiary-educated (97.2 per cent) than non-educated (76.8 per cent) women. In addition, the percentage of women 15-49 years old not inclined to keep secret that a family member is infected with the HIV virus is only 50.4 per cent, but interestingly this rate is higher among ethnic minority (60.1 per cent) than Kinh/Hoa (40.1 per cent). Overall, only 30 per cent of women displayed a favourable attitude to all four and these proportions significantly decreased by education level, 35.1 to 8.4 per cent across the scale.

A large proportion of women believed a child with HIV or a child with a HIV-positive parent should be allowed to continue schooling (80.1 and 91.6 per cent, respectively).

Interestingly, the percentage of women who expressed accepting attitudes in all six indicators was very low (14.5 per cent).

Knowledge of a Place for HIV Testing, Counselling and Testing during Antenatal Care

Another important indicator is knowledge of where to be tested for HIV and use of such services. In order to protect themselves and prevent infecting others, it is important for individuals to know their HIV status. Knowledge of own status is also a critical factor in the decision to seek appropriately HIV/AIDS prevention and treatment.

Table HA.4: Knowledge of a place for HIV testing

Percentage of women aged 15-49 years who know where to get an HIV test, percentage who have ever been tested, percentage who have ever been tested and know the result of the most recent test, percentage who have been tested in the last 12 months, and percentage who have been tested in the last 12 months and know the result, Viet Nam, 2014

	Percentage of women who:					Number of women aged 15-49
	Know a place to get tested[1]	Have ever been tested	Have ever been tested and know the result of the most recent test	Have been tested in the last 12 months	Have been tested in the last 12 months and know the result[2]	
Total	**69.9**	**29.0**	**20.1**	**12.5**	**11.3**	**9827**
Region						
Red River Delta	83.8	35.6	26.5	15.0	14.1	2221
Northern Midlands and Mountainous area	65.3	28.4	19.2	11.9	10.3	1325
North Central and Central coastal area	61.9	18.5	12.4	8.2	7.4	2082
Central Highlands	58.8	17.1	10.9	7.1	6.1	619
South East	80.6	41.6	29.4	18.4	16.9	1768
Mekong River Delta	58.7	25.4	15.8	10.8	9.4	1811

	Percentage of women who:					
	Know a place to get tested[1]	Have ever been tested	Have ever been tested and know the result of the most recent test	Have been tested in the last 12 months	Have been tested in the last 12 months and know the result[2]	Number of women aged 15-49
Area						
Urban	79.8	38.1	28.1	16.3	15.1	3259
Rural	65.0	24.6	16.1	10.6	9.4	6568
Age						
15-24	74.6	19.9	11.9	10.8	9.3	2707
15-19	70.5	7.6	4.5	4.1	3.8	1374
20-24	78.8	32.5	19.5	17.7	15.0	1333
25-29	78.1	43.1	23.3	17.2	15.2	1359
30-39	70.2	36.2	24.9	15.0	13.8	2929
40-49	61.2	23.7	21.3	9.3	8.7	2832
Marital status						
Ever married/in union	68.3	34.0	22.7	14.2	12.8	7519
Never married/in union	75.0	12.9	11.4	7.1	6.4	2308
Education						
None	20.7	9.0	6.1	4.5	3.7	475
Primary	44.1	19.0	12.5	7.4	6.2	1483
Lower Secondary	67.6	26.6	18.1	10.6	9.3	3516
Upper Secondary	80.8	29.0	19.5	12.2	11.1	2382
Tertiary	92.1	46.0	33.4	22.0	20.9	1971
Wealth Index quintiles						
Poorest	42.5	13.9	7.8	5.7	4.4	1773
Second	61.0	21.0	12.3	9.0	7.7	1814
Middle	73.6	25.7	16.9	10.5	9.3	2003
Fourth	78.9	33.1	23.3	14.4	13.0	2171
Richest	88.1	48.1	37.1	21.4	20.6	2067
Ethnicity of household head						
Kinh/Hoa	73.7	31.0	21.7	13.3	12.1	8456
Ethnic Minorities	46.7	17.0	10.0	7.5	6.2	1371

[1] MICS Indicator 9.4 - Women who know where to be tested for HIV

[2] MICS Indicator 9.5 - Women who have been tested for HIV and know the results

Questions related to knowledge of a place to go for HIV testing and whether a person has ever been tested are presented in Table HA.4. It shows that while 69.9 per cent of women aged 15-49 nationally knew where to get tested, only 29 per cent had ever been tested. A lower proportion of women (20.1 per cent) knew the result of their most recent test. Different rates emerged between urban (28.1 per cent) and rural areas (9.4 per cent), tertiary-educated women (33.4 per cent) and non-educated ones (9 per cent), women from richest households (37.1 per cent) and poorest women (7.8 per cent) and Kinh/Hoa (21.7 per cent) and ethnic minorities (10.7 per cent).

Among women aged 15-49 years, 12.5 per cent had tested for HIV in the last 12 months, while 11.3 per cent tested in the last 12 months and knew their result.

Awareness of testing locations was higher among women living in the Red River Delta (83.8 per cent), and lower among those in the Central Highlands and Mekong River Delta (58.8 and 58.7 per cent, respectively). Limited awareness displayed among women with no education (20.7 per cent) and those with primary education (44.1 per cent), contrasted with those with tertiary a education (92.1 per cent). In addition, a large differential was observed between women in the poorest (42.5 per cent) and richest (88.1 per cent) wealth index quintiles as well as between Kinh/Hoa women (73.7 per cent) with ethnic minority ones (46.7 per cent).

The highest proportion of women ever tested for HIV was found in the 25-29 age group (43.1 per cent), followed by those 30-39 years (36.2 per cent) with 32.5 per cent for those aged 20-24 years. Again, those with a tertiary education had a higher percentage of having been ever tested for HIV (46 per cent) than those with no education (9 per cent).

Table HA.5: HIV counseling and testing during antenatal care

Percentage of women aged 15-49 with a live birth in the last two years who received antenatal care from a health professional during the last pregnancy; percentage of women who received HIV counseling; percentage of women who were offered and tested for HIV, percentage of women who were offered, tested and received the results of the HIV test, and percentage of women who received counseling and were offered, accepted and received the results of the HIV test, Viet Nam, 2014

	Percentage of women who:					
	Received antenatal care from a health care professional for last pregnancy	Received HIV counseling during antenatal care[1]	Were offered an HIV test and were tested for HIV during antenatal care	Were offered an HIV test and were tested for HIV during antenatal care, and received the results[2]	Received HIV counseling, were offered an HIV test, accepted and received the results	Number of women aged 15-49 with a live birth in the last two years
Total	**95.8**	**29.3**	**32.4**	**30.0**	**18.9**	**1464**
Region						
Red River Delta	98.6	26.6	31.6	30.2	17.8	343
Northern Midlands and Mountainous area	82.7	19.2	15.9	13.1	6.3	230
North Central and Central coastal area	99.1	19.6	17.7	16.1	7.2	300
Central Highlands	89.9	14.2	12.7	9.8	6.5	109
South East	99.3	50.3	68.6	65.7	43.6	242
Mekong River Delta	99.4	40.4	40.0	36.5	27.8	239
Area						
Urban	99.1	36.1	45.4	42.2	25.8	428
Rural	94.4	26.5	27.0	25.0	16.0	1037
Age						
15-24	92.7	26.4	23.7	21.7	15.3	457
15-19	90.6	26.8	22.1	21.8	13.0	79
20-24	93.1	26.3	24.1	21.7	15.7	378

	Percentage of women who:					Number of women aged 15-49 with a live birth in the last two years
	Received antenatal care from a health care professional for last pregnancy	Received HIV counseling during antenatal care[1]	Were offered an HIV test and were tested for HIV during antenatal care	Were offered an HIV test and were tested for HIV during antenatal care, and received the results[2]	Received HIV counseling, were offered an HIV test, accepted and received the results	
25-29	97.1	29.9	32.0	29.9	18.1	480
30-39	98.0	31.8	41.4	38.5	23.4	494
40-49	(86.6)	(22.3)	(23.1)	(19.3)	(12.2)	33
Marital status						
Ever married/in union	95.8	29.3	32.4	30.1	18.9	1461
Never married/in union	*	*	*	*	*	3
Education						
None	57.4	6.3	6.5	2.9	2.0	67
Primary	93.5	23.1	24.2	22.2	13.0	182
Lower Secondary	96.8	26.7	26.7	25.3	17.2	529
Upper Secondary	99.4	34.2	38.1	34.6	21.5	340
Tertiary	99.4	36.0	44.6	42.1	25.1	347
Wealth Index quintiles						
Poorest	81.3	13.3	11.2	8.7	6.1	294
Second	98.3	25.9	22.9	20.5	11.2	288
Middle	99.7	32.4	36.6	34.9	20.8	292
Fourth	100	32.8	38.7	36.5	24.5	314
Richest	99.7	42.5	53.2	50.1	32.2	275
Ethnicity of household head						
Kinh/Hoa	99.2	32.0	36.8	34.4	21.8	1215
Ethnic Minorities	79.0	15.8	10.9	8.5	4.8	250

[1] **MICS Indicator 9.7 - HIV counseling during antenatal care**

[2] **MICS Indicator 9.8 - HIV testing during antenatal care**

Note:

Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

Figures shown in parenthesis are based on denominators of 25-49 unweighted cases=

Among women aged 15-49 years who had given birth within the two years preceding the survey, the percentage who received counselling and HIV testing during antenatal care is presented in Table HA.5.

Of those who received antenatal care (95.8 per cent), just 29.3 per cent received HIV counselling. In addition, 32.4 per cent of women were offered and tested for HIV during antenatal care and these proportions were higher among those aged 25-29 and 30-39 years compared to other age groups. Notable differences were found between household wealth index quintiles, with 13.3 per cent of women in the lowest wealth quintile who received HIV counselling during antenatal care compared to 42.5 per cent of those in the highest wealth quintile; and 11.2 per cent of women in the lowest wealth quintile were offered an HIV test and were tested during antenatal care compared to 53.2 per cent of those in the highest wealth quintile. Furthermore, differences were also observed between levels of education, with 6.3 per cent of women with no education who received HIV counselling during antenatal care compared to 36.0 per cent of those with a tertiary education, 6.5 per cent of women with no education were offered an HIV test and were tested during antenatal care compared to 44.6 per cent of those with a tertiary education. Moreover, women in the South East and Mekong River Delta regions had the highest percentages of HIV counselling during antenatal care (50.3 and 40.4 per cent, respectively). Overall, just 18.9 per cent of women aged 15-49 years received HIV counseling, were offered an HIV test, accepted and received the result. This rate was different between regions (6.5 per cent in the Central Highlands against 43.6 per cent in the South East) and between wealth index quintiles (6.1 per cent of poorest women compared to 32 per cent of richest women). Importantly, this rate among ethnic minority women was only one-fifth of that of Kinh/Hoa women.

HIV Indicators for Young Women

In many countries, more than half of new adult HIV infections are among young people aged 15-24 years. Thus, a change in behaviour among members of this age group is especially important to reduce new infections. The next table presents specific information on this age group.

Table HA.7: Key HIV and AIDS indicators (young women)

Percentage of women aged 15-24 years by key HIV and AIDS indicators, Viet Nam, 2014

	Percentage of women aged 15-24 years who:					Number of women aged 15-24 years	Percentage who express accepting attitudes towards people living with HIV on first four questions[a]	Percentage who express accepting attitudes towards people living with HIV on all six questions	Number of women aged 15-24 years who have heard of HIV/AIDS
	Have comprehensive knowledge[1]	Know all three means of HIV transmission from mother to child	Know a place to get tested for HIV	Have been tested for HIV and know the result	Have been tested in the last 12 months and know the result				
Total	**49.3**	**49.3**	**74.6**	**11.9**	**9.3**	**2707**	**30.5**	**14.8**	**2593**
Region									
Red River Delta	63.0	57.6	86.7	14.9	10.1	609	33.5	12.2	600
Northern Midlands and Mountainous area	39.2	42.9	69.3	12.1	9.9	367	32.9	15.7	325
North Central and Central coastal area	41.0	41.8	68.1	7.7	6.8	615	34.0	15.5	584
Central Highlands	40.3	44.3	61.2	6.0	4.4	206	29.3	14.2	198
South East	54.7	51.7	83.2	16.0	12.6	472	25.8	14.5	459
Mekong River Delta	49.0	53.2	68.4	11.7	10.0	439	25.2	17.3	428
Area									
Urban	53.6	46.7	80.2	12.7	9.6	868	25.7	16.1	847
Rural	47.4	50.5	72.0	11.5	9.2	1839	32.8	14.2	1746
Age									
15-19	50.5	48.8	70.5	4.5	3.8	1374	31.7	14.5	1315
15-17	48.1	47.5	68.1	2.4	1.2	900	32.3	14.4	861
18-19	55.2	51.1	75.1	8.6	8.6	474	30.6	14.7	453
20-24	48.1	49.8	78.8	19.5	15.0	1333	29.3	15.1	1278
20-22	47.5	49.9	78.8	19.0	14.6	788	30.7	15.5	753
23-24	49.1	49.6	78.9	20.2	15.6	544	27.1	14.5	525

	Percentage of women aged 15-24 years who:					Number of women aged 15-24 years	Percentage who express accepting attitudes towards people living with HIV on first four questions[a]	Percentage who express accepting attitudes towards people living with HIV on all six questions	Number of women aged 15-24 years who have heard of HIV/AIDS
	Have comprehensive knowledge[1]	Know all three means of HIV transmission from mother to child	Know a place to get tested for HIV	Have been tested for HIV and know the result	Have been tested in the last 12 months and know the result				
Marital status									
Ever married/in union	38.3	48.4	72.6	16.8	17.6	853	25.3	16.6	786
Never married/in union	54.4	49.7	75.5	9.6	5.5	1854	32.7	14.0	1807
Education									
None	3.4	30.0	23.1	3.2	2.4	71	(5.3)	(15.9)	31
Primary	13.0	36.5	38.4	6.4	2.2	115	19.9	15.6	88
Lower Secondary	32.5	51.5	64.5	8.7	9.5	611	24.1	16.2	580
Upper Secondary	53.0	48.1	76.9	8.5	6.6	1204	32.7	15.1	1188
Tertiary	68.2	53.3	90.5	22.3	15.6	706	34.4	12.9	706
Wealth Index quintiles									
Poorest	29.8	46.9	50.3	5.9	4.3	518	25.9	14.5	440
Second	47.6	51.5	70.0	11.3	9.2	508	32.4	14.2	491
Middle	51.3	50.1	81.6	8.5	8.6	581	34.7	15.2	571
Fourth	52.8	46.9	83.5	14.6	12.8	605	32.6	13.3	600
Richest	65.1	51.4	85.7	19.4	11.2	494	25.3	17.0	491
Ethnicity of household head									
Kinh/Hoa	53.2	50.2	78.7	12.8	9.9	2264	30.4	15.2	2224
Ethnic Minorities	29.5	44.5	53.7	7.0	6.3	443	31.1	12.3	369

[1] **MICS Indicator 9.1, MDG Indicator 6.3 - Knowledge about HIV prevention among young women**

a Refer to Table HA.3 for the four indicators.

Note: Figures shown in parenthesis are based on denominators of 25-49 unweighted cases

Table HA.7 summarizes information on key HIV indicators for young women aged 15-24 years. Results with respect to comprehensive knowledge on HIV/AIDS (49.3 per cent), knowledge of mother-to-child transmission (49.3 per cent) and knowledge of a place to get tested (74.6 per cent) were generally better in this age group than those aged 15-49 years.

Accepting attitudes towards people living with HIV with respect to the same four questions were similar in this age group (30.5 per cent) to those aged 15-49 years (30 per cent – Table HA.3). The percentage of young women who expressed accepting attitudes towards people living with HIV in all six questions only decreased by 14.8 per cent nationally. This rate differed little across regions, areas, education levels, age, marital status, wealth index quintiles and ethnicity.

Overall, 9.3 per cent of women aged 15-24 years have been tested for HIV in the last 12 months and knew the result.

Differentials in comprehensive knowledge were observed in education and household wealth status among women aged 15-24 years. Overall, just 13 per cent of women with primary education had comprehensive knowledge of HIV/AIDS against 68.2 per cent of those with tertiary education. Women in the poorest wealth quintile (29.8 per cent) were outscored by those in the richest wealth quintile (65.1 per cent). This rate has considerably difference between young Kinh/Hoa women (53.2 per cent) and ethnic minority women (29.5 per cent)

Of the 11.9 per cent of women aged 15-24 who have ever tested for HIV and knew the result, the proportion was higher among ever-married women (16.8 per cent) than never married (9.6 per cent).

Furthermore, 9.3 per cent of women aged 15-24 years tested for HIV in the last 12 months and knew the result. The proportion was the highest among women living in the South East (12.6 per cent) and lowest in the Central Highlands (4.4 per cent).

Orphans

Children who are orphaned may be at increased risk of neglect or exploitation when the parents are not available to assist them. Monitoring the variations in different outcomes for orphans and comparing them to their peers gives us a measure of how well communities and governments are responding to their needs. Table HA. 9 presents information on the orphanhood status of children aged 10-14 years. Overall, 0.5 per cent of children aged 10-14 years in Viet Nam were orphaned. Since the number of orphans is small (n=15), it is impossible to analyze orphans by characteristics such as sex, urban/rural or school attendance.

Table HA.9 Orphanhood status of children aged 10-14 years

	Percentage of children whose mother and father have died (orphans)	Percentage of children whose parents are still alive and who are living with at least one parent (non-orphans)	Number of children aged 10-14 years	Percentage of children whose mother and father have died (orphans) and are attending school	Total number of orphan children aged 10-14 years	Percentage of children whose parents are still alive, who are living with at least one parent (non-orphans), and who are attending school	Total number of non-orphan children aged 10-14 years	Orphans to non-orphans school attendance ratio[1]
Total	**0.5**	**90.6**	**3010**	*	**15**	**95.1**	**2727**	*
Sex								
Male	0.6	90.3	1550	*	9	95.0	1400	*
Female	0.4	90.9	1460	*	6	95.3	1327	*
Area								
Urban	0.4	90.4	896	*	3	97.6	810	*
Rural	0.6	90.7	2115	*	12	94.1	1918	*

[1] **MICS Indicator 9.16, MDG Indicator 6.4 - Ratio of school attendance of orphans to school attendance of non-orphans**

See Table CP.14 for further overall results related to children's living arrangements and orphanhood.

Note: Figures denoted by an asterisk are based on denominators of less than 25 unweighted cases

CHAPTER XIII

ACCESS TO MASS MEDIA AND USE OF INFORMATION/ COMMUNICATION TECHNOLOGY

XIII. ACCESS TO MASS MEDIA AND USE OF INFORMATION/ COMMUNICATION TECHNOLOGY

The Viet Nam MICS 2014 collected information on exposure to mass media, use of mobile phones, computers and the internet. In particular, women aged 15-49 years were surveyed on exposure to newspapers/magazines, radio and television as well as use of mobile phones, while the focus was narrowed to use of computers and the internet for those aged 15-24.

Access to Mass Media

The proportion of women who read a newspaper or magazine, listen to the radio and watch television at least once a week is shown in Table MT.1.

In Viet Nam, 36.6 per cent of women read a newspaper or magazine, 27.6 per cent listen to the radio and 95.3 per cent watch television at least once a week. Overall, 3.5 per cent did not have regular exposure to any of the three media, while 96.5 per cent were exposed to any media at least once a week. Only 13.2 per cent of women were exposed to all three types of media on a weekly basis.

Table MT.1: Exposure to mass media

Percentage of women aged 15-49 years who are exposed to specific mass media on a weekly basis, Viet Nam MICS 2014

	Percentage of women aged 15-49 years who:			All three media at least once a week[1]	Any media at least once a week	None of the media at least once a week	Percentage of women aged 15-49 who:			Number of women aged 15-49 years
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week				Own a mobile phone or use one as if was theirs[2]	Used their mobile phone to read or write SMS messages	Read or write SMS messages at least once a week	
Total	**36.6**	**27.6**	**95.3**	**13.2**	**96.5**	**3.5**	**81.9**	**63.6**	**51.3**	**9827**
Age										
15-19	50.9	28.8	94.9	18.1	96.9	3.1	72.3	70.4	66.1	1374
20-24	51.1	28.8	93.9	17.7	96.3	3.7	89.0	83.7	76.9	1333
25-29	43.6	23.8	95.7	13.4	97.0	3.0	88.5	79.8	66.6	1359
30-34	38.5	28.4	95.9	13.7	96.5	3.5	88.4	71.4	53.4	1539
35-39	27.4	30.3	95.0	11.2	96.1	3.9	82.2	58.7	42.4	1391
40-44	25.3	26.4	95.8	9.4	96.5	3.5	79.0	48.4	34.0	1442
45-49	20.4	26.7	95.6	9.1	96.1	3.9	73.5	33.8	21.8	1390
Region										
Red River Delta	44.2	30.9	97.7	16.5	98.7	1.3	90.7	75.8	61.5	2221
Northern Midlands and Mountainous area	26.7	22.4	89.9	9.1	91.1	8.9	74.1	58.7	47.5	1325
North Central and Central coastal area	33.4	29.2	95.3	12.1	96.7	3.3	79.5	58.5	45.8	2082
Central Highlands	25.8	13.9	91.9	5.2	93.0	7.0	63.4	50.2	37.0	619
South East	54.2	24.6	96.5	17.4	97.9	2.1	88.3	71.5	62.7	1768
Mekong River Delta	24.5	33.2	96.3	11.9	97.2	2.8	79.5	54.8	41.9	1811
Area										
Urban	57.5	27.6	96.5	18.2	98.1	1.9	89.6	77.5	66.9	3259
Rural	26.2	27.6	94.7	10.7	95.6	4.4	78.0	56.7	43.6	6568

	Percentage of women aged 15-49 years who:			All three media at least once a week[1]	Any media at least once a week	None of the media at least once a week	Percentage of women aged 15-49 who:			Number of women aged 15-49 years
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week				Own a mobile phone or use one as if was theirs[2]	Used their mobile phone to read or write SMS messages	Read or write SMS messages at least once a week	
Education										
None	0.2	12.0	71.4	0.0	72.3	27.7	34.4	1.3	0.4	475
Primary	6.7	19.2	92.1	2.3	93.4	6.6	68.0	31.2	17.9	1483
Lower Secondary	19.0	28.6	97.1	7.5	97.9	2.1	82.0	57.4	39.6	3516
Upper Secondary	50.2	30.9	97.7	19.0	98.6	1.4	85.5	77.5	66.5	2382
Tertiary	82.6	31.8	97.4	27.6	99.5	0.5	99.3	97.3	91.4	1971
Wealth Index quintiles										
Poorest	9.8	19.4	84.2	3.0	86.4	13.6	55.6	34.1	23.4	1773
Second	17.7	29.4	97.2	8.2	97.8	2.2	77.0	49.7	36.9	1814
Middle	29.4	29.5	97.0	12.1	98.4	1.6	85.2	64.4	49.6	2003
Fourth	44.6	30.1	98.4	17.2	99.2	0.8	91.8	74.9	61.3	2171
Richest	74.7	28.5	98.2	23.1	99.3	0.7	95.1	88.5	79.2	2067
Ethnicity of household head										
Kinh/Hoa	39.9	29.2	96.9	14.6	98.1	1.9	85.9	67.5	54.7	8456
Ethnic Minorities	16.3	17.6	85.2	4.6	86.6	13.4	56.8	39.4	30.7	1371

[1] MICS Indicator 10.1 - Exposure to mass media

[2] MICS Indicator 10.S1 - Use of mobile phones

Women under the age of 25 were more likely than older women to report exposure to all three types of mass media. Strong differentials by area, education and wealth index quintile were observed for exposure to all types of media, primarily due to differentials in exposure to print media and radio.

Exposure of women to all three forms of mass media was greatest in the South East (17.4 per cent) and Red River Delta (16.5 per cent), triple that of the lowest area is the Central Highlands (5.2 per cent). Larger proportions of women were exposed to all three media types in urban areas (18.2 per cent) than in rural areas (10.7 per cent). Women with higher education levels and in richer wealth index quintile households were more exposed to all three media types. Kinh/Hoa women had triple the exposure to all three media types than ethnic minority women (14.6 per cent compared to 4.6 per cent).

Mobile Telephone Use

The results of Viet Nam MICS 2014, in which mobile telephone use was Viet Nam survey specific, reveal that the majority (92.5 per cent) of households used mobile phones (Table HH.7). From Table MT.1 of the surveyed women aged 15-49, 81.9 per cent owned or used a mobile telephone, with 63.6 per cent having used them to read or write SMS messages and 51.3 per cent did so at least once a week.

Regarding regional disparities in the ownership or usage of mobile phones, it was more common (90.7 per cent) for women in the Red River Delta compared to the other regions. The Central Highlands region had the least percentage (63.4 per cent) of women owning and using mobile phones. Almost all tertiary-educated women and those from the richest wealth index quintile own a mobile phone, against 34.4 per cent of those non-educated and 55.6 per cent from the poorest wealth index quintile. A little over half (56.8 per cent) of ethnic minority women own and use mobile phones compared to 85.9 per cent of Kinh/Hoa women.

Almost all tertiary-educated women and those from the richest wealth index quintile own a mobile phone, against 34.4 per cent of those non-educated and 55.6 per cent from the poorest wealth index quintile.

Use of Information/Communication Technology

The questions on computer and internet use were only asked to 15-24 year old women. As shown in Table MT.2, 74.3 per cent of 15-24 year old women have ever used a computer, 63.3 per cent used a computer during the last year preceding the survey and 48.4 per cent used one at least once a week during the last month preceding the survey. Overall, 72.2 per cent of women aged 15-24 have used the internet, while 66.7 per cent did so during the last year before the survey. The proportion of young women who used the internet more frequently, at least once a week during the last month, was smaller at 55.1 per cent.

As expected, both the computer and internet use during the last 12 months was more widespread among 15-19 year old women. Such use of computers and the internet was also strongly associated with area, education and wealth.

Higher utilization of computers and the internet was observed among young women in urban areas (87.4 per cent and 87.3 per cent, respectively) compared to those in rural areas (68.1 per cent and 65.2 per cent). The use of computers and the internet during the last year was greatest in the Red River Delta (89.2 per cent and 82.0 per cent) and lowest in the Northern Midlands and Mountainous area (50.9 per cent and 45.9 per cent). The level of computer and internet use increased with higher education levels. Only 7.6 per cent and 6.0 per cent of women with a primary education reported having used a computer and the internet during the last year, while almost all tertiary-educated women used a computer (94.9 per cent) and internet (95.7

per cent). Almost all young women of the richest wealth index quintile used computers and the internet (97.3 per cent and 96.5 per cent) in comparison with only one-fourth of women in the poorest index quintile households (23.6 per cent and 25.4 per cent). More than double the percentage of Kinh/Hoa women used computers and the internet during the last year than ethnic minority women (70.3 per cent and 70.4 per cent in comparison with 27.5 per cent and 29.3 per cent).

Table MT.2: Use of computers and internet

Percentage of young women aged 15-24 years who have ever used a computer and the internet, percentage who have used during the last 12 months, and percentage who have used at least once weekly during the last one month, Viet Nam, 2014

	Percentage of women aged 15-24 years who have:						Number of women aged 15-24 years
	Ever used a computer	Used a computer during the last 12 months[1]	Used a computer at least once a week during the last one month	Ever used the internet	Used the internet during the last 12 months[2]	Used the internet at least once a week during the last one month	
Total	**74.3**	**63.3**	**48.4**	**72.2**	**66.7**	**55.1**	**2707**
Age							
15-19	80.1	71.5	52.5	76.3	72.5	57.0	1374
20-24	68.3	54.9	44.2	68.1	60.6	53.1	1333
Region							
Red River Delta	89.2	79.8	62.4	86.9	82.0	68.0	609
Northern Midlands and Mountainous area	50.9	41.0	26.6	51.8	45.9	34.5	367
North Central and Central coastal area	76.9	65.8	48.3	75.1	69.7	56.3	615
Central Highlands	61.6	49.0	32.4	56.7	49.3	35.5	206
South East	85.0	74.9	66.0	84.4	78.8	71.5	472
Mekong River Delta	64.2	49.7	36.0	59.1	53.8	44.0	439
Area							
Urban	87.4	80.5	68.2	87.3	83.5	74.2	868
Rural	68.1	55.2	39.1	65.2	58.8	46.0	1839
Education							
None	0.0	0.0	0.0	0.0	0.0	0.0	71
Primary	11.1	7.6	1.3	13.4	11.2	6.0	115
Lower Secondary	40.5	24.7	14.0	43.0	34.3	23.8	611
Upper Secondary	87.7	73.3	51.5	82.3	75.3	58.2	1204
Tertiary	98.4	94.9	85.4	97.3	95.7	90.2	706
Wealth Index quintiles							
Poorest	35.8	23.6	11.6	30.0	25.4	14.6	518
Second	65.1	49.2	29.5	63.6	53.8	36.6	508
Middle	81.2	67.1	48.2	79.9	72.2	59.9	581
Fourth	89.5	80.7	64.4	87.3	83.1	71.2	605
Richest	97.5	93.7	87.1	97.9	96.5	90.9	494
Ethnicity of household head							
Kinh/Hoa	81.2	70.3	54.9	79.7	74.0	62.1	2264
Ethnic Minorities	39.2	27.5	15.4	34.0	29.3	19.0	443

[1] Chỉ tiêu MICS 10.2 - Sử dụng máy vi tính

[2] Chỉ tiêu MICS 10.3 - Sử dụng internet

APPENDIX

APPENDIX A. SAMPLE DESIGN

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

The primary objective of the sample design for the Viet Nam MICS 2014 (MICS5) was to produce statistically reliable estimates of most indicators, at the national level, for urban and rural areas, and for six regions: Red River Delta, Northern Midlands and Mountainous areas, North Central and Central coastal areas, Central Highlands, South East and Mekong River Delta of the country. Urban and rural areas in each of the six regions were defined as the sampling strata.

A multi-stage, stratified cluster sampling approach was used for the selection of the survey sample.

Sample Size and Sample Allocation

The sample size for Viet Nam MICS 2014 was calculated as 10,200 households. In the case of Viet Nam MICS 2011 (MICS4), the indicator used for the calculation of the sample size was the underweight prevalence among children under 5 years old. Since this indicator was not included in Viet Nam MICS 2014, the following seven different indicators were chosen instead for calculating the sample size:

1. Use of improved sanitation facilities
2. Contraceptive prevalence
3. Comprehensive knowledge about HIV prevention
4. Complete antenatal care
5. Age-appropriate breastfeeding
6. Vitamin A supplementation
7. Early childhood education attendance.

A simulation exercise to determine the level of precision expected for these seven indicators based on alternative sample sizes, using Viet Nam MICS 2011 results, was conducted with the assumption that the sample design for Viet Nam MICS 2014 would be similar to that for Viet Nam MICS 2011.

The approximate sampling errors for the Viet Nam MICS 2014 estimates were calculated as follows:

$$se_{MICS5} \approx se_{MICS4} \sqrt{\frac{n_{MICS4}}{n_{MICS5}}}$$

se_{MICS5} = estimated approximate standard error for a particular indicator and domain from Viet Nam MICS 2014 data based on the proposed sample size

se_{MICS4} = actual standard error for estimate from Viet Nam MICS 2011, presented in Appendix C of the final report

n_{MICS4} = number of observations (unweighted number of sample households or persons) in Viet Nam MICS 2011 for the particular domain of the estimate

n_{MICS5} = expected number of observations (sample households or persons) in Viet Nam MICS 2014 for the particular domain of the estimate, based on the proposed sample size.

The formula defined above was used to simulate the standard errors and corresponding margins of error for the seven selected indicators at the national level, urban and rural, and by region, based on four alternative sample sizes per region: 1,600, 1,700, 1,800 and 2,000 households.

Following this exercise, 1,700 households were selected as the sample size needed in each region – thus yielding 10,200 in total. The number of households selected per cluster for the Viet Nam MICS 2014 was determined as 20 households, based on a number of considerations, including the design effect, available budget and time needed for a team to complete the data collection in one cluster. By dividing the total number of households by the number of sample households per cluster, it was calculated that 85 sample clusters would need to be selected in each region.

Equal allocation of the total sample size to the six regions was used. Therefore, 85 clusters were allocated to each region, with the final sample size calculated at 10,200 households (85 clusters * 6 regions * 20 sample households per cluster). In each region, except the South East region, the clusters (primary sampling units) were distributed to the urban and rural domains using a weighting factor of 1.7 for the urban stratum allocation which would result in a sample slightly over 40 per cent urban at the national level. Regarding the South East region, which is predominantly urban, a strictly proportional allocation was used to determine the number of urban and rural sample clusters.

The table below shows the allocation of clusters to the sampling strata.

Table SD.1: Allocation of Sample Clusters (Primary Sampling Units) to Sampling Strata

	Population (2012 GSO Estimates)			Number of Clusters		
	Total	Urban	Rural	Urban	Rural	Total
Total	**88772900**	**28356400**	**60416500**	**206**	**304**	**510**
Region						
Red River Delta	20236700	6247700	13989000	36	49	85
Northern Midlands and Mountainous areas	11400200	1942400	9457800	27	58	85
North Central and Central coastal areas	19173600	5009500	14164100	31	54	85
Central Highlands	5379600	1544100	3835500	37	48	85
South East	15192300	9283600	5908700	48	37	85
Mekong River Delta	17390500	4329100	13061400	29	56	85

Sampling Frame and Selection of Clusters

The sampling frame used for the selection of sample clusters for Viet Nam MICS 2014 was based on a 15 percent sample of enumeration areas used for the long formquestionnairesof the Population and Housing Census 2009 (PHC2009). Census enumeration areas were defined as primary sampling units (PSUs), and were selected from each of the sampling strata using systematic pps (probability proportional to size) sampling procedures, based on the number of households in each enumeration area from the PHC2009. The first stage of sampling was thus completed by selecting the required number of enumeration areas from each of the six regions, separately for the urban and rural strata.

Listing Activities

Since the sampling frame (the PHC2009) was not up-to-date, a new listing of households was conducted in all the sample enumeration areas prior to the selection of households. For this purpose, listing teams were formed with members from the district statistical offices (DSOs), who visited each enumeration area and listed all the households. Following the selection of sample enumeration areas, the listing activities were completed at the beginning of December 2013 by 369 teams, formed from 369 DSOs. Each team was responsible for listing about six enumeration areas on average. The listing teams closely collaborated with local authorities and were supervised by provincial statistical offices (PSOs) and the GSO.

Segmentation was performed in the case where an enumeration area had more than 300 households. Depending on the total number of dwellings, an enumeration area was divided into segments of approximately equal size with well-defined boundaries onthe enumeration area sketch map. One segment was randomly selected for listing. All segments and their selection procedures were reported and used for calculating the sample weights.

Selection of Households

Lists of households were prepared for all sampled enumeration areas and sent to the GSO. The GSO then directly selected the sample households from these lists. In each sampled enumeration area, the households were then sequentially numbered from 1 to n (the total number of households in each enumeration area). The selection of 20 households in each enumeration area was carried out using random systematic selection procedures.

Calculation of Sample Weights

The Viet Nam MICS 2014 sample is not self-weighting. Essentially, by allocating equal numbers of households to each of the regions (1,700 households), while the different sampling fractions were used in each region since the population size of the regions are different. For this reason, sample weights have to be calculated and these were used in the subsequent analyses of the survey data.

The weight is the reciprocal of the sampling fraction employed in selecting the number of sample households in that particular sampling stratum (h) and PSU (i):

$$W_{hi} = \frac{1}{f_{hi}}$$

The term F_{hi} , the sampling fraction for the i-th sample PSU in the h-th stratum, is the product of probabilities of selection at every stage in each sampling stratum:

$$f_{hi} = p_{1hi} \times p_{2hi} \times p_{3hi}$$

Where P_{shi} is the probability of selection of the sampling unit atstage s for the i-th sample PSU in the h-th sampling stratum. Based on the sample design, these probabilities were calculated as follows:

$P_{1hi} = \frac{n_h \cdot M_{hi}}{M_h}$,

n_h = number of sample PSUs selected in stratum h

M_{hi} number of households in the PHC2009 frame for the i-th sample PSU in stratum h

M_h = total number of households in the PHC2009 frame for stratum h

p_{2hi} = proportion of the PSU listed the i-th sample PSU stratum h (in the case of PSUs that were segmented); for non-segmented PSUs, p2hi = 1

$p_{3hi} = \frac{20}{M'_{hi}}$

M_{hi} = number of households listed in the i-th sample PSU in stratum h

Since the number of households in each enumeration area (PSU) from the PHC2009 frame used for the first stage selection and the updated number of households in the enumeration area from the listing are generally different, individual overall probabilities of selection for households in each sample enumeration area (cluster) were calculated.

A final component in the calculation of sample weights took into account the level of non-responses for the household and individual interviews.The adjustment for household non-responsesin each stratum is equal to: $\frac{1}{RR_h}$

Where RRh is the response rate for the sample households in stratum h, defined as the proportion of the number of interviewed households in stratum h out of the number of selected households found to be occupied during the fieldwork in stratum h.

Similarly, adjustments for non-responses at an individual level (women and under-5 children) for each stratum is equal to: $\frac{1}{RR_h}$

Where RRh is the response rate for the individual questionnaires in stratum h, defined as the proportion of eligible individuals (women and under-5 children) in the sample households in stratum h who were successfully interviewed.

After the completion of fieldwork, response rates were calculated for each sampling stratum. These were used to adjust the sample weights calculated for each cluster. Response rates in the Viet Nam MICS 2014 are shown in Table HH.1 in this report.

The non-response adjustment factors for the individual women and under-5 questionnaires are applied to the adjusted household weights. Numbers of eligible women and under-5 children were obtained from the roster of household members in the household questionnaire forhouseholds where interviews were completed.

The design weights for the households were calculated by multiplying the inverse of the probabilities of selection by the non-response adjustment factor for each enumeration area. These weights were then standardized (or normalized), one purpose of which is to make the weighted sum of the interviewed sample units equal to the total sample size at the national level. Normalization was achieved by dividing the full sample weights (adjusted for non-responses) by the average of these weights across all households at the national level. This is performed by multiplying the sample weights by a constant factor equal to the unweighted number of households at the national level divided by the weighted total number of households (using the full sample weights adjusted for non-response). A similar standardization procedure was followed to obtain standardized weights for the individual women and under-5 questionnaires. The normalized household weights varied between 0.177 and 2.473 in the 510 sample enumeration areas (clusters).

Sample weights were appended to all data sets and analyses were performed by weighting each household, woman or under-5 with these sample weights.

APPENDIX B. LIST OF PERSONNEL INVOLVED IN THE SURVEY

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Mr. Jesper Moller, Deputy Representative, UNICEF Viet Nam

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APPENDIX C. ESTIMATES OF SAMPLING ERRORS

The sample of respondents selected in Viet Nam MICS 2014 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 the estimates from all possible samples. The extent of variability is not known exactly, but can be estimated statistically from the survey data.

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

- Standard error (se): Standard error is the square root of the variance of the estimate. For survey indicators that are means, proportions or ratios, the Taylor series linearization method is used for the estimation of standard errors. For more complex statistics, such as fertility and mortality rates, the Jackknife repeated replication method is used for standard error estimation.
- Coefficient of variation (se/r) is the ratio of the standard error to the value (r) of the indicator, and is a measure of the relative sampling error.
- 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 based on the same sample size. The square root of the design effect (deft) is used to show the efficiency of the sample design in relation to the precision. A deft value of 1.0 indicates that the sample design of the survey is as efficient as a simple random sample for a particular indicator, while a deft value above 1.0 indicates an 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, with a specified level of confidence. For any given statistic calculated from the survey, the value of that statistic will fall within a range of plus or minus two times the standard error (r + 2.se or r – 2.se) of the statistic in 95 per cent of all possible samples of identical size and design.

For the calculation of sampling errors from Viet Nam MICS 2014 data, programmes developed in CSPro Version 5.0, SPSS Version 21 Complex Samples module and CMRJack[1] have 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. Given the use of normalized weights, by comparing the weighted and unweighted counts it is possible to determine whether a particular domain has been under-sampled or over-sampled compared to the average sampling rate. If the weighted count is smaller than the unweighted count, this means that the particular domain had been over-sampled. As explained later in the footnote of Table SE.1, there is an exception in the case of indicators 4.1, 4.2 and 4.3 and 3.15, for which the unweighted count represents the number of sample households, and the weighted counts reflect the total population.

Sampling errors are calculated for indicators of primary interest, for the national level, for urban and rural areas, and for all six regions. The selected indicators are based on household members, seven are based on women. 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.10 show the calculated sampling errors for selected domains.

1 CMRJack is a software developed by FAFO, an independent and multidisciplinary research foundation. CMRJack produces mortality estimates and standard errors for surveys with complete birth histories or summary birth histories. See http://www.fafo.no/ais/child_mortality/index.html

Table SE.1: Indicators selected for sampling error calculations

List of indicators selected for sampling error calculations, and base populations (denominators) for each indicator, Viet Nam, 2014

MICS5 Indicators		Denominator	
2.5	Children ever breastfed	NU.3	Number of live births in the last two years
2.6	Early initiation of breastfeeding	NU.3	Number of live births in the last two years
2.7	Exclusive breastfeeding under 6 months	NU.4	Number of children aged 0-5 months
2.8	Predominant breastfeeding under 6 months	NU.4	Number of children aged 0-5 months
2.9	Continued breastfeeding at 1 year	NU.4	Number of children aged 12-15 months
2.10	Continued breastfeeding at 2 years	NU.4	Number of children aged 20-23 months
2.12	Age-appropriate breastfeeding	NU.6	Number of children aged 0-23 months
2.14	Milk feeding frequency for non-breastfed children	NU.8	Number of children aged 6-23 months
2.15	Minimum meal frequency	NU.8	Number of children aged 6-23 months
2.16	Minimum dietary diversity	NU.8	Number of children aged 6-23 months
2.17a	Minimum acceptable diet (breastfeeding children)	NU.8	Number of children aged 6-23 months
2.17b	Minimum acceptable diet (non breastfeeding children)	NU.8	Number of children aged 6-23 months
2.18	Bottle feeding	NU.9	Number of children aged 0-23 months
2.20	Low birth weight infants	NU.1	Number of live births in the last two years
2.21	Infants weighed at birth	NU.1	Number of live births in the last two years
-	Tuberculosis immunization coverage	CH.2	Number of children aged 12-23 months
-	Polio immunization coverage (Polio 3)	CH.2	Number of children aged12-23 months
-	Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	CH.2	Number of children aged 12-23 months
MDG 4.3	Measles immunization coverage	CH.2	Number of children aged 12-23 months
-	Hepatitis B at birth	CH.2	Number of children aged 12-23 months
-	Hepatitis B immunization coverage	CH.2	Number of children aged 12-23 months
-	Haemophilus influenzae type B (Hib) immunization coverage	CH.2	Number of children aged 12-23 months
-	Full immunization coverage	CH.2	Number of children aged 12-23 months
-	No vaccination	CH.2	Number of children aged 12-23 months
3.9	Neonatal tetanus protection	CH.3	Number of women aged 15-49 years with a live birth in the last two years
-	Children with diarrhoea	CH.4	Number of children aged 0-59 months
3.10	Care-seeking for diarrhoea	CH.5	Number of children aged under 5 with diarrhoea in the last two weeks
3.11	Diarrhoea treatment with oral rehydration salts (ORS) and zinc	CH.7	Number of children aged under 5 with diarrhoea in the last two weeks
3.12	Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	CH.8	Number of of children aged under 5 with diarrhoea in the last two weeks
-	Children with ARI symptoms	CH.4	Number of children aged 0-59 months
-	Mother/caretakers know 2 dangerous signs of ARI	CH.11	Number of mothers/caretakers of children under 5 years
3.15	Use of solid fuels for cooking	CH.12	All household members
4.1	Use of improved drinking water sources	WS.1	All household members

MICS5 Indicators		Denominator	
4.2	Water treatment	WS.2	Total number of household members in households using unimproved drinking water sources
4.3	Use of improved sanitation	WS.5	All household members
4.4	Safe disposal of child faeces	WS.8	Number of children aged 0-2 years
4.5	Place for handwashing	WS.9	Total number of households
4.6	Availability of soap or other cleansing agents	WS.10	Total number of households
5.3	Contraceptive prevalence rate	RH.5	Number of women aged 15-49 years who are currently married or in union
5.4	Unmet need	RH.6	Number of women aged 15-49 years who are currently married or in union
5.5a	Antenatal care coverage: At least once by skilled health personnel	RH.7	Number of women aged 15-49 years with a live birth in the last two years
5.5b	Antenatal care coverage: At least four times by any provider	RH.8	Number of women aged 15-49 years with a live birth in the last two years
5.6	Content of antenatal care	RH.9	Number of women aged 15-49 years with a live birth in the last two years
5.7	Skilled attendant at delivery	RH.10	Number of women aged 15-49 years with a live birth in the last two years
5.8	Institutional deliveries	RH.11	Number of women aged 15-49 years with a live birth in the last two years
5.9	Caesarean section	RH.10	Number of women aged 15-49 years with a live birth in the last two years
5.10	Post-partum stay in health facility	RH.12	Number of women aged 15-49 years with a live birth in the last two years
5.11	Post-natal health check for the newborn	RH.13	Number of live births in the last two years
5.12	Post-natal health check for the mother	RH.15	Number of women aged 15-49 years with a live birth in the last two years
6.1	Attendance for early childhood education	CD.1	Number of children aged 36-59 months
6.2	Support for learning	CD.2	Number of children aged 36-59 months
6.3	Father's support for learning	CD.2	Number of children aged 36-59 months who are living with bio father
6.4	Mother's support for learning	CD.2	Number of children aged 36-59 months who are living with bio mother
6.5	Availability of children's books	CD.3	Number of children aged 0-59 months
6.6	Availability of playthings	CD.3	Number of children aged 0-59 months
6.7	Inadequate care	CD.4	Number of children aged 0-59 months
6.8	Early child development index	CD.5	Number of children aged 36-59 months
7.1	Literacy rate among young people	ED.1	Number of women aged 15-24 years
7.2	School readiness	ED.2	Number of children who currently attending grade 1
7.3	Net intake rate in primary education	ED.3	Number of children at aged primary school entry age
7.4	Primary school net attendance ratio (adjusted)	ED.4	Number of children aged 6-10 years
7.5	Secondary school net attendance ratio (adjusted)	ED.5	Number of children aged 11-14 years
7.S1	Lower secondary school net attendance ratio (adjusted)	ED.5A	Number of children aged 15-17 years

MICS5 Indicators		Denominator	
7.S2	Upper secondary school net attendance ratio (adjusted)	ED.5B	Number of children aged 6-17 years
7.8	Transition rate to secondary school	ED.7	Number of children attending the last grade of primary school during the previous school year
7.S3	Transition rate to upper secondary school	ED.7A	Number of children attending the last grade of lower secondary school during the previous school year
8.1	Birth registration	CP.1	Number of children aged 0-59 months
8.2	Child labour	CP.4	Number of children aged 5-17 years
8.3	Violent discipline	CP.5	Number of children aged 1-14 years
8.4	Marriage before age of 15	CP.7	Number of women aged 15-49 years
8.5	Marriage before age of 18	CP.7	Number of women aged 20-49 years
8.6	Young people aged 15-19 years currently married or in union	CP.7	Number of women aged 15-19 years
8.7	Polygyny	CP.7	Number of women aged 15-49 years who are currently married or in union
8.8b	Spousal age difference	CP.9	Number of women aged 20-24 years who are currently married or in union
8.12	Attitudes towards domestic violence	CP.13	Number of women aged 15-49 years
8.13	Children's living arrangements	CP.14	Number of children aged 0-17 years
8.14	Prevalence of children with one or both parents dead	CP.14	Number of children aged 0-17 years
8.15	Children with at least one parent living abroad	CP.15	Number of children aged 0-17 years
-	Have heard of AIDS	HA.1	Number of women aged 15-49 years
9.1	Knowledge of HIV prevention among young women	HA.1	Number of women aged 15-24
9.2	Knowledge of mother-to-child transmission of HIV	HA.2	Number of women aged15-49 years
9.3	Accepting attitudes towards people living with HIV	HA.3	Number of women aged15-49 years
9.4	People who know where to be tested for HIV	HA.4	Number of women aged 15-49 years
9.5	People who have been tested for HIV and know the results	HA.4	Number of women aged 15-49 years who ever tested HIV
9.7	HIV counselling during antenatal care	HA.5	Number of women aged 15-49 years with a live birth in the last two years
9.8	HIV testing during antenatal care	HA.5	Number of women aged 15-49 years with a live birth in the last two years
10.1	Exposure to mass media	MT.1	Number of women aged 15-49 years
10.2	Use of computers	MT.2	Number of women aged 15-24 years
10.3	Use of internet	MT.2	Number of women aged 15-24 years
10.S1	Use of mobile phones	MT.1	Number of women aged 15-49 years

Table SE.2: Sampling errors: Total sample

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9693	0.0053	0.0054	1.3751	1.1726	1464	1484	0.9588	0.9798
Early initiation of breastfeeding	2.6		0.2645	0.0120	0.0455	1.1036	1.0505	1464	1484	0.2405	0.2886
Exclusive breastfeeding under 6 months	2.7		0.2434	0.0221	0.0906	0.9433	0.9712	350	358	0.1993	0.2875
Predominant breastfeeding under 6 months	2.8		0.4896	0.0228	0.0466	0.7431	0.8620	350	358	0.4440	0.5353
Continued breastfeeding at 1 year	2.9		0.6564	0.0208	0.0317	0.5081	0.7128	260	265	0.6147	0.6980
Continued breastfeeding at 2 years	2.10		0.2180	0.0215	0.0986	0.6639	0.8148	233	246	0.1750	0.2610
Age-appropriate breastfeeding	2.12		0.4688	0.0145	0.0309	1.2458	1.1161	1478	1476	0.4398	0.4978
Milk feeding frequency for non-breastfed children	2.14		0.8958	0.0117	0.0130	0.6598	0.8123	468	453	0.8725	0.9192
Minimum meal frequency	2.15		0.9048	0.0091	0.0100	1.0459	1.0227	1101	1092	0.8867	0.9230
Minimum dietary diversity	2.16		0.7685	0.0133	0.0173	1.1038	1.0506	1128	1118	0.7420	0.7950
Minimum acceptable diet (breastfeeding children)	2.17a		0.6241	0.0182	0.0292	0.9020	0.9497	633	638	0.5876	0.6605
Minimum acceptable diet (non breastfeeding children)	2.17b		0.5451	0.0190	0.0348	0.6575	0.8109	468	453	0.5071	0.5831
Bottle feeding	2.18		0.4407	0.0137	0.0310	1.1151	1.0560	1478	1476	0.4134	0.4680
Low birth weight infants	2.20		0.0565	0.0034	0.0602	1.1111	1.0541	1453	1474	0.0497	0.0633
Infants weighed at birth	2.21		0.9426	0.0098	0.0104	2.6504	1.6280	1464	1484	0.9229	0.9622
Tuberculosis immunization coverage	-		0.9800	0.0044	0.0045	0.7830	0.8849	790	785	0.9711	0.9888

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Polio immunization coverage (Polio 3)	-		0.9304	0.0101	0.0108	1.2270	1.1077	789	783	0.9103	0.9506
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8864	0.0115	0.0130	1.0027	1.0014	773	765	0.8635	0.9094
Measles immunization coverage	-		0.9091	0.0103	0.0113	0.9930	0.9965	786	779	0.8886	0.9297
Hepatitis B at birth	-		0.7847	0.0134	0.0171	0.8234	0.9074	777	771	0.7578	0.8116
Hepatitis B immunization coverage	-		0.8740	0.0128	0.0146	1.1360	1.0658	774	767	0.8485	0.8996
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8747	0.0130	0.0148	1.1654	1.0795	766	760	0.8487	0.9006
Full immunization coverage	-		0.8243	0.0151	0.0183	1.1921	1.0918	766	762	0.7942	0.8545
No vaccination			0.0154	0.0042	0.2707	0.8964	0.9468	790	785	0.0070	0.0237
Neonatal tetanus protection	3.9		0.8215	0.0107	0.0130	1.1513	1.0730	1464	1484	0.8002	0.8429
Children with diarrhoea	-		0.0859	0.0058	0.0673	1.4114	1.1880	3316	3316	0.0743	0.0975
Care-seeking for diarrhoea	3.10		0.5510	0.0209	0.0378	0.5430	0.7369	285	310	0.5093	0.5927
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1259	0.0130	0.1029	0.4711	0.6864	285	310	0.1000	0.1518
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.5779	0.0186	0.0321	0.4369	0.6610	285	310	0.5408	0.6150
Children with ARI symptoms	-		0.0297	0.0035	0.1164	1.3721	1.1714	3316	3316	0.0228	0.0366
Mother/caretakers know 2 dangerous signs of ARI	-		0.2836	0.0107	0.0377	1.5539	1.2465	2715	2765	0.2622	0.3050
Use of solid fuels for cooking	3.15		0.4161	0.0105	0.0252	4.5174	2.1254	38506	9979	0.3951	0.4370
Use of improved drinking water sources	4.1	7.8	0.9204	0.0072	0.0079	7.1256	2.6694	38506	9979	0.9059	0.9348
Water treatment	4.2		0.7904	0.0170	0.0215	1.3449	1.1597	3066	769	0.7563	0.8245
Use of improved sanitation	4.3	7.9	0.7921	0.0088	0.0111	4.6485	2.1560	38506	9979	0.7746	0.8096

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Safe disposal of child faeces	4.4		0.8626	0.0049	0.0057	1.9875	1.4098	9811	9804	0.8527	0.8724
Place for handwashing	4.5		0.5773	0.0132	0.0229	1.5250	1.2349	2139	2131	0.5509	0.6037
Availability of soap or other cleansing agents	4.6		0.9243	0.0040	0.0043	2.2773	1.5091	9979	9979	0.9163	0.9323
Contraceptive prevalence rate	5.3	5.3	0.7572	0.0054	0.0072	1.1138	1.0554	7038	6972	0.7464	0.7680
Unmet need	5.4	5.6	0.0611	0.0031	0.0503	1.1448	1.0700	7038	6972	0.0549	0.0672
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9580	0.0095	0.0099	3.2938	1.8149	1464	1484	0.9390	0.9769
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.7371	0.0135	0.0184	1.4038	1.1848	1464	1484	0.7100	0.7642
Content of antenatal care	5.6		0.5620	0.0155	0.0276	1.4503	1.2043	1464	1484	0.5310	0.5930
Skilled attendant at delivery	5.7	5.2	0.9376	0.0101	0.0108	2.5925	1.6101	1464	1484	0.9174	0.9578
Institutional deliveries	5.8		0.9364	0.0102	0.0109	2.5718	1.6037	1464	1484	0.9160	0.9567
Caesarean section	5.9		0.2753	0.0132	0.0479	1.2940	1.1375	1464	1484	0.2489	0.3017
Post-partum stay in health facility	5.10		0.9824	0.0036	0.0036	0.9876	0.9938	1371	1352	0.9753	0.9895
Post-natal health check for the newborn	5.11		0.8912	0.0112	0.0125	1.9124	1.3829	1464	1484	0.8689	0.9136
Post-natal health check for the mother	5.12		0.8977	0.0113	0.0125	2.0448	1.4300	1464	1484	0.8752	0.9202
Attendance for early childhood education	6.1		0.7128	0.0144	0.0203	1.2272	1.1078	1197	1207	0.6839	0.7416
Support for learning	6.2		0.7592	0.0162	0.0214	1.7381	1.3184	1197	1207	0.7268	0.7917
Father's support for learning	6.3		0.1493	0.0122	0.0814	1.4021	1.1841	1197	1207	0.1250	0.1736
Mother's support for learning	6.4		0.4497	0.0182	0.0405	1.6177	1.2719	1197	1207	0.4133	0.4862
Availability of children's books	6.5		0.2623	0.0091	0.0347	1.4157	1.1898	3316	3316	0.2442	0.2805
Availability of playthings	6.6		0.5153	0.0115	0.0223	1.7556	1.3250	3316	3316	0.4923	0.5383
Inadequate care	6.7		0.0697	0.0050	0.0720	1.2857	1.1339	3316	3316	0.0597	0.0797

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Early child development index	6.8		0.8870	0.0102	0.0115	1.2555	1.1205	1197	1207	0.8666	0.9074
Literacy rate among young people	7.1	2.3	0.9649	0.0067	0.0070	3.6629	1.9139	2707	2736	0.9514	0.9784
School readiness	7.2		0.9678	0.0066	0.0068	1.0131	1.0066	694	720	0.9545	0.9811
Net intake rate in primary education	7.3		0.9614	0.0050	0.0052	0.4711	0.6863	678	701	0.9514	0.9714
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9789	0.0033	0.0034	1.8185	1.3485	3265	3429	0.9723	0.9855
Secondary school net attendance ratio (adjusted)	7.5		0.8391	0.0082	0.0098	2.2026	1.4841	4201	4445	0.8227	0.8554
Lower secondary school net attendance ratio (adjusted)	7.S1		0.9038	0.0079	0.0088	1.8270	1.3517	2377	2539	0.8880	0.9196
Upper secondary school net attendance ratio (adjusted)	7.S2		0.7069	0.0137	0.0194	1.7205	1.3117	1824	1906	0.6796	0.7343
Transition rate to secondary school	7.8		0.9805	0.0048	0.0049	0.7408	0.8607	588	622	0.9709	0.9900
Transition rate to upper secondary school	7.S3		0.8946	0.0138	0.0154	0.9470	0.9731	468	470	0.8670	0.9222
Birth registration	8.1		0.9606	0.0041	0.0042	1.4455	1.2023	3316	3316	0.9525	0.9688
Child labour	8.2		0.1643	0.0099	0.0603	3.4854	1.8669	8578	4868	0.1445	0.1842
Violent discipline	8.3		0.6841	0.0084	0.0123	1.7238	1.3129	9257	5232	0.6672	0.7009
Marriage before age of 15	8.4		0.0087	0.0013	0.1508	1.9676	1.4027	9827	9827	0.0061	0.0114
Marriage before age of 18	8.5		0.1107	0.0052	0.0472	2.3416	1.5302	8453	8429	0.1002	0.1212
Young people aged 15-19 years currently married or in union	8.6		0.1034	0.0096	0.0926	1.3819	1.1755	1374	1398	0.0842	0.1226
Polygyny	8.7		0.0070	0.0011	0.1571	1.2079	1.0991	7038	6972	0.0048	0.0092
Spousal age difference	8.8b		0.0469	0.0080	0.1712	0.9789	0.9894	687	680	0.0308	0.0629
Attitudes towards domestic violence	8.12		0.2825	0.0069	0.0245	2.3222	1.5239	9827	9827	0.2686	0.2963

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children's living arrangements	8.13		0.0516	0.0033	0.0641	2.6594	1.6308	11283	11878	0.0450	0.0583
Prevalence of children with one or both parents dead	8.14		0.0347	0.0024	0.0678	1.9612	1.4004	11283	11878	0.0300	0.0394
Children with at least one parent living abroad	8.15		0.0127	0.0021	0.1668	4.2564	2.0631	11283	11878	0.0085	0.0170
Have heard of AIDS	-		0.9452	0.0053	0.0056	5.2943	2.3009	9827	9827	0.9346	0.9557
Knowledge of HIV prevention among young women	9.1	6.3	0.4935	0.0134	0.0272	1.9649	1.4018	2707	2736	0.4667	0.5203
Knowledge of mother-to-child transmission of HIV	9.2		0.4683	0.0069	0.0147	1.8582	1.3632	9827	9827	0.4546	0.4820
Accepting attitudes towards people living with HIV	9.3		0.2999	0.0067	0.0225	2.0030	1.4153	9288	9252	0.2864	0.3133
People who know where to be tested for HIV	9.4		0.6990	0.0078	0.0111	2.8208	1.6795	9827	9827	0.6834	0.7145
People who have been tested for HIV and know the results	9.5		0.1129	0.0040	0.0358	1.6031	1.2661	9827	9827	0.1048	0.1210
HIV counselling during antenatal care	9.7		0.2927	0.0138	0.0473	1.3726	1.1716	1464	1484	0.2650	0.3204
HIV testing during antenatal care	9.8		0.3001	0.0154	0.0514	1.6824	1.2971	1464	1484	0.2693	0.3310
Exposure to mass media	10.1		0.1317	0.0053	0.0406	2.4594	1.5683	9827	9827	0.1210	0.1424
Use of computers	10.2		0.6329	0.0133	0.0210	2.0813	1.4427	2707	2736	0.6063	0.6594
Use of internet	10.3		0.6668	0.0128	0.0192	2.0197	1.4212	2707	2736	0.6412	0.6924
Use of mobile phones	10.S1		0.8189	0.0072	0.0088	3.4121	1.8472	9827	9827	0.8045	0.8332

Table SE.3: Sampling errors: Urban

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9566	0.0121	0.0126	1.9614	1.4005	428	558	0.9324	0.9808
Early initiation of breastfeeding	2.6		0.2380	0.0211	0.0889	1.3733	1.1719	428	558	0.1957	0.2802
Exclusive breastfeeding under 6 months	2.7		0.2075	0.0225	0.1086	0.4202	0.6482	99	137	0.1625	0.2526
Predominant breastfeeding under 6 months	2.8		0.4267	0.0314	0.0735	0.5469	0.7395	99	137	0.3639	0.4894
Continued breastfeeding at 1 year	2.9		0.5766	0.0433	0.0751	0.8216	0.9064	84	108	0.4900	0.6632
Continued breastfeeding at 2 years	2.10		0.1803	0.0323	0.1791	0.7410	0.8608	84	106	0.1157	0.2449
Age-appropriate breastfeeding	2.12		0.4013	0.0273	0.0680	1.7261	1.3138	436	558	0.3468	0.4559
Milk feeding frequency for non-breastfed children	2.14		0.9529	0.0094	0.0098	0.3814	0.6176	169	196	0.9342	0.9717
Minimum meal frequency	2.15		0.9387	0.0129	0.0138	1.1785	1.0856	326	408	0.9128	0.9645
Minimum dietary diversity	2.16		0.8654	0.0167	0.0193	1.0028	1.0014	337	421	0.8320	0.8987
Minimum acceptable diet (breastfeeding children)	2.17a		0.7344	0.0227	0.0309	0.5563	0.7458	157	212	0.6890	0.7797
Minimum acceptable diet (non breastfeeding children)	2.17b		0.5736	0.0295	0.0514	0.6929	0.8324	169	196	0.5147	0.6326

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Bottle feeding	2.18		0.5550	0.0246	0.0443	1.3635	1.1677	436	558	0.5059	0.6042
Low birth weight infants	2.20		0.0509	0.0053	0.1040	1.1470	1.0710	426	557	0.0403	0.0615
Infants weighed at birth	2.21		0.9848	0.0065	0.0066	1.5464	1.2435	428	558	0.9719	0.9977
Tuberculosis immunization coverage	-		0.9973	0.0019	0.0019	0.4040	0.6356	253	308	0.9936	1.0011
Polio immunization coverage (Polio 3)	-		0.9362	0.0185	0.0198	1.7589	1.3262	253	307	0.8992	0.9733
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8853	0.0224	0.0253	1.5086	1.2283	252	306	0.8404	0.9301
Measles immunization coverage	-		0.8885	0.0200	0.0225	1.2368	1.1121	253	307	0.8484	0.9285
Hepatitis B at birth	-		0.8437	0.0192	0.0228	0.8601	0.9274	253	308	0.8053	0.8822
Hepatitis B immunization coverage	-		0.8838	0.0220	0.0249	1.4411	1.2005	253	307	0.8398	0.9278
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8790	0.0227	0.0258	1.4811	1.2170	253	307	0.8336	0.9243
Full immunization coverage	-		0.8108	0.0270	0.0333	1.4546	1.2061	253	307	0.7568	0.8648
No vaccination	-		0.0008	0.0000	0.0445	0.0005	0.0220	253	308	0.0007	0.0009
Neonatal tetanus protection	3.9		0.8619	0.0162	0.0188	1.2246	1.1066	428	558	0.8295	0.8942
Children with diarrhoea	-		0.0599	0.0081	0.1345	1.4578	1.2074	985	1265	0.0438	0.0761
Care-seeking for diarrhoea	3.10		0.5077	0.0338	0.0665	0.4015	0.6336	59	89	0.4402	0.5752
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1771	0.0260	0.1471	0.4098	0.6402	59	89	0.1250	0.2292

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.6425	0.0362	0.0564	0.5024	0.7088	59	89	0.5700	0.7149
Children with ARI symptoms	-		0.0247	0.0050	0.2043	1.3345	1.1552	985	1265	0.0146	0.0347
Mother/caretakers know 2 dangerous signs of ARI	-		0.2725	0.0158	0.0581	1.3829	1.1760	832	1096	0.2408	0.3041
Use of solid fuels for cooking	3.15		0.1839	0.0152	0.0828	6.3412	2.5182	12236	4107	0.1534	0.2143
Use of improved drinking water sources	4.1	7.8	0.9824	0.0040	0.0041	3.8558	1.9636	12236	4107	0.9744	0.9905
Water treatment	4.2		0.6412	0.0261	0.0407	0.2579	0.5078	215	88	0.5890	0.6935
Use of improved sanitation	4.3	7.9	0.9089	0.0128	0.0141	8.0973	2.8456	12236	4107	0.8834	0.9345
Safe disposal of child faeces	4.4		0.7195	0.0212	0.0295	1.8015	1.3422	639	809	0.6770	0.7619
Place for handwashing	4.5		0.9184	0.0065	0.0071	2.2790	1.5096	3057	4053	0.9054	0.9314
Availability of soap or other cleansing agents	4.6		0.9557	0.0046	0.0048	2.0199	1.4212	3102	4107	0.9466	0.9649
Contraceptive prevalence rate	5.3	5.3	0.7599	0.0084	0.0111	1.0939	1.0459	2154	2805	0.7431	0.7768
Unmet need	5.4	5.6	0.0593	0.0043	0.0725	0.9302	0.9645	2154	2805	0.0507	0.0679
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9910	0.0044	0.0045	1.2369	1.1122	428	558	0.9822	0.9999
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.8627	0.0183	0.0212	1.5665	1.2516	428	558	0.8261	0.8992
Content of antenatal care	5.6		0.6967	0.0219	0.0314	1.2590	1.1220	428	558	0.6530	0.7404
Skilled attendant at delivery	5.7	5.2	0.9899	0.0045	0.0046	1.1470	1.0710	428	558	0.9809	0.9990

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Institutional deliveries	5.8		0.9926	0.0036	0.0036	0.9957	0.9978	428	558	0.9854	0.9999
Caesarean section	5.9		0.4329	0.0248	0.0572	1.3909	1.1794	428	558	0.3834	0.4825
Post-partum stay in health facility	5.10		0.9933	0.0040	0.0041	1.3448	1.1596	424	548	0.9852	1.0014
Post-natal health check for the newborn	5.11		0.9407	0.0125	0.0133	1.5664	1.2516	428	558	0.9157	0.9658
Post-natal health check for the mother	5.12		0.9579	0.0105	0.0109	1.5096	1.2287	428	558	0.9369	0.9788
Attendance for early childhood education	6.1		0.7969	0.0213	0.0267	1.2900	1.1358	350	462	0.7543	0.8394
Support for learning	6.2		0.8503	0.0169	0.0199	1.0319	1.0158	350	462	0.8165	0.8840
Father's support for learning	6.3		0.2271	0.0256	0.1125	1.7154	1.3097	350	462	0.1760	0.2782
Mother's support for learning	6.4		0.6188	0.0261	0.0423	1.3362	1.1559	350	462	0.5665	0.6711
Availability of children's books	6.5		0.4308	0.0159	0.0368	1.2978	1.1392	985	1265	0.3991	0.4626
Availability of playthings	6.6		0.5222	0.0179	0.0344	1.6314	1.2772	985	1265	0.4863	0.5581
Inadequate care	6.7		0.0436	0.0060	0.1382	1.0993	1.0485	985	1265	0.0315	0.0556
Early child development index	6.8		0.9084	0.0148	0.0163	1.2184	1.1038	350	462	0.8788	0.9381
Literacy rate among young people	7.1	2.3	0.9863	0.0045	0.0046	1.6676	1.2913	868	1111	0.9774	0.9953
School readiness	7.2		0.9658	0.0104	0.0108	0.9326	0.9657	210	285	0.9449	0.9866
Net intake rate in primary education	7.3		0.9744	0.0090	0.0092	0.8943	0.9457	204	278	0.9565	0.9924

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9839	0.0035	0.0036	1.0493	1.0244	994	1352	0.9769	0.9909
Secondary school net attendance ratio (adjusted)	7.5		0.8923	0.0086	0.0097	1.2859	1.1340	1190	1664	0.8751	0.9096
Lower secondary school net attendance ratio (adjusted)	7.S1		0.9477	0.0084	0.0088	1.3433	1.1590	683	952	0.9310	0.9645
Upper secondary school net attendance ratio (adjusted)	7.S2		0.7913	0.0163	0.0206	1.1471	1.0710	507	712	0.7587	0.8240
Transition rate to secondary school	7.8		1.0000	0.0000	0.0000			182	247	1.0000	1.0000
Transition rate to upper secondary school	7.S3		0.9472	0.0097	0.0103	0.3319	0.5761	124	176	0.9277	0.9667
Birth registration	8.1		0.9675	0.0055	0.0057	1.2371	1.1122	985	1265	0.9564	0.9786
Child labour	8.2		0.0963	0.0091	0.0942	1.8663	1.3661	2538	1975	0.0782	0.1145
Violent discipline	8.3		0.6685	0.0115	0.0172	1.2622	1.1235	2781	2128	0.6455	0.6914
Marriage before age of 15	8.4		0.0036	0.0016	0.4307	2.8375	1.6845	3259	4200	0.0005	0.0068
Marriage before age of 18	8.5		0.0670	0.0068	0.1017	2.7061	1.6450	2831	3641	0.0534	0.0807
Young people aged 15-19 years currently married or in union	8.6		0.0736	0.0137	0.1861	1.5341	1.2386	428	559	0.0462	0.1009
Polygyny	8.7		0.0077	0.0017	0.2176	1.0321	1.0159	2154	2805	0.0044	0.0111
Spousal age difference	8.8b		0.0704	0.0188	0.2669	1.0040	1.0020	137	187	0.0328	0.1080
Attitudes towards domestic violence	8.12		0.2328	0.0116	0.0499	3.1684	1.7800	3259	4200	0.2096	0.2561

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children's living arrangements	8.13		0.0440	0.0037	0.0831	1.4471	1.2030	3343	4560	0.0366	0.0513
Prevalence of children with one or both parents dead	8.14		0.0311	0.0036	0.1170	2.0070	1.4167	3343	4560	0.0238	0.0384
Children with at least one parent living abroad	8.15		0.0076	0.0017	0.2228	1.7370	1.3180	3343	4560	0.0042	0.0110
Have heard of AIDS	-		0.9693	0.0060	0.0062	5.1071	2.2599	3259	4200	0.9573	0.9813
Knowledge of HIV prevention among young women	9.1	6.3	0.5357	0.0202	0.0376	1.8144	1.3470	868	1111	0.4954	0.5760
Knowledge of mother-to-child transmission of HIV	9.2		0.4624	0.0086	0.0186	1.2433	1.1150	3259	4200	0.4452	0.4795
Accepting attitudes towards people living with HIV	9.3		0.2919	0.0075	0.0257	1.1094	1.0533	3159	4067	0.2768	0.3069
People who know where to be tested for HIV	9.4		0.7977	0.0099	0.0124	2.5457	1.5955	3259	4200	0.7779	0.8175
People who have been tested for HIV and know the results	9.5		0.1511	0.0069	0.0460	1.5794	1.2567	3259	4200	0.1372	0.1650
HIV counselling during antenatal care	9.7		0.3610	0.0228	0.0632	1.2576	1.1214	428	558	0.3154	0.4067
HIV testing during antenatal care	9.8		0.4217	0.0266	0.0631	1.6163	1.2713	428	558	0.3685	0.4749
Exposure to mass media	10.1		0.1819	0.0102	0.0558	2.9125	1.7066	3259	4200	0.1616	0.2023
Use of computers	10.2		0.8045	0.0180	0.0224	2.2820	1.5106	868	1111	0.7685	0.8405
Use of internet	10.3		0.8347	0.0180	0.0215	2.6001	1.6125	868	1111	0.7987	0.8706
Use of mobile phones	10.S1		0.8962	0.0083	0.0092	3.0824	1.7557	3259	4200	0.8797	0.9127

Table SE.4: Sampling errors: Rural

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9746	0.0055	0.0056	1.1197	1.0582	1037	926	0.9636	0.9855
Early initiation of breastfeeding	2.6		0.2755	0.0146	0.0530	0.9864	0.9932	1037	926	0.2463	0.3047
Exclusive breastfeeding under 6 months	2.7		0.2575	0.0292	0.1135	0.9831	0.9915	251	221	0.1990	0.3160
Predominant breastfeeding under 6 months	2.8		0.5145	0.0290	0.0563	0.7385	0.8593	251	221	0.4566	0.5724
Continued breastfeeding at 1 year	2.9		0.6943	0.0221	0.0318	0.3589	0.5991	177	157	0.6501	0.7385
Continued breastfeeding at 2 years	2.10		0.2393	0.0285	0.1190	0.6193	0.7870	149	140	0.1823	0.2962
Age-appropriate breastfeeding	2.12		0.4970	0.0173	0.0347	1.0928	1.0454	1042	918	0.4625	0.5316
Milk feeding frequency for non-breastfed children	2.14		0.8635	0.0175	0.0203	0.6679	0.8173	299	257	0.8285	0.8986
Minimum meal frequency	2.15		0.8906	0.0118	0.0132	0.9724	0.9861	775	684	0.8671	0.9142
Minimum dietary diversity	2.16		0.7272	0.0175	0.0241	1.0760	1.0373	790	697	0.6921	0.7622
Minimum acceptable diet (breastfeeding children)	2.17a		0.5876	0.0230	0.0391	0.9258	0.9622	476	426	0.5417	0.6336
Minimum acceptable diet (non breastfeeding children)	2.17b		0.5290	0.0246	0.0465	0.6230	0.7893	299	257	0.4797	0.5782
Bottle feeding	2.18		0.3928	0.0163	0.0416	1.0261	1.0130	1042	918	0.3601	0.4255

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Low birth weight infants	2.20		0.0589	0.0043	0.0728	1.0448	1.0221	1026	917	0.0503	0.0674
Infants weighed at birth	2.21		0.9252	0.0136	0.0147	2.4764	1.5736	1037	926	0.8979	0.9524
Tuberculosis immunization coverage	-		0.9718	0.0064	0.0066	0.7167	0.8466	537	477	0.9590	0.9847
Polio immunization coverage (Polio 3)	-		0.9277	0.0120	0.0129	1.0164	1.0082	537	476	0.9038	0.9517
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8870	0.0132	0.0148	0.7915	0.8897	521	459	0.8607	0.9133
Measles immunization coverage	-		0.9189	0.0118	0.0129	0.8818	0.9390	533	472	0.8953	0.9425
Hepatitis B at birth	-		0.7563	0.0174	0.0230	0.7610	0.8723	524	463	0.7214	0.7911
Hepatitis B immunization coverage	-		0.8693	0.0157	0.0180	0.9932	0.9966	521	460	0.8379	0.9007
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8726	0.0158	0.0181	1.0154	1.0077	514	453	0.8410	0.9042
Full immunization coverage	-		0.8310	0.0182	0.0219	1.0674	1.0331	513	455	0.7947	0.8673
No vaccination	-		0.0222	0.0061	0.2749	0.8178	0.9043	537	477	0.0100	0.0345
Neonatal tetanus protection	3.9		0.8049	0.0136	0.0169	1.0901	1.0441	1037	926	0.7777	0.8321
Children with diarrhoea	-		0.0969	0.0075	0.0771	1.3071	1.1433	2331	2051	0.0819	0.1118
Care-seeking for diarrhoea	3.10		0.5624	0.0248	0.0442	0.5513	0.7425	226	221	0.5127	0.6120
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1125	0.0149	0.1321	0.4868	0.6977	226	221	0.0828	0.1422
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.5610	0.0213	0.0379	0.4046	0.6361	226	221	0.5185	0.6036
Children with ARI symptoms	-		0.0318	0.0044	0.1394	1.3075	1.1435	2331	2051	0.0229	0.0406

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Mother/caretakers know 2 dangerous signs of ARI	-		0.2885	0.0137	0.0475	1.5284	1.2363	1884	1669	0.2611	0.3159
Use of solid fuels for cooking	3.15		0.5242	0.0130	0.0249	3.9953	1.9988	26270	5872	0.4982	0.5503
Use of improved drinking water sources	4.1	7.8	0.8915	0.0104	0.0117	6.5702	2.5632	26270	5872	0.8707	0.9123
Water treatment	4.2		0.8017	0.0178	0.0222	1.3576	1.1652	2851	681	0.7660	0.8373
Use of improved sanitation	4.3	7.9	0.7377	0.0113	0.0154	3.8904	1.9724	26270	5872	0.7150	0.7603
Safe disposal of child faeces	4.4		0.5167	0.0164	0.0318	1.4245	1.1935	1500	1322	0.4839	0.5496
Place for handwashing	4.5		0.8373	0.0065	0.0078	1.7843	1.3358	6754	5751	0.8243	0.8503
Availability of soap or other cleansing agents	4.6		0.9101	0.0054	0.0060	2.1050	1.4509	6877	5872	0.8992	0.9209
Contraceptive prevalence rate	5.3	5.3	0.7560	0.0069	0.0091	1.0648	1.0319	4884	4167	0.7422	0.7697
Unmet need	5.4	5.6	0.0618	0.0040	0.0646	1.1441	1.0696	4884	4167	0.0538	0.0698
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9443	0.0132	0.0140	3.0698	1.7521	1037	926	0.9179	0.9707
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.6853	0.0176	0.0257	1.3308	1.1536	1037	926	0.6501	0.7205
Content of antenatal care	5.6		0.5064	0.0199	0.0393	1.4682	1.2117	1037	926	0.4666	0.5463
Skilled attendant at delivery	5.7	5.2	0.9160	0.0141	0.0154	2.3877	1.5452	1037	926	0.8878	0.9442
Institutional deliveries	5.8		0.9131	0.0143	0.0156	2.3708	1.5397	1037	926	0.8846	0.9417
Caesarean section	5.9		0.2103	0.0152	0.0724	1.2898	1.1357	1037	926	0.1798	0.2407
Post-partum stay in health facility	5.10		0.9775	0.0048	0.0049	0.8391	0.9160	947	804	0.9679	0.9871
Post-natal health check for the newborn	5.11		0.8708	0.0150	0.0172	1.8451	1.3584	1037	926	0.8408	0.9008

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Post-natal health check for the mother	5.12		0.8729	0.0153	0.0175	1.9404	1.3930	1037	926	0.8424	0.9034
Attendance for early childhood education	6.1		0.6780	0.0181	0.0267	1.1178	1.0573	847	745	0.6418	0.7142
Support for learning	6.2		0.7216	0.0214	0.0297	1.6956	1.3021	847	745	0.6788	0.7644
Father's support for learning	6.3		0.1171	0.0136	0.1159	1.3261	1.1516	847	745	0.0900	0.1443
Mother's support for learning	6.4		0.3799	0.0227	0.0597	1.6261	1.2752	847	745	0.3345	0.4252
Availability of children's books	6.5		0.1911	0.0105	0.0548	1.4547	1.2061	2331	2051	0.1702	0.2121
Availability of playthings	6.6		0.5123	0.0145	0.0283	1.7238	1.3129	2331	2051	0.4834	0.5413
Inadequate care	6.7		0.0807	0.0066	0.0822	1.2161	1.1028	2331	2051	0.0675	0.0940
Early child development index	6.8		0.8781	0.0130	0.0149	1.1823	1.0874	847	745	0.8520	0.9042
Literacy rate among young people	7.1	2.3	0.9548	0.0096	0.0101	3.4763	1.8645	1839	1625	0.9356	0.9740
School readiness	7.2		0.9687	0.0084	0.0086	1.0001	1.0001	484	435	0.9520	0.9854
Net intake rate in primary education	7.3		0.9558	0.0060	0.0063	0.3596	0.5996	474	423	0.9438	0.9678
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9767	0.0045	0.0046	1.8306	1.3530	2271	2077	0.9677	0.9857
Secondary school net attendance ratio (adjusted)	7.5		0.8180	0.0108	0.0132	2.1716	1.4736	3011	2781	0.7964	0.8396
Lower secondary school net attendance ratio (adjusted)	7.S1		0.8861	0.0105	0.0119	1.7331	1.3165	1694	1587	0.8651	0.9071
Upper secondary school net attendance ratio (adjusted)	7.S2		0.6744	0.0176	0.0261	1.6796	1.2960	1317	1194	0.6393	0.7096

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Transition rate to secondary school	7.8		0.9717	0.0069	0.0071	0.6476	0.8048	405	375	0.9579	0.9855
Transition rate to upper secondary school	7.S3		0.8757	0.0185	0.0211	0.9175	0.9579	344	294	0.8388	0.9127
Birth registration	8.1		0.9577	0.0053	0.0055	1.4105	1.1877	2331	2051	0.9472	0.9683
Child labour	8.2		0.1929	0.0132	0.0685	3.2453	1.8015	6040	2893	0.1665	0.2194
Violent discipline	8.3		0.6907	0.0110	0.0160	1.7697	1.3303	6476	3104	0.6687	0.7128
Marriage before age of 15	8.4		0.0113	0.0018	0.1603	1.6464	1.2831	6568	5627	0.0077	0.0149
Marriage before age of 18	8.5		0.1327	0.0070	0.0524	2.0145	1.4193	5622	4788	0.1188	0.1466
Young people aged 15-19 years currently married or in union	8.6		0.1169	0.0125	0.1068	1.2663	1.1253	946	839	0.0919	0.1419
Polygyny	8.7		0.0066	0.0014	0.2099	1.2267	1.1076	4884	4167	0.0039	0.0094
Spousal age difference	8.8b		0.0410	0.0088	0.2140	0.9629	0.9813	549	493	0.0234	0.0585
Attitudes towards domestic violence	8.12		0.3071	0.0085	0.0278	1.9250	1.3874	6568	5627	0.2900	0.3242
Children's living arrangements	8.13		0.0549	0.0044	0.0809	2.7843	1.6686	7941	7318	0.0460	0.0638
Prevalence of children with one or both parents dead	8.14		0.0362	0.0030	0.0818	1.8413	1.3569	7941	7318	0.0303	0.0421
Children with at least one parent living abroad	8.15		0.0149	0.0029	0.1970	4.2868	2.0705	7941	7318	0.0090	0.0207
Have heard of AIDS	-		0.9332	0.0073	0.0078	4.8197	2.1954	6568	5627	0.9186	0.9478
Knowledge of HIV prevention among young women	9.1	6.3	0.4735	0.0173	0.0365	1.9450	1.3946	1839	1625	0.4390	0.5081
Knowledge of mother-to-child transmission of HIV	9.2		0.4712	0.0093	0.0198	1.9711	1.4039	6568	5627	0.4525	0.4899

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Accepting attitudes towards people living with HIV	9.3		0.3040	0.0094	0.0311	2.1872	1.4789	6129	5185	0.2851	0.3229
People who know where to be tested for HIV	9.4		0.6500	0.0104	0.0161	2.6950	1.6416	6568	5627	0.6291	0.6709
People who have been tested for HIV and know the results	9.5		0.0940	0.0049	0.0523	1.5981	1.2642	6568	5627	0.0842	0.1038
HIV counselling during antenatal care	9.7		0.2645	0.0170	0.0642	1.3702	1.1706	1037	926	0.2306	0.2985
HIV testing during antenatal care	9.8		0.2500	0.0185	0.0740	1.6867	1.2987	1037	926	0.2130	0.2870
Exposure to mass media											
	10.1		0.1067	0.0060	0.0565	2.1429	1.4639	6568	5627	0.0947	0.1188
Use of computers											
	10.2		0.5519	0.0169	0.0307	1.8840	1.3726	1839	1625	0.5180	0.5857
Use of internet											
	10.3		0.5876	0.0163	0.0278	1.7825	1.3351	1839	1625	0.5550	0.6202
Use of mobile phones	10.S1		0.7805	0.0098	0.0125	3.1252	1.7678	6568	5627	0.7610	0.8000

Table SE.5: Sampling errors: Red River Delta

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9743	0.0107	0.0110	1.0314	1.0156	343	227	0.9529	0.9957
Early initiation of breastfeeding	2.6		0.2094	0.0275	0.1311	1.0290	1.0144	343	227	0.1545	0.2643
Exclusive breastfeeding under 6 months	2.7		0.2888	0.0506	0.1753	0.6239	0.7899	78	51	0.1875	0.3900
Predominant breastfeeding under 6 months	2.8		0.4795	0.0335	0.0699	0.2248	0.4741	78	51	0.4125	0.5465
Continued breastfeeding at 1 year	2.9		0.6448	0.0414	0.0642	0.2467	0.4967	49	34	0.5621	0.7276
Continued breastfeeding at 2 years	2.10		0.3465	0.0706	0.2039	0.7274	0.8529	51	34	0.2052	0.4878
Age-appropriate breastfeeding	2.12		0.5153	0.0278	0.0539	0.6938	0.8330	348	226	0.4598	0.5708
Milk feeding frequency for non-breastfed children	2.14		0.9617	0.0278	0.0289	1.3631	1.1675	102	66	0.9061	1.0173
Minimum meal frequency	2.15		0.9316	0.0185	0.0199	0.9213	0.9598	266	172	0.8946	0.9687
Minimum dietary diversity	2.16		0.8259	0.0309	0.0374	1.1568	1.0755	270	175	0.7640	0.8877
Minimum acceptable diet (breastfeeding children)	2.17a		0.7126	0.0468	0.0657	1.1232	1.0598	164	106	0.6190	0.8063
Minimum acceptable diet (non breastfeeding children)	2.17b		0.6667	0.0454	0.0681	0.6021	0.7760	102	66	0.5759	0.7574
Bottle feeding	2.18		0.3567	0.0276	0.0775	0.7488	0.8653	348	226	0.3014	0.4120
Low birth weight infants	2.20		0.0542	0.0076	0.1409	0.9411	0.9701	340	225	0.0389	0.0695
Infants weighed at birth	2.21		0.9825	0.0090	0.0092	1.0695	1.0341	343	227	0.9645	1.0006

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Tuberculosis immunization coverage	-		1.0000	0.0000	0.0000			192	125	1.0000	1.0000
Polio immunization coverage (Polio 3)	-		0.9832	0.0099	0.0101	0.7335	0.8565	192	125	0.9634	1.0030
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.9598	0.0136	0.0142	0.5928	0.7700	190	124	0.9325	0.9871
Measles immunization coverage	-		0.9723	0.0088	0.0091	0.3579	0.5983	192	125	0.9546	0.9899
Hepatitis B at birth	-		0.8460	0.0278	0.0328	0.7344	0.8570	192	125	0.7904	0.9015
Hepatitis B immunization coverage	-		0.9665	0.0117	0.0121	0.5223	0.7227	192	125	0.9431	0.9899
Haemophilus influenzae type B (Hib) immunization coverage	-		0.9594	0.0138	0.0144	0.5959	0.7719	188	123	0.9318	0.9870
Full immunization coverage	-		0.9370	0.0139	0.0148	0.3971	0.6301	188	123	0.9093	0.9647
No vaccination	-		0.0000	0.0000				192	125	0.0000	0.0000
Neonatal tetanus protection	3.9		0.8414	0.0226	0.0268	0.8632	0.9291	343	227	0.7963	0.8866
Children with diarrhoea	-		0.0659	0.0102	0.1554	0.8768	0.9364	784	516	0.0454	0.0864
Care-seeking for diarrhoea	3.10		0.4640	0.0506	0.1091	0.3296	0.5741	52	33	0.3628	0.5652
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.0935	0.0550	0.5878	1.1403	1.0679	52	33	-0.0164	0.2034
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.6025	0.0715	0.1186	0.6823	0.8260	52	33	0.4596	0.7455
Children with ARI symptoms	-		0.0180	0.0070	0.3911	1.4411	1.2004	784	516	0.0039	0.0320
Mother/caretakers know 2 dangerous signs of ARI	-		0.3880	0.0307	0.0790	1.7109	1.3080	638	433	0.3267	0.4493
Use of solid fuels for cooking	3.15		0.2619	0.0189	0.0720	3.0759	1.7538	9091	1674	0.2242	0.2996

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Use of improved drinking water sources	4.1	7.8	0.9934	0.0027	0.0027	1.8918	1.3754	9091	1674	0.9879	0.9988
Water treatment	4.2		0.9732	0.0017	0.0018	0.0012	0.0343	60	11	0.9697	0.9767
Use of improved sanitation	4.3	7.9	0.9409	0.0081	0.0086	1.9825	1.4080	9091	1674	0.9247	0.9572
Safe disposal of child faeces	4.4		0.6990	0.0224	0.0320	0.7852	0.8861	507	331	0.6543	0.7438
Place for handwashing	4.5		0.9445	0.0075	0.0079	1.7697	1.3303	2465	1672	0.9296	0.9594
Availability of soap or other cleansing agents	4.6		0.9622	0.0068	0.0070	2.0989	1.4488	2468	1674	0.9487	0.9757
Contraceptive prevalence rate	5.3	5.3	0.7673	0.0109	0.0142	0.7261	0.8521	1632	1091	0.7455	0.7891
Unmet need	5.4	5.6	0.0584	0.0067	0.1143	0.8818	0.9391	1632	1091	0.0450	0.0717
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9855	0.0083	0.0085	1.1023	1.0499	343	227	0.9689	1.0022
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.8518	0.0258	0.0303	1.1931	1.0923	343	227	0.8001	0.9034
Content of antenatal care	5.6		0.6325	0.0364	0.0576	1.2917	1.1365	343	227	0.5596	0.7054
Skilled attendant at delivery	5.7	5.2	0.9758	0.0106	0.0109	1.0820	1.0402	343	227	0.9546	0.9971
Institutional deliveries	5.8		0.9901	0.0070	0.0071	1.1333	1.0646	343	227	0.9761	1.0041
Caesarean section	5.9		0.2551	0.0304	0.1191	1.0987	1.0482	343	227	0.1943	0.3159
Post-partum stay in health facility	5.10		0.9650	0.0098	0.0102	0.6418	0.8011	340	225	0.9453	0.9847
Post-natal health check for the newborn	5.11		0.9554	0.0130	0.0136	0.8953	0.9462	343	227	0.9294	0.9814
Post-natal health check for the mother	5.12		0.9468	0.0135	0.0143	0.8173	0.9041	343	227	0.9198	0.9738
Attendance for early childhood education	6.1		0.8548	0.0237	0.0278	0.8524	0.9233	282	189	0.8073	0.9022
Support for learning	6.2		0.8650	0.0376	0.0435	2.2790	1.5096	282	189	0.7897	0.9402

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Father's support for learning	6.3		0.2106	0.0329	0.1560	1.2207	1.1048	282	189	0.1449	0.2763
Mother's support for learning	6.4		0.5389	0.0468	0.0869	1.6582	1.2877	282	189	0.4453	0.6325
Availability of children's books	6.5		0.3836	0.0235	0.0612	1.1998	1.0953	784	516	0.3367	0.4305
Availability of playthings	6.6		0.5966	0.0230	0.0385	1.1308	1.0634	784	516	0.5506	0.6425
Inadequate care	6.7		0.0509	0.0104	0.2050	1.1605	1.0773	784	516	0.0300	0.0718
Early child development index	6.8		0.9369	0.0203	0.0216	1.3058	1.1427	282	189	0.8964	0.9774
Literacy rate among young people	7.1	2.3	0.9931	0.0042	0.0043	1.0486	1.0240	609	403	0.9847	1.0016
School readiness	7.2		0.9908	0.0093	0.0094	1.0613	1.0302	179	114	0.9722	1.0093
Net intake rate in primary education	7.3		0.9946	0.0054	0.0054	0.6210	0.7880	177	115	0.9838	1.0054
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9887	0.0039	0.0040	0.7005	0.8370	746	504	0.9808	0.9966
Secondary school net attendance ratio (adjusted)	7.5		0.9349	0.0123	0.0131	1.4300	1.1958	856	580	0.9104	0.9594
Lower secondary school net attendance ratio (adjusted)	7.S1		0.9813	0.0071	0.0073	0.8694	0.9324	456	313	0.9670	0.9956
Upper secondary school net attendance ratio (adjusted)	7.S2		0.8640	0.0227	0.0263	1.1678	1.0807	399	267	0.8185	0.9094
Transition rate to secondary school	7.8		1.0000	0.0000	0.0000			105	74	1.0000	1.0000
Transition rate to upper secondary school	7.S3		0.9302	0.0222	0.0238	0.5441	0.7376	109	73	0.8859	0.9745
Birth registration	8.1		0.9883	0.0050	0.0051	1.1212	1.0589	784	516	0.9783	0.9983
Child labour	8.2		0.0421	0.0082	0.1935	1.1452	1.0701	1818	696	0.0258	0.0585
Violent discipline	8.3		0.6258	0.0191	0.0305	1.2111	1.1005	2052	781	0.5877	0.6640
Marriage before age of 15	8.4		0.0027	0.0016	0.5807	1.3640	1.1679	2221	1495	-0.0004	0.0058

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Marriage before age of 18	8.5		0.0787	0.0092	0.1167	1.4943	1.2224	1908	1285	0.0603	0.0970
Young people aged 15-19 years currently married or in union	8.6		0.0430	0.0111	0.2581	0.6260	0.7912	313	210	0.0208	0.0653
Polygyny	8.7		0.0071	0.0021	0.2981	0.6938	0.8329	1632	1091	0.0029	0.0113
Spousal age difference	8.8b		0.0382	0.0207	0.5406	1.0689	1.0339	150	93	-0.0031	0.0796
Attitudes towards domestic violence	8.12		0.1780	0.0133	0.0746	1.7996	1.3415	2221	1495	0.1514	0.2046
Children's living arrangements	8.13		0.0416	0.0088	0.2118	3.2926	1.8146	2477	1691	0.0240	0.0593
Prevalence of children with one or both parents dead	8.14		0.0254	0.0043	0.1707	1.2846	1.1334	2477	1691	0.0168	0.0341
Children with at least one parent living abroad	8.15		0.0202	0.0063	0.3135	3.4308	1.8522	2477	1691	0.0075	0.0329
Have heard of AIDS	-		0.9854	0.0029	0.0029	0.8720	0.9338	2221	1495	0.9796	0.9912
Knowledge of HIV prevention among young women	9.1	6.3	0.6298	0.0338	0.0537	1.9690	1.4032	609	403	0.5623	0.6974
Knowledge of mother-to-child transmission of HIV	9.2		0.5458	0.0154	0.0283	1.4364	1.1985	2221	1495	0.5149	0.5767
Accepting attitudes towards people living with HIV	9.3		0.3565	0.0145	0.0407	1.3534	1.1633	2188	1476	0.3275	0.3855
People who know where to be tested for HIV	9.4		0.8384	0.0105	0.0126	1.2228	1.1058	2221	1495	0.8174	0.8595
People who have been tested for HIV and know the results	9.5		0.1410	0.0126	0.0894	1.9574	1.3991	2221	1495	0.1158	0.1661
HIV counselling during antenatal care	9.7		0.2665	0.0315	0.1181	1.1445	1.0698	343	227	0.2035	0.3294

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
HIV testing during antenatal care	9.8		0.3018	0.0393	0.1303	1.6577	1.2875	343	227	0.2231	0.3804
Exposure to mass media	10.1		0.1652	0.0130	0.0785	1.8208	1.3494	2221	1495	0.1393	0.1911
Use of computers	10.2		0.7978	0.0304	0.0382	2.3083	1.5193	609	403	0.7369	0.8586
Use of internet	10.3		0.8195	0.0279	0.0340	2.1136	1.4538	609	403	0.7637	0.8753
Use of mobile phones	10.S1		0.9071	0.0126	0.0139	2.8258	1.6810	2221	1495	0.8819	0.9324

Table SE.6: Sampling errors: Northern Midlands and Mountain areas

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9604	0.0133	0.0139	1.2983	1.1394	230	280	0.9338	0.9870
Early initiation of breastfeeding	2.6		0.3114	0.0285	0.0914	1.0544	1.0268	230	280	0.2545	0.3684
Exclusive breastfeeding under 6 months	2.7		0.4102	0.0578	0.1409	1.0633	1.0312	61	78	0.2946	0.5258
Predominant breastfeeding under 6 months	2.8		0.5526	0.0467	0.0845	0.6796	0.8244	61	78	0.4591	0.6460
Continued breastfeeding at 1 year	2.9		0.8720	0.0204	0.0234	0.2233	0.4725	50	61	0.8313	0.9128
Continued breastfeeding at 2 years	2.10		0.1152	0.0863	0.7495	2.3402	1.5298	28	33	-0.0575	0.2879
Age-appropriate breastfeeding	2.12		0.5726	0.0329	0.0575	1.2469	1.1166	228	283	0.5068	0.6384
Milk feeding frequency for non-breastfed children	2.14		0.6754	0.0319	0.0472	0.2874	0.5361	51	63	0.6117	0.7392
Minimum meal frequency	2.15		0.8643	0.0264	0.0305	1.2024	1.0965	166	204	0.8116	0.9170
Minimum dietary diversity	2.16		0.6093	0.0421	0.0691	1.5180	1.2321	167	205	0.5251	0.6935
Minimum acceptable diet (breastfeeding children)	2.17a		0.5060	0.0373	0.0737	0.7797	0.8830	114	141	0.4314	0.5806
Minimum acceptable diet (non breastfeeding children)	2.17b		0.4434	0.0481	0.1084	0.5806	0.7620	51	63	0.3472	0.5395
Bottle feeding	2.18		0.2062	0.0226	0.1094	0.8773	0.9367	228	283	0.1611	0.2513

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Low birth weight infants	2.20		0.0620	0.0076	0.1221	0.8154	0.9030	222	272	0.0468	0.0771
Infants weighed at birth	2.21		0.7917	0.0525	0.0664	4.6701	2.1610	230	280	0.6866	0.8968
Tuberculosis immunization coverage	-		0.9488	0.0176	0.0186	0.8759	0.9359	113	138	0.9135	0.9840
Polio immunization coverage (Polio 3)	-		0.9012	0.0340	0.0377	1.7751	1.3323	113	138	0.8333	0.9691
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8304	0.0399	0.0481	1.4260	1.1941	103	127	0.7506	0.9103
Measles immunization coverage	-		0.9038	0.0249	0.0275	0.9598	0.9797	111	136	0.8541	0.9535
Hepatitis B at birth	-		0.4647	0.0348	0.0748	0.6218	0.7885	105	129	0.3952	0.5342
Hepatitis B immunization coverage	-		0.7713	0.0554	0.0718	2.2105	1.4868	104	128	0.6605	0.8821
Haemophilus influenzae type B (Hib) immunization coverage	-		0.7842	0.0561	0.0715	2.3207	1.5234	102	126	0.6721	0.8963
Full immunization coverage	-		0.7185	0.0579	0.0806	2.0382	1.4276	101	124	0.6028	0.8343
No vaccination	-		0.0295	0.0166	0.5640	1.3257	1.1514	113	138	-0.0038	0.0628
Neonatal tetanus protection	3.9		0.7099	0.0302	0.0425	1.2352	1.1114	230	280	0.6495	0.7703
Children with diarrhoea	-		0.1413	0.0157	0.1111	1.2930	1.1371	513	638	0.1099	0.1727
Care-seeking for diarrhoea	3.10		0.4687	0.0471	0.1004	0.7646	0.8744	72	87	0.3745	0.5628
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.0339	0.0133	0.3919	0.4634	0.6807	72	87	0.0073	0.0605
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.5732	0.0357	0.0623	0.4484	0.6697	72	87	0.5018	0.6447
Children with ARI symptoms	-		0.0214	0.0075	0.3476	1.6863	1.2986	513	638	0.0065	0.0364

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Mother/caretakers know 2 dangerous signs of ARI	-		0.2716	0.0214	0.0787	1.1844	1.0883	419	514	0.2288	0.3143
Use of solid fuels for cooking	3.15		0.7017	0.0272	0.0387	5.8928	2.4275	5240	1674	0.6474	0.7560
Use of improved drinking water sources	4.1	7.8	0.8986	0.0157	0.0175	4.5507	2.1332	5240	1674	0.8671	0.9300
Water treatment	4.2		1.0000	0.0000	0.0000			532	154	1.0000	1.0000
Use of improved sanitation	4.3	7.9	0.6884	0.0250	0.0364	4.8868	2.2106	5240	1674	0.6383	0.7384
Safe disposal of child faeces	4.4		0.3632	0.0403	0.1110	2.8736	1.6952	331	410	0.2826	0.4438
Place for handwashing	4.5		0.7552	0.0199	0.0263	3.4971	1.8701	1257	1635	0.7154	0.7950
Availability of soap or other cleansing agents	4.6		0.8898	0.0144	0.0162	3.5304	1.8789	1292	1674	0.8610	0.9186
Contraceptive prevalence rate	5.3	5.3	0.7279	0.0146	0.0201	1.3429	1.1588	1034	1249	0.6987	0.7571
Unmet need	5.4	5.6	0.0821	0.0085	0.1030	1.1842	1.0882	1034	1249	0.0652	0.0990
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.8272	0.0540	0.0653	5.6894	2.3852	230	280	0.7192	0.9351
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.5168	0.0401	0.0776	1.7960	1.3402	230	280	0.4366	0.5970
Content of antenatal care	5.6		0.2842	0.0280	0.0984	1.0727	1.0357	230	280	0.2283	0.3401
Skilled attendant at delivery	5.7	5.2	0.7751	0.0538	0.0694	4.6275	2.1512	230	280	0.6676	0.8827
Institutional deliveries	5.8		0.7692	0.0536	0.0697	4.5119	2.1241	230	280	0.6620	0.8764
Caesarean section	5.9		0.2215	0.0296	0.1337	1.4198	1.1916	230	280	0.1623	0.2808
Post-partum stay in health facility	5.10		0.9681	0.0104	0.0108	0.7580	0.8707	177	217	0.9472	0.9889

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Post-natal health check for the newborn	5.11		0.7328	0.0530	0.0723	3.9983	1.9996	230	280	0.6268	0.8387
Post-natal health check for the mother	5.12		0.7533	0.0535	0.0710	4.2997	2.0736	230	280	0.6463	0.8604
Attendance for early childhood education	6.1		0.8380	0.0350	0.0417	2.1184	1.4555	188	236	0.7681	0.9080
Support for learning	6.2		0.6530	0.0470	0.0719	2.2885	1.5128	188	236	0.5590	0.7469
Father's support for learning	6.3		0.0912	0.0187	0.2046	0.9875	0.9937	188	236	0.0539	0.1285
Mother's support for learning	6.4		0.3696	0.0292	0.0790	0.8590	0.9268	188	236	0.3112	0.4280
Availability of children's books	6.5		0.1522	0.0197	0.1295	1.9183	1.3850	513	638	0.1128	0.1917
Availability of playthings	6.6		0.4485	0.0307	0.0684	2.4231	1.5566	513	638	0.3871	0.5098
Inadequate care	6.7		0.1155	0.0187	0.1616	2.1718	1.4737	513	638	0.0782	0.1528
Early child development index	6.8		0.8178	0.0290	0.0355	1.3268	1.1519	188	236	0.7598	0.8758
Literacy rate among young people	7.1	2.3	0.8729	0.0400	0.0459	6.1689	2.4837	367	428	0.7928	0.9530
School readiness	7.2		0.9802	0.0087	0.0089	0.4741	0.6886	94	122	0.9628	0.9977
Net intake rate in primary education	7.3		0.9134	0.0137	0.0150	0.2822	0.5312	94	120	0.8860	0.9408
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9553	0.0138	0.0144	2.7694	1.6642	489	623	0.9277	0.9829
Secondary school net attendance ratio (adjusted)	7.5		0.7942	0.0298	0.0376	3.8467	1.9613	569	707	0.7346	0.8539
Lower secondary school net attendance ratio (adjusted)	7.S1		0.8767	0.0304	0.0347	3.4841	1.8666	323	408	0.8159	0.9376

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Upper secondary school net attendance ratio (adjusted)	7.S2		0.6046	0.0467	0.0772	2.7185	1.6488	246	299	0.5113	0.6980
Transition rate to secondary school	7.8		0.9868	0.0127	0.0129	1.2345	1.1111	82	101	0.9614	1.0122
Transition rate to upper secondary school	7.S3		0.8651	0.0462	0.0534	1.3332	1.1546	63	74	0.7728	0.9574
Birth registration	8.1		0.9495	0.0157	0.0165	3.2818	1.8116	513	638	0.9181	0.9810
Child labour	8.2		0.3618	0.0426	0.1177	6.3428	2.5185	1229	809	0.2767	0.4470
Violent discipline	8.3		0.6087	0.0290	0.0476	3.2376	1.7993	1347	920	0.5507	0.6666
Marriage before age of 15	8.4		0.0208	0.0068	0.3266	3.6152	1.9014	1325	1599	0.0072	0.0343
Marriage before age of 18	8.5		0.1884	0.0198	0.1049	3.5336	1.8798	1140	1383	0.1489	0.2280
Young people aged 15-19 years currently married or in union	8.6		0.2264	0.0386	0.1707	1.8320	1.3535	185	216	0.1491	0.3036
Polygyny	8.7		0.0121	0.0040	0.3344	1.7079	1.3069	1034	1249	0.0040	0.0202
Spousal age difference	8.8b		0.0111	0.0073	0.6571	0.6958	0.8342	127	144	-0.0035	0.0258
Attitudes towards domestic violence	8.12		0.3460	0.0169	0.0488	2.0125	1.4186	1325	1599	0.3122	0.3798
Children's living arrangements	8.13		0.0498	0.0062	0.1243	1.6924	1.3009	1648	2091	0.0374	0.0621
Prevalence of children with one or both parents dead	8.14		0.0399	0.0064	0.1599	2.2199	1.4899	1648	2091	0.0271	0.0526
Children with at least one parent living abroad	8.15		0.0120	0.0035	0.2941	2.1928	1.4808	1648	2091	0.0049	0.0190
Have heard of AIDS	-		0.8984	0.0296	0.0329	15.3384	3.9164	1325	1599	0.8392	0.9576

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Knowledge of HIV prevention among young women	9.1	6.3	0.3923	0.0310	0.0791	1.7265	1.3140	367	428	0.3302	0.4544
Knowledge of mother-to-child transmission of HIV	9.2		0.4174	0.0213	0.0510	2.9727	1.7242	1325	1599	0.3748	0.4599
Accepting attitudes towards people living with HIV	9.3		0.3488	0.0191	0.0547	2.3057	1.5185	1190	1442	0.3107	0.3869
People who know where to be tested for HIV	9.4		0.6533	0.0297	0.0455	6.2240	2.4948	1325	1599	0.5939	0.7127
People who have been tested for HIV and know the results	9.5		0.1029	0.0103	0.0998	1.8235	1.3504	1325	1599	0.0824	0.1234
HIV counselling during antenatal care	9.7		0.1923	0.0278	0.1445	1.3869	1.1777	230	280	0.1367	0.2479
HIV testing during antenatal care	9.8		0.1313	0.0281	0.2139	1.9305	1.3894	230	280	0.0751	0.1875
Exposure to mass media	10.1		0.0913	0.0090	0.0991	1.5766	1.2556	1325	1599	0.0732	0.1093
Use of computers	10.2		0.4096	0.0347	0.0847	2.1260	1.4581	367	428	0.3402	0.4790
Use of internet	10.3		0.4587	0.0376	0.0820	2.4305	1.5590	367	428	0.3835	0.5339
Use of mobile phones	10.S1		0.7413	0.0301	0.0406	7.5384	2.7456	1325	1599	0.6812	0.8015

Table SE.7: Sampling errors: North Central and Central coastal area

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9856	0.0087	0.0089	1.1877	1.0898	300	222	0.9681	1.0030
Early initiation of breastfeeding	2.6		0.2852	0.0265	0.0928	0.7587	0.8710	300	222	0.2323	0.3381
Exclusive breastfeeding under 6 months	2.7		0.2672	0.0611	0.2286	1.0094	1.0047	77	54	0.1450	0.3893
Predominant breastfeeding under 6 months	2.8		0.5422	0.0732	0.1351	1.1450	1.0701	77	54	0.3958	0.6887
Continued breastfeeding at 1 year	2.9		0.8283	0.0221	0.0267	0.1067	0.3266	45	32	0.7840	0.8725
Continued breastfeeding at 2 years	2.10		0.2055	0.0265	0.1287	0.1629	0.4037	50	39	0.1526	0.2584
Age-appropriate breastfeeding	2.12		0.5214	0.0384	0.0736	1.3159	1.1471	309	224	0.4446	0.5981
Milk feeding frequency for non-breastfed children	2.14		0.9282	0.0223	0.0240	0.4761	0.6900	87	65	0.8837	0.9728
Minimum meal frequency	2.15		0.9118	0.0249	0.0273	1.2887	1.1352	230	168	0.8620	0.9617
Minimum dietary diversity	2.16		0.8473	0.0274	0.0323	0.9777	0.9888	233	170	0.7926	0.9020
Minimum acceptable diet (breastfeeding children)	2.17a		0.7374	0.0392	0.0531	0.8074	0.8986	142	103	0.6591	0.8157
Minimum acceptable diet (non breastfeeding children)	2.17b		0.6718	0.0367	0.0546	0.3907	0.6251	87	65	0.5984	0.7451

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Bottle feeding	2.18		0.4083	0.0345	0.0844	1.0959	1.0469	309	224	0.3394	0.4772
Low birth weight infants	2.20		0.0660	0.0101	0.1535	1.0789	1.0387	300	222	0.0457	0.0862
Infants weighed at birth	2.21		0.9766	0.0121	0.0124	1.4216	1.1923	300	222	0.9524	1.0008
Tuberculosis immunization coverage	-		1.0000	0.0000	0.0000			157	115	1.0000	1.0000
Polio immunization coverage (Polio 3)	-		0.9662	0.0150	0.0155	0.7811	0.8838	157	115	0.9363	0.9961
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.9018	0.0287	0.0319	1.0634	1.0312	157	115	0.8443	0.9593
Measles immunization coverage	-		0.9402	0.0226	0.0240	1.0346	1.0172	157	115	0.8950	0.9854
Hepatitis B at birth	-		0.8722	0.0222	0.0255	0.5013	0.7080	156	114	0.8278	0.9167
Hepatitis B immunization coverage	-		0.8889	0.0296	0.0334	0.9970	0.9985	154	113	0.8296	0.9482
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8889	0.0297	0.0334	1.0002	1.0001	154	113	0.8295	0.9483
Full immunization coverage			0.8543	0.0351	0.0411	1.1007	1.0491	152	112	0.7841	0.9246
No vaccination			0.0000	0.0000				157	115	0.0000	0.0000
Neonatal tetanus protection	3.9		0.8756	0.0230	0.0263	1.0760	1.0373	300	222	0.8295	0.9216
Children with diarrhoea	-		0.0770	0.0149	0.1937	1.5371	1.2398	690	492	0.0472	0.1068
Care-seeking for diarrhoea	3.10		0.6056	0.0511	0.0844	0.3939	0.6276	53	37	0.5034	0.7079
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1496	0.0264	0.1764	0.1972	0.4440	53	37	0.0968	0.2024

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.4226	0.0223	0.0528	0.0735	0.2711	53	37	0.3779	0.4672
Children with ARI symptoms	-		0.0304	0.0084	0.2757	1.1701	1.0817	690	492	0.0136	0.0471
Mother/caretakers know 2 dangerous signs of ARI	-		0.2457	0.0212	0.0864	1.0037	1.0018	566	414	0.2033	0.2882
Use of solid fuels for cooking	3.15		0.4760	0.0252	0.0529	4.2163	2.0534	8214	1661	0.4257	0.5264
Use of improved drinking water sources	4.1	7.8	0.8642	0.0202	0.0234	5.7714	2.4024	8214	1661	0.8238	0.9046
Water treatment	4.2		0.9453	0.0101	0.0107	0.3663	0.6052	1116	186	0.9250	0.9655
Use of improved sanitation	4.3	7.9	0.8381	0.0201	0.0240	4.9533	2.2256	8214	1661	0.7979	0.8783
Safe disposal of child faeces	4.4		0.5820	0.0288	0.0495	1.0688	1.0338	436	314	0.5243	0.6396
Place for handwashing	4.5		0.8601	0.0117	0.0136	1.8592	1.3635	2210	1632	0.8367	0.8835
Availability of soap or other cleansing agents	4.6		0.9455	0.0089	0.0094	2.5273	1.5898	2245	1661	0.9278	0.9632
Contraceptive prevalence rate	5.3	5.3	0.7672	0.0120	0.0156	0.8474	0.9206	1445	1056	0.7433	0.7912
Unmet need	5.4	5.6	0.0519	0.0075	0.1453	1.2199	1.1045	1445	1056	0.0368	0.0670
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9911	0.0068	0.0069	1.1589	1.0765	300	222	0.9775	1.0047
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.7040	0.0356	0.0506	1.3475	1.1608	300	222	0.6327	0.7753
Content of antenatal care	5.6		0.5383	0.0374	0.0695	1.2461	1.1163	300	222	0.4634	0.6132
Skilled attendant at delivery	5.7	5.2	0.9848	0.0094	0.0095	1.3020	1.1410	300	222	0.9661	1.0036

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Institutional deliveries	5.8		0.9746	0.0140	0.0144	1.7616	1.3272	300	222	0.9465	1.0027
Caesarean section	5.9		0.3234	0.0372	0.1152	1.4013	1.1838	300	222	0.2489	0.3979
Post-partum stay in health facility	5.10		0.9875	0.0088	0.0089	1.3429	1.1588	293	217	0.9700	1.0050
Post-natal health check for the newborn	5.11		0.8720	0.0242	0.0278	1.1597	1.0769	300	222	0.8236	0.9204
Post-natal health check for the mother	5.12		0.8891	0.0248	0.0279	1.3792	1.1744	300	222	0.8395	0.9387
Attendance forearly childhood education	6.1		0.7456	0.0358	0.0480	1.2072	1.0987	257	180	0.6741	0.8172
Support for learning	6.2		0.7854	0.0387	0.0493	1.5937	1.2624	257	180	0.7079	0.8629
Father's support for learning	6.3		0.1437	0.0259	0.1802	0.9752	0.9875	257	180	0.0919	0.1954
Mother's support for learning	6.4		0.4511	0.0462	0.1024	1.5424	1.2419	257	180	0.3587	0.5435
Availability of children's books	6.5		0.2352	0.0183	0.0780	0.9183	0.9583	690	492	0.1985	0.2719
Availability of playthings	6.6		0.5546	0.0291	0.0524	1.6809	1.2965	690	492	0.4965	0.6128
Inadequate care	6.7		0.1032	0.0114	0.1100	0.6841	0.8271	690	492	0.0805	0.1260
Early child development index	6.8		0.8698	0.0241	0.0277	0.9149	0.9565	257	180	0.8217	0.9179
Literacy rate among young people	7.1	2.3	0.9851	0.0062	0.0063	1.1943	1.0929	615	454	0.9727	0.9976
School readiness	7.2		0.9812	0.0139	0.0141	0.9909	0.9954	131	96	0.9535	1.0090
Net intake rate in primary education	7.3		1.0000	0.0000	0.0000			126	91	1.0000	1.0000

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9986	0.0014	0.0014	0.6942	0.8332	643	484	0.9957	1.0014
Secondary school net attendance ratio (adjusted)	7.5		0.8962	0.0129	0.0144	1.2977	1.1392	992	729	0.8705	0.9220
Lower secondary school net attendance ratio (adjusted)	7.S1		0.9405	0.0143	0.0152	1.4784	1.2159	551	403	0.9118	0.9692
Upper secondary school net attendance ratio (adjusted)	7.S2		0.8043	0.0244	0.0303	1.2272	1.1078	441	326	0.7555	0.8530
Transition rate to secondary school	7.8		0.9707	0.0142	0.0146	0.6375	0.7984	124	91	0.9423	0.9991
Transition rate to upper secondary school	7.S3		0.8575	0.0344	0.0401	0.8435	0.9184	126	88	0.7887	0.9264
Birth registration	8.1		0.9810	0.0064	0.0065	1.0899	1.0440	690	492	0.9682	0.9939
Child labour	8.2		0.1522	0.0168	0.1107	1.6726	1.2933	1879	762	0.1185	0.1859
Violent discipline	8.3		0.7115	0.0156	0.0219	0.9081	0.9530	1933	768	0.6804	0.7427
Marriage before age of 15	8.4		0.0055	0.0027	0.4973	2.0960	1.4477	2082	1535	0.0000	0.0110
Marriage before age of 18	8.5		0.0852	0.0137	0.1609	3.1142	1.7647	1754	1293	0.0578	0.1126
Young people aged 15-19 years currently married or in union	8.6		0.0874	0.0212	0.2431	1.3636	1.1677	329	242	0.0449	0.1298
Polygyny	8.7		0.0054	0.0024	0.4494	1.1662	1.0799	1445	1056	0.0006	0.0103
Spousal age difference	8.8b		0.0475	0.0207	0.4360	0.9676	0.9837	143	103	0.0061	0.0890
Attitudes towards domestic violence	8.12		0.4051	0.0181	0.0446	2.0772	1.4412	2082	1535	0.3690	0.4413

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children's living arrangements	8.13		0.0572	0.0081	0.1423	2.2270	1.4923	2436	1812	0.0409	0.0735
Prevalence of children with one or both parents dead	8.14		0.0433	0.0065	0.1492	1.8248	1.3509	2436	1812	0.0304	0.0562
Children with at least one parent living abroad	8.15		0.0249	0.0069	0.2755	3.5081	1.8730	2436	1812	0.0112	0.0386
Have heard of AIDS	-		0.9155	0.0124	0.0136	3.0655	1.7508	2082	1535	0.8906	0.9403
Knowledge of HIV prevention among young women	9.1	6.3	0.4104	0.0283	0.0690	1.5014	1.2253	615	454	0.3537	0.4670
Knowledge of mother-to-child transmission of HIV	9.2		0.4010	0.0167	0.0418	1.7915	1.3385	2082	1535	0.3675	0.4345
Accepting attitudes towards people living with HIV	9.3		0.3167	0.0179	0.0565	2.0799	1.4422	1906	1408	0.2809	0.3524
People who know where to be tested for HIV	9.4		0.6192	0.0193	0.0311	2.4203	1.5557	2082	1535	0.5807	0.6578
People who have been tested for HIV and know the results	9.5		0.0736	0.0076	0.1035	1.3058	1.1427	2082	1535	0.0584	0.0888
HIV counselling during antenatal care	9.7		0.1965	0.0275	0.1402	1.0618	1.0304	300	222	0.1414	0.2516
HIV testing during antenatal care	9.8		0.1615	0.0261	0.1613	1.1078	1.0525	300	222	0.1094	0.2136
Exposure to mass media	10.1		0.1210	0.0127	0.1046	2.3100	1.5199	2082	1535	0.0957	0.1463
Use of computers	10.2		0.6583	0.0272	0.0413	1.4852	1.2187	615	454	0.6040	0.7126
Use of internet	10.3		0.6968	0.0278	0.0398	1.6519	1.2853	615	454	0.6413	0.7523
Use of mobile phones	10.S1		0.7952	0.0174	0.0218	2.8353	1.6838	2082	1535	0.7605	0.8299

Table SE.8: Sampling errors: Central Highlands

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9814	0.0071	0.0073	0.8586	0.9266	109	308	0.9671	0.9957
Early initiation of breastfeeding	2.6		0.3507	0.0244	0.0695	0.8012	0.8951	109	308	0.3019	0.3994
Exclusive breastfeeding under 6 months	2.7		0.2867	0.0458	0.1596	0.7374	0.8587	25	73	0.1952	0.3783
Predominant breastfeeding under 6 months	2.8		0.5740	0.0451	0.0787	0.6001	0.7746	25	73	0.4837	0.6643
Continued breastfeeding at 1 year	2.9		0.8134	0.0310	0.0381	0.2912	0.5397	17	47	0.7514	0.8754
Continued breastfeeding at 2 years	2.10		0.4225	0.0521	0.1232	0.6886	0.8298	23	63	0.3184	0.5267
Age-appropriate breastfeeding	2.12		0.5695	0.0331	0.0581	1.3229	1.1502	107	297	0.5033	0.6357
Milk feeding frequency for non-breastfed children	2.14		0.7844	0.0569	0.0726	1.3234	1.1504	25	70	0.6705	0.8983
Minimum meal frequency	2.15		0.8743	0.0214	0.0244	0.9052	0.9514	81	219	0.8315	0.9170
Minimum dietary diversity	2.16		0.6327	0.0293	0.0462	0.8211	0.9062	82	224	0.5742	0.6912
Minimum acceptable diet (breastfeeding children)	2.17a		0.4803	0.0311	0.0647	0.5686	0.7541	56	148	0.4181	0.5424

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Minimum acceptable diet (non breastfeeding children)	2.17b		0.5612	0.0466	0.0830	0.6078	0.7796	25	70	0.4680	0.6543
Bottle feeding	2.18		0.3561	0.0328	0.0920	1.3870	1.1777	107	297	0.2906	0.4217
Low birth weight infants	2.20		0.0724	0.0092	0.1276	1.4459	1.2024	109	308	0.0539	0.0909
Infants weighed at birth	2.21		0.8562	0.0276	0.0323	1.9038	1.3798	109	308	0.8010	0.9115
Tuberculosis immunization coverage	-		0.9380	0.0291	0.0310	2.2558	1.5019	58	156	0.8797	0.9962
Polio immunization coverage (Polio 3)	-		0.8736	0.0353	0.0405	1.7312	1.3158	57	154	0.8029	0.9443
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.7578	0.0460	0.0607	1.7180	1.3107	56	150	0.6658	0.8498
Measles immunization coverage	-		0.8359	0.0359	0.0430	1.4289	1.1954	57	153	0.7641	0.9077
Hepatitis B at birth	-		0.6095	0.0496	0.0813	1.5796	1.2568	57	154	0.5104	0.7087
Hepatitis B immunization coverage	-		0.7612	0.0454	0.0597	1.7126	1.3087	56	152	0.6704	0.8520
Haemophilus influenzae type B (Hib) immunization coverage	-		0.7700	0.0471	0.0611	1.8526	1.3611	55	149	0.6758	0.8642
Full immunization coverage			0.7048	0.0483	0.0686	1.7051	1.3058	57	153	0.6081	0.8014
No vaccination			0.0567	0.0286	0.5046	2.3723	1.5402	58	156	-0.0005	0.1139
Neonatal tetanus protection	3.9		0.6368	0.0256	0.0402	0.8703	0.9329	109	308	0.5855	0.6880

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children with diarrhoea	-		0.1266	0.0197	0.1554	2.3346	1.5279	241	668	0.0872	0.1659
Care-seeking for diarrhoea	3.10		0.6028	0.0510	0.0846	0.8901	0.9435	30	83	0.5009	0.7048
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1399	0.0379	0.2712	0.9810	0.9905	30	83	0.0640	0.2158
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.7389	0.0280	0.0380	0.3343	0.5782	30	83	0.6828	0.7949
Children with ARI symptoms	-		0.0459	0.0100	0.2186	1.5321	1.2378	241	668	0.0258	0.0659
Mother/caretakers know 2 dangerous signs of ARI	-		0.2782	0.0229	0.0822	1.4515	1.2048	196	558	0.2324	0.3239
Use of solid fuels for cooking	3.15		0.5272	0.0381	0.0723	9.7219	3.1180	2432	1668	0.4509	0.6034
Use of improved drinking water sources	4.1	7.8	0.8327	0.0319	0.0383	12.1635	3.4876	2432	1668	0.7690	0.8965
Water treatment	4.2		0.3185	0.0374	0.1176	1.3110	1.1450	407	204	0.2436	0.3933
Use of improved sanitation	4.3	7.9	0.6543	0.0403	0.0616	11.9868	3.4622	2432	1668	0.5736	0.7349
Safe disposal of child faeces	4.4		0.4594	0.0368	0.0801	2.2545	1.5015	149	414	0.3858	0.5331
Place for handwashing	4.5		0.8145	0.0194	0.0238	4.0717	2.0178	549	1644	0.7758	0.8532
Availability of soap or other cleansing agents	4.6		0.8793	0.0151	0.0171	3.5715	1.8898	558	1668	0.8492	0.9095
Contraceptive prevalence rate	5.3	5.3	0.7133	0.0149	0.0209	1.3255	1.1513	421	1223	0.6835	0.7431

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Unmet need	5.4	5.6	0.0862	0.0083	0.0966	1.0763	1.0374	421	1223	0.0695	0.1029
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.8994	0.0244	0.0271	2.0148	1.4194	109	308	0.8507	0.9481
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.4768	0.0400	0.0839	1.9708	1.4038	109	308	0.3967	0.5568
Content of antenatal care	5.6		0.2499	0.0314	0.1256	1.6129	1.2700	109	308	0.1872	0.3127
Skilled attendant at delivery	5.7	5.2	0.8096	0.0293	0.0362	1.7128	1.3087	109	308	0.7509	0.8682
Institutional deliveries	5.8		0.8068	0.0318	0.0394	1.9946	1.4123	109	308	0.7431	0.8704
Caesarean section	5.9		0.1453	0.0218	0.1502	1.1773	1.0850	109	308	0.1017	0.1890
Post-partum stay in health facility	5.10		0.9663	0.0157	0.0162	1.9073	1.3810	88	254	0.9350	0.9976
Post-natal health check for the newborn	5.11		0.8233	0.0243	0.0295	1.2439	1.1153	109	308	0.7747	0.8719
Post-natal health check for the mother	5.12		0.7978	0.0254	0.0318	1.2235	1.1061	109	308	0.7470	0.8485
Attendance for early childhood education	6.1		0.6496	0.0538	0.0828	3.2656	1.8071	93	258	0.5420	0.7571
Support for learning	6.2		0.6227	0.0420	0.0674	1.9282	1.3886	93	258	0.5388	0.7067
Father's support for learning	6.3		0.1293	0.0274	0.2123	1.7198	1.3114	93	258	0.0744	0.1842
Mother's support for learning	6.4		0.3678	0.0523	0.1421	3.0175	1.7371	93	258	0.2633	0.4723
Availability of children's books	6.5		0.1482	0.0180	0.1212	1.7041	1.3054	241	668	0.1122	0.1841

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Availability of playthings	6.6		0.5331	0.0212	0.0398	1.2085	1.0993	241	668	0.4906	0.5755
Inadequate care	6.7		0.0943	0.0153	0.1624	1.8335	1.3541	241	668	0.0637	0.1250
Early child development index	6.8		0.9035	0.0184	0.0204	1.0021	1.0011	93	258	0.8666	0.9404
Literacy rate among young people	7.1	2.3	0.9228	0.0154	0.0167	1.9667	1.4024	206	593	0.8920	0.9535
School readiness	7.2		0.9793	0.0096	0.0098	0.7351	0.8574	56	161	0.9600	0.9986
Net intake rate in primary education	7.3		0.9344	0.0206	0.0221	1.0751	1.0369	54	156	0.8932	0.9756
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9484	0.0118	0.0125	2.0086	1.4172	244	703	0.9248	0.9721
Secondary school net attendance ratio (adjusted)	7.5		0.7181	0.0220	0.0307	2.4938	1.5792	356	1041	0.6741	0.7622
Lower secondary school net attendance ratio (adjusted)	7.S1		0.8157	0.0224	0.0274	1.9543	1.3980	205	589	0.7710	0.8604
Upper secondary school net attendance ratio (adjusted)	7.S2		0.5112	0.0335	0.0655	2.0255	1.4232	151	452	0.4442	0.5782
Transition rate to secondary school	7.8		0.9484	0.0191	0.0201	0.9771	0.9885	46	132	0.9102	0.9866
Transition rate to upper secondary school	7.S3		0.9394	0.0197	0.0210	0.7182	0.8474	34	106	0.9000	0.9789
Birth registration	8.1		0.9210	0.0132	0.0143	1.5863	1.2595	241	668	0.8946	0.9473

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Child labour	8.2		0.2525	0.0233	0.0924	2.6915	1.6406	694	935	0.2059	0.2992
Violent discipline	8.3		0.7944	0.0172	0.0217	1.7316	1.3159	709	957	0.7600	0.8288
Marriage before age of 15	8.4		0.0186	0.0039	0.2090	1.4978	1.2238	619	1811	0.0108	0.0264
Marriage before age of 18	8.5		0.1579	0.0180	0.1142	3.6469	1.9097	510	1492	0.1219	0.1940
Young people aged 15-19 years currently married or in union	8.6		0.1476	0.0214	0.1447	1.1528	1.0737	109	319	0.1049	0.1903
Polygyny	8.7		0.0074	0.0022	0.2984	0.8060	0.8978	421	1223	0.0030	0.0117
Spousal age difference	8.8b		0.0730	0.0124	0.1693	0.3271	0.5719	55	146	0.0483	0.0977
Attitudes towards domestic violence	8.12		0.3395	0.0169	0.0498	2.3083	1.5193	619	1811	0.3057	0.3734
Children's living arrangements	8.13		0.0205	0.0030	0.1465	1.1441	1.0696	878	2552	0.0145	0.0265
Prevalence of children with one or both parents dead	8.14		0.0497	0.0051	0.1021	1.3917	1.1797	878	2552	0.0396	0.0599
Children with at least one parent living abroad	8.15		0.0003	0.0003	1.0013	0.6602	0.8126	878	2552	-0.0003	0.0008
Have heard of AIDS	-		0.9153	0.0128	0.0140	3.8294	1.9569	619	1811	0.8897	0.9409
Knowledge of HIV prevention among young women	9.1	6.3	0.4025	0.0308	0.0766	2.3379	1.5290	206	593	0.3409	0.4642
Knowledge of mother-to-child transmission of HIV	9.2		0.3777	0.0131	0.0347	1.3198	1.1488	619	1811	0.3515	0.4039

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Accepting attitudes towards people living with HIV	9.3		0.2849	0.0141	0.0496	1.6330	1.2779	567	1670	0.2566	0.3131
People who know where to be tested for HIV	9.4		0.5880	0.0214	0.0364	3.4167	1.8484	619	1811	0.5452	0.6308
People who have been tested for HIV and know the results	9.5		0.0612	0.0054	0.0889	0.9323	0.9656	619	1811	0.0503	0.0721
HIV counselling during antenatal care	9.7		0.1422	0.0204	0.1433	1.0451	1.0223	109	308	0.1015	0.1830
HIV testing during antenatal care	9.8		0.0981	0.0168	0.1718	0.9851	0.9925	109	308	0.0644	0.1317
Exposure to mass media	10.1		0.0517	0.0069	0.1328	1.7396	1.3189	619	1811	0.0380	0.0654
Use of computers	10.2		0.4898	0.0378	0.0773	3.3925	1.8419	206	593	0.4141	0.5655
Use of internet	10.3		0.4931	0.0383	0.0777	3.4785	1.8651	206	593	0.4164	0.5697
Use of mobile phones	10.S1		0.6340	0.0272	0.0428	5.7521	2.3984	619	1811	0.5797	0.6883

Table SE.9: Sampling errors: South East

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9344	0.0200	0.0214	1.5921	1.2618	242	244	0.8944	0.9745
Early initiation of breastfeeding	2.6		0.2206	0.0289	0.1312	1.1845	1.0883	242	244	0.1627	0.2785
Exclusive breastfeeding under 6 months	2.7		0.0736	0.0193	0.2624	0.2956	0.5437	56	55	0.0350	0.1123
Predominant breastfeeding under 6 months	2.8		0.2923	0.0415	0.1419	0.4494	0.6704	56	55	0.2093	0.3753
Continued breastfeeding at 1 year	2.9		0.3102	0.0754	0.2432	1.0905	1.0443	41	42	0.1593	0.4611
Continued breastfeeding at 2 years	2.10		0.1336	0.0501	0.3752	0.8248	0.9082	38	39	0.0333	0.2338
Age-appropriate breastfeeding	2.12		0.2736	0.0395	0.1443	1.8587	1.3634	239	238	0.1946	0.3525
Milk feeding frequency for non-breastfed children	2.14		0.9597	0.0230	0.0239	1.4475	1.2031	107	107	0.9138	1.0057
Minimum meal frequency	2.15		0.9215	0.0162	0.0176	0.6294	0.7934	173	174	0.8890	0.9539
Minimum dietary diversity	2.16		0.8739	0.0188	0.0215	0.5837	0.7640	183	183	0.8363	0.9115
Minimum acceptable diet (breastfeeding children)	2.17a		0.6738	0.0312	0.0463	0.2917	0.5401	65	67	0.6115	0.7361
Minimum acceptable diet (non breastfeeding children)	2.17b		0.4958	0.0472	0.0952	0.9447	0.9720	107	107	0.4014	0.5902

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Bottle feeding	2.18		0.6821	0.0323	0.0474	1.1407	1.0680	239	238	0.6175	0.7467
Low birth weight infants	2.20		0.0555	0.0068	0.1227	0.7898	0.8887	242	244	0.0419	0.0691
Infants weighed at birth	2.21		0.9731	0.0114	0.0117	1.2136	1.1016	242	244	0.9502	0.9960
Tuberculosis immunization coverage	-		0.9716	0.0095	0.0098	0.4385	0.6622	133	135	0.9526	0.9906
Polio immunization coverage (Polio 3)	-		0.8567	0.0352	0.0410	1.3490	1.1615	133	135	0.7864	0.9270
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8467	0.0320	0.0378	1.0520	1.0257	132	134	0.7827	0.9108
Measles immunization coverage	-		0.8207	0.0346	0.0421	1.0813	1.0399	132	134	0.7515	0.8898
Hepatitis B at birth	-		0.8829	0.0229	0.0259	0.6754	0.8219	132	134	0.8371	0.9288
Hepatitis B immunization coverage	-		0.8401	0.0313	0.0372	0.9686	0.9842	132	134	0.7775	0.9027
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8401	0.0313	0.0372	0.9686	0.9842	132	134	0.7775	0.9027
Full immunization coverage			0.7466	0.0410	0.0549	1.1887	1.0903	133	135	0.6646	0.8285
No vaccination			0.0216	0.0076	0.3515	0.3656	0.6046	133	135	0.0064	0.0368
Neonatal tetanus protection	3.9		0.8782	0.0236	0.0269	1.2648	1.1247	242	244	0.8310	0.9254
Children with diarrhoea	-		0.0677	0.0136	0.2015	1.5197	1.2327	515	516	0.0404	0.0950
Care-seeking for diarrhoea	3.10		0.5664	0.0436	0.0769	0.2707	0.5203	35	36	0.4793	0.6536
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.1706	0.0274	0.1605	0.1854	0.4306	35	36	0.1159	0.2254

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.5681	0.0380	0.0669	0.2058	0.4537	35	36	0.4921	0.6441
Children with ARI symptoms	-		0.0256	0.0078	0.3045	1.2549	1.1202	515	516	0.0100	0.0412
Mother/caretakers know 2 dangerous signs of ARI	-		0.2591	0.0204	0.0787	0.9658	0.9828	435	447	0.2184	0.2999
Use of solid fuels for cooking	3.15		0.1614	0.0134	0.0829	2.1849	1.4781	6373	1652	0.1346	0.1881
Use of improved drinking water sources	4.1	7.8	0.9752	0.0105	0.0107	7.4622	2.7317	6373	1652	0.9543	0.9961
Water treatment	4.2		0.6766	0.0099	0.0147	0.0167	0.1294	158	38	0.6567	0.6965
Use of improved sanitation	4.3	7.9	0.9094	0.0120	0.0132	2.9041	1.7041	6373	1652	0.8853	0.9335
Safe disposal of child faeces	4.4		0.7383	0.0274	0.0371	1.3439	1.1593	347	348	0.6836	0.7930
Place for handwashing	4.5		0.9040	0.0064	0.0071	0.7571	0.8701	1506	1600	0.8912	0.9168
Availability of soap or other cleansing agents	4.6		0.9131	0.0095	0.0104	1.8696	1.3673	1557	1652	0.8941	0.9321
Contraceptive prevalence rate	5.3	5.3	0.7466	0.0128	0.0171	1.0410	1.0203	1161	1203	0.7210	0.7722
Unmet need	5.4	5.6	0.0621	0.0073	0.1179	1.1049	1.0511	1161	1203	0.0474	0.0767
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9925	0.0052	0.0052	0.8855	0.9410	242	244	0.9821	1.0029
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.9004	0.0179	0.0198	0.8648	0.9299	242	244	0.8647	0.9361
Content of antenatal care	5.6		0.8379	0.0288	0.0344	1.4857	1.2189	242	244	0.7802	0.8955
Skilled attendant at delivery	5.7	5.2	0.9812	0.0134	0.0136	2.3683	1.5389	242	244	0.9545	1.0080

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Institutional deliveries	5.8		0.9731	0.0114	0.0117	1.2136	1.1016	242	244	0.9502	0.9960
Caesarean section	5.9		0.3484	0.0250	0.0718	0.6699	0.8185	242	244	0.2983	0.3984
Post-partum stay in health facility	5.10		1.0000	0.0000	0.0000			236	237	1.0000	1.0000
Post-natal health check for the newborn	5.11		0.9573	0.0103	0.0108	0.6346	0.7966	242	244	0.9366	0.9780
Post-natal health check for the mother	5.12		0.9546	0.0112	0.0117	0.7039	0.8390	242	244	0.9322	0.9770
Attendance for early childhood education	6.1		0.7121	0.0323	0.0453	0.8647	0.9299	172	171	0.6475	0.7767
Support for learning	6.2		0.8069	0.0331	0.0410	1.1933	1.0924	172	171	0.7408	0.8730
Father's support for learning	6.3		0.1962	0.0328	0.1674	1.1623	1.0781	172	171	0.1305	0.2618
Mother's support for learning	6.4		0.5161	0.0366	0.0709	0.9110	0.9545	172	171	0.4429	0.5892
Availability of children's books	6.5		0.3604	0.0182	0.0506	0.7439	0.8625	515	516	0.3239	0.3969
Availability of playthings	6.6		0.4497	0.0253	0.0563	1.3337	1.1549	515	516	0.3991	0.5004
Inadequate care	6.7		0.0344	0.0078	0.2269	0.9444	0.9718	515	516	0.0188	0.0500
Early child development index	6.8		0.8911	0.0239	0.0268	0.9985	0.9992	172	171	0.8434	0.9389
Literacy rate among young people	7.1	2.3	0.9868	0.0085	0.0086	2.6507	1.6281	472	481	0.9699	1.0038
School readiness	7.2		0.9860	0.0089	0.0090	0.6593	0.8120	111	116	0.9682	1.0038
Net intake rate in primary education	7.3		0.9562	0.0122	0.0128	0.3909	0.6252	107	111	0.9318	0.9806

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9783	0.0103	0.0106	2.7034	1.6442	503	538	0.9576	0.9990
Secondary school net attendance ratio (adjusted)	7.5		0.8150	0.0182	0.0223	1.5148	1.2308	643	694	0.7787	0.8514
Lower secondary school net attendance ratio (adjusted)	7.S1		0.8991	0.0174	0.0193	1.4029	1.1844	388	423	0.8644	0.9339
Upper secondary school net attendance ratio (adjusted)	7.S2		0.6621	0.0258	0.0389	0.8010	0.8950	255	271	0.6105	0.7136
Transition rate to secondary school	7.8		0.9787	0.0101	0.0104	0.5257	0.7251	97	108	0.9584	0.9989
Transition rate to upper secondary school	7.S3		0.9795	0.0004	0.0004	0.0004	0.0192	53	56	0.9787	0.9802
Birth registration	8.1		0.9522	0.0118	0.0124	1.5775	1.2560	515	516	0.9286	0.9758
Child labour	8.2		0.1027	0.0148	0.1443	1.9317	1.3898	1340	812	0.0731	0.1323
Violent discipline	8.3		0.6819	0.0197	0.0289	1.6195	1.2726	1488	903	0.6424	0.7213
Marriage before age of 15	8.4		0.0054	0.0014	0.2524	0.6315	0.7947	1768	1821	0.0027	0.0082
Marriage before age of 18	8.5		0.0785	0.0074	0.0947	1.2178	1.1035	1546	1595	0.0636	0.0934
Young people aged 15-19 years currently married or in union	8.6		0.0774	0.0171	0.2207	0.9197	0.9590	222	226	0.0433	0.1116
Polygyny	8.7		0.0086	0.0031	0.3548	1.3140	1.1463	1161	1203	0.0025	0.0147
Spousal age difference	8.8b		0.0820	0.0202	0.2469	0.4189	0.6472	76	78	0.0415	0.1224
Attitudes towards domestic violence	8.12		0.1917	0.0127	0.0660	1.8825	1.3720	1768	1821	0.1663	0.2170

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children's living arrangements	8.13		0.0376	0.0064	0.1688	2.0875	1.4448	1761	1874	0.0249	0.0503
Prevalence of children with one or both parents dead	8.14		0.0274	0.0047	0.1711	1.5453	1.2431	1761	1874	0.0180	0.0368
Children with at least one parent living abroad	8.15		0.0041	0.0014	0.3358	0.8644	0.9297	1761	1874	0.0013	0.0068
Have heard of AIDS	-		0.9682	0.0069	0.0071	2.8205	1.6794	1768	1821	0.9544	0.9820
Knowledge of HIV prevention among young women	9.1	6.3	0.5468	0.0292	0.0533	1.6463	1.2831	472	481	0.4885	0.6051
Knowledge of mother-to-child transmission of HIV	9.2		0.4912	0.0113	0.0230	0.9263	0.9624	1768	1821	0.4686	0.5137
Accepting attitudes towards people living with HIV	9.3		0.2565	0.0135	0.0526	1.6871	1.2989	1712	1766	0.2295	0.2835
People who know where to be tested for HIV	9.4		0.8056	0.0099	0.0123	1.1392	1.0674	1768	1821	0.7858	0.8254
People who have been tested for HIV and know the results	9.5		0.1689	0.0085	0.0504	0.9381	0.9685	1768	1821	0.1519	0.1860
HIV counselling during antenatal care	9.7		0.5028	0.0348	0.0692	1.1768	1.0848	242	244	0.4332	0.5724
HIV testing during antenatal care	9.8		0.6571	0.0355	0.0540	1.3566	1.1647	242	244	0.5861	0.7280
Exposure to mass media	10.1		0.1739	0.0132	0.0761	2.2172	1.4890	1768	1821	0.1474	0.2003
Use of computers	10.2		0.7487	0.0210	0.0280	1.1224	1.0594	472	481	0.7067	0.7906
Use of internet	10.3		0.7881	0.0198	0.0251	1.1282	1.0622	472	481	0.7484	0.8277
Use of mobile phones	10.S1		0.8829	0.0101	0.0114	1.7944	1.3396	1768	1821	0.8627	0.9031

Table SE.10: Sampling errors: Mekong River Delta

Standard errors, coefficients of variation, design effects (deff), square root of design effects (deft), and confidence intervals for selected indicators, Viet Nam, 2014

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Children ever breastfed	2.5		0.9803	0.0077	0.0078	0.6141	0.7837	239	203	0.9649	0.9956
Early initiation of breastfeeding	2.6		0.2779	0.0341	0.1227	1.1704	1.0819	239	203	0.2097	0.3461
Exclusive breastfeeding under 6 months	2.7		0.1107	0.0284	0.2567	0.3771	0.6141	54	47	0.0539	0.1675
Predominant breastfeeding under 6 months	2.8		0.5241	0.0566	0.1080	0.5915	0.7691	54	47	0.4109	0.6374
Continued breastfeeding at 1 year	2.9		0.5470	0.0539	0.0986	0.5633	0.7505	58	49	0.4391	0.6548
Continued breastfeeding at 2 years	2.10		0.1165	0.0247	0.2123	0.2199	0.4689	44	38	0.0670	0.1660
Age-appropriate breastfeeding	2.12		0.3864	0.0322	0.0833	0.9038	0.9507	246	208	0.3220	0.4507
Milk feeding frequency for non-breastfed children	2.14		0.8719	0.0256	0.0294	0.4763	0.6901	96	82	0.8206	0.9231
Minimum meal frequency	2.15		0.8919	0.0187	0.0210	0.5594	0.7479	186	155	0.8545	0.9293
Minimum dietary diversity	2.16		0.6885	0.0302	0.0438	0.6783	0.8236	193	161	0.6282	0.7489
Minimum acceptable diet (breastfeeding children)	2.17a		0.4871	0.0467	0.0959	0.6287	0.7929	91	73	0.3937	0.5805
Minimum acceptable diet (non breastfeeding children)	2.17b		0.4063	0.0389	0.0956	0.5071	0.7121	96	82	0.3286	0.4840
Bottle feeding	2.18		0.6198	0.0349	0.0564	1.0725	1.0356	246	208	0.5499	0.6896
Low birth weight infants	2.20		0.0367	0.0057	0.1544	1.0361	1.0179	239	203	0.0254	0.0480
Infants weighed at birth	2.21		0.9963	0.0036	0.0036	0.7327	0.8560	239	203	0.9891	1.0036

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Tuberculosis immunization coverage	-		0.9806	0.0135	0.0138	1.1112	1.0541	137	116	0.9536	1.0077
Polio immunization coverage (Polio 3)	-		0.9350	0.0264	0.0282	1.3158	1.1471	137	116	0.8822	0.9877
Diphtheria, pertussis and tetanus (DPT 3) immunization coverage	-		0.8997	0.0204	0.0226	0.5237	0.7237	136	115	0.8590	0.9405
Measles immunization coverage	-		0.9050	0.0282	0.0311	1.0615	1.0303	137	116	0.8487	0.9613
Hepatitis B at birth	-		0.8240	0.0339	0.0411	0.9030	0.9503	136	115	0.7562	0.8918
Hepatitis B immunization coverage	-		0.8855	0.0226	0.0255	0.5720	0.7563	136	115	0.8404	0.9306
Haemophilus influenzae type B (Hib) immunization coverage	-		0.8855	0.0226	0.0255	0.5720	0.7563	136	115	0.8404	0.9306
Full immunization coverage			0.8392	0.0324	0.0386	0.8855	0.9410	136	115	0.7744	0.9039
No vaccination			0.0194	0.0135	0.6997	1.1112	1.0541	137	116	-0.0077	0.0464
Neonatal tetanus protection	3.9		0.8596	0.0259	0.0302	1.1255	1.0609	239	203	0.8078	0.9115
Children with diarrhoea	-		0.0737	0.0133	0.1800	1.2510	1.1185	573	486	0.0472	0.1003
Care-seeking for diarrhoea	3.10		0.6801	0.0424	0.0623	0.2723	0.5218	42	34	0.5953	0.7648
Diarrhoea treatment with oral rehydration salts (ORS) and zinc	3.11		0.2463	0.0016	0.0064	0.0004	0.0210	42	34	0.2432	0.2495
Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	3.12		0.6431	0.0388	0.0603	0.2162	0.4649	42	34	0.5655	0.7206
Children with ARI symptoms	-		0.0490	0.0094	0.1928	0.9285	0.9636	573	486	0.0301	0.0679
Mother/caretakers know 2 dangerous signs of ARI	-		0.2218	0.0221	0.0997	1.1272	1.0617	462	399	0.1776	0.2661
Use of solid fuels for cooking	3.15		0.5229	0.0283	0.0540	5.2788	2.2976	7156	1650	0.4664	0.5794
Use of improved drinking water sources	4.1	7.8	0.8891	0.0244	0.0275	9.9673	3.1571	7156	1650	0.8403	0.9379

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Water treatment	4.2		0.6830	0.0385	0.0564	1.2005	1.0957	794	176	0.6059	0.7601
Use of improved sanitation	4.3	7.9	0.5684	0.0280	0.0492	5.2636	2.2942	7156	1650	0.5125	0.6244
Safe disposal of child faeces	4.4		0.4930	0.0303	0.0615	1.1503	1.0725	369	314	0.4324	0.5536
Place for handwashing	4.5		0.8091	0.0112	0.0138	1.3112	1.1451	1826	1621	0.7867	0.8314
Availability of soap or other cleansing agents	4.6		0.8950	0.0088	0.0098	1.3538	1.1635	1859	1650	0.8774	0.9126
Contraceptive prevalence rate	5.3	5.3	0.7795	0.0137	0.0176	1.2548	1.1202	1346	1150	0.7521	0.8069
Unmet need	5.4	5.6	0.0492	0.0060	0.1213	0.8745	0.9352	1346	1150	0.0373	0.0612
Antenatal care coverage: At least once by skilled health personnel	5.5a	5.5	0.9944	0.0056	0.0056	1.1432	1.0692	239	203	0.9832	1.0056
Antenatal care coverage: At least four times by any provider	5.5b	5.5	0.7796	0.0282	0.0361	0.9331	0.9660	239	203	0.7233	0.8360
Content of antenatal care	5.6		0.6211	0.0386	0.0622	1.2810	1.1318	239	203	0.5438	0.6983
Skilled attendant at delivery	5.7	5.2	0.9941	0.0004	0.0004	0.0044	0.0661	239	203	0.9934	0.9949
Institutional deliveries	5.8		0.9941	0.0004	0.0004	0.0044	0.0661	239	203	0.9934	0.9949
Caesarean section	5.9		0.2808	0.0288	0.1026	0.8300	0.9111	239	203	0.2232	0.3384
Post-partum stay in health facility	5.10		1.0000	0.0000	0.0000			237	202	1.0000	1.0000
Post-natal health check for the newborn	5.11		0.9400	0.0158	0.0168	0.8904	0.9436	239	203	0.9085	0.9715
Post-natal health check for the mother	5.12		0.9652	0.0137	0.0142	1.1282	1.0622	239	203	0.9379	0.9926
Attendance for early childhood education	6.1		0.3902	0.0328	0.0840	0.7773	0.8817	205	173	0.3246	0.4558
Support for learning	6.2		0.6998	0.0269	0.0384	0.5918	0.7693	205	173	0.6460	0.7536
Father's support for learning	6.3		0.0947	0.0249	0.2629	1.2431	1.1150	205	173	0.0449	0.1445
Mother's support for learning	6.4		0.3798	0.0406	0.1069	1.2046	1.0975	205	173	0.2986	0.4611
Availability of children's books	6.5		0.1874	0.0216	0.1151	1.4817	1.2172	573	486	0.1443	0.2306

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Availability of playthings	6.6		0.4679	0.0268	0.0574	1.4043	1.1850	573	486	0.4142	0.5216
Inadequate care	6.7		0.0354	0.0080	0.2269	0.9166	0.9574	573	486	0.0193	0.0515
Early child development index	6.8		0.8921	0.0233	0.0261	0.9662	0.9830	205	173	0.8456	0.9386
Literacy rate among young people	7.1	2.3	0.9705	0.0123	0.0127	1.9814	1.4076	439	377	0.9459	0.9951
School readiness	7.2		0.8883	0.0284	0.0320	0.8965	0.9468	122	111	0.8314	0.9452
Net intake rate in primary education	7.3		0.9263	0.0200	0.0216	0.6292	0.7932	121	108	0.8863	0.9664
Primary school net attendance ratio (adjusted)	7.4	2.1	0.9778	0.0057	0.0058	0.8583	0.9264	640	577	0.9664	0.9892
Secondary school net attendance ratio (adjusted)	7.5		0.7694	0.0239	0.0311	2.2332	1.4944	786	694	0.7215	0.8172
Lower secondary school net attendance ratio (adjusted)	7.S1		0.8443	0.0214	0.0254	1.4058	1.1857	454	403	0.8015	0.8872
Upper secondary school net attendance ratio (adjusted)	7.S2		0.5877	0.0386	0.0657	1.7843	1.3358	332	291	0.5105	0.6649
Transition rate to secondary school	7.8		0.9827	0.0106	0.0108	0.7621	0.8730	133	116	0.9614	1.0039
Transition rate to upper secondary school	7.S3		0.8534	0.0318	0.0372	0.5804	0.7618	83	73	0.7899	0.9170
Birth registration	8.1		0.9324	0.0095	0.0101	0.6888	0.8300	573	486	0.9135	0.9513
Child labour	8.2		0.1790	0.0154	0.0860	1.3741	1.1722	1618	854	0.1482	0.2098
Violent discipline	8.3		0.7378	0.0175	0.0238	1.4345	1.1977	1728	903	0.7028	0.7729
Marriage before age of 15	8.4		0.0109	0.0029	0.2654	1.2159	1.1027	1811	1566	0.0051	0.0167
Marriage before age of 18	8.5		0.1376	0.0104	0.0753	1.2497	1.1179	1595	1381	0.1169	0.1584
Young people aged 15-19 years currently married or in union	8.6		0.1144	0.0229	0.2003	0.9538	0.9766	216	185	0.0686	0.1602
Polygyny	8.7		0.0030	0.0015	0.5139	0.9019	0.9497	1346	1150	-0.0001	0.0060

	MICS Indicator	MDG Indicator	Value (r)	Standard error (se)	Coefficient of variation (se/r)	Design effect (deff)	Square root of design effect (deft)	Weighted count	Unweighted count	Confidence limits	
										Lower bound r - 2se	Upper bound r + 2se
Spousal age difference	8.8b		0.0589	0.0205	0.3476	0.8696	0.9325	136	116	0.0179	0.0998
Attitudes towards domestic violence	8.12		0.2922	0.0162	0.0553	1.9774	1.4062	1811	1566	0.2599	0.3246
Children's living arrangements	8.13		0.0835	0.0081	0.0975	1.6097	1.2687	2082	1858	0.0672	0.0998
Prevalence of children with one or both parents dead	8.14		0.0314	0.0055	0.1761	1.8672	1.3665	2082	1858	0.0204	0.0425
Children with at least one parent living abroad	8.15		0.0027	0.0013	0.4881	1.2006	1.0957	2082	1858	0.0001	0.0053
Have heard of AIDS	-		0.9519	0.0066	0.0070	1.5031	1.2260	1811	1566	0.9386	0.9651
Knowledge of HIV prevention among young women	9.1	6.3	0.4904	0.0300	0.0611	1.3511	1.1624	439	377	0.4305	0.5504
Knowledge of mother-to-child transmission of HIV	9.2		0.4964	0.0152	0.0305	1.4392	1.1997	1811	1566	0.4661	0.5267
Accepting attitudes towards people living with HIV	9.3		0.2235	0.0152	0.0680	1.9818	1.4077	1724	1490	0.1931	0.2539
People who know where to be tested for HIV	9.4		0.5868	0.0202	0.0343	2.6220	1.6193	1811	1566	0.5465	0.6272
People who have been tested for HIV and know the results	9.5		0.0941	0.0064	0.0685	0.7630	0.8735	1811	1566	0.0812	0.1070
HIV counselling during antenatal care	9.7		0.4039	0.0333	0.0824	0.9299	0.9643	239	203	0.3373	0.4704
HIV testing during antenatal care	9.8		0.3652	0.0345	0.0946	1.0389	1.0192	239	203	0.2961	0.4342
Exposure to mass media	10.1		0.1185	0.0116	0.0980	2.0195	1.4211	1811	1566	0.0953	0.1417
Use of computers	10.2		0.4973	0.0356	0.0715	1.9014	1.3789	439	377	0.4262	0.5684
Use of internet	10.3		0.5376	0.0296	0.0551	1.3249	1.1510	439	377	0.4784	0.5968
Use of mobile phones	10.S1		0.7953	0.0128	0.0161	1.5842	1.2586	1811	1566	0.7696	0.8210

APPENDIX D. DATA QUALITY TABLES

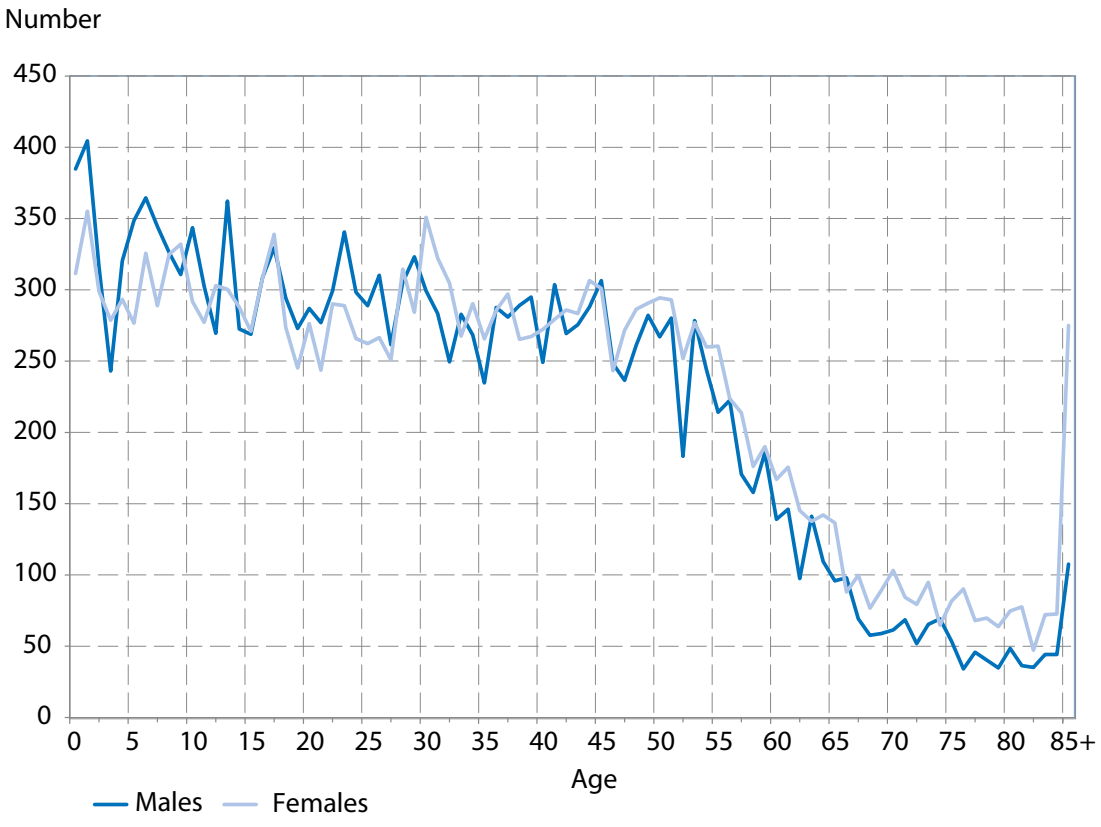
DQ.1: Age distribution of household population

Single-year age distribution of household population by sex, Viet Nam, 2014

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
Age					**Age**				
0	385	2,0	312	1,6	45	306	1,6	301	1,5
1	404	2,1	355	1,8	46	248	1,3	243	1,2
2	316	1,7	299	1,5	47	237	1,2	272	1,4
3	243	1,3	279	1,4	48	261	1,4	286	1,5
4	320	1,7	293	1,5	49	282	1,5	291	1,5
5	348	1,8	277	1,4	50	267	1,4	294	1,5
6	364	1,9	326	1,7	51	280	1,5	293	1,5
7	345	1,8	289	1,5	52	183	1,0	252	1,3
8	326	1,7	325	1,7	53	278	1,5	277	1,4
9	311	1,6	332	1,7	54	244	1,3	260	1,3
10	343	1,8	292	1,5	55	214	1,1	260	1,3
11	303	1,6	277	1,4	56	222	1,2	224	1,1
12	270	1,4	303	1,5	57	171	0,9	214	1,1
13	362	1,9	300	1,5	58	158	0,8	176	0,9
14	272	1,4	288	1,5	59	186	1,0	190	1,0
15	269	1,4	271	1,4	60	139	0,7	167	0,9
16	309	1,6	308	1,6	61	146	0,8	176	0,9
17	330	1,7	339	1,7	62	98	0,5	145	0,7
18	294	1,6	274	1,4	63	141	0,7	138	0,7
19	273	1,4	245	1,3	64	109	0,6	142	0,7
20	287	1,5	276	1,4	65	96	0,5	137	0,7
21	277	1,5	244	1,2	66	98	0,5	88	0,5
22	299	1,6	290	1,5	67	69	0,4	100	0,5
23	341	1,8	289	1,5	68	58	0,3	77	0,4
24	298	1,6	266	1,4	69	59	0,3	89	0,5
25	289	1,5	262	1,3	70	61	0,3	103	0,5
26	310	1,6	267	1,4	71	69	0,4	84	0,4
27	261	1,4	251	1,3	72	52	0,3	79	0,4
28	305	1,6	314	1,6	73	65	0,3	95	0,5
29	323	1,7	284	1,5	74	69	0,4	65	0,3

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
30	299	1,6	351	1,8	75	53	0,3	82	0,4
31	283	1,5	322	1,6	76	34	0,2	90	0,5
32	249	1,3	305	1,6	77	46	0,2	68	0,3
33	283	1,5	268	1,4	78	40	0,2	70	0,4
34	268	1,4	290	1,5	79	35	0,2	64	0,3
35	235	1,2	266	1,4	80	48	0,3	75	0,4
36	288	1,5	286	1,5	81	36	0,2	78	0,4
37	281	1,5	297	1,5	82	35	0,2	47	0,2
38	289	1,5	265	1,4	83	44	0,2	72	0,4
39	295	1,6	267	1,4	84	44	0,2	73	0,4
40	249	1,3	272	1,4	85+	108	0,6	275	1,4
41	304	1,6	279	1,4					
42	269	1,4	286	1,5					
43	276	1,5	283	1,4					
44	288	1,5	306	1,6	**Total**	18927	100	19579	100

Figure DQ.1: Household population by single ages, Viet Nam MICS 2014



DQ.2: Age distribution of eligible and interviewed women

Household population of women aged 10-54 years, interviewed women aged 15-49 years, and percentage of eligible women who were interviewed, by five-year age groups, Viet Nam, 2014

	Household population of women aged 10-54 years	Interviewed women aged 15-49 years		Percentage of eligible women interviewed (Completion rate)
	Number	Number	Percent	
Age				
10-14	1460	na	na	na
15-19	1437	1338	14.0	93.1
20-24	1365	1298	13.6	95.1
25-29	1378	1323	13.8	96.0
30-34	1536	1498	15.7	97.5
35-39	1381	1354	14.1	98.0
40-44	1427	1405	14.7	98.4
45-49	1393	1353	14.1	97.1
50-54	1376	na	na	na
Total (15-49)	9917	9568	100	96.5
Ratio of 50-54 to 45-49	0.99	na	na	na

na: not applicable

DQ.4: Age distribution of children in household and under-5 questionnaires

Household population of children aged 0-7 years, children aged 0-4 years whose mothers/caretakers were interviewed, and percentage of under-5 children whose mothers/caretakers were interviewed, by single years of age, Viet Nam, 2014

	Household population of children 0-7 years	Under-5s with completed interviews		Percentage of eligible under-5s with completed interviews
	Number	Number	Percent	(Completion rate)
Age				
0	696	682	21.5	98.0
1	760	753	23.7	99.1
2	615	614	19.3	99.9
3	522	519	16.3	99.5
4	614	608	19.2	99.2
5	625	na	na	na
6	690	na	na	na
7	633	na	na	na
Total (0-4)	3206	3177	100	99.1
Ratio of 5 to 4	1.02	na	na	na

na: not applicable

DQ.5: Birth date reporting: Household population

Percentage distribution of household population by completeness of date of birth information, Viet Nam, 2014

	Completeness of reporting of month and year of birth				Total	Number of household members
	Year and month of birth	Year of birth only	Month of birth only	Both missing		
Total	**89.0**	**10.9**	**0.0**	**0.0**	**100**	**38506**
Age						
0-4	100.0	0.0	0.0	0.0	100	3206
5-14	99.4	0.6	0.0	0.0	100	6252
15-24	97.7	2.3	0.0	0.0	100	5778
25-49	88.8	11.2	0.0	0.0	100	14095
50-64	80.4	19.6	0.0	0.0	100	6045
65-84	61.7	38.3	0.0	0.0	100	2748
85+	39.7	59.7	0.0	0.7	100	383
Region						
Red River Delta	94.2	5.7	0.0	0.0	100	9091
Northern Midlands and Mountainous area	93.7	6.3	0.0	0.0	100	5240
North Central and Central coastal area	91.7	8.2	0.0	0.1	100	8214
Central Highlands	89.9	10.1	0.0	0.0	100	2432
South East	90.2	9.8	0.0	0.0	100	6373
Mekong River Delta	74.6	25.4	0.0	0.0	100	7156
Area						
Urban	91.3	8.7	0.0	0.0	100	12236
Rural	88.0	12.0	0.0	0.0	100	26270

DQ.6: Birth date and age reporting: Women

Percentage distribution of women aged 15-49 years by completeness of date of birth/age information, Viet Nam, 2014

	Completeness of reporting of date of birth and age					Total	Number of women aged 15-49 years
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Other/DK/ Missing		
Total	**93.1**	**6.9**	**0.0**	**0.0**	**0.0**	**100**	**9827**
Region							
Red River Delta	98.7	1.3	0.0	0.0	0.0	100	2221
Northern Midlands and Mountainous area	95.8	4.2	0.0	0.0	0.0	100	1325
North Central and Central coastal area	95.2	4.8	0.0	0.0	0.0	100	2082
Central Highlands	92.2	7.8	0.0	0.0	0.0	100	619
South East	94.9	5.1	0.0	0.0	0.0	100	1768
Mekong River Delta	80.4	19.6	0.0	0.0	0.0	100	1811
Area							
Urban	95.2	4.8	0.0	0.0	0.0	100	3259
Rural	92.0	8.0	0.0	0.0	0.0	100	6568

DQ.8: Birth date and age reporting: Under-5s

Percentage distribution children under-5 by completeness of date of birth/age information, Viet Nam, 2014

	Completeness of reporting of date of birth and age					Total	Number of under-5 children
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Other/ DK/ Missing		
Total	**99.9**	**0.1**	**0.0**	**0.0**	**0.0**	**100**	**3316**
Region							
Red River Delta	100.0	0.0	0.0	0.0	0.0	100	784
Northern Midlands and Mountainous area	100.0	0.0	0.0	0.0	0.0	100	513
North Central and Central coastal area	100.0	0.0	0.0	0.0	0.0	100	690
Central Highlands	99.8	0.2	0.0	0.0	0.0	100	241
South East	100.0	0.0	0.0	0.0	0.0	100	515
Mekong River Delta	99.8	0.2	0.0	0.0	0.0	100	573
Area							
Urban	100.0	0.0	0.0	0.0	0.0	100	985
Rural	99.9	0.1	0.0	0.0	0.0	100	2331

DQ.9: Birth date reporting: Children, adolescents and young people

Percentage distribution of children, adolescents and young people aged 5-24 years by completeness of date of birth information, Viet Nam, 2014

	Completeness of reporting of month and year of birth				Total	Number of children, adolescents and young people age 5-24 years Total
	Year and month of birth	Year of birth only	Month of birth only	Both missing		
Total	**98.6**	**1.4**	**0.0**	**0.0**	**100**	**12030**
Region						
Red River Delta	99.9	0.1	0.0	0.0	100	2613
Northern Midlands and Mountainous area	98.2	1.8	0.0	0.0	100	1737
North Central and Central coastal area	99.2	0.8	0.0	0.0	100	2585
Central Highlands	97.6	2.4	0.0	0.0	100	946
South East	98.8	1.2	0.0	0.0	100	1988
Mekong River Delta	96.7	3.3	0.0	0.0	100	2162
Area						
Urban	99.1	0.9	0.0	0.0	100	3651
Rural	98.3	1.7	0.0	0.0	100	8379

DQ.11: Completeness of reporting

Percentage of observations that are missing information for selected questions and indicators, Viet Nam, 2014

Questionnaire and type of missing information	Reference group	Percent with missing/ incomplete information[a]	Number of cases
Household			
Starting time of interview	All households interviewed	0.0	9979
Ending time of interview	All households interviewed	0.0	9979
Women			
Date of first marriage/union	All ever married women aged 15-49		
Only month		6.2	7519
Both month and year		2.0	7519
Age at first marriage/union	All ever married women aged 15-49 with year of first marriage not known	0.1	7519
Age at first intercourse	All women age 15-24 who have ever had sex		
Time since last intercourse	All women age 15-24 who have ever had sex		
Starting time of interview	All women interviewed	0.0	9827
Ending time of interview	All women interviewed	0.0	9827
Under-5			
Starting time of interview	All under-5 children	0.0	3316
Ending time of interview	All under-5 children	0.0	3316

a Includes "Don't know" responses

DQ:16: Observation of birth certificates

Percentage distribution of children under-5 by presence of birth certificates and percentage of birth certificates seen, Viet Nam, 2014

	Child has birth certificate		Child does not have birth certificate	DK/Missing	Total	Percentage of birth certificates seen by the interviewer (1)/ (1+2)*100	Number of children under aged 5
	Seen by the interviewer (1)	Not seen by the interviewer (2)					
Total	**72.2**	**23.2**	**4.6**	**0.0**	**100**	**75.7**	**3316**
Region							
Red River Delta	72.9	25.9	1.2	0.0	100	73.8	784
Northern Midlands and Mountainous area	66.2	27.4	6.4	0.0	100	70.7	513
North Central and Central coastal area	76.5	20.9	2.6	0.0	100	78.5	690
Central Highlands	70.4	20.3	9.3	0.0	100	77.6	241
South East	77.3	17.3	5.4	0.0	100	81.7	515
Mekong River Delta	67.7	24.9	7.4	0.0	100	73.1	573
Area							
Urban	71.2	25.4	3.4	0.0	100	73.7	985
Rural	72.6	22.3	5.1	0.0	100	76.5	2331
Child's age							
0-5 months	66.7	13.6	19.7	0.0	100	83.0	350
6-11 months	73.5	18.2	8.4	0.0	100	80.2	338
12-23 months	72.0	25.0	2.9	0.0	100	74.2	790
24-35 months	71.0	26.7	2.3	0.0	100	72.7	641
36-47 months	75.6	22.6	1.8	0.0	100	76.9	539
48-59 months	73.0	25.7	1.3	0.0	100	74.0	658

DQ.17: Observation of vaccination cards

Percentage distribution of children aged 0-35 months by presence of a vaccination card and the percentage of vaccination cards seen by the interviewers, Viet Nam, 2014

	Child does not have vaccination card		Child has vaccination card			Percentage of vaccination cards seen by the interviewer in household or health facility (1a or 1b)/ (1a+1b+2)*100	Number of children aged 0-35 months
	Had vaccination card previously	Never had vaccination card	Seen by the interviewer in the household (1a)	Seen by the interviewer in health facility (1b)	Not seen by the interviewer (2)		
Total	**1.4**	**8.1**	**72.5**	**80.4**	**5.0**	**94.8**	**2119**
Region							
Red River Delta	0.9	4.4	78.4	89.6	3.3	96.7	502
Northern Midlands and Mountainous area	1.7	24.9	49.7	85.9	1.7	98.1	325
North Central and Central coastal area	2.5	5.3	75.9	88.1	2.1	97.9	433
Central Highlands	5.0	11.8	64.8	75.3	4.5	94.9	148
South East	0.3	3.7	82.9	58.5	9.6	90.0	343
Mekong River Delta	0.2	4.2	73.8	76.3	9.7	89.9	368
Area							
Urban	0.9	2.5	77.1	72.3	7.1	92.7	635
Rural	1.6	10.5	70.5	83.8	4.1	95.7	1484
Child's age							
0-5 months	1.2	17.3	70.8	66.4	4.6	94.7	350
6-11 months	0.3	7.4	82.6	80.4	2.8	97.1	338
12-23 months	0.9	4.9	77.1	86.5	3.8	96.1	790
24-35 months	2.8	7.4	62.3	80.4	7.8	91.9	641

DQ.18: Observation of women's health cards

Percentage distribution of women with a live birth in the last two years by presence of a health card and the percentage of health cards seen by the interviewers, Viet Nam, 2014

	Woman does not have health card	Woman has health card		DK/Missing	Total	Percentage of health cards seen by the interviewer (1)/ (1+2)*100	Number of women with a live birth in the last two years
		Seen by the interviewer (1)	Not seen by the interviewer (2)				
Total	**37.2**	**16.3**	**45.8**	**0.7**	**100**	**26.3**	**1464**
Region							
Red River Delta	32.8	13.5	52.7	1.0	100	20.4	343
Northern Midlands and Mountainous area	59.8	7.2	29.9	3.1	100	19.3	230
North Central and Central coastal area	40.4	15.9	43.7	0.0	100	26.7	300
Central Highlands	59.6	6.6	33.5	0.2	100	16.6	109
South East	17.6	27.4	55.1	0.0	100	33.2	242
Mekong River Delta	27.2	22.9	49.9	0.0	100	31.5	239
Area							
Urban	25.3	20.0	54.6	0.1	100	26.8	428
Rural	42.0	14.8	42.1	1.0	100	26.0	1037
Wealth Index quintile							
Poorest	63.2	8.8	26.2	1.8	100	25.1	294
Second	41.8	13.8	42.8	1.6	100	24.5	288
Middle	26.3	21.5	51.9	0.3	100	29.3	292
Fourth	32.7	17.0	50.3	0.0	100	25.2	314
Richest	21.1	20.8	58.1	0.0	100	26.4	275
Women age group							
15-24	41.9	14.5	42.6	0.9	100	25.4	457
25-34	34.6	16.1	48.5	0.8	100	25.0	844
35-49	37.2	22.5	40.3	0.0	100	35.8	162

DQ.20: Presence of mother in the household and the person interviewed for the under-5 questionnaire

Distribution of children under-5 by whether the mother lives in the same household and the person who was interviewed for the under-5 questionnaire, Viet Nam, 2014

	Mother in the household	Mother not in the household and primary caretaker identiafied:			Total	Number of children under-5
		Father	Other adult female	Other adult male		
Total	**95.2**	**0.2**	**4.4**	**0.2**	**100**	**3206**
Age						
0	99.7	0.0	0.3	0.0	100	696
1	97.5	0.1	2.4	0.0	100	760
2	92.4	0.2	7.4	0.0	100	615
3	92.5	0.3	6.9	0.3	100	522
4	92.3	0.5	6.4	0.7	100	614

DQ.21: Selection of children aged 1-17 years for the child labour and child discipline modules

Percentage distribution of households by the number of children aged 1-17 years and the percentage of households with at least two children aged 1-17 years where correct selection of one child for the child labour and child discipline modules was performed, Viet Nam, 2014

	Number of children aged 1-17 years			Total	Number of households	Percentage of households where correct selection was performed	Number of households with twoor more children aged 1-17 years
	None	One	Two or more				
Total	**37.5**	**28.8**	**33.7**	**100**	**9979**	**98.6**	**3362**
Region							
Red River Delta	43.6	24.9	31.5	100	2468	98.4	778
Northern Midlands and Mountainous area	33.1	29.7	37.2	100	1292	98.8	481
North Central and Central coastal area	40.8	26.5	32.6	100	2245	98.4	733
Central Highlands	26.9	25.8	47.3	100	558	98.7	264
South East	35.5	31.7	32.8	100	1557	98.6	510
Mekong River Delta	33.5	34.4	32.1	100	1859	99.0	597
Area							
Urban	37.7	30.2	32.1	100	3102	98.3	995
Rural	37.4	28.1	34.4	100	6877	98.7	2367
Wealth Index quintiles							
Poorest	38.3	25.4	36.3	100	2078	98.6	755
Second	41.0	26.6	32.4	100	2076	98.7	672
Middle	41.1	27.2	31.7	100	2040	98.9	646
Fourth	36.1	31.3	32.7	100	1956	98.9	639
Richest	30.3	34.2	35.6	100	1829	97.9	651

DQ.22: School attendance by single age

Distribution of household population aged 5-24 years by educational level and grade attended in the current (or most recent) school year, Viet Nam, 2014

Not attending school		Currently attending														DK/ Missing	Total	Number of household members
		Preschool	Primary school grade					Lower secondary school grade				Upper secondary school grade			Tertiary			
			1	2	3	4	5	6	7	8	9	10	11	12				
Age in calendar year 2013																		
5	4.8	94.6	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	100	623
6	1.6	2.2	95.3	0.9	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	678
7	1.5	0.3	4.8	92.8	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100	655
8	1.6	0.2	1.2	6.2	88.4	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	100	643
9	1.1	0.0	0.5	2.1	7.7	87.2	1.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	100	642
10	1.9	0.1	0.2	0.5	2.1	7.9	86.4	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	100	647
11	2.3	0.0	0.0	0.0	0.5	2.2	7.3	86.3	1.1	0.4	0.0	0.0	0.0	0.0	0.0	0.0	100	563
12	3.8	0.0	0.0	0.1	0.1	0.8	1.8	11.4	80.2	1.3	0.2	0.0	0.0	0.0	0.0	0.2	100	573
13	7.0	0.0	0.0	0.0	0.2	0.5	0.5	2.8	8.9	79.1	1.1	0.0	0.0	0.0	0.0	0.0	100	669
14	11.0	0.0	0.2	0.1	0.0	0.2	0.3	0.8	2.0	8.0	77.0	0.4	0.0	0.0	0.0	0.0	100	572
15	19.6	0.0	0.0	0.0	0.0	0.0	0.0	0.2	1.1	1.7	9.3	67.8	0.3	0.0	0.0	0.0	100	530
16	23.6	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.9	2.0	9.0	62.5	1.8	0.0	0.1	100	638
17	29.3	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.1	0.6	1.7	7.4	60.9	0.1	0.0	100	655
18	62.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.2	2.6	8.9	26.2	0.0	100	553
19	66.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.7	2.1	30.6	0.2	100	522
20	69.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.5	29.6	0.0	100	564
21	75.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3	24.6	0.0	100	516
22	82.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	17.0	0.0	100	592
23	91.2	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	8.8	0.0	100	646
24 [a]	95.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.0	0.1	100	496

[a] Those age 25 at the time of interview who were age 24 at beginning of school year are excluded as current attendance was only collected for those age 5-24 at the time of interview

DQ.23: Sex ratio at birth among children ever born and living

Sex ratio (number of males per 100 females) among children ever born (at birth), children living, and deceased children, by age of women, Viet Nam, 2014

	Children ever born			Children living			Children deceased			Number of women
	Sons	Daughters	Sex ratio at birth	Sons	Daughters	Sex ratio	Sons	Daughters	Sex ratio	
Total	**7899**	**7468**	**1.06**	**7583**	**7270**	**1.04**	**316**	**198**	**1.60**	**9827**
Age										
15-19	57	42	1.35	54	40	1.36	3	2	1.12	1374
20-24	386	352	1.10	372	347	1.07	14	6	2.51	1333
25-29	860	797	1.08	846	788	1.07	14	9	1.58	1359
30-34	1456	1377	1.06	1421	1361	1.04	35	16	2.14	1539
35-39	1522	1433	1.06	1473	1402	1.05	49	30	1.61	1391
40-44	1755	1634	1.07	1659	1583	1.05	96	51	1.89	1442
45-49	1863	1832	1.02	1757	1749	1.00	106	84	1.26	1390

Note: Sex ratio at birth was estimated base on weighted observations

DQ.24: Births by periods preceding the survey

Number of births, sex ratio at birth, and period ratio by periods preceding the survey, according to living, deceased, and total children (weighted, imputed), as reported in the birth histories, Viet Nam, 2014

	Number of births			Percentage with complete birth date[a]			Sex ratio at birth[b]			Period ratio[c]		
	Living	Deceased	Total	Living	Deceased	Total	Living	Deceased	Total	Living	Deceased	Total
Total	**14853**	**514**	**15367**	**99.2**	**88.1**	**98.8**	**104.3**	**159.8**	**105.8**	**na**	**na**	**na**
Years												
0	676	9	685	100.0	100.0	100.0	121.7	257.6	122.8	na	na	na
1	760	8	768	100.0	100.0	100.0	110.4	48.8	109.5	119.8	74.9	119.1
2	592	13	606	100.0	100.0	100.0	108.3	95.9	108.0	95.3	206.1	96.5
3	483	5	487	100.0	100.0	100.0	89.9	117.9	90.1	82.6	32.2	81.3
4	577	16	593	99.9	93.6	99.8	102.6	215.4	104.5	109.4	202.8	110.8
5	572	11	583	100.0	85.9	99.7	125.7	218.0	126.9	93.0	85.8	92.8
6	653	9	663	100.0	92.1	99.9	110.2	157.8	110.8	112.4	94.3	112.1
7	590	9	599	100.0	79.4	99.7	118.7	148.2	119.1	94.0	65.1	93.4
8	602	19	621	99.7	83.4	99.2	109.3	287.2	112.2	102.6	195.7	104.1
9	584	10	594	99.7	85.0	99.4	87.0	81.9	86.9	12.5	4.8	12.1
10+	8764	405	9169	98.6	87.3	98.1	101.6	161.6	103.7	na	na	na
Five-year periods												
0-4	3088	51	3139	100.0	98.0	100.0	107.3	131.2	107.7	na	na	na
5-9	3001	58	3059	99.9	84.9	99.6	109.3	175.6	110.3	na	na	na
10-14	2708	71	2779	99.4	90.9	99.2	105.9	310.6	108.5	na	na	na
15-19	2751	110	2861	99.1	92.8	98.9	98.7	149.5	100.3	na	na	na
20+	3305	224	3529	97.5	83.4	96.6	100.6	139.7	102.7	na	na	na

na: not applicable

[a] Both month and year of birth given. The inverse of the percentage reported is the percentage with incomplete and therefore imputed date of birth

[b] (Bm/Bf) x 100, where Bm and Bf are the numbers of male and female births, respectively

[c] (2 x Bt/(Bt-1 + Bt+1)) x 100, where Bt is the number of births in year t preceding the survey

DQ.25: Reporting of age at death in days

Distribution of reported deaths under one month of age by age at death in days and the percentage of neonatal deaths reported to occur at aged 0-6 days, by five-year periods preceding the survey (weighted, imputed), Viet Nam, 2014

	Number of years preceding the survey				Total
	0-4	5-9	10-14	15-19	(0-19)
Age at death (days)					
0	8	2	13	11	34
1	17	11	5	15	47
2	1	1	4	2	8
3	1	3	2	3	10
4	0	0	0	5	5
5	1	0	0	4	4
6	1	0	0	1	2
7	2	2	2	2	8
8	0	0	0	1	1
9	0	0	0	2	2
10	2	2	1	2	6
12	2	0	0	2	3
14	0	0	1	0	1
15	1	1	0	0	2
20	0	1	0	0	1
21	0	1	0	0	1
23	0	0	0	1	1
30	1	0	0	0	1
Total 0-30 days	36	24	27	51	139
Percentage early neonata[la]	79.8	68.8	88.6	79.7	79.6

* Deaths during the first 7 days (0-6), divided by deaths during the first month (0-28 days)

DQ.26: Reporting of age at death in months

Distribution of reported deaths under two years of age by age at death in months and the percentage of infant deaths reported to occur at age under one month, for the five-year periods of birth preceding the survey (weighted, imputed), Viet Nam, 2014

	Number of years preceding the survey				Total (0-19)
	0-4	5-9	10-14	15-19	
Age at death (months)					
0[a]	36	24	27	51	139
1	2	2	8	3	15
2	3	4	0	2	10
3	3	3	0	2	8
4	0	1	1	2	4
5	0		0	0	
6	2	3	4	2	11
7	1		0		2
8		2	1	2	6
11	0		3	1	4
12	1	5	4	5	15
14	1		1	0	2
18	0	0	1	0	1
19	0	0	0	2	2
20	0	0	1	0	1
23	0		0	0	
Reported as 1 year	0	0	0	0	0
Total 0-11 months	48	40	44	67	199
Percentage neonatal[b]	75.2	59.7	62.0	76.5	69.6

[a] Includes deaths under one month reported in days

[b] Deaths under one month, divided by deaths under one year

APPENDIX E. VIET NAM MICS 2014 INDICATORS: NUMERATORS AND DENOMINATORS

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
1.	**MORTALITY**				
1.1	Neonatal mortality rate	CM-BH	Probability of dying within the first 28 days of life		
1.2	Infant mortality rate	CM-BH	Probability of dying before the first birthday		MDG 4.2
1.3	Post-neonatal mortality rate	CM-BH	Difference between infant and neonatal mortality rates		
1.4	Child mortality rate	CM-BH	Probability of dying between the first and the fifth birthdays		
1.5	Under-5mortality rate	CM-BH	Probability of dying between birth and the fifth birthday		MDG 4.1
2.	**NUTRITION**				
2.5	Children ever breastfed	MN	Number of women with a live birth in the two years preceding the survey who breastfed the child at any time	Total number of women with a live birth in the two years preceding the survey	
2.6	Early initiation of breastfeeding	MN	Number of women with a live birth in the two years preceding the survey who put the newborn to the breast within onehour of birth	Total number of women with a live birth in the two years preceding the survey	
2.7	Exclusive breastfeeding under six months	BF	Number of infants under 6 months of age who are exclusively breastfed[1]	Total number of infants under 6 months of age	
2.8	Predominant breastfeeding under six months	BF	Number of infants under 6 months of age who received breast milk as the predominant source of nourishment[2] during the previous day	Total number of infants under 6 months of age	
2.9	Continued breastfeeding at one year	BF	Number of children age 12-15 months who are currently breastfeeding	Total number of children aged 12-15 months	
2.10	Continued breastfeeding at two years	BF	Number of children age 20-23 months who are currently breastfeeding	Total number of children aged 20-23 months	
2.11	Median duration of breastfeeding	BF	The age in months when 50 percent of children aged 0-35 months did not receive breast milk during the previous day		
2.12	Age-appropriate breastfeeding	BF	Number of children aged 0-23 months appropriately fed[3] during the previous day	Total number of children aged 0-23 months	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
2.13	Introduction of solid, semi-solid or soft foods	BF	Number of infants aged 6-8 months who received solid, semi-solid or soft foods during the previous day	Total number of infants aged 6-8 months	
2.14	Milk feeding frequency for non-breastfed children	BF	Number of non-breastfed children age 6-23 months who received at least two milk feedings during the previous day	Total number of non-breastfed children aged 6-23 months	
2.15	Minimum meal frequency	BF	Number of children aged 6-23 months receiving solid, semi-solid and soft foods (plus milk feeds for non-breastfed children) the minimum times[4] or more, according to breastfeeding status, during the previous day	Total number of children aged 6-23 months	
2.16	Minimum dietary diversity	BF	Number of children age 6-23 months who received foods from four or more food groups[5] during the previous day	Total number of children age 6-23 months	
2.17a					
2.17b	Minimum acceptable diet	BF	a) Number of breastfed children 6-23 months of age who had at least the minimum dietary diversity and the minimum meal frequency during the previous day b) Number of non-breastfed children 6-23 months of age who received at least two milk feedings and had at least the minimum dietary diversity not including milk feeds and the minimum meal frequency during the previous day	a) Number of breastfed children 6-23 months of age b) Number of non-breastfed children 6-23 months of age	
2.18	Bottle feeding	BF	Number of children aged 0-23 months who were fed with a bottle during the previous day	Total number of children aged 0-23 months	
2.20	Low-birth weight infants	MN	Number of last live births in the two years preceding the survey weighing below 2,500 grams at birth	Total number of last live births in the two years preceding the survey	
2.21	Infants weighed at birth	MN	Number of last live births in the two years preceding the survey who were weighed at birth	Total number of last live births in the two years preceding the survey	
3.	**CHILD HEALTH**				
3.1	Tuberculosis immunization coverage	IM	Number of children aged 12-23 months who received BCG vaccine by their first birthday	Total number of children aged 12-23 months	
3.2	Polio immunization coverage	IM	Number of children aged 12-23 months who received the third dose of OPV vaccine (OPV3) by their first birthday	Total number of children aged 12-23 months	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
3.3	Immunization coverage for diphtheria, pertussis and tetanus (DPT)	IM	Number of children aged 12-23 months who received the third dose of DPT vaccine (DPT3) by their first birthday	Total number of children aged 12-23 months	
3.4	Measles immunization coverage	IM	Number of children aged 12-23 months who received measles vaccine by their first birthday	Total number of children aged 12-23 months	MDG 4.3
3.5	Hepatitis B immunization coverage	IM	Number of children aged 12-23 months who received the third dose of Hepatitis B vaccine (HepB3) by their first birthday	Total number of children aged 12-23 months	
3.6	Haemophilus influenzae type B (Hib) immunization coverage	IM	Number of children aged 12-23 months who received the third dose of Hib vaccine (Hib3) by their first birthday	Total number of children aged 12-23 months	
3.8	Full immunization coverage	IM	Number of children age 12-23 months who received all vaccinations recommended in the national immunization schedule by their first birthday	Total number of children aged 12-23 months	
3.9	Neonatal tetanus protection	MN	Number of women age d15-49 years with a live birth in the two years preceding the survey who were given at least two doses of tetanus toxoid vaccine within the appropriate interval[6] prior to giving birth	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	
3.10	Care-seeking for diarrhoea	CA	Number of children under age 5 with suspected diarrhoea in the two weeks preceding the survey who were taken to an appropriate health provider	Total number of children under age 5 with suspected diarrhoea in the two weeks preceding the survey	
3.11	Diarrhoea treatment with oral rehydration salts (ORS) and zinc	CA	Number of children under age 5 with diarrhoea in the two weeks preceding the survey who received ORS and zinc.	Total number of children under age 5 with diarrhoea in the two weeks preceding the survey	
3.12	Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	CA	Number of children under age 5 with diarrhoea in the two weeks preceding the survey who received ORT (ORS packet, recommended homemade fluid or increased fluids) and continued feeding during the episode of diarrhoea	Total number of children under age 5 with diarrhoea in the two weeks preceding the survey	
3.13	Care-seeking for children with ARI symptoms	CA	Number of children under age 5 with suspected pneumonia in the two weeks preceding the survey who were taken to an appropriate health provider	Total number of children under age 5 with suspected pneumonia in the two weeks preceding the survey	
3.14	Antibiotic treatment for children with ARI symptoms	CA	Number of children under age 5 with suspected pneumonia in the previous two weeks who received antibiotics	Total number of children under age 5 with suspected pneumonia in the previous two weeks	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
3.15	Use of solid fuels for cooking	HC	Number of household members in households that use solid fuels as the primary source of domestic energy to cook	Total number of household members	
4.	**WATER AND SANITATION**				
4.1	Use of improved drinking water sources	WS	Number of household members using improved sources of drinking water	Total number of household members	MDG 7.8
4.2	Water treatment	WS	Number of household members using unimproved drinking water who use an appropriate treatment method	Total number of household members in households using unimproved drinking water sources	
4.3	Use of improved sanitation	WS	Number of household members using improved sanitation facilities which are not shared	Total number of household members	MDG 7.9
4.4	Safe disposal of child's faeces	CA	Number of children aged 0-2 years whose last stools were disposed of safely	Total number of children aged 0-2 years	
4.5	Place for handwashing	HW	Number of households with a specific place for hand washing where water and soap or other cleansing agent are present	Total number of households	
4.6	Availability of soap or other cleansing agent	HW	Number of households with soap or other cleansing agent	Total number of households	
5.	**REPRODUCTIVE HEALTH**				
5.1	Adolescent birth rate[7]	CM - BH	Age-specific fertility rate for women aged 15-19 years for the one year period preceding the survey		MDG 5.4
5.2	Early childbearing	CM - BH	Number of women aged 20-24 years who had at least one live birth before age 18	Total number of women aged 20-24 years	
5.3	Contraceptive prevalence rate	CP	Number of women aged 15-49 years currently married or in union who are using (or whose partner is using) a (modern or traditional) contraceptive method	Total number of women aged 15-49 years who are currently married or in union	MDG 5.3
5.4	Unmet need[8]	UN	Number of women aged 15-49 years who are currently married or in union who are fecund and want to space their births or limit the number of children they have and who are not currently using contraception	Total number of women aged 15-49 years who are currently married or in union	MDG 5.6

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
5.5a 5.5b	Antenatal care coverage	' MN	Number of women aged 15-49 years who were attended during pregnancy in the two years preceding the survey (a) at least once by skilled personnel (b) at least four times by any provider	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	MDG 5.5
5.6	Content of antenatal care	MN	Number of women age d15-49 years with a live birth in the two years preceding the survey who had their blood pressure measured and gave urine and blood samples during the last pregnancy	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	
5.7	Skilled attendant at delivery	MN	Number of women aged 15-49 years with a live birth in the two years preceding the survey who were attended during childbirth by skilled health personnel	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	MDG 5.2
5.8	Institutional deliveries	MN	Number of women aged 15-49 years with a live birth in the two years preceding the survey who delivered in a health facility	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	
5.9	Caesarean section	MN	Number of last live births in the two years preceding the survey that were delivered by caesarean section	Total number of last live births in the two years preceding the survey	
5.10	Post-partum stay in health facility	PN	Number of women aged 15-49 years who stayed in the health facility for 12 hours or more after the delivery of their last live birth in the two years preceding the survey	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	
5.11	Post-natal health check for the newborn	PN	Number of last live births in the two years preceding the survey who received a health check while in facility or at home following delivery, or a post-natal care visit within two days after delivery	Total number of last live births in the two years preceding the survey	
5.12	Post-natal health check for the mother	PN	Number of women aged 15-49 years who received a health check while in facility or at home following delivery, or a post-natal care visit within two days after delivery	Total number of women aged 15-49 years with a live birth in the two years preceding the survey	
6.	**CHILD DEVELOPMENT**				
6.1	Attendance to early childhood education	EC	Number of children aged 36-59 months who are attending an early childhood education programme	Total number of children aged 36-59 months	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
6.2	Support for learning	EC	Number of children aged 36-59 months with whom an adult has engaged in four or more activities to promote learning and school readiness in the past three days	Total number of children aged 36-59 months	
6.3	Father's support for learning	EC	Number of children aged 36-59 months whose father has engaged in four or more activities to promote learning and school readiness in the past three days	Total number of children aged 36-59 months	
6.4	Mother's support for learning	EC	Number of children aged 36-59 months whose mother has engaged in four or more activities to promote learning and school readiness in the past three days	Total number of children aged 36-59 months	
6.5	Availability of children's books	EC	Number of children under age 5 who have three or more children's books	Total number of children under age 5	
6.6	Availability of playthings	EC	Number of children under age 5 with two or more types of playthings	Total number of children under age 5	
6.7	Inadequate care	EC	Number of children under age 5 left alone or in the care of another child younger than 10 years of age for more than one hour at least once in the past week	Total number of children under age 5	
6.8	Early child development index	EC	Number of children aged 36-59 months who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains	Total number of children aged 36-59 months	
7.	**LITERACY AND EDUCATION**				
7.1	Literacy rate among young women	WB	Number of women aged 15-24 years who are able to read a short simple statement about everyday life or who attended secondary or higher education	Total number of women aged 15-24 years	MDG 2.3
7.2	School readiness	ED	Number of children in first grade of primary school who attended pre-school during the previous school year	Total number of children attending the first grade of primary school	
7.3	Net intake rate in primary education	ED	Number of children of school-entry age who enter the first grade of primary school	Total number of children of school-entry age	
7.4	Primary school net attendance ratio (adjusted)	ED	Number of children of primary school age currently attending primary or secondary school	Total number of children of primary school age	MDG 2.1
7.5	Secondary school net attendance ratio (adjusted)	ED	Number of children of secondary school age currently attending secondary school or higher	Total number of children of secondary school age	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
7.S1	Lower secondary school net attendance ratio (adjusted)	ED	Number of children of lower secondary school age currently attending lower secondary school or higher	Total number of children of lower secondary school age	
7.S2	Upper secondary school net attendance ratio (adjusted)	ED	Number of children of upper secondary school age currently attending upper secondary school or higher	Total number of children of upper secondary school age	
7.6	Children reaching last grade of primary	ED	Proportion of children entering the first grade of primary school who eventually reach last grade		MDG 2.2
7.7	Primary completion rate	ED	Number of children 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)	
7.8	Transition rate to secondary school	ED	Number of children attending the last grade of primary school during the previous school year who are in the first grade of secondary school during the current school year	Total number of children attending the last grade of primary school during the previous school year	
7.S3	Transition rate to upper secondary school	ED	Number of children who attended the last grade of lower secondary school during the previous school year who are in the first grade of upper secondary school during the current school year divided by the number of children who attended the last grade of lower secondary school during the previous school year	Total number of children attending the last grade of lower secondary school during the previous school year	
7.9	Gender parity index (primary school)	ED	Primary school net attendance ratio (adjusted) for girls	Primary school net attendance ratio (adjusted) for boys	MDG 3.1
7.10	Gender parity index (secondary school)	ED	Secondary school net attendance ratio (adjusted) for girls	Secondary school net attendance ratio (adjusted) for boys	MDG 3.1
7.S4	Gender parity index (lower secondary school)	ED	Lower secondary school net attendance ratio (adjusted) for girls	Lower secondary school net attendance ratio (adjusted) for boys	
7.S5	Gender parity index (upper secondary school)	ED	Upper secondary school net attendance ratio (adjusted) for girls	Upper secondary school net attendance ratio (adjusted) for boys	
8.	**CHILD PROTECTION**				
8.1	Birth registration	BR	Number of children under age 5 whose births are reported registered	Total number of children under age 5	
8.2	Child labour	CL	Number of children aged 5-17 years who are involved in child labour[9]	Total number of children aged 5-17 years	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
8.3	Violent discipline	CD	Number of children aged 1-14 years who experienced psychological aggression or physical punishment during the last one month preceding the survey	Total number of children aged 1-14 years	
8.4	Marriage before age 15 [M]	MA	Number of women aged 15-49 years who were first married or in union before age 15	Total number of women aged 15-49 years	
8.5	Marriage before age 18 [M]	MA	Number of women aged 20-49 years who were first married or in union before age 18	Total number of women aged 20-49 years	
8.6	Young women age 15-19 years currently married or in union [M]	MA	Number of women aged 15-19 years who are currently married or in union	Total number of women aged 15-19 years	
8.7	Polygyny	MA	Number of women aged 15-49 years who are in a polygynous union	Total number of women aged 15-49 years who are currently married or in union	
8.8	Spousal age difference	MA	Number of women currently married or in union whose spouse is 10 or more years older: (a) for women aged 15-19 years (b) for women aged 20-24 years	Total number of women currently married or in union : (a) aged 15-19 years (b) aged 20-24 years	
8.12	Attitudes towards domestic violence [M]	DV	Number of women who state that a husband/partner is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food	Total number of women aged 15-49 years	
8.S1	Attitudes towards domestic violence	DV	Number of women aged 15-49 years who state that a husband is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food, (6) she does not complete housework, (7) she is doubted to be faithful, (8) she is disclosed as unfaithful.	Total number of women aged 15-49 years	
8.13	Children's living arrangements	HL	Number of children aged 0-17 years living with neither biological parent	Total number of children aged 0-17 years	
8.14	Prevalence of children with one or both parents dead	HL	Number of children aged 0-17 years with one or both parents dead	Total number of children aged 0-17 years	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
8.15	Children with at least one parent living abroad	HL	Number of children 0-17 years with at least one parent living abroad	Number of children 0-17 years	
9.	**HIV/AIDS**				
9.1	Knowledge about HIV prevention among young women [M]	HA	Number of women aged 15-24 years who correctly identify ways of preventing the sexual transmission of HIV[10], and who reject major misconceptions about HIV transmission	Total number of women aged 15-24 years	MDG 6.3
9.2	Knowledge of mother-to-child transmission of HIV [M]	HA	Number of women aged 15-49 years who correctly identify all three means[11] of mother-to-child transmission of HIV	Total number of women aged 15-49 years	
9.3	Accepting attitudes towards people living with HIV [M]	HA	Number of women aged 15-49 years expressing accepting attitudes on all four questions[12] toward people living with HIV	Total number of women aged 15-49 years who have heard of HIV	
9.4	Women who know where to be tested for HIV [M]	HA	Number of women aged 15-49 years who state knowledge of a place to be tested for HIV	Total number of women aged 15-49 years	
9.5	Women who have been tested for HIV and know the results [M]	HA	Number of women aged 15-49 years who have been tested for HIV in the 12 months preceding the survey and who know their results	Total number of women aged 15-49 years	
9.7	HIV counselling during antenatal care	HA	Number of women aged 15-49 years who gave birth in the two years preceding the survey and received antenatal care, reporting that they received counselling on HIV during antenatal care	Total number of women aged 15-49 years who gave birth in the two years preceding the survey	
9.8	HIV testing during antenatal care	HA	Number of women aged 15-49 years who gave birth in the two years preceding the survey and received antenatal care, reporting that they were offered and accepted an HIV test during antenatal care and received their results	Total number of women aged 15-49 years who gave birth in the two years preceding the survey	
9.16	Ratio of school attendance of orphans to school attendance of non-orphans	HL - ED	Proportion attending school among children aged 10-14 years who have lost both parents	Proportion attending school among children aged 10-14 years whose parents are alive and who are living with one or both parents	

MICS5 INDICATOR		Module	Numerator	Denominator	MDG
10.	**ACCESS TO MASS MEDIA AND USE OF INFORMATION/ COMMUNICATION TECHNOLOGY**				
10.1	Exposure to mass media [M]	MT	Number of women aged 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television	Total number of women aged 15-49 years	
10.2	Use of computers [M]	MT	Number of young women aged 15-24 years who used a computer during the last 12 months	Total number of women aged 15-24 years	
10.3	Use of internet [M]	MT	Number of young women aged 15-24 who used the internet during the last 12 months	Total number of women aged 15-24 years	
10.S1	Use of mobile phones	MT	Number of women aged 15-49 years who own a mobile phone or use one as if was theirs.	Total number of women aged 15-49 years	

1 Infants receiving breast milk, and not receiving any other fluids or foods, with the exception of oral rehydration solution, vitamins, mineral supplements and medicines.

2 Infants who receive breast milk and certain fluids (water and water-based drinks, fruit juice, ritual fluids, oral rehydration solution, drops, vitamins, minerals, and medicines), but do not receive anything else (in particular, non-human milk and food-based fluids).

3 Infants age 0-5 months who are exclusively breastfed, and children age 6-23 months who are breastfed and ate solid, semi-solid or soft foods.

4 Breastfeeding children: Solid, semi-solid, or soft foods, two times for infants age 6-8 months, and three times for children 9-23 months; Non-breastfeeding children: Solid, semi-solid, or soft foods, or milk feeds, four times for children age 6-23 months.

5 The 7 foods groups used for this indicator are: 1) grains, roots and tubers, 2) legumes and nuts, 3) dairy products (milk, yogurt, cheese), 4) flesh foods (meat, fish, poultry and liver/organ meats), 5) eggs, 6) vitamin-A rich fruits and vegetables, and 7) other fruits and vegetables.

6 See MICS manual for a detailed description.

7 Indicator is defined as "Age-specific fertility rate for women age 15-19 years, for the 3-year period preceding the survey" when estimated from the birth history.

8 See MICS manual for a detailed description.

9 Children involved in child labour are defined as children involved in economic activities above the age-specific thresholds, children involved in household chores above the age-specific thresholds, and children involved in hazardous work. Refer to the MICS tabulation plan for more detailed information on thresholds and classifications.

10 Using condoms and limiting sex to one faithful, uninfected partner.

11 Transmission during pregnancy, during delivery, and by breastfeeding.

12 Women (1) who think that a female teacher with the AIDS virus should be allowed to teach in school, (2) who would buy fresh vegetables from a shopkeeper or vendor who has the AIDS virus, (3) who would not want to keep it as a secret if a family member became infected with the AIDS virus, and (4) who would be willing to care for a family member who became sick with the AIDS virus.

APPENDIX F. VIET NAM MICS 2014 QUESTIONNAIRES

MICS

HOUSEHOLD QUESTIONNAIRE
Viet Nam MICS 2014

HOUSEHOLD INFORMATION PANEL HH

HH0A. Province/ City's name and number:
Name _____ ___ ___

HH0B. District's name and number:
Name_____ ___ ___ ___

HH0C. Commune/ Ward name and number: _____ ___ ___ ___ ___ ___

HH1. Cluster's name and number:
Name _____ ___ ___ ___

HH2. Household number: ___ ___

HH3. Interviewer's name and number:
Name _____ ___ ___ ___

HH4. Team leader's name and number:
Name_____ ___ ___ ___

HH5. Day / Month / Year of interview:
___ ___ /___ ___ / 2 0 1 ___

HH6. Area:
Urban 1
Rural..... 2

HH7. Region:
Red River Delta 1
Northern Midlands and Mountain area 2
North Central and Central Coastal area 3
Central Highlands 4
South East 5
Mekong River Delta 6

MY NAME IS [...] WE ARE FROM THE GENERAL STATISTICS OFFICE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, WOMEN AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT **40** MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS. MAY I START NOW?

☐ *Yes, permission is given ⇨ Go to HH18 to record the time and then begin the interview.*

☐ *No, permission is not given ⇨ Circle 04 in HH9. Discuss this result with your supervisor.*

HH9. Result of household interview:

Completed 01
No household member or no competent respondent at home at time of visit..... 02
Entire household absent for extended period of time..... 03
Refused 04
Dwelling vacant / Address not a dwelling..... 05
Dwelling destroyed 06
Dwelling not found 07
Other (*specify*)_____ 96

After the household questionnaire has been completed, fill in the following information:

HH10. Respondent to Household Questionnaire:
Name _____ ___ ___

HH11. Total number of household members: ___ ___

HH12. Number of women age 15-49 years: ___ ___

HH14. Number of children under age 5: ___ ___

After all questionnaires for the household have been completed, fill in the following information:

HH13. Number of women's questionnaires completed: ___ ___

HH15. Number of under-5 questionnaires completed: ___ ___

HH16. Field editor's name and number:
Name_____ ___ ___ ___

HH17. Main data entry clerk's name and number:
Name_____ ___ ___

HH18. *Record the time.*

Hour ..... __ __

Minutes ..... __ __

LIST OF HOUSEHOLD MEMBERS — HL

FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD.

List the head of the household in line 01. List all household members (HL2), their relationship to the household head (HL3), and their sex (HL4)

Then ask: ARE THERE ANY OTHERS WHO LIVE HERE, EVEN IF THEY ARE NOT AT HOME NOW?

If yes, complete listing for questions HL2-HL4. Then, ask questions starting with HL5 for each person at a time.

Use an additional questionnaire if all rows in the List of Household Members have been used.

							For women age **15-49**	*For children age* **0-4**	*For children age* **0-17** *years*						*For children age* **0-14**
HL1. *Line no.*	**HL2.** *Name*	**HL3.** WHAT IS THE RELATION-SHIP OF (*name*) TO THE HEAD OF HOUSE-HOLD?	**HL4.** IS (*name*) MALE OR FEMALE? 1 Male 2 Female	**HL5.** WHAT IS (*name*)'S DATE OF BIRTH ACCORDING TO WESTERN CALENDAR? *Record the date according to western calendar. Use the lunar-western transformation table if necessary.* 98 DK 9998 DK		**HL6.** HOW OLD IS (*name*)? *Record in completed years. If age is 95 or above, record '95'*	**HL7.** *Circle line no. if woman age* **15-49**	**HL7B.** *Circle line no. if age* **0-4**	**HL11.** IS (*name*)'S NATURAL MOTHER ALIVE? 1 Yes 2 No ↘ HL13 8 DK ↘ HL13	**HL12.** DOES (*name*)'S NATURAL MOTHER LIVE IN THIS HOUSE-HOLD? *If "Yes" Record line no. of mother and go to HL13 Record 00 for "No"*	**HL12A.** WHERE DOES (*name*)'S NATURAL MOTHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	**HL13.** IS (*name*)'S NATURAL FATHER ALIVE? 1 Yes 2 No ↘ HL15 8 DK ↘ HL15	**HL14.** DOES (*name*)'S NATURAL FATHER LIVE IN THIS HOUSE-HOLD? *If "Yes" Record line no. of father and go to HL15 Record 00 for "No"*	**HL14A.** WHERE DOES (*name*)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	**HL15.** *Record line no. of mother from HL12 if indicated. If HL12 is blank, or "00" ask:* WHO IS THE PRIMARY CARETAKER OF (*name*)?
Line	Name	Relation*	M F	Month	Year	Age	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother
01		**0 1**	1 2	__ __	__ __ __ __	— —	01	01	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
02		__ __	1 2	__ __	__ __ __ __	— —	02	02	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
03		__ __	1 2	__ __	__ __ __ __	— —	03	03	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
04		__ __	1 2	__ __	__ __ __ __	— —	04	04	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
05		__ __	1 2	__ __	__ __ __ __	— —	05	05	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
06		__ __	1 2	__ __	__ __ __ __	— —	06	06	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
07		__ __	1 2	__ __	__ __ __ __	— —	07	07	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
08		__ __	1 2	__ __	__ __ __ __	— —	08	08	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
09		__ __	1 2	__ __	__ __ __ __	— —	09	09	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
10		__ __	1 2	__ __	__ __ __ __	— —	10	10	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __

							For women age **15-49**	For children age **0-4**	For children age **0-17** years						For children age **0-14**
HL1. *Line no.*	**HL2**. *Name*	**HL3**. WHAT IS THE RELATION-SHIP OF (*name*) TO THE HEAD OF HOUSE-HOLD?	**HL4**. IS (*name*) MALE OR FEMALE? 1 Male 2 Female	**HL5**. WHAT IS (*name*)'S DATE OF BIRTH ACCORDING TO WESTERN CALENDAR? *Record the date according to western calendar. Use the lunar-western transformation table if necessary.* 98 DK 9998 DK		**HL6**. HOW OLD IS (*name*)? *Record in completed years. If age is 95 or above, record '95'*	**HL7**. *Circle line no. if woman age* **15-49**	**HL7B**. *Circle line no. if age* **0-4**	**HL11**. IS (*name*)'S NATURAL MOTHER ALIVE? 1 Yes 2 No ↘ HL13 8 DK ↘ HL13	**HL12**. DOES (*name*)'S NATURAL MOTHER LIVE IN THIS HOUSE-HOLD? *If "Yes" Record line no. of mother and go to HL13 Record 00 for "No"*	**HL12A**. WHERE DOES (*name*)'S NATURAL MOTHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	**HL13**. IS (*name*)'S NATURAL FATHER ALIVE? 1 Yes 2 No ↘ HL15 8 DK ↘ HL15	**HL14**. DOES (*name*)'S NATURAL FATHER LIVE IN THIS HOUSE-HOLD? *If "Yes" Record line no. of father and go to HL15 Record 00 for "No"*	**HL14A**. WHERE DOES (*name*)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	**HL15**. *Record line no. of mother from HL12 if indicated. If HL12 is blank, or "00" ask:* WHO IS THE PRIMARY CARETAKER OF (*name*)?
Line	Name	Relation*	M	F	Month	Year	Age			Y N DK	Mother		Y N DK	Father		Mother
11		__ __	1	2	__ __	__ __ __ __	__ __	11	11	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
12		__ __	1	2	__ __	__ __ __ __	__ __	12	12	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
13		__ __	1	2	__ __	__ __ __ __	__ __	13	13	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
14		__ __	1	2	__ __	__ __ __ __	__ __	14	14	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
15		__ __	1	2	__ __	__ __ __ __	__ __	15	15	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __

Tick here if additional questionnaire used ☐

Probe for additional household members.
Probe especially for any infants or small children not listed, and others who may not be members of the family (such as servants, friends) but who usually live in the household.
Insert names of additional members in the household list and complete form accordingly.

Now for each woman age 15-49 years, write her name and line number and other identifying information in the information panel of a separate Individual Women's Questionnaire.
For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of a separate Under-5 Questionnaire.
You should now have a separate questionnaire for each eligible woman, each eligible man, and each child under five in the household.

** Codes for **HL3**: Relationship to head of household:*

01 Head
02 Spouse/Partner
03 Son / Daughter
04 Son-In-Law / Daughter-In-Law
05 Grandchild
06 Parent
07 Parent-In-Law
08 Brother / Sister
09 Brother-In-Law / Sister-In-Law
10 Uncle / Aunt
11 Niece / Nephew
12 Other relative
13 Adopted / Foster/ Stepchild
14 Servant (Live-in)
96 Other (Not related)
98 DK

EDUCATION

ED

			For household members age **5 and above**			For household members age **5-24** years							
ED1. *Line number*	**ED2**. *Name and age* *Copy from HL2 and HL6*		**ED3**. HAS (*name*) EVER ATTENDED SCHOOL OR PRE-SCHOOL? 1 Yes 2 No ⇘ Next Line	**ED4A**. WHAT IS THE HIGHEST LEVEL OF SCHOOL (*name*) HAS ATTENDED? Level: 0 Preschool 1 Primary 2 Lower Secondary 3 Upper Secondary 4 Professional School 5 College/ University & above 8 DK *If level=0,4,5 skip to ED5*	**ED4B**. WHAT IS THE HIGHEST GRADE (*name*) COMPLETED AT THIS LEVEL? Grade: 98 DK *If less than 1 grade at this level, enter 00.*	**ED5**. DURING THE 2013-2014 SCHOOL YEAR, DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME? 1 Yes 2 No ⇘ ED7	**ED6**. DURING THIS/THAT SCHOOL YEAR, WHICH LEVEL AND GRADE IS/WAS (*name*) ATTENDING? Level: 0 Preschool 1 Primary 2 Lower Secondary 3 Upper Secondary 4 Professional School 5 College/ University & above 8 DK *If level=0,4,5 skip to ED7*	Grade: 98 DK	**ED7**. DURING THE PREVIOUS SCHOOL YEAR, THAT IS 2012-2013, DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME? 1 Yes 2 No ⇘ Next Line 8 DK ⇘ Next Line	**ED8**. DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE DID (*name*) ATTEND? Level: 0 Preschool 1 Primary 2 Lower Secondary 3 Upper Secondary 4 Professional School 5 College/ University & above 8 DK *If level=0,4,5 go to next person*	Grade: 98 DK
Line	Name	Age	Yes No	Level	Grade	Ye No	Level	Grade	Y N DK	Level	Grade		
01		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
02		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
03		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
04		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
05		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
06		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
07		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
08		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
09		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
10		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
11		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
12		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
13		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
14		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		
15		__ __	1 2	0 1 2 3 4 5 8	__ __	1 2	0 1 2 3 4 5 8	__ __	1 2 8	0 1 2 3 4 5 8	__ __		

SELECTION OF ONE CHILD FOR CHILD LABOUR/CHILD DISCIPLINE — SL

SL1. *Check HL6 in the List of Household Members and write the total number of children age 1-17 years.*

Total number ..... __

SL2. *Check the number of children age 1-17 years in SL1:*

☐ *Zero ⇨ Go to HOUSEHOLD CHARACTERISTICS module*

☐ *One ⇨ Go to SL9 and record the rank number as '1', enter the line number (HL1), child's name (HL2) and age (HL6)*

☐ *Two or more ⇨ Continue with SL2A*

SL2A. *List each of the children age 1-17 years below in the order they appear in the List of Household Members. Do not include other household members outside of the age range 1-17 years. Record the line number, name, sex, and age for each child.*

SL3. *Rank number*	**SL4**. *Line number from HL1*	**SL5**. *Name from HL2*	**SL6**. *Sex from HL4*		**SL7**. *Age from HL6*
Rank	Line	Name	M	F	Age
1	__ __		1	2	___ ___
2	__ __		1	2	___ ___
3	__ __		1	2	___ ___
4	__ __		1	2	___ ___
5	__ __		1	2	___ ___
6	__ __		1	2	___ ___
7	__ __		1	2	___ ___
8	__ __		1	2	___ ___

SL8. *Check the last digit of the household number (HH2) from the cover page. This is the number of the row you should go to in the table below.*

Check the total number of children age 1-17 years in SL1 above. This is the number of the column you should go to in the table below

Find the box where the row and the column meet and circle the number that appears in the box. This is the rank number (SL3) of the selected child.

Last Digit of Household Number (from HH2)	**Total Number of Eligible Children in the Household (from SL1)**						
	2	***3***	***4***	***5***	***6***	***7***	***8+***
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

SL9. *Record the rank number (SL3), line number (SL4), name (SL5) and age (SL7) of the selected child*

Rank number ..... __

Line number ..... __ __

Name_____

Age ..... __ __

CHILD LABOUR		CL
CL1. *Check selected child's age from SL9:* ☐ *1-4 years ⇨ Go to Next Module* ☐ *5-17 years ⇨ Continue with CL2*		
CL2. NOW I WOULD LIKE TO ASK ABOUT ANY WORK CHILDREN IN THIS HOUSEHOLD MAY DO. SINCE LAST (*day of the week*), DID (*name*) DO ANY OF THE FOLLOWING ACTIVITIES, EVEN FOR ONLY ONE HOUR?		
[A] DID (*name*) DO ANY WORK OR HELP ON HIS/HER OWN OR THE HOUSEHOLD'S PLOT/FARM/FOOD GARDEN OR LOOKED AFTER ANIMALS? FOR EXAMPLE, GROWING FARM PRODUCE, HARVESTING, OR FEEDING, GRAZING, MILKING ANIMALS?	Yes No Worked on plot / farm / food garden / looked after animals 1 2	
[B] DID (*name*) HELP IN FAMILY BUSINESS OR RELATIVE'S BUSINESS WITH OR WITHOUT PAY, OR RUN HIS/HER OWN BUSINESS?	Helped in family / relative's business/ran own business 1 2	
[C] DID (*name*) PRODUCE OR SELL ARTICLES, HANDICRAFTS, CLOTHES, FOOD OR AGRICULTURAL PRODUCTS?	Produce / sell articles / handicrafts / clothes / food or agricultural products 1 2	
[D] SINCE LAST (*day of the week*), DID (*name*) ENGAGE IN ANY OTHER ACTIVITY IN RETURN FOR INCOME IN CASH OR IN KIND, EVEN FOR ONLY ONE HOUR? *If "No", Probe:* PLEASE INCLUDE ANY ACTIVITY (*name*) PERFORMED AS A REGULAR OR CASUAL EMPLOYEE, SELF-EMPLOYED OR EMPLOYER; OR AS AN UNPAID FAMILY WORKER HELPING OUT IN HOUSEHOLD BUSINESS OR FARM.	Any other activity 1 2	
CL3. *Check CL2, A to D* ☐ *There is at least one 'Yes' ⇨ continue with CL4* ☐ *All answers are 'No ⇨ Go to CL8*		
CL4. SINCE LAST (*day of the week*) ABOUT HOW MANY HOURS DID (*name*) ENGAGE IN THIS ACTIVITY/THESE ACTIVITIES, IN TOTAL? *If less than one hour, record "00"*	Number of hours ..... __ __	
CL5. DOES THE ACTIVITY/DO THESE ACTIVITIES REQUIRE CARRYING HEAVY LOADS?	Yes..... 1 No 2	1⇨ CL8
CL6. DOES THE ACTIVITY/DO THESE ACTIVITIES REQUIRE WORKING WITH DANGEROUS TOOLS (KNIVES ETC.) OR OPERATING HEAVY MACHINERY?	Yes..... 1 No 2	1⇨ CL8

CL7. How would you describe the work environment of (*name*)?		
[A] Is (*name*) exposed to dust, fumes or gas?	Yes ..... 1 No 2	1⇨ CL8
[B] Is (*name*) exposed to extreme cold, heat or humidity?	Yes ..... 1 No 2	1⇨ CL8
[C] Is (*name*) exposed to loud noise or vibration?	Yes ..... 1 No 2	1⇨ CL8
[D] Is (*name*) required to work at heights?	Yes ..... 1 No 2	1⇨ CL8
[E] Is (*name*) required to work with chemicals (pesticides, glues, etc.) or explosives?	Yes ..... 1 No 2	1⇨ CL8
[F] Is (*name*) exposed to other things, processes or conditions bad for (*name*)'s health or safety?	Yes ..... 1 No 2	
CL8. Since last (*day of the week*), did (*name*) fetch water or collect firewood for household use?	Yes ..... 1 No 2	2⇨ CL10
CL9. In total, how many hours did (*name*) spend on fetching water or collecting firewood for household use, since last (*day of the week*)? *If less than one hour, record "00"*	Number of hours ..... __ __	
CL10. Since last (*day of the week*), did (*name*) do any of the following for this household?	Yes No	
[A] Shopping for household?	Shopping for household 1 2	
[B] Repair any household equipment?	Repair household equipment 1 2	
[C] Cooking or cleaning utensils or the house?	Cooking / cleaning utensils /house ... 1 2	
[D] Washing clothes?	Washing clothes 1 2	
[E] Caring for children?	Caring for children 1 2	
[F] Caring for the old or sick?	Caring for old / sick 1 2	
[G] Other household tasks?	Other household tasks 1 2	
CL11. *Check CL10, A to G* ☐ *There is at least one 'Yes' ⇨ Continue with CL12* ☐ *All answers are 'No' ⇨ Go to Next Module*		
CL12. Since last (*day of the week*), about how many hours did (*name*) engage in this activity/these activities, in total? *If less than one hour, record "00"*	Number of hours..... __ __	

CHILD DISCIPLINE		CD
CD1. *Check selected child's age from SL9:* ☐ *1-14 years ⇨ Continue with CD2* ☐ *15-17 years ⇨ Go to Next Module*		
CD2. *Write the line number and name of the child from SL9.*	Line number .....__ __ Name _____	
CD3. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED. PLEASE TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH *(name)* IN THE PAST MONTH.	Yes No	
[A] TOOK AWAY PRIVILEGES, FORBADE SOMETHING (*name*) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.	Took away privileges 1 2	
[B] EXPLAINED WHY (*name*)'S BEHAVIOUR WAS WRONG.	Explained wrong behaviour.....1 2	
[C] SHOOK HIM/HER.	Shook him/her 1 2	
[D] SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.	Shouted, yelled, screamed 1 2	
[E] GAVE HIM/HER SOMETHING ELSE TO DO.	Gave something else to do 1 2	
[F] SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.	Spanked, hit, slapped on bottom with bare hand 1 2	
[G] HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.	Hit with belt, hairbrush, stick, or other hard object 1 2	
[H] CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.	Called dumb, lazy, or another name 1 2	
[I] HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.	Hit / slapped on the face, head or ears 1 2	
[J] HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.	Hit / slapped on hand, arm or leg 1 2	
[K] BEAT HIM/HER UP, THAT IS HIT HIM/HER OVER AND OVER AS HARD AS ONE COULD.	Beat up, hit over and over as hard as one could.....1 2	
CD4. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE, OR EDUCATE A CHILD PROPERLY, THE CHILD NEEDS TO BE PHYSICALLY PUNISHED?	Yes ..... 1 No ..... 2 DK / No opinion..... 8	

HOUSEHOLD CHARACTERISTICS		HC
HC1A. WHAT IS THE RELIGION OF THE HEAD OF THIS HOUSEHOLD?	Buddhism ..... 01 Muslim ..... 02 Cao Dai ..... 03 Hoa Hao ..... 04 Christian Catholic ..... 05 Christian Protestant ..... 06 Other religion (*specify*) _____ 96 No religion 97	
HC1C. TO WHAT ETHNIC GROUP DOES THE HEAD OF THIS HOUSEHOLD BELONG?	Kinh ..... 01 Tay ..... 02 Thai ..... 03 Muong ..... 04 Khmer ..... 05 Chinese ..... 06 Nung ..... 07 Mong ..... 08 Gia Rai ..... 09 Ê đê ..... 10 Ba na ..... 11 Other ethnic group (*specify*) _____ 96	
HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	Number of rooms ..... __ __	
HC3. *Main material of the dwelling floor.* *Record observation.*	Natural floor Earth / Sand ..... 11 Rudimentary floor Wood planks ..... 21 Palm / Bamboo ..... 22 Finished floor Parquet or polished wood ..... 31 Vinyl or asphalt strips ..... 32 Ceramic tiles ..... 33 Cement ..... 34 Carpet ..... 35 Enamelled tiles/ marble ..... 36 Other (*specify*) _____ 96	
HC4. *Main material of the roof.* *Record observation.*	Natural roofing No Roof ..... 11 Thatch / Palm leaf ..... 12 Rudimentary roofing Palm / Bamboo ..... 22 Wood planks ..... 23 Cardboard ..... 24 Finished roofing Metal / Tin ..... 31 Wood ..... 32 Calamine / Cement fibre ..... 33 Ceramic tiles ..... 34 Cement ..... 35 Stone slates ..... 37 Asphalt sheets ..... 38 Other (*specify*) _____ 96	

HC5. *Main material of the exterior walls.* *Record observation.*	Natural walls No walls ..... 11 Cane / Palm / Trunks ..... 12 Dirt ..... 13 Reed ..... 14 Rudimentary walls Bamboo with mud ..... 21 Stone with mud ..... 22 Uncovered adobe ..... 23 Plywood ..... 24 Cardboard ..... 25 Reused wood ..... 26 Finished walls Cement ..... 31 Stone with lime / cement ..... 32 Bricks ..... 33 Cement blocks ..... 34 Covered adobe ..... 35 Wood planks / shingles ..... 36 Other (*specify*) _____ 96	
HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD MAINLY USE FOR COOKING?	Electricity ..... 01 Liquefied Petroleum Gas (LPG) ..... 02 Natural gas ..... 03 Biogas ..... 04 Kerosene ..... 05 Coal / Lignite ..... 06 Charcoal ..... 07 Wood ..... 08 Straw / Shrubs / Grass ..... 09 Animal dung ..... 10 Agricultural crop residue ..... 11 No food cooked in household ..... 95 Other (*specify*) _____ 96	01⇨HC8 02⇨HC8 03⇨HC8 04⇨HC8 05⇨HC8 95⇨HC8
HC7. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS? *If 'In the house', probe*: IS IT DONE IN A SEPARATE ROOM USED AS A KITCHEN?	In the house In a separate room used as kitchen ..... 1 Elsewhere in the house ..... 2 In a separate building ..... 3 Outdoors ..... 4 Other (*specify*) _____ 6	

HC8. DOES YOUR HOUSEHOLD HAVE:	Yes No	
[A] ELECTRICITY?	Electricity 1 2	
[B] A RADIO?	Radio 1 2	
[C] A TELEVISION?	Television 1 2	
[D] A FIXED TELEPHONE?	Fixed telephone 1 2	
[E] A REFRIGERATOR?	Refrigerator 1 2	
[F] A BED?	Bed 1 2	
[G] A TABLE AND CHAIR SET?	Table and chair set 1 2	
[H] SOFA?	Sofa 1 2	
[I] A FAN?	Fan 1 2	
[J] A COMPUTER?	Computer 1 2	
[K] AN AIRCONDITIONER?	Airconditioner 1 2	
[L] A GAS COOKER?	Gas cooker 1 2	
[M] AN ELECTRIC COOKER?	Electric cooker 1 2	
[N] A WASHING MACHINE?	Washing machine 1 2	
[O] A TRACTOR?	Tractor 1 2	
[P] A CAR OR TRUCK?	Car 1 2	
[Q] A SHIP OR BOAT WITH A MOTOR?	Ship and boat with a motor 1 2	
HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:	Yes No	
[B] A MOBILE TELEPHONE?	Mobile telephone 1 2	
[C] A BICYCLE?	Bicycle 1 2	
[D] A MOTORCYCLE OR SCOOTER?	Motorcycle / Scooter 1 2	
HC10. DO YOU OR SOMEONE LIVING IN THIS HOUSEHOLD OWN THIS DWELLING? *If "No", then ask:* DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD? *If "Rented from someone else", circle "2". For other responses, circle "6".*	Own ..... 1 Rent ..... 2 Other (*specify*) _____ 6	
HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN OR HAVE USER RIGHTS FOR ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes ..... 1 No 2	2⇨HC12A
HC12. HOW MANY METERS SQUARE (M^2) OF AGRICULTURAL LAND DO MEMBERS OF THIS		

HOUSEHOLD OWN OR HAVE USER RIGHTS FOR? *If 99995 or more, record '99995'. If unknown, record '99998'*	M² ..... ___ ___ ___ ___ ___	
HC12A. DOES ANY MEMBER OF THIS HOUSEHOLD OWN OR HAVE USER RIGHTS FOR ANY WATER SURFACE AREA THAT CAN BE USED FOR AQUACULTURE?	Yes .....1 No.....2	2⇨HC12C
HC12B. HOW MANY METERS SQUARE (M²) OF WATER SURFACE AREA DO MEMBERS OF THIS HOUSEHOLD OWN OR HAVE USER RIGHTS FOR? *If 99995 or more, record '99995'. If unknown, record '99998'.*	M² ..... ___ ___ ___ ___ ___	
HC12C. DOES ANY MEMBER OF THIS HOUSEHOLD OWN OR HAVE RIGHTS FOR ANY FORESTRY LAND?	Yes .....1 No.....2	2⇨HC13
HC12D. HOW MANY METERS SQUARE (M²) OF FORESTRY LAND DO MEMBERS OF THIS HOUSEHOLD OWN OR HAVE RIGHTS FOR? *If 99995 or more, record '99995'. If unknown, record '99998''.*	M² ..... ___ ___ ___ ___ ___	
HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS, OR POULTRY?	Yes .....1 No.....2	2⇨HC15
HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE? [A] CATTLE, MILK COWS, OR BULLS? [B] HORSES, DONKEYS, OR MULES? [C] GOATS? [E] CHICKEN? [F] PIGS? [G] DUCK, GEESE OR SWANS? *If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.*	Cattle, milk cows, or bulls .....___ ___ Horses, donkeys, or mules .....___ ___ Goats.....___ ___ Chicken .....___ ___ Pigs .....___ ___ Duck, Geese or swans.....___ ___	
HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT? *Not including Deposit certificate*	Yes .....1 No.....2	

WATER AND SANITATION		WS
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?	Piped water Piped into dwelling ..... 11 Piped into compound, yard or plot..... 12 Piped to neighbour ..... 13 Public tap / standpipe ..... 14 Tube Well, Borehole..... 21 Dug well Protected well..... 31 Unprotected well ..... 32 Water from spring Protected spring ..... 41 Unprotected spring..... 42 Rainwater collection ..... 51 Surface water (river, stream, dam, lake, pond, canal, irrigation channel) ..... 81 Bottled water ..... 91 Other (*specify*) _____ 96	 11⇨WS6 12⇨WS6 13⇨WS6 14⇨WS3 21⇨WS3 31⇨WS3 32⇨WS3 41⇨WS3 42⇨WS3 51⇨WS3 81⇨WS3 96⇨WS3
WS2. WHAT IS THE MAIN SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND HANDWASHING?	Piped water Piped into dwelling ..... 11 Piped into compound, yard or plot..... 12 Piped to neighbour ..... 13 Public tap / standpipe ..... 14 Tube Well, Borehole..... 21 Dug well Protected well..... 31 Unprotected well ..... 32 Water from spring Protected spring ..... 41 Unprotected spring..... 42 Rainwater collection ..... 51 Surface water (river, stream, dam, lake, pond, canal, irrigation channel) ..... 81 Other (*specify*) _____ 96	 11⇨WS6 12⇨WS6 13⇨WS6
WS3. WHERE IS THAT WATER SOURCE LOCATED?	In own dwelling ..... 1 In own yard / plot..... 2 Elsewhere 3	1⇨WS6 2⇨WS6
WS4. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK?	Number of minutes..... __ __ __ DK..... 998	

WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT THE WATER FOR YOUR HOUSEHOLD? *Probe:* IS THIS PERSON UNDER AGE 15? WHAT SEX?	Adult woman (age 15+ years).....1 Adult man (age 15+ years).....2 Female child (under 15).....3 Male child (under 15).....4 DK 8	
WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER TO DRINK?	Yes .....1 No.....2 DK 8	2⇨WS8 8⇨WS8
WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER TO DRINK? *Probe:* ANYTHING ELSE? *Record all items mentioned.*	Boil ..... A Add bleach / chlorine ..... B Strain it through a cloth..... C Use water filter (ceramic, sand, composite, etc.) ..... D Solar disinfection ..... E Let it stand and settle .....F Other (*specify*) _____ X DK .....Z	
WS8. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE? *If "flush" or "pour flush", probe:* WHERE DOES IT FLUSH TO? *If not possible to determine, ask permission to observe the facility.*	Flush / Pour flush Flush to piped sewer system .....11 Flush to septic tank.....12 Flush to pit (latrine).....13 Flush to somewhere else.....14 Flush to unknown place / Not sure / DK where.....15 Pit latrine Ventilated Improved Pit latrine (VIP) ....21 Pit latrine with slab.....22 Pit latrine without slab / Open pit .....23 Composting toilet.....31 Bucket .....41 Hanging toilet, Hanging latrine.....51 No facility, Bush, Field .....95 Other (*specify*) _____ 96	95⇨Next Module
WS9. DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?	Yes .....1 No.....2	2⇨Next Module
WS10. DO YOU SHARE THIS FACILITY ONLY WITH MEMBERS OF OTHER HOUSEHOLDS THAT YOU KNOW, OR IS THE FACILITY OPEN TO THE USE OF THE GENERAL PUBLIC?	Other households only (not public) .....1 Public facility.....2	2⇨Next Module
WS11. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY, INCLUDING YOUR OWN HOUSEHOLD?	Number of households (if less than 10) 0 __ Ten or more households.....10 DK 98	

HANDWASHING		HW
HW1. WE WOULD LIKE TO LEARN ABOUT THE PLACES THAT HOUSEHOLDS USE TO WASH THEIR HANDS. CAN YOU PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD MOST OFTEN WASH THEIR HANDS?	Observed ..... 1 Not observed Not in dwelling / plot / yard ..... 2 No permission to see ..... 3 Other reason (*specify*) _____ 6	 2 ⇨HW4 3 ⇨HW4 6 ⇨HW4
HW2. *Observe presence of water at the place for handwashing.* *Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.*	Water is available ..... 1 Water is not available 2	
HW3A. *Is soap, detergent present at the place for handwashing?*	Yes, present ..... 1 No, not present 2	 2⇨HW4
HW3B. *Record your observation.* *Circle all that apply.*	Bar soap ..... A Detergent (Powder / Liquid / Paste)..... B Liquid soap C	A⇨HH19 B⇨HH19 C⇨HH19
HW4. DO YOU HAVE ANY SOAP OR DETERGENT IN YOUR HOUSE FOR WASHING HANDS?	Yes ..... 1 No 2	 2⇨HH19
HW5A. CAN YOU PLEASE SHOW IT TO ME?	Yes, shown ..... 1 No, not shown 2	 2⇨HH19
HW5B. *Record your observation.* *Circle all that apply.*	Bar soap ..... A Detergent (Powder / Liquid / Paste)..... B Liquid soap C	

HH19. *Record the time.*	Hour and minutes..... __ __ : __ __	

HH20. *Thank the respondent for his/her cooperation and check the List of Household Members:*

☐ *A separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN has been issued for each woman age 15-49 years in the List of Household Members (HL7)*

☐ *A separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE has been issued for each child under age 5 years in the List of Household Members (HL7B)*

Return to the cover page and make sure that all information is entered, including the number of eligible women (HH12) and under-5s (HH14)

Make arrangements for the administration of the remaining questionnaire(s) in this household.

THANK YOU VERY MUCH FOR ANSWERING THE QUESTIONS. COULD YOU PLEASE GIVE US YOUR TELEPHONE NUMBER IN CASE WE MIGHT NEED SOME MORE INFORMATION?

WE DO NOT USE OR SHARE YOUR NUMBER FOR ANY OTHER PURPOSES.

Telephone number: _____

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations

MICS

QUESTIONNAIRE FOR INDIVIDUAL WOMEN

Viet Nam MICS 2014

WOMAN'S INFORMATION PANEL	WM
This questionnaire is to be administered to all women age 15 through 49 (see List of Household Members, column HL7). A separate questionnaire should be used for each eligible woman.	
WM0A. Province/ City's name and number: Name _____ ___ ___	**WM0B**. District's name and number: Name_____.___ ___ ___
WM0C.Commune/ Ward name and number: _____ ___ ___ ___ ___ ___	
WM1. EA's name and number: Name _____ ___ ___ ___	**WM2**. Household number: ___ ___
WM3. Woman's name: Name_____	**WM4**. Woman's line number: ___ ___
WM5. Interviewer's name and number: Name_____ ___ ___	**WM6**. Day / Month / Year of interview: ___ ___ /___ ___ / 2 0 1 ___

Repeat greeting if not already read to this woman:	*If greeting at the beginning of the household questionnaire has already been read to this woman, then read the following:*
MY NAME IS [...]. WE ARE FROM THE GENERAL STATISTICS OFFICE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, WOMEN AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT 50 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS.	NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT YOUR HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT 50 MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS.

MAY I START NOW?

☐ *Yes, permission is given ⇨ Go to WM10 to record the time and then begin the interview.*

☐ *No, permission is not given ⇨ Circle '03' in WM7. Discuss this result with your supervisor.*

WM7. Result of woman's interview	
	Completed ..... 01 Not at home ..... 02 Refused ..... 03 Partly completed ..... 04 Incapacitated ..... 05 Other (*specify*)_____ 96

WM8. Field editor's name and number:	**WM9**. Main data entry clerk's name and number:
Name_____ __ __ __	Name_____ __ __

WM10. *Record the time.*	Hour and minutes ..... __ __ : __ __	

WOMAN'S BACKGROUND		**WB**
WB1. IN WHAT MONTH AND YEAR WERE YOU BORN?	Date of birth Month ..... __ __ DK month ..... 98 Year ..... __ __ __ __ DK year 9998	
WB2. HOW OLD ARE YOU? *Probe:* HOW OLD WERE YOU AT YOUR LAST BIRTHDAY? *Compare and correct WB1 and/or WB2 if inconsistent*	Age (in completed years) ..... __ __	
WB3. HAVE YOU EVER ATTENDED SCHOOL OR PRESCHOOL?	Yes ..... 1 No 2	 2⇨WB7
WB4. WHAT IS THE HIGHEST LEVEL OF SCHOOL YOU ATTENDED?	Preschool ..... 0 Primary ..... 1 Lower Secondary ..... 2 Upper Secondary ..... 3 Professional School ..... 4 College/ University & above 5	0⇨WB7 4 ⇨ Next Module 5 ⇨ Next Module
WB5. WHAT IS THE HIGHEST GRADE YOU COMPLETED AT THAT LEVEL? *If grade 1 is not completed at this level, enter "00"*	Grade ..... __ __	
WB6. *Check WB4:* ☐ *Lower or upper secondary ⇨ Go to Next Module* ☐ *Primary (WB4=1) ⇨ Continue with WB7*		
WB7. NOW I WOULD LIKE YOU TO READ THIS SENTENCE TO ME. *Show sentence on the card to the respondent.* *If respondent cannot read whole sentence, probe:* CAN YOU READ PART OF THE SENTENCE TO ME?	Cannot read at all ..... 1 Able to read only parts of sentence ..... 2 Able to read whole sentence ..... 3 No sentence in required language _____ 4 *(specify language)* Blind / visually impaired 5	

ACCESS TO MASS MEDIA AND USE OF INFORMATION/COMMUNICATION TECHNOLOGY		MT
MT0. DO YOU OWN A MOBILE PHONE OR USE ONE AS IF IT YOURS?	Yes ..... 1 No 2	
MT1. *Check WB7:* ☐ *Question left blank (Respondent has secondary or higher education) ⇨ Continue with MT1A* ☐ *Able to read or no sentence in required language (WB7 = 2, 3 or 4) ⇨ Continue with MT1A* ☐ *Cannot read at all or blind/visually impaired (WB7 = 1 or 5) ⇨ Go to MT3*		
MT1A. *Check MT0:* ☐ *Yes ⇨ Continue with MT1B* ☐ *No ⇨ Continue with MT2*		
MT1B. HAVE YOU EVER USED YOUR MOBILE PHONE TO READ OR WRITE SMS MESSAGES?	Yes ..... 1 No 2	2⇨MT2
MT1C. DURING THE LAST ONE MONTH, HOW OFTEN DID YOU READ OR WRITE SMS MESSAGES: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	
MT2. HOW OFTEN DO YOU READ A NEWSPAPER OR MAGAZINE: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	
MT3. DO YOU LISTEN TO THE RADIO ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	
MT4. HOW OFTEN DO YOU WATCH TELEVISION: WOULD YOU SAY THAT YOU WATCH ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	
MT5. *Check WB2: Age of respondent?* ☐ *Age 15-24 ⇨ Continue with MT6* ☐ *Age 25-49 ⇨ Go to Next Module*		
MT6. HAVE YOU EVER USED A COMPUTER?	Yes ..... 1 No 2	2⇨MT9
MT7. HAVE YOU USED A COMPUTER FROM ANY LOCATION IN THE LAST 12 MONTHS?	Yes ..... 1 No 2	2⇨MT9
MT8. DURING THE LAST ONE MONTH, HOW OFTEN DID YOU USE A COMPUTER: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	
MT9. HAVE YOU EVER USED THE INTERNET?	Yes ..... 1 No 2	2⇨Next Module
MT10. IN THE LAST 12 MONTHS, HAVE YOU USED THE INTERNET? *If necessary, probe for use from any location, with any device.*	Yes ..... 1 No 2	2⇨ Next Module
MT11. DURING THE LAST ONE MONTH, HOW OFTEN DID YOU USE THE INTERNET: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?	Almost every day ..... 1 At least once a week ..... 2 Less than once a week ..... 3 Not at all 4	

FERTILITY/BIRTH HISTORY		CM
CM1. NOW I WOULD LIKE TO ASK ABOUT ALL THE BIRTHS YOU HAVE HAD DURING YOUR LIFE. HAVE YOU EVER GIVEN BIRTH?	Yes ..... 1 No 2	2⇨CM8
CM4. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE NOW LIVING WITH YOU?	Yes ..... 1 No 2	2⇨CM6
CM5. HOW MANY SONS LIVE WITH YOU? HOW MANY DAUGHTERS LIVE WITH YOU? *If none, record '00'.*	Sons at home..... __ __ Daughters at home ..... __ __	
CM6. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE ALIVE BUT DO NOT LIVE WITH YOU?	Yes ..... 1 No 2	2⇨CM8
CM7. HOW MANY SONS ARE ALIVE BUT DO NOT LIVE WITH YOU? HOW MANY DAUGHTERS ARE ALIVE BUT DO NOT LIVE WITH YOU? *If none, record '00'.*	Sons elsewhere ..... __ __ Daughters elsewhere ..... __ __	
CM8. HAVE YOU EVER GIVEN BIRTH TO A BOY OR GIRL WHO WAS BORN ALIVE BUT LATER DIED? *If "No" probe by asking:* I MEAN, TO A CHILD WHO EVER BREATHED OR CRIED OR SHOWED OTHER SIGNS OF LIFE – EVEN IF HE OR SHE LIVED ONLY A FEW MINUTES OR HOURS?	Yes ..... 1 No 2	2⇨CM10
CM9. HOW MANY BOYS HAVE DIED? HOW MANY GIRLS HAVE DIED? *If none, record '00'.*	Boys dead..... __ __ Girls dead ..... __ __	
CM10. *Sum answers to CM5, CM7, and CM9.*	Sum ..... __ __	

CM11. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE HAD IN TOTAL (*total number in CM10*) LIVE BIRTHS DURING YOUR LIFE. IS THIS CORRECT?

☐ *Yes. Check below:*

☐ *No live births ⇨ Go to ILLNESS SYMPTOMS Module*

☐ *One or more live births ⇨ Continue with the BIRTH HISTORY module*

☐ *No. ⇨ Check responses to CM1-CM10 and make corrections as necessary before proceeding to the BIRTH HISTORY Module or ILLNESS SYMPTOMS Module*

BIRTH HISTORY — BH

NOW I WOULD LIKE TO RECORD THE NAMES OF ALL OF YOUR BIRTHS, WHETHER STILL ALIVE OR NOT, STARTING WITH THE FIRST ONE YOU HAD.
Record names of all of the births in BH1.Record twins and triplets on separate lines. If there are more than 14 births, use an additional questionnaire.

BH Line No.	**BH1.** WHAT NAME WAS GIVEN TO YOUR (*first/next*) BABY?	**BH2.** WERE ANY OF THESE BIRTHS TWINS? 1 Single 2 Multiple	**BH3.** IS (*name*) A BOY OR A GIRL? 1 Boy 2 Girl	**BH4.** IN WHAT MONTH AND YEAR WAS (*name*) BORN? *Probe*: WHAT IS HIS/HER BIRTHDAY?		**BH5.** IS (*name*) STILL ALIVE? 1 Yes 2 No	**BH6.** HOW OLD WAS (*name*) AT HIS/HER LAST BIRTHDAY? *Record age in completed years.*	**BH7.** IS (*name*) LIVING WITH YOU? 1 Yes 2 No	**BH8.** *Record household line number of child (from HL1)* *Record "00" if child is not listed.*	**BH9.** *If dead:* HOW OLD WAS (*name*) WHEN HE/SHE DIED? *If "1 year", probe:* HOW MANY MONTHS OLD WAS (*name*)? *Record days if less than 1 month; record months if less than 2 years; or years*		**BH10.** WERE THERE ANY OTHER LIVE BIRTHS BETWEEN (*name of previous birth*) AND (*name*), INCLUDING ANY CHILDREN WHO DIED AFTER BIRTH? 1 Yes 2 No
Line	Name	S M	B G	Month	Year	Y N	Age	Y N	Line No	Unit	Number	Y N
01		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ Next Line	Days ..... 1 Months..... 2 Years 3	__ __	
02		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth
03		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth
04		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth
05		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth
06		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth
07		1 2	1 2	__ __	__ __ __ __	1 2 ⇨ BH9	__ __	1 2	__ __ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	__ __	1 Add Birth 2 Next Birth

BH Line No.	**BH1.** WHAT NAME WAS GIVEN TO YOUR (*first/next*) BABY?	**BH2.** WERE ANY OF THESE BIRTHS TWINS? 1 Single 2 Multiple	**BH3.** IS (*name*) A BOY OR A GIRL? 1 Boy 2 Girl	**BH4.** IN WHAT MONTH AND YEAR WAS (*name*) BORN? *Probe*: WHAT IS HIS/HER BIRTHDAY?		**BH5.** IS (*name*) STILL ALIVE? 1 Yes 2 No	**BH6.** HOW OLD WAS (*name*) AT HIS/HER LAST BIRTHDAY? *Record age in completed years.*	**BH7.** IS (*name*) LIVING WITH YOU? 1 Yes 2 No	**BH8.** *Record household line number of child (from HL1)* *Record "00" if child is not listed.*	**BH9.** *If dead:* HOW OLD WAS (*name*) WHEN HE/SHE DIED? *If "1 year", probe:* HOW MANY MONTHS OLD WAS (*name*)? *Record days if less than 1 month; record months if less than 2 years; or years*		**BH10.** WERE THERE ANY OTHER LIVE BIRTHS BETWEEN (*name of previous birth*) AND (*name*), INCLUDING ANY CHILDREN WHO DIED AFTER BIRTH? 1 Yes 2 No
08		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
09		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
10		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
11		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
12		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
13		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth
14		1 2	1 2	___ ___	___ ___ ___ ___	1 2 ⇨ BH9	___ ___	1 2	___ ___ ⇨ BH10	Days ..... 1 Months..... 2 Years 3	___ ___	1 2 Add Birth Next Birth

BH11. HAVE YOU HAD ANY LIVE BIRTHS SINCE THE BIRTH OF (*name of last birth in BIRTH HISTORY Module*)?

Yes..... 1

No 2

1⇨Record birth(s) in Birth History

CM12A. *Compare number in CM10 with number of births in the BIRTH HISTORY Module above and check:*

☐ *Numbers are same ⇨ Continue with CM13*

☐ *Numbers are different ⇨ Probe and reconcile*

CM13. *Check BH4 in BIRTH HISTORY Module: Last birth occurred within the last 2 years, that is, since (month of interview) in* ***2011/2012*** *(if the month of interview and the month of birth are the same, and the year of birth is* ***2011/2012****, consider this as a birth within the last 2 years)*

☐ *No live birth in last 2 years. ⇨ Go to ILLNESS SYMPTOMS Module.*

☐ *One or more live births in last 2 years. ⇨ Record name of last born child and continue with Next Module*

*Name of last-born child*_____

If child has died, take special care when referring to this child by name in the following modules.

DESIRE FOR LAST BIRTH		**DB**
This module is to be administered to all women with a live birth in the 2 years preceding the date of interview. Record name of last-born child from CM13 here _____. Use this child's name in the following questions, where indicated.		
DB1. WHEN YOU GOT PREGNANT WITH (*name*), DID YOU WANT TO GET PREGNANT AT THAT TIME?	Yes ..... 1 No 2	1⇨Next Module
DB2. DID YOU WANT TO HAVE A BABY LATER ON, OR DID YOU NOT WANT ANY (MORE) CHILDREN?	Later ..... 1 No more 2	2⇨Next Module
DB3. HOW MUCH LONGER DID YOU WANT TO WAIT? *Record the answer as stated by respondent.*	Months ..... 1 __ __ Years ..... 2 __ __ DK 998	

MATERNAL AND NEWBORN HEALTH — MN

This module is to be administered to all women with a live birth in the 2 years preceding the date of interview.
Record name of last-born child from CM13 here _____.
Use this child's name in the following questions, where indicated.

MN1. DID YOU SEE ANYONE FOR ANTENATAL CARE DURING YOUR PREGNANCY WITH (*name*)?	Yes ..... 1 No 2	 2⇨MN4E
MN2. WHOM DID YOU SEE? *Probe:* ANYONE ELSE? *Probe for the type of person seen and circle all answers given.*	Health professional: Doctor ..... A Nurse/midwife ..... B Other person Traditional birth attendant ..... F Village health worker ..... G Other (*specify*)_____ X	
MN2A. HOW MANY WEEKS OR MONTHS PREGNANT WERE YOU WHEN YOU FIRST RECEIVED ANTENATAL CARE FOR THIS PREGNANCY? *Record the answer as stated by respondent.*	Weeks ..... 1 __ __ Months ..... 2 0 __ DK 998	
MN3. HOW MANY TIMES DID YOU RECEIVE ANTENATAL CARE DURING THIS PREGNANCY? *Probe to identify the number of times antenatal care was received. If a range is given, record the minimum number of times antenatal care received.*	Number of times ..... __ __ DK 98	
MN4. AS PART OF YOUR ANTENATAL CARE DURING THIS PREGNANCY, WERE ANY OF THE FOLLOWING DONE AT LEAST ONCE: [A] WAS YOUR BLOOD PRESSURE MEASURED? [B] DID YOU GIVE A URINE SAMPLE? [C] DID YOU GIVE A BLOOD SAMPLE? [D] WERE YOU ADVISED TO TAKE IRON FOLIC SUPPLEMENTS (OR IRON TABLETS OR MULTIPLE MICRO-NUTRIENT (MMN) SUPPLEMENTS)?	Yes No Blood pressure ..... 1 2 Urine sample ..... 1 2 Blood sample ..... 1 2 Iron Folic Supplements 1 2	
MN4E. DURING THIS PREGNANCY, DID YOU TAKE ANY IRON FOLIC SUPPLEMENTS (OR IRON TABLETS OR MULTIPLE MICRO-NUTRIENT (MMN) SUPPLEMENTS) SUCH AS THESE? *Show sample pictures*	Yes ..... 1 No 2	 2⇨MN5
MN4F. DURING THIS WHOLE PREGNANCY, FOR HOW MANY MONTHS DID YOU TAKE THE TABLETS (SUPPLEMENTS)? *If a range is given, record the minimum number of months mentioned. If less than 1 month record '0'.*	Number of months ..... 0 __ DK 98	

MN5. DO YOU HAVE A CARD OR OTHER DOCUMENT WITH YOUR OWN IMMUNIZATIONS LISTED? MAY I SEE IT PLEASE? *If a card is presented, use it to assist with answers to the following questions.*	Yes (card seen) ..... 1 Yes (card not seen) ..... 2 No ..... 3 DK 8	
MN6. WHEN YOU WERE PREGNANT WITH (*name*), DID YOU RECEIVE ANY INJECTION IN THE ARM OR SHOULDER TO PREVENT THE BABY FROM GETTING TETANUS, THAT IS CONVULSIONS AFTER BIRTH?	Yes ..... 1 No ..... 2 DK 8	 2⇨MN9 8⇨MN9
MN7. HOW MANY TIMES DID YOU RECEIVE THIS TETANUS INJECTION DURING YOUR PREGNANCY WITH (*name*)?	Number of times ..... __ DK 8	 8⇨MN9

MN8. *How many tetanus injections during last pregnancy were reported in MN7?*

☐ *At least two tetanus injections during last pregnancy. ⇨ Go to MN17*

☐ *Only one tetanus injection during last pregnancy. ⇨ Continue with MN9*

MN9. DID YOU RECEIVE ANY TETANUS INJECTION AT ANY TIME BEFORE YOUR PREGNANCY WITH (*name*), EITHER TO PROTECT YOURSELF OR ANOTHER BABY?	Yes ..... 1 No ..... 2 DK 8	 2⇨MN17 8⇨MN17
MN10. HOW MANY TIMES DID YOU RECEIVE A TETANUS INJECTION BEFORE YOUR PREGNANCY WITH (*name*)? *If 7 or more times, record '7'.*	Number of times ..... __ DK 8	 8⇨MN17
MN11. HOW MANY YEARS AGO DID YOU RECEIVE THE LAST TETANUS INJECTION BEFORE YOUR PREGNANCY WITH (*name*)? *If less than 1 year, record '00'.*	Years ago ..... __ __	
MN17. WHO ASSISTED WITH THE DELIVERY OF (*name*)? *Probe:* ANYONE ELSE? *Probe for the type of person assisting and circle all answers given.* *If respondent says no one assisted, probe to determine whether any adults were present at the delivery.*	Health professional: Doctor ..... A Nurse/midwife ..... B Other person Traditional birth attendant ..... F Village health worker ..... G Relative / Friend ..... H Other (*specify*)_____ X No one ..... Y	

MN18. WHERE DID YOU GIVE BIRTH TO (*name*)? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Home Your home ..... 11 Other home ..... 12 Public sector Government hospital ..... 21 Commune health centre ..... 22 Sectoral hospital (army, police) ..... 24 Policlinic ..... 25 Other public (*specify*) _____ 26 Private Medical Sector Private hospital ..... 31 Private clinic ..... 32 Private maternity home ..... 33 Other private medical (*specify*) _____ 36 Other (*specify*) _____ 96	11⇨MN20 12⇨MN20 96⇨MN20
MN19. WAS (*name*) DELIVERED BY CAESAREAN SECTION? THAT IS, DID THEY CUT YOUR BELLY OPEN TO TAKE THE BABY OUT?	Yes ..... 1 No 2	2⇨MN20
MN19A. WHEN WAS THE DECISION MADE TO HAVE THE CAESAREAN SECTION? WAS IT BEFORE OR AFTER YOUR LABOUR PAINS STARTED?	Before ..... 1 After 2	
MN20. WHEN (*name*) WAS BORN, WAS HE/SHE VERY LARGE, LARGER THAN AVERAGE, AVERAGE, SMALLER THAN AVERAGE, OR VERY SMALL?	Very large ..... 1 Larger than average ..... 2 Average ..... 3 Smaller than average ..... 4 Very small ..... 5 DK 8	
MN21. WAS (*name*) WEIGHED AT BIRTH?	Yes ..... 1 No ..... 2 DK 8	2⇨MN23 8⇨MN23
MN22. HOW MUCH DID (*name*) WEIGH? *If a card is available, record weight from card.*	From card ..... 1 (kg) __ . __ __ __ From recall ..... 2 (kg) __ . __ __ __ DK 99998	
MN23. HAS YOUR MENSTRUAL PERIOD RETURNED SINCE THE BIRTH OF (*name*)?	Yes ..... 1 No 2	
MN24. DID YOU EVER BREASTFEED (*name*)?	Yes ..... 1 No 2	2⇨Next Module

MN25. HOW LONG AFTER BIRTH DID YOU FIRST PUT (*name*) TO THE BREAST? *If less than 1 hour, record '00' hours.* *If less than 24 hours, record hours.* *Otherwise, record days.*	Immediately .....000 Hours .....1 __ __ Days .....2 __ __ DK / Don't remember 998	
MN26. IN THE FIRST THREE DAYS AFTER DELIVERY, WAS (*name*) GIVEN ANYTHING TO DRINK OTHER THAN BREAST MILK?	Yes .....1 No 2	2⇨Next Module
MN27. WHAT WAS (*name*) GIVEN TO DRINK? *Probe:* ANYTHING ELSE?	Milk (other than breast milk) ..... A Plain water ..... B Sugar or glucose water ..... C Gripe water ..... D Sugar-salt-water solution ..... E Fruit juice ..... F Infant formula ..... G Tea / Infusions ..... H Honey ..... I Rice soup ..... J Other (*specify*)_____ X	

POST-NATAL HEALTH CHECKS — PN

This module is to be administered to all women with a live birth in the 2 years preceding the date of interview.
Record name of last-born child from CM13 here _____.
Use this child's name in the following questions, where indicated.

PN1. *Check MN18: Was the child delivered in a health facility?*

☐ *Yes, the child was delivered in a health facility (MN18=21-26 or 31-36) ⇨ Continue with PN2*

☐ *No, the child was not delivered in a health facility (MN18=11-12 or 96) ⇨ Go to PN6*

PN2. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT WHAT HAPPENED IN THE HOURS AND DAYS AFTER THE BIRTH OF (*name*). YOU HAVE SAID THAT YOU GAVE BIRTH IN (*name or type of facility in MN18*). HOW LONG DID YOU STAY THERE AFTER THE DELIVERY? *If less than one day, record hours.* *If less than one week, record days.* *Otherwise, record weeks.*	Hours .....1 __ __ Days .....2 __ __ Weeks.....3 __ __ DK / Don't remember 998	
PN3. I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)'S HEALTH AFTER DELIVERY – FOR EXAMPLE, SOMEONE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF (*name*) IS OK. BEFORE YOU LEFT THE (*name or type of facility in MN18*), DID ANYONE CHECK ON (*name*)'S HEALTH?	Yes .....1 No.....2	
PN4. AND WHAT ABOUT CHECKS ON YOUR HEALTH – I MEAN, SOMEONE ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS ABOUT YOUR HEALTH OR EXAMINING YOU? DID ANYONE CHECK ON YOUR HEALTH BEFORE YOU LEFT (*name or type or facility in MN18*)?	Yes .....1 No.....2	
PN5. NOW I WOULD LIKE TO TALK TO YOU ABOUT WHAT HAPPENED AFTER YOU LEFT (*name or type of facility in MN18*). DID ANYONE CHECK ON (*name*)'S HEALTH AFTER YOU LEFT (*name or type of facility in MN18*)?	Yes .....1 No.....2	1⇨PN11 2⇨PN16

PN6. *Check MN17: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?*

☐ *Yes, delivery assisted by a health professional, traditional birth attendant, or community health worker (MN17=A-G) ⇨ Continue with PN7*

☐ *No, delivery not assisted by a health professional, traditional birth attendant, or community health worker (A-G not circled in MN17) ⇨ Go to PN10*

PN7. YOU HAVE ALREADY SAID THAT (*person or persons in MN17*) ASSISTED WITH THE BIRTH. NOW I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)'S HEALTH AFTER DELIVERY, FOR EXAMPLE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF (*name*) IS OK. AFTER THE DELIVERY WAS OVER AND BEFORE (*person or persons in MN17*) LEFT YOU, DID (*person or persons in MN17*) CHECK ON (*name*)'S HEALTH?	Yes .....1 No 2	
PN8. AND DID (*person or persons in MN17*) CHECK ON YOUR HEALTH BEFORE LEAVING? BY CHECK ON YOUR HEALTH, I MEAN ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS ABOUT YOUR HEALTH OR EXAMINING YOU.	Yes .....1 No 2	
PN9. AFTER THE (*person or persons in MN17*) LEFT YOU, DID ANYONE CHECK ON THE HEALTH OF (*name*)?	Yes .....1 No 2	1⇨PN11 2⇨PN18
PN10. I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)'S HEALTH AFTER DELIVERY – FOR EXAMPLE, SOMEONE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF THE BABY IS OK. AFTER (*name*) WAS DELIVERED, DID ANYONE CHECK ON HIS/HER HEALTH?	Yes .....1 No 2	2⇨PN19
PN11. DID SUCH A CHECK HAPPEN ONLY ONCE, OR MORE THAN ONCE?	Once .....1 More than once 2	1⇨PN12A 2⇨PN12B
PN12A. HOW LONG AFTER DELIVERY DID THAT CHECK HAPPEN? **PN12B**. HOW LONG AFTER DELIVERY DID THE FIRST OF THESE CHECKS HAPPEN? *If less than one day, record hours.* *If less than one week, record days.* *Otherwise, record weeks.*	Hours .....1 __ __ Days .....2 __ __ Weeks .....3 __ __ DK / Don't remember 998	

PN13. WHO CHECKED ON (*name*)'S HEALTH AT THAT TIME?	Health professional Doctor ..... A Nurse / Midwife ..... B Other person Traditional birth attendant ..... F Village health worker..... G Relative / Friend..... H Other (*specify*)_____ X	
PN14. WHERE DID THIS CHECK TAKE PLACE? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Home Your home ..... 11 Other home..... 12 Public sector Government hospital..... 21 Commune health centre..... 22 Sectoral hospital (army, police) ..... 24 Policlinic..... 25 Other public (*specify*) _____ 26 Private Medical Sector Private hospital ..... 31 Private clinic..... 32 Private maternity home ..... 33 Other private medical (*specify*) _____ 36 Other (*specify*)_____ 96	
PN15. *Check MN18: Was the child delivered in a health facility?* ☐ *Yes, the child was delivered in a health facility (MN18=21-26 or 31-36) ⇨ Continue with PN16* ☐ *No, the child was not delivered in a health facility (MN18=11-12 or 96) ⇨ Go to PN17*		
PN16. AFTER YOU LEFT (*name or type of facility in MN18*), DID ANYONE CHECK ON YOUR HEALTH?	Yes ..... 1 No..... 2	1⇨PN20 2⇨Next Module
PN17. *Check MN17: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?* ☐ *Yes, delivery assisted by a health professional, traditional birth attendant, or community health worker (MN17=A-G) ⇨ Continue with PN18* ☐ *No, delivery not assisted by a health professional, traditional birth attendant, or community health worker (A-G not circled in MN17) ⇨ Go to PN19*		
PN18. AFTER THE DELIVERY WAS OVER AND (*person or persons in MN17*) LEFT, DID ANYONE CHECK ON YOUR HEALTH?	Yes ..... 1 No..... 2	1⇨PN20 2⇨Next Module

PN19. AFTER THE BIRTH OF (*name*), DID ANYONE CHECK ON YOUR HEALTH? I MEAN SOMEONE ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS ABOUT YOUR HEALTH OR EXAMINING YOU.	Yes .....1 No 2	2⇨Next Module
PN20. DID SUCH A CHECK HAPPEN ONLY ONCE, OR MORE THAN ONCE?	Once .....1 More than once 2	1⇨PN21A 2⇨PN21B
PN21A. HOW LONG AFTER DELIVERY DID THAT CHECK HAPPEN? **PN21B**. HOW LONG AFTER DELIVERY DID THE FIRST OF THESE CHECKS HAPPEN? *If less than one day, record hours.* *If less than one week, record days.* *Otherwise, record weeks.*	Hours .....1 __ __ Days .....2 __ __ Weeks .....3 __ __ DK / Don't remember 998	
PN22. WHO CHECKED ON YOUR HEALTH AT THAT TIME?	Health professional Doctor ..... A Nurse / Midwife ..... B Other person Traditional birth attendant ..... F Village health worker ..... G Relative / Friend ..... H Other (*specify*) _____ X	
PN23. WHERE DID THIS CHECK TAKE PLACE? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Home Your home .....11 Other home .....12 Public sector Government hospital .....21 Commune health centre .....22 Sectoral hospital (army, police) .....24 Policlinic .....25 Other public (*specify*) _____ 26 Private Medical Sector Private hospital .....31 Private clinic .....32 Private maternity home .....33 Other private medical (*specify*) _____ 36 Other (*specify*) _____ 96	

ILLNESS SYMPTOMS — IS

IS1. *Check List of Household Members, columns HL7B and HL15*

Is the respondent the mother or caretaker of any child under age 5?

☐ *Yes ⇨ Continue with IS2.*

☐ *No ⇨ Go to Next Module.*

IS2. SOMETIMES CHILDREN HAVE SEVERE ILLNESSES AND SHOULD BE TAKEN IMMEDIATELY TO A HEALTH FACILITY. WHAT TYPES OF SYMPTOMS WOULD CAUSE YOU TO TAKE A CHILD UNDER THE AGE OF 5 TO A HEALTH FACILITY RIGHT AWAY? *Probe:* ANY OTHER SYMPTOMS? *Keep asking for more signs or symptoms until the mother/caretaker cannot recall any additional symptoms.* *Circle all symptoms mentioned, but do <u>not</u> prompt with any suggestions*	Child not able to drink or breastfeed ..... A Child becomes sicker ..... B Child develops a fever ..... C Child has fast breathing ..... D Child has difficulty breathing ..... E Child has blood in stool ..... F Child is drinking poorly ..... G Child vomiting ..... H Child choked ..... I Other (*specify*) _____ X Other (*specify*) _____ Y Other (*specify*) _____ Z	

CONTRACEPTION — CP

CP1. I WOULD LIKE TO TALK WITH YOU ABOUT ANOTHER SUBJECT – FAMILY PLANNING. ARE YOU PREGNANT NOW?	Yes, currently pregnant ..... 1 No ..... 2 Unsure or DK 8	1⇨CP2A
CP2. COUPLES USE VARIOUS WAYS OR METHODS TO DELAY OR AVOID A PREGNANCY. ARE YOU CURRENTLY DOING SOMETHING OR USING ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?	Yes ..... 1 No 2	1⇨CP3
CP2A. HAVE YOU EVER DONE SOMETHING OR USED ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?	Yes ..... 1 No 2	1⇨Next Module 2⇨Next Module
CP3. WHAT ARE YOU DOING TO DELAY OR AVOID A PREGNANCY? *Do not prompt.* *If more than one method is mentioned, circle each one.*	Female sterilization ..... A Male sterilization ..... B IUD ..... C Injectables ..... D Implants ..... E Pill ..... F Male condom ..... G Female condom ..... H Diaphragm ..... I Foam / Jelly ..... J Periodic abstinence / Rhythm ..... L Withdrawal ..... M Other (*specify*) _____ X	MICS.WM.19

UNMET NEED		UN
UN1. *Check CP1. Currently pregnant?* ☐ *Yes, currently pregnant ⇨ Continue with UN2* ☐ *No, unsure or DK ⇨ Go to UN5*		
UN2. NOW I WOULD LIKE TO TALK TO YOU ABOUT YOUR CURRENT PREGNANCY. WHEN YOU GOT PREGNANT, DID YOU WANT TO GET PREGNANT AT THAT TIME?	Yes ..... 1 No 2	1⇨UN4
UN3. DID YOU WANT TO HAVE A BABY LATER ON OR DID YOU NOT WANT ANY (MORE) CHILDREN?	Later ..... 1 No more 2	
UN4. NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE FUTURE. AFTER THE CHILD YOU ARE NOW EXPECTING, WOULD YOU LIKE TO HAVE ANOTHER CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY MORE CHILDREN?	Have another child ..... 1 No more / None ..... 2 Undecided / DK 8	1⇨UN7 2⇨UN13 8⇨UN13
UN5. *Check CP3. Currently using "Female sterilization"?* ☐ *Yes ⇨ Go to UN13* ☐ *No ⇨ Continue with UN6*		
UN6. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE FUTURE. WOULD YOU LIKE TO HAVE (A/ANOTHER) CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY (MORE) CHILDREN?	Have (a/another) child ..... 1 No more / None ..... 2 Says she cannot get pregnant ..... 3 Undecided / DK 8	 2⇨UN9 3⇨UN11 8⇨UN9
UN7. HOW LONG WOULD YOU LIKE TO WAIT BEFORE THE BIRTH OF (A/ANOTHER) CHILD? *Record the answer as stated by respondent.*	Months ..... 1 __ __ Years ..... 2 __ __ Does not want to wait (soon/now) ..... 993 Says she cannot get pregnant ..... 994 After marriage ..... 995 Other ..... 996 DK 998	 994⇨UN11
UN8. *Check CP1. Currently pregnant?* ☐ *Yes, currently pregnant ⇨ Go to UN13* ☐ *No, unsure or DK ⇨ Continue with UN9*		

UN9. *Check CP2. Currently using a method?* ☐ *Yes ⇨ Go to UN13* ☐ *No ⇨ Continue with UN10*		
UN10. DO YOU THINK YOU ARE PHYSICALLY ABLE TO GET PREGNANT AT THIS TIME?	Yes ..... 1 No ..... 2 DK 8	1 ⇨UN13 8 ⇨UN13
UN11. WHY DO YOU THINK YOU ARE NOT PHYSICALLY ABLE TO GET PREGNANT? *If the respondent gives more than one answer, circle each one.*	Infrequent sex / No sex ..... A Menopausal ..... B Never menstruated ..... C Hysterectomy (surgical removal of uterus) ..... D Has been trying to get pregnant for 2 years or more without result ..... E Postpartum amenorrheic ..... F Breastfeeding ..... G Too old ..... H Fatalistic ..... I Other (*specify*) _____ X DK ..... Z	
UN12. *Check UN11. "Never menstruated" mentioned?* ☐ *Mentioned ⇨ Go to Next Module* ☐ *Not mentioned ⇨ Continue with UN13*		
UN13. WHEN DID YOUR LAST MENSTRUAL PERIOD START? *Record the answer using the same unit stated by the respondent*	Days ago ..... 1 __ __ Weeks ago ..... 2 __ __ Months ago ..... 3 __ __ Years ago ..... 4 __ __ In menopause / Has had hysterectomy ..... 994 Before last birth ..... 995 Never menstruated 996	

ATTITUDES TOWARD DOMESTIC VIOLENCE					DV
DV1. SOMETIMES A HUSBAND IS ANNOYED OR ANGERED BY THINGS THAT HIS WIFE DOES. IN YOUR OPINION, IS A HUSBAND JUSTIFIED IN HITTING OR BEATING HIS WIFE IN THE FOLLOWING SITUATIONS:		Yes	No	DK	
[A] IF SHE GOES OUT WITHOUT TELLING HIM?	Goes out without telling	1	2	8	
[B] IF SHE NEGLECTS THE CHILDREN?	Neglects children.....	1	2	8	
[C] IF SHE ARGUES WITH HIM?	Argues with him.....	1	2	8	
[D] IF SHE REFUSES TO HAVE SEX WITH HIM?	Refuses sex	1	2	8	
[E] IF SHE BURNS THE FOOD?	Burned the food.....	1	2	8	
[F] IF SHE DOES NOT COMPLETE HER HOUSE WORK TO HIS SATISFACTION?	Incompleted house works.....	1	2	8	
[G] IF SHE IS DOUBTED ABOUT HER BEING FAITHFUL?	Doubted of her faithful	1	2	8	
[H]IF SHE ISDISCLOSED THAT SHE WAS UNFAITHFUL ?	Disclosed about her unfaithful ..	1	2	8	

MARRIAGE/UNION		MA
MA1. ARE YOU CURRENTLY MARRIED OR LIVING TOGETHER WITH A MAN AS IF MARRIED?	Yes, currently married ..... 1 Yes, living with a man..... 2 No, not in union 3	 3⇨MA5
MA2. HOW OLD IS YOUR HUSBAND/PARTNER? *Probe*: HOW OLD WAS YOUR HUSBAND/PARTNER ON HIS LAST BIRTHDAY?	Age in years ..... __ __ DK 98	
MA3. BESIDES YOURSELF, DOES YOUR HUSBAND/PARTNER HAVE ANY OTHER WIVES OR PARTNERS OR DOES HE LIVE WITH OTHER WOMEN AS IF MARRIED?	Yes ..... 1 No 2	 2⇨MA7
MA4. HOW MANY OTHER WIVES OR PARTNERS DOES HE HAVE?	Number ..... __ __ DK 98	⇨MA7 98⇨MA7
MA5. HAVE YOU EVER BEEN MARRIED OR LIVED TOGETHER WITH A MAN AS IF MARRIED?	Yes, formerly married ..... 1 Yes, formerly lived with a man..... 2 No 3	 3 ⇨Next Module
MA6. WHAT IS YOUR MARITAL STATUS NOW: ARE YOU WIDOWED, DIVORCED OR SEPARATED?	Widowed ..... 1 Divorced ..... 2 Separated..... 3	
MA7. HAVE YOU BEEN MARRIED OR LIVED WITH A MAN ONLY ONCE OR MORE THAN ONCE?	Only once ..... 1 More than once 2	1 ⇨MA8A 2 ⇨MA8B
MA8A. IN WHAT MONTH AND YEAR DID YOU MARRY OR START LIVING WITH A MAN AS IF MARRIED? **MA8B**. IN WHAT MONTH AND YEAR DID YOU FIRST MARRY OR START LIVING WITH A MAN AS IF MARRIED?	Date of (first) marriage Month ..... __ __ DK month ..... 98 Year ..... __ __ __ __ DK year 9998	 ⇨Next Module
MA9. HOW OLD WERE YOU WHEN YOU FIRST STARTED LIVING WITH YOUR (FIRST) HUSBAND/PARTNER?	Age in years ..... __ __	

HIV/AIDS		HA
HA1. NOW I WOULD LIKE TO TALK WITH YOU ABOUT SOMETHING ELSE. HAVE YOU EVER HEARD OF AN ILLNESS CALLED AIDS?	Yes ..... 1 No 2	 2 ⇨Next Module
HA2. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE HIV VIRUS BY HAVING JUST ONE UNINFECTED SEX PARTNER WHO HAS NO OTHER SEX PARTNERS?	Yes ..... 1 No ..... 2 DK 8	
HA3. CAN PEOPLE GET THE HIV VIRUS BECAUSE OF WITCHCRAFT OR OTHER SUPERNATURAL MEANS?	Yes ..... 1 No ..... 2 DK 8	
HA4. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE HIV VIRUS BY USING A CONDOM EVERY TIME THEY HAVE SEX?	Yes ..... 1 No ..... 2 DK 8	
HA5. CAN PEOPLE GET THE HIV VIRUS FROM MOSQUITO BITES?	Yes ..... 1 No ..... 2 DK 8	
HA6. CAN PEOPLE GET THE HIV VIRUS BY SHARING FOOD WITH A PERSON WHO HAS THE AIDS VIRUS?	Yes ..... 1 No ..... 2 DK 8	
HA7. IS IT POSSIBLE FOR A HEALTHY-LOOKING PERSON TO HAVE THE HIV VIRUS?	Yes ..... 1 No ..... 2 DK 8	
HA8. CAN THE VIRUS THAT CAUSES HIV BE TRANSMITTED FROM A MOTHER TO HER BABY: [A] DURING PREGNANCY? [B] DURING DELIVERY? [C] BY BREASTFEEDING?	Yes No DK During pregnancy ..... 1 2 8 During delivery ..... 1 2 8 By breastfeeding 1 2 8	
HA9. IN YOUR OPINION, IF A FEMALE TEACHER HAS THE HIV VIRUS BUT IS NOT SICK, SHOULD SHE BE ALLOWED TO CONTINUE TEACHING IN SCHOOL?	Yes ..... 1 No ..... 2 DK / Not sure / Depends 8	
HA9A. IN YOUR OPINION, SHOULD A CHILD THAT HAS THE HIV VIRUS, BUT IS NOT SICK BE ALLOWED TO CONTINUE GOING TO HIS/HER SCHOOL?	Yes ..... 1 No ..... 2 DK / Not sure / Depends 8	
HA9B. IN YOUR OPINION, SHOULD A CHILD WHOSE MOTHER OR FATHER HAS THE HIV VIRUS, BE ALLOWED TO CONTINUE GOING TO HIS/HER SCHOOL?	Yes ..... 1 No ..... 2 DK / Not sure / Depends 8	
HA10. WOULD YOU BUY FRESH VEGETABLES FROM A SHOPKEEPER OR VENDOR IF YOU KNEW THAT THIS PERSON HAD THE HIV VIRUS?	Yes ..... 1 No ..... 2 DK / Not sure / Depends 8	

HA11. IF A MEMBER OF YOUR FAMILY GOT INFECTED WITH THE HIV VIRUS, WOULD YOU WANT IT TO REMAIN A SECRET?	Yes .....1 No .....2 DK / Not sure / Depends 8	
HA12. IF A MEMBER OF YOUR FAMILY BECAME SICK WITH HIV, WOULD YOU BE WILLING TO CARE FOR HER OR HIM IN YOUR OWN HOUSEHOLD?	Yes .....1 No .....2 DK / Not sure / Depends 8	
HA13. *Check CM13: Any live birth in last 2 years?* ☐ *No live birth in last 2 years (CM13="No" or blank) ⇨ Go to HA24* ☐ *One or more live births in last 2 years ⇨ Continue with HA14*		
HA14. *Check MN1: Received antenatal care?* ☐ *Received antenatal care ⇨ Continue with HA15* ☐ *Did not receive antenatal care ⇨ Go to HA24*		
HA15. DURING ANY OF THE ANTENATAL VISITS FOR YOUR PREGNANCY WITH (*name*), WERE YOU GIVEN ANY INFORMATION ABOUT: [A] BABIES GETTING THE HIV VIRUS FROM THEIR MOTHER? [B] THINGS THAT YOU CAN DO TO PREVENT GETTING THE HIV VIRUS? [C] GETTING TESTED FOR THE HIV VIRUS? WERE YOU: [D] OFFERED A TEST FOR THE HIV VIRUS?	Y N DK AIDS from mother .....1 2 8 Things to do .....1 2 8 Tested for AIDS .....1 2 8 Offered a test 1 2 8	
HA16. I DON'T WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE HIV VIRUS AS PART OF YOUR ANTENATAL CARE?	Yes ..... 1 No ..... 2 DK..... 8	 2⇨HA19 8⇨HA19
HA17. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?	Yes ..... 1 No ..... 2 DK..... 8	 2⇨HA22 8⇨HA22
HA18. REGARDLESS OF THE RESULT, ALL WOMEN WHO ARE TESTED ARE SUPPOSED TO RECEIVE COUNSELLING AFTER GETTING THE RESULT. AFTER YOU WERE TESTED, DID YOU RECEIVE COUNSELLING?	Yes ..... 1 No ..... 2 DK..... 8	1⇨HA22 2⇨HA22 8⇨HA22
HA19. *Check MN17: Birth delivered by health professional (A, B or C)?* ☐ *Yes, birth delivered by health professional (MN17 = A, B or C) ⇨ Continue with HA20* ☐ *No, birth not delivered by health professional (MN17 = else) ⇨ Go to HA24*		

HA20. I DON'T WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE HIV VIRUS BETWEEN THE TIME YOU WENT FOR DELIVERY BUT BEFORE THE BABY WAS BORN?	Yes ..... 1 No 2	2⇨HA24
HA21. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?	Yes ..... 1 No 2	
HA22. HAVE YOU BEEN TESTED FOR THE HIV VIRUS SINCE THAT TIME YOU WERE TESTED DURING YOUR PREGNANCY?	Yes ..... 1 No 2	1⇨HA25
HA23. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED FOR THE HIV VIRUS?	Less than 12 months ago ..... 1 12-23 months ago ..... 2 2 or more years ago 3	1 ⇨Next Module 2 ⇨Next Module 3 ⇨Next Module
HA24. I DON'T WANT TO KNOW THE RESULTS, BUT HAVE YOU EVER BEEN TESTED TO SEE IF YOU HAVE THE HIV VIRUS?	Yes ..... 1 No 2	2⇨HA27
HA25. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED?	Less than 12 months ago ..... 1 12-23 months ago ..... 2 2 or more years ago 3	
HA26. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?	Yes ..... 1 No ..... 2 DK 8	1 ⇨Next Module 2 ⇨Next Module 8 ⇨Next Module
HA27. DO YOU KNOW OF A PLACE WHERE PEOPLE CAN GO TO GET TESTED FOR THE HIV VIRUS?	Yes ..... 1 No 2	

WM11. *Record the time.*	Hour and minutes ..... __ __ : __ __	

WM12. *Check List of Household Members, columns HL7B and HL15.*
Is the respondent the mother or caretaker of any child age 0-4 living in this household?

☐ *Yes ⇨ Proceed to complete the cover page (WM7, then go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent.*

☐ *No ⇨ End the interview with this respondent by thanking her for her cooperation and proceed to complete the cover page*

THANK YOU VERY MUCH FOR ANSWERING THE QUESTIONS. COULD YOU PLEASE GIVE US YOUR TELEPHONE NUMBER IN CASE WE MIGHT NEED SOME MORE INFORMATION?

WE DO NOT USE OR SHARE YOUR NUMBER FOR ANY OTHER PURPOSES.

Telephone number: _____

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations

QUESTIONNAIRE FOR CHILDREN UNDER FIVE

Viet Nam MICS 2014

UNDER-FIVE CHILD INFORMATION PANEL	UF

This questionnaire is to be administered to all mothers or caretakers (see List of Household Members, column HL15) who care for a child that lives with them and is under the age of 5 years (see List of Household Members, column HL7B).
A separate questionnaire should be used for each eligible child.

UF0A. Province/ City's name and number: Name _____.___ ___	**UF0B**. District's name and number: Name_____ ___ ___ ___
UF0C. Commune/ Ward name and number: _____ ___ ___ ___ ___ ___	
UF1. Cluster's name and number: Name _____ ___ ___ ___	**UF2**. Household number: ___ ___
UF3. Child's name: Name_____	**UF4**. Child's line number: ___ ___
UF5. Mother's / Caretaker's name: Name_____	**UF6**. Mother's / Caretaker's line number: ___ ___
UF7. Interviewer's name and number: Name _____ ___ ___ ___	**UF8**. Day / Month / Year of interview: ___ ___/___ ___/ 2 0 1 ___

Repeat greeting if not already read to this respondent: MY NAME IS [...]. WE ARE FROM THE GENERAL STATISTICS OFFICE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT (*child's name from UF3*)'S HEALTH AND WELL-BEING. THE INTERVIEW WILL TAKE ABOUT 40 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS.	*If greeting at the beginning of the household questionnaire has already been read to this person, then read the following:* NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT (*child's name from UF3*)'S HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT **40** MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS.

MAY I START NOW?

- ☐ *Yes, permission is given ⇨ Go to UF12 to record the time and then begin the interview.*
- ☐ *No, permission is not given ⇨ Circle '03' in UF9. Discuss this result with your supervisor*

UF9. Result of interview for children under 5 *Codes refer to mother/caretaker.*	Completed ..... 01 Not at home ..... 02 Refused ..... 03 Partly completed ..... 04 Incapacitated ..... 05 Other (*specify*) _____ 96
UF10. Field editor's name and number: Name_____ __ __	**UF11**. Main data entry clerk's name and number: Name_____ __

UF12. *Record the time.*	Hour and minutes .....__ __ : __ __	

AGE		**AG**
AG1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE DEVELOPMENT AND HEALTH OF (*name*). ON WHAT DAY, MONTH AND YEAR ACCORDING TO WESTERN CALENDAR WAS (*name*) BORN? *Probe:* WHAT IS HIS / HER BIRTHDAY? *If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day* *Month and year must be recorded.*	Date of birth Day ..... __ __ DK day ..... 98 Month ..... __ __ Year .....2 0 __ __	
AG2. HOW OLD IS (*name*)? *Probe*: HOW OLD WAS (*name*) AT HIS / HER LAST BIRTHDAY? *Record age in completed years.* *Record '0' if less than 1 year.* *Compare and correct AG1 and/or AG2 if inconsistent.*	Age (in completed years) ..... __	

BIRTH REGISTRATION		BR
BR1. DOES (*name*) HAVE A BIRTH CERTIFICATE? *If yes, ask:* MAY I SEE IT?	Yes, seen ..... 1 Yes, not seen ..... 2 No ..... 3 DK 8	1⇨Next Module 2⇨Next Module
BR2. HAS (*name*)'S BIRTH BEEN REGISTERED WITH THE PEOPLE COMMUNITY?	Yes ..... 1 No ..... 2 DK 8	1⇨Next Module
BR3. DO YOU KNOW HOW TO REGISTER (*name*)'S BIRTH?	Yes ..... 1 No 2	

EARLY CHILDHOOD DEVELOPMENT		EC
EC1. HOW MANY CHILDREN'S BOOKS OR PICTURE BOOKS DO YOU HAVE FOR (*name*)?	None ..... 00 Number of children's books ..... 0 __ Ten or more books 10	
EC2. I AM INTERESTED IN LEARNING ABOUT THE THINGS THAT (*name*) PLAYS WITH WHEN HE/SHE IS AT HOME. DOES HE/SHE PLAY WITH: [A] HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)? [B] TOYS FROM A SHOP OR MANUFACTURED TOYS? [C] HOUSEHOLD OBJECTS (SUCH AS BOWLS OR POTS) OR OBJECTS FOUND OUTSIDE (SUCH AS STICKS, ROCKS, ANIMAL SHELLS OR LEAVES)? *If the respondent says "YES" to the categories above, then probe to learn specifically what the child plays with to ascertain the response*	Y N DK Homemade toys ..... 1 2 8 Toys from a shop ..... 1 2 8 Household objects or outside objects 1 2 8	
EC3. SOMETIMES ADULTS TAKING CARE OF CHILDREN HAVE TO LEAVE THE HOUSE TO GO SHOPPING, WASH CLOTHES, OR FOR OTHER REASONS AND HAVE TO LEAVE YOUNG CHILDREN. ON HOW MANY DAYS IN THE PAST WEEK WAS (*name*): [A] LEFT ALONE FOR MORE THAN AN HOUR? [B] LEFT IN THE CARE OF ANOTHER CHILD, THAT IS, SOMEONE LESS THAN 10 YEARS OLD, FOR MORE THAN AN HOUR? *If 'none' enter' 0'. If 'don't know' enter'8'*	Number of days left alone for more than an hour ..... __ Number of days left with other child for more than an hour ..... __	
EC4. *Check AG2: Age of child* ☐ *Child age 0, 1 or 2 ⇨ Go to Next Module* ☐ *Child age 3 or 4 ⇨ Continue with EC5*		
EC5. DOES (*name*) ATTEND ANY ORGANIZED LEARNING OR EARLY CHILDHOOD EDUCATION PROGRAMME, SUCH AS A PRIVATE OR GOVERNMENT FACILITY, INCLUDING KINDERGARTEN OR COMMUNITY CHILD CARE?	Yes ..... 1 No ..... 2 DK 8	

EC7. IN THE PAST 3 DAYS, DID YOU OR ANY HOUSEHOLD MEMBER AGE 15 OR OVER ENGAGE IN ANY OF THE FOLLOWING ACTIVITIES WITH (*name*): *If yes, ask:* WHO ENGAGED IN THIS ACTIVITY WITH (*name*)? *Circle all that apply.*		Mother	Father	Other	No one	
[A] READ BOOKS TO OR LOOKED AT PICTURE BOOKS WITH (*name*)?	Read books	A	B	X	Y	
[B] TOLD STORIES TO (*name*)?	Told stories	A	B	X	Y	
[C] SANG SONGS TO (*name*) OR WITH (*name*), INCLUDING LULLABIES?	Sang songs	A	B	X	Y	
[D] TOOK (*name*) OUTSIDE THE HOME, COMPOUND, YARD OR ENCLOSURE?	Took outside	A	B	X	Y	
[E] PLAYED WITH (*name*)?	Played with	A	B	X	Y	
[F] NAMED, COUNTED, OR DREW THINGS TO OR WITH (*name*)?	Named/counted	A	B	X	Y	
EC8. I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH AND DEVELOPMENT OF (*name*). CHILDREN DO NOT ALL DEVELOP AND LEARN AT THE SAME RATE. FOR EXAMPLE, SOME WALK EARLIER THAN OTHERS. THESE QUESTIONS ARE RELATED TO SEVERAL ASPECTS OF (*name*)'S DEVELOPMENT. CAN (*name*) IDENTIFY OR NAME AT LEAST TEN LETTERS OF THE ALPHABET?	Yes ..... 1 No ..... 2 DK 8					
EC9. CAN (*name*) READ AT LEAST FOUR SIMPLE, POPULAR WORDS?	Yes ..... 1 No ..... 2 DK 8					
EC10. DOES (*name*) KNOW THE NAME AND RECOGNIZE THE SYMBOL OF ALL NUMBERS FROM 1 TO 10?	Yes ..... 1 No ..... 2 DK 8					
EC11. CAN (*name*) PICK UP A SMALL OBJECT WITH TWO FINGERS, LIKE A STICK OR A ROCK FROM THE GROUND?	Yes ..... 1 No ..... 2 DK 8					
EC12. IS (*name*) SOMETIMES TOO SICK TO PLAY?	Yes ..... 1 No ..... 2 DK 8					
EC13. DOES (*name*) FOLLOW SIMPLE DIRECTIONS ON HOW TO DO SOMETHING CORRECTLY?	Yes ..... 1 No ..... 2 DK 8					
EC14. WHEN GIVEN SOMETHING TO DO, IS (*name*) ABLE TO DO IT INDEPENDENTLY?	Yes ..... 1 No ..... 2 DK 8					

EC15. DOES *(name)* GET ALONG WELL WITH OTHER CHILDREN?	Yes ..... 1 No ..... 2 DK 8	
EC16. DOES (*name*) KICK, BITE, OR HIT OTHER CHILDREN OR ADULTS?	Yes ..... 1 No ..... 2 DK 8	
EC17. DOES (*name*) GET DISTRACTED EASILY?	Yes ..... 1 No ..... 2 DK 8	

BREASTFEEDING AND DIETARY INTAKE		BD
BD1. *Check AG2: Age of child* ☐ *Child age 0, 1 or 2 ⇨ Continue with BD2* ☐ *Child age 3 or 4 ⇨ Go to CARE OF ILLNESS Module*		
BD2. HAS (*name*) EVER BEEN BREASTFED?	Yes ..... 1 No ..... 2 DK 8	2⇨BD4 8⇨BD4
BD3. IS (*name*) STILL BEING BREASTFED?	Yes ..... 1 No ..... 2 DK 8	
BD4. YESTERDAY, DURING THE DAY OR NIGHT, DID (*name*) DRINK ANYTHING FROM A BOTTLE WITH A NIPPLE?	Yes ..... 1 No ..... 2 DK 8	
BD5. DID (*name*) DRINK ORS (ORAL REHYDRATION SOLUTION) YESTERDAY, DURING THE DAY OR NIGHT?	Yes ..... 1 No ..... 2 DK 8	
BD6. DID (*name*) DRINK OR EAT VITAMIN OR MINERAL SUPPLEMENTS OR ANY MEDICINES YESTERDAY, DURING THE DAY OR NIGHT?	Yes ..... 1 No ..... 2 DK 8	
BD7. NOW I WOULD LIKE TO ASK YOU ABOUT (OTHER) LIQUIDS THAT (*name*) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. I AM INTERESTED TO KNOW WHETHER (*name*) HAD THE ITEM EVEN IF COMBINED WITH OTHER FOODS. PLEASE INCLUDE LIQUIDS CONSUMED OUTSIDE OF YOUR HOME. DID (*name*) DRINK (*Name of item*) YESTERDAY DURING THE DAY OR THE NIGHT:	Yes No DK	
[A] PLAIN WATER?	Plain water 1 2 8	
[B1] JUICE FROM RIPENING FRUITS WITH YELLOW/ ORANGE INSIDE , SUCH AS: MANGO, PAPAYA, STRAWBERRY, WATER MELLON?	Juice with yellow or orange inside 1 2 8	
[B2] OTHER FRUIT JUICE?	Other fruit juice	
[C] RICE SOUP/BOILED WATER OR CLEAR BROTH FROM VEGETABLE OR MEAT WITHOUT PIECES AND GRAINS FIBERS?	Rice soup or clear broth without pieces and fibers 1 2 8	
[D] MILK SUCH AS TINNED, POWDERED, OR FRESH ANIMAL MILK?	Milk 1 2 8	
If yes: HOW MANY TIMES DID (*name*) DRINK MILK? *If 7 or more times, record '7'.* *If unknown, record '8'.*	Number of times drank milk ..... __	
[E] INFANT FORMULA?	Infant formula 1 2 8	
If yes: HOW MANY TIMES DID (*name*) DRINK INFANT FORMULA? *If 7 or more times, record '7'.* *If unknown, record '8'.*	Number of times drank infant formula ..... __	
[F] ANY OTHER LIQUIDS?	Other liquid 1 2 8 *Specify* _____	

BD8. NOW I WOULD LIKE TO ASK YOU ABOUT (OTHER) FOODS THAT (*name*) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. AGAIN, I AM INTERESTED TO KNOW WHETHER (*name*) HAD THE ITEM EVEN IF COMBINED WITH OTHER FOODS. PLEASE INCLUDE FOODS CONSUMED OUTSIDE OF YOUR HOME. DID (*name*) EAT (*Name of food*) YESTERDAY DURING THE DAY OR THE NIGHT:		Yes	No	DK	
[A] YOGURT?	Yogurt	1	2	8	
If yes: HOW MANY TIMES DID (*name)* DRINK OR EAT YOGURT? *If 7 or more times, record '7'. If unknown, record '8'.*	Number of times drank/ate yogurt..... __				
[B] ANY KIND OF POWDER, CAKE, SUPPLEMENTATION FOOD SUCH AS CERELAC, DIELAC, HIPP, NIN, ALPHA, NESLE?	XO, Hipp, Gain..,	1	2	8	
[C] BREAD, RICE, NOODLES, PORRIDGE, OR OTHER FOODS MADE FROM GRAINS, INCLUDING RICE SOUP OR MIXED SOUP?	Foods made from grains	1	2	8	
[D] PUMPKIN, CARROTS, SQUASH OR SWEET POTATOES THAT ARE YELLOW OR ORANGE INSIDE?	Pumpkin, carrots, squash, etc.	1	2	8	
[E] WHITE POTATOES, WHITE YAMS, MANIOC, CASSAVA, OR ANY OTHER FOODS MADE FROM ROOTS?	White potatoes, white yams, manioc, cassava, etc.	1	2	8	
[F] ANY DARK GREEN, LEAFY VEGETABLES?	Dark green, leafy vegetables	1	2	8	
[G] RIPE MANGOES OR PAPAYAS?	Papayas	1	2	8	
[H] ANY OTHER FRUITS OR VEGETABLES?	Other fruits or vegetables	1	2	8	
[I] LIVER, KIDNEY, HEART OR OTHER ORGAN MEATS?	Liver, kidney, heart or other organ meats	1	2	8	
[J] ANY MEAT, SUCH AS BEEF, PORK, LAMB, GOAT, CHICKEN, OR DUCK?	Meat, such as beef, pork, lamb, goat, etc.	1	2	8	
[K] EGGS?	Eggs	1	2	8	
[L] FRESH OR DRIED FISH OR SHELLFISH?	Fresh or dried fish	1	2	8	
[M] ANY FOODS MADE FROM BEANS, PEAS, LENTILS, OR NUTS?	Foods made from beans, peas, etc.	1	2	8	
[N] CHEESE OR OTHER FOOD MADE FROM MILK?	Cheese or other food made from milk	1	2	8	
[O] ANY OTHER SOLID, SEMI-SOLID, OR SOFT FOOD THAT I HAVE NOT MENTIONED?	Other solid, semi-solid, or soft food	1	2	8	
	Specify _____				

BD9. *Check BD8 (Categories "A" through "O")*

☐ *At least one "Yes" or all "DK" ⇨ Go to BD11*

☐ *Else ⇨ Continue with BD10*

BD10. *Probe to determine whether the child ate any solid, semi-solid or soft foods yesterday during the day or night*

☐ *The child did not eat or the respondent does not know ⇨ Go to Next Module*

☐ *The child ate at least one solid, semi-solid or soft food item mentioned by the respondent ⇨ Go back to BD8 and record food eaten yesterday [A to O]. When finished, continue with BD11*

BD11. HOW MANY TIMES DID (*name*) EAT ANY SOLID, SEMI-SOLID OR SOFT FOODS YESTERDAY DURING THE DAY OR NIGHT?	Number of times..... __	
If 7 or more times, record '7'.	DK.....8	

IMMUNIZATION — IM

*If an immunization **(child health)** card is available, copy the dates in IM3 for each type of immunization and Vitamin A recorded on the card. IM6-IM17 are for registering vaccinations that are not recorded on the card. IM6-IM17 will only be asked when a card is not available.*

IM1. DO YOU HAVE A CARD WHERE (*name*)'S VACCINATIONS ARE WRITTEN DOWN? *If yes:* MAY I SEE IT PLEASE?	Yes, seen ..... 1 Yes, not seen ..... 2 No card..... 3	1⇨IM3 2⇨IM6
IM1A. IF NO, WHETHER VACCINATION CARD IS KEPT AT HEALTH CENTER?	Yes..... 1 No 2	
IM2. DID YOU EVER HAVE A VACCINATION ***(child health)*** CARD FOR (*name*)?	Yes..... 1 No 2	1⇨IM6 2⇨IM6

IM3.
(a) Copy dates for each vaccination from the card.
(b) Write '44' in day column if card shows that vaccination was given but no date recorded.

		Date of Immunization								
		Day		Month		Year				
BCG	**BCG**									
POLIO 1	**OPV1**									
POLIO 2	**OPV2**									
POLIO 3	**OPV3**									
PENTAVALENT 1	**DPT-HEP-HIB 1**									
PENTAVALENT 2	**DPT-HEP-HIB 2**									
PENTAVALENT 3	**DPT-HEP-HIB 3**									
DPT 1	**DPT1**									
DPT 2	**DPT2**									
DPT 3	**DPT3**									
HEPB AT BIRTH	**HEP0**									
HEPB 1	**HEP1**									
HEPB 2	**HEP2**									
HEPB 3	**HEP3**									
HIB 1	**HIB1**									
HIB 2	**HIB2**									
HIB 3	**HIB3**									
MEASLES (OR MMR OR MR)	**MEASLES**									
VITAMIN A (FIRST DOSE)	**VITA1**									
VITAMIN A (SECOND DOSE)	**VITA2**									

IM4. *Check IM3. Are all vaccines (BCG to Measles) recorded?* ☐ *Yes ⇨ Go to IM19* ☐ *No ⇨ Continue with IM5*		
IM5. IN ADDITION TO WHAT IS RECORDED ON THIS CARD, DID (*name*) RECEIVE ANY OTHER VACCINATIONS – INCLUDING VACCINATIONS RECEIVED IN CAMPAIGNS OR IMMUNIZATION DAYS OR CHILD HEALTH DAYS? ☐ *Yes ⇨ Go back to IM3 and probe for these vaccinations and write '66' in the corresponding day column for each vaccine mentioned. When finished, skip to IM19* ☐ *No/DK ⇨ Go to IM19*		
IM6. HAS (*name*) EVER RECEIVED ANY VACCINATIONS TO PREVENT HIM/HER FROM GETTING DISEASES, INCLUDING VACCINATIONS RECEIVED IN A CAMPAIGN OR IMMUNIZATION DAY OR CHILD HEALTH DAY?	Yes .....1 No .....2 DK 8	 2⇨IM19 8⇨IM19
IM7. HAS (*name*) EVER RECEIVED A BCG VACCINATION AGAINST TUBERCULOSIS – THAT IS, AN INJECTION IN THE ARM OR SHOULDER THAT USUALLY CAUSES A SCAR?	Yes .....1 No .....2 DK 8	
IM8. HAS (*name*) EVER RECEIVED ANY "VACCINATION DROPS IN THE MOUTH" TO PROTECT HIM/HER FROM POLIO?	Yes .....1 No .....2 DK 8	 2⇨IM10A 8⇨IM10A
IM10. HOW MANY TIMES WAS THE POLIO VACCINE RECEIVED?	Number of times .....__	
IM10A. HAS (*name*) EVER RECEIVED A PENTAVALENT VACCINATION –THAT IS, AN INJECTION IN THE THIGH– TO PREVENT HIM/HER FROM GETTING DPT, HEP B AND HIB B? *Probe by indicating that this vaccination is sometimes called as 5 in 1*	Yes .....1 No .....2 DK 8	 2⇨IM11 8⇨IM11
IM10B. HOW MANY TIMES WAS THE PENTAVALENT VACCINE RECEIVED?	Number of times .....__	
IM11. HAS (*name*) EVER RECEIVED A DPT VACCINATION – THAT IS, AN INJECTION IN THE THIGH TO PREVENT HIM/HER FROM GETTING TETANUS, WHOOPING COUGH, OR DIPHTHERIA? *Probe by indicating that DPT vaccination is sometimes called as 3 in 1 and given at the same time as Polio*	Yes .....1 No .....2 DK 8	 2⇨IM13 8⇨IM13
IM12. HOW MANY TIMES WAS THE DPT VACCINE RECEIVED?	Number of times .....__	
IM13. HAS (*name*) EVER RECEIVED A HEPATITIS B VACCINATION – THAT IS, AN INJECTION IN THE THIGH TO PREVENT HIM/HER FROM GETTING HEPATITIS B? *Probe by indicating that the Hepatitis B vaccine is sometimes given at the same time as Polio and DPT vaccines*	Yes .....1 No .....2 DK 8	 2⇨IM15A 8⇨IM15A
IM14. WAS THE FIRST HEPATITIS B VACCINE RECEIVED WITHIN 24 HOURS AFTER BIRTH?	Yes .....1 No .....2 DK 8	
IM15. HOW MANY TIMES WAS THE HEPATITIS B RECEIVED?	Number of times .....__	

IM15A. HAS (*name*) EVER RECEIVED A HIB VACCINATION – THAT IS, AN INJECTION IN THE THIGH TO PREVENT HIM/HER FROM GETTING HAEMOPHILUS INFLUENZAE TYPE B? *Probe by indicating that the Hib vaccine is sometimes given at the same time as Polio and DPT vaccines*	Yes ..... 1 No ..... 2 DK 8	 2⇨IM16 8⇨IM16
IM15B. HOW MANY TIMES WAS THE HIB VACCINE RECEIVED?	Number of times ..... __	
IM16. HAS (*name*) EVER RECEIVED A MEASLES INJECTION (OR AN MMR OR MR) – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER - TO PREVENT HIM/HER FROM GETTING MEASLES?	Yes ..... 1 No ..... 2 DK 8	
IM19. PLEASE TELL ME IF (NAME) HAS PARTICIPATED IN ANY OF THE FOLLOWING CAMPAIGNS, NATIONAL IMMUNIZATION DAYS AND/OR VITAMIN A OR CHILD HEALTH DAYS: [A] ***June 2013 Vitamin A campaign*** [B] ***December 2012/2013 Vitamin A campaign***	Y N DK *Jun 2013, A*.....1 2 8 *Dec 2012/13, A*.....1 2 8	

CARE OF ILLNESS		CA
CA1. IN THE LAST TWO WEEKS, HAS (*name*) HAD DIARRHOEA?	Yes ..... 1 No ..... 2 DK 8	 2⇨CA7 8⇨CA7
CA2. I WOULD LIKE TO KNOW HOW MUCH (*name*) WAS GIVEN TO DRINK DURING THE DIARRHOEA (INCLUDING BREASTMILK). DURING THE TIME (*name*) HAD DIARRHOEA, WAS HE/SHE GIVEN LESS THAN USUAL TO DRINK, ABOUT THE SAME AMOUNT, OR MORE THAN USUAL? *If 'less', probe*: WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO DRINK, OR SOMEWHAT LESS?	Much less ..... 1 Somewhat less ..... 2 About the same ..... 3 More ..... 4 Nothing to drink ..... 5 DK 8	
CA3. DURING THE TIME (*name*) HAD DIARRHOEA, WAS HE/SHE GIVEN LESS THAN USUAL TO EAT, ABOUT THE SAME AMOUNT, MORE THAN USUAL, OR NOTHING TO EAT? *If 'less', probe:* WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO EAT OR SOMEWHAT LESS?	Much less ..... 1 Somewhat less ..... 2 About the same ..... 3 More ..... 4 Stopped food ..... 5 Never gave food ..... 6 DK 8	
CA3A. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE DIARRHOEA FROM ANY SOURCE?	Yes ..... 1 No ..... 2 DK 8	 2⇨CA4 8⇨CA4
CA3B. FROM WHERE DID YOU SEEK ADVICE OR TREATMENT? *Probe:* ANYWHERE ELSE? *Circle all providers mentioned, but do NOT prompt with any suggestions.* *Probe to identify each type of source.* *If unable to determine if public or private sector, write the name of the place.* _____ (*Name of place*)	Public sector Government hospital ..... A Government health centre ..... B Government health post ..... C Village health worker ..... D Mobile / Outreach clinic ..... E Sectoral hospital (army, police) ..... F Govt. pharmacy ..... G Other public (*specify*) _____ H Private medical sector Private hospital / clinic ..... I Private physician ..... J Private pharmacy ..... K Other private medical (*specify*) _____ O Other source Relative / Friend ..... P Shop ..... Q Traditional practitioner ..... R Other (*specify*) _____ X	

CA4. DURING THE TIME (*name*) HAD DIARRHOEA, WAS (*name*) GIVEN TO DRINK *Read each item aloud and record response before proceeding to the next item.* [A] A FLUID MADE FROM A SPECIAL PACKET CALLED ORAL REHYDRATION SOLUTION (ORS) [B] A PRE-PACKAGED ORS FLUID FOR DIARRHOEA?	Y N DK Fluid from ORS packet..... 1 2 8 Pre-packaged ORS fluid 1 2 8	

CA4A. *Check CA4: ORS*

☐ *Child was given ORS ('Yes' circled in 'A' or 'B' in CA4) ⇨ Continue with CA4B*

☐ *Child was not given ORS ⇨ Go to CA4C*

CA4B. WHERE DID YOU GET THE ORS? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Public sector Government hospital ..... 11 Government health centre ..... 12 Government health post ..... 13 Village health worker ..... 14 Mobile / Outreach clinic ..... 15 Sectoral hospital (army, police) ..... 17 Govt. pharmacy ..... 18 Other public (*specify*) _____ 16 Private medical sector Private hospital / clinic ..... 21 Private physician ..... 22 Private pharmacy ..... 23 Other private medical (*specify*)_____ 26 Other source Relative / Friend ..... 31 Shop ..... 32 Traditional practitioner ..... 33 Other (*specify*) _____ 96	
CA4C. DURING THE TIME (*name*) HAD DIARRHOEA, WAS (*name*) GIVEN: [A] ZINC TABLETS? [B] ZINC SYRUP?	Y N DK Zinc tablets ..... 1 2 8 Zinc syrup 1 2 8	
CA4D. *Check CA4C: Any zinc?* ☐ *Child was given any zinc ('Yes' circled in 'A' or 'B' in CA4C) ⇨ Continue with CA4E* ☐ *Child was not given any zinc ⇨ Go to CA4F*		
CA4E. WHERE DID YOU GET THE ZINC? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Public sector Government hospital ..... 11 Government health centre ..... 12 Government health post ..... 13 Village health worker ..... 14 Mobile / Outreach clinic ..... 15 Sectoral hospital (army, police) ..... 17 Govt. pharmacy ..... 18 Other public (*specify*) _____ 16 Private medical sector Private hospital / clinic ..... 21 Private physician ..... 22 Private pharmacy ..... 23 Other private medical (*specify*) ..... 26 Other source Relative / Friend ..... 31 Shop ..... 32 Traditional practitioner ..... 33 Already had at home ..... 40 Other (*specify*) _____ 96	

CA4F. DURING THE TIME (*name*) HAD DIARRHOEA, WAS (*name*) GIVEN TO DRINK ANY OF THE FOLLOWING: *Read each item aloud and record response before proceeding to the next item.* [A] WATER FROM RICE PORRIDGE/ RICE SOUP (WITH SALT)? [B] LEMON ORANGE/ COCONUT DRINK? [C] SOUP WATER FROM BOILED VEGETABLES/ MEAT? [D] WATER FROM FRIED AND BOILED RICE?	Y N DK Water from rice porridge/ rice soup .. 1 2 8 Lem-orange/ coconut drink..... 1 2 8 Soup from boiled veg/ meat ..... 1 2 8 Water from fried and boiled rice 1 2 8	
CA5. WAS ANYTHING (ELSE) GIVEN TO TREAT THE DIARRHOEA?	Yes..... 1 No ..... 2 DK..... 8	 2⇨CA7 8⇨CA7
CA6. WHAT (ELSE) WAS GIVEN TO TREAT THE DIARRHOEA? *Probe*: ANYTHING ELSE? *Record all treatments given. Write brand name(s) of all medicines mentioned.* _____ *(Name)*	Pill or Syrup Antibiotic.....A Antimotility.....B Other pill or syrup (Not antibiotic, antimotility or zinc) ..... G Unknown pill or syrup .....H Injection Antibiotic..... L Non-antibiotic ..... M Unknown injection .....N Intravenous ..... O Home remedy / Herbal medicine..... Q Other (*specify*) _____ X	
CA7. AT ANY TIME IN THE LAST TWO WEEKS, HAS (*name*) HAD AN ILLNESS WITH A COUGH?	Yes..... 1 No ..... 2 DK..... 8	 2⇨CA14 8⇨CA14
CA8. WHEN (*name*) HAD AN ILLNESS WITH A COUGH, DID HE/SHE BREATHE FASTER THAN USUAL WITH SHORT, RAPID BREATHS OR HAVE DIFFICULTY BREATHING?	Yes..... 1 No ..... 2 DK..... 8	 2⇨CA10 8⇨CA10
CA9. WAS THE FAST OR DIFFICULT BREATHING DUE TO A PROBLEM IN THE CHEST OR A BLOCKED OR RUNNY NOSE?	Problem in chest only..... 1 Blocked or runny nose only..... 2 Both ..... 3 Other (*specify*) _____ 6 DK..... 8	

CA10. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?	Yes ..... 1 No ..... 2 DK 8	 2⇨CA12 8⇨CA12
CA11. FROM WHERE DID YOU SEEK ADVICE OR TREATMENT? *Probe:* ANYWHERE ELSE? *Circle all providers mentioned, but do NOT prompt with any suggestions.* *Probe to identify each type of source.* *If unable to determine if public or private sector, write the name of the place.* _____ *(Name of place)*	Public sector Government hospital ..... A Government health centre ..... B Government health post ..... C Village health worker ..... D Mobile / Outreach clinic ..... E Sectoral hospital (army, police) ..... F Govt. pharmacy ..... G Other public (*specify*) _____ H Private medical sector Private hospital / clinic ..... I Private physician ..... J Private pharmacy ..... K Other private medical (*specify*)_____ O Other source Relative / Friend ..... P Shop ..... Q Traditional practitioner ..... R Other (*specify*) _____ X	
CA12.AT ANY TIME DURING THE ILLNESS, WAS (*name*) GIVEN ANY MEDICINE FOR THE ILLNESS?	Yes ..... 1 No ..... 2 DK 8	 2⇨CA14 8⇨CA14
CA13. WHAT MEDICINE WAS (*name*) GIVEN? *Probe:* ANY OTHER MEDICINE? *Circle all medicines given. Write brand name(s) of all medicines mentioned.* _____ *(Names of medicines)*	Antibiotics: Pill / Syrup ..... I Injection ..... J Other medications: Paracetamol/ Panadol /Acetaminophen . P Aspirin ..... Q Ibuprofen ..... R Other (*specify*) _____ X DK ..... Z	

CA13A. *Check CA13: Antibiotic mentioned (codes I or J)?*

☐ *Yes ⇨ Continue with CA13B*

☐ *No ⇨ Go to CA14*

CA13B. WHERE DID YOU GET THE ANTIBIOTICS? *Probe to identify the type of source.* *If unable to determine whether public or private, write the name of the place.* _____ *(Name of place)*	Public sector Government hospital ..... 11 Government health centre ..... 12 Government health post ..... 13 Village health worker ..... 14 Mobile / Outreach clinic ..... 15 Sectoral hospital (army, police) ..... 17 Govt. pharmacy ..... 18 Other public (*specify*) _____ 16 Private medical sector Private hospital / clinic ..... 21 Private physician ..... 22 Private pharmacy ..... 23 Other private medical (*specify*)_____ 26 Other source Relative / Friend ..... 31 Shop ..... 32 Traditional practitioner ..... 33 Already had at home ..... 40 Other (*specify*) _____ 96	
CA14. *Check AG2: Age of child* ☐ *Child age 0, 1 or 2 ⇨ Continue with CA15* ☐ *Child age 3 or 4 ⇨ Go to UF13*		
CA15. THE LAST TIME *(name)* PASSED STOOLS, WHAT WAS DONE TO DISPOSE OF THE STOOLS?	Child used toilet / latrine ..... 01 Put / Rinsed into toilet or latrine ..... 02 Put / Rinsed into drain or ditch ..... 03 Thrown into garbage (solid waste) ..... 04 Buried ..... 05 Left in the open ..... 06 Other (*specify*) _____ 96 DK 98	

UF13. *Record the time.*	Hour and minutes..... __ __ : __ __	

UF14. *Check List of Household Members, columns HL7B and HL15.*
Is the respondent the mother or caretaker of another child age 0-4 living in this household?

☐ *Yes ⇨ Go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent*

☐ *No ⇨ End the interview with this respondent by thanking her/him for her/his cooperation and tell her/him that you will need to measure the weight and height of the child before you leave the household*

Check to see if there are other woman's or under-5 questionnaires to be administered in this household.

THANK YOU VERY MUCH FOR ANSWERING THE QUESTIONS. COULD YOU PLEASE GIVE US YOUR TELEPHONE NUMBER IN CASE WE MIGHT NEED SOME MORE INFORMATION?

WE DO NOT USE OR SHARE YOUR NUMBER FOR ANY OTHER PURPOSES.

Telephone number: _____

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations

MICS

QUESTIONNAIRE FORM FOR VACCINATION RECORDS AT COMMUNE HEALTH CENTER

Viet Nam MICS 2014

UNDER-FIVE CHILD INFORMATION PANEL	**HF**

This questionnaire form is to be used at commune health centers to record information on the vaccinations and Vitamin A supplementation for children age 0-2 years. A separate questionnaire form should be used for each eligible child.

The QUESTIONNAIRE FOR CHILDREN UNDER FIVE must be completed for the child prior to completing this form. This panel should be completed before visiting the health facility.

This questionnaire form must be appended to the QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child.

HF0A. Province/ City's name and number: Name _____.___ ___	**HF0B**. District's name and number: Name_____ ___ ___ ___
HF0C. Commune/ Ward name and number: _____ ___ ___ ___ ___ ___	
HF1. EA's name and number: Name _____ ___ ___ ___	**HF2**. Household number: ___ ___
HF3. Child's name: Name_____	**HF4**. Child's line number: ___ ___
HF5. Mother's / Caretaker's name: Name_____	**HF6**. Mother's / Caretaker's line number: ___ ___
HF7. Interviewer's name and number: Name_____ ___ ___ ___	**HF8**. Day / Month / Year of facility visit: ___ ___ / ___ ___ / 2 0 1 ___
HF9. Day, month and year of birth *(From AG1 in Questionnaire for Children Under-5)* ___ ___ / ___ ___ / 2 0 1 ___	**HF10**. Tel. no. of com. health center:_____ **HF10A**. Name of health staff: _____ **HF10B**. Tel. no. of health staff: _____

HF11. Result of health facility visit	Vaccination record seen ..... 1 Vaccination record not seen..... 2 Could not meet with health staff ..... 3 Refused to provide information.... ..... 4 Other (*specify*)_____6

HF11A. Field editor's name and number: Name_____ ___ ___ ___	**HF11B**. Main data entry clerk's name and number: Name_____ ___ ___

IMMUNIZATION					HI
HF12. *Record day, month and year of birth as written on vaccination record*		___ ___ / ___ ___ / 2 0 1 ___			
HF13. *(a) Copy dates for each vaccination from the card.* *(b) Write '44' in day column if card shows that vaccination was given but no date recorded.*		Date of Immunization			
		Day	Month	Year	
BCG	BCG				
Polio at birth	OPV0				
Polio 1	OPV1				
Polio 2	OPV2				
Polio 3	OPV3				
pentavalent 1	DPT-HEP-HIB1				
pentavalent 2	DPT-HEP-HIB 2				
pentavalent 3	DPT-HEP-HIB 3				
DPT 1	DPT1				
DPT 2	DPT2				
DPT 3	DPT3				
HepB at birth	HEP0				
HepB 1	HEP1				
HepB 2	HEP2				
HepB 3	HEP3				
Hib 1	HIB1				
Hib 2	HIB2				
Hib 3	HIB3				
Measles (or MMR or MR)	Measles				
Vitamin A (first dose)	VitA1				
Vitamin A (second dose)	VitA2				

Observations: ....

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15 YEARS OLD AND OVER HOUSEHOLD MEMBERS INFORMATION PANEL	HF
This questionnaire form must be completed after the completion of the Household Characteristic Module *This questionnaire form must be appended to the HOUSEHOLD QUESTIONNAIRE*	
MP0A. Province/ City's name and number: Name _____ ___ ___	**MP0B**. District's name and number: Name_____ ___ ___
MP0C. Commune/ Ward name and number: Name _____ ___ ___ ___ ___ ___	
MP1. Cluster's name and number: Name _____ ___ ___ ___	**MP2**. Household number: ___ ___

List of Provinces

Order	Code	Name	Order	Code	Name
I	**1**	**Red River Delta**	33	49	Quảng Nam
1	01	Hà Nội	34	51	Quảng Ngãi
2	26	Vĩnh Phúc	35	52	Bình Định
3	27	Bắc Ninh	36	54	Phú Yên
4	22	Quảng Ninh	37	56	Khánh Hòa
5	30	Hải Dương	38	58	Ninh Thuận
6	31	Hải Phòng	39	60	Bình Thuận
7	33	Hưng Yên	**IV**	**4**	**Central Highland**
8	34	Thái Bình	40	62	Kon Tum
9	35	Hà Nam	41	64	Gia Lai
10	36	Nam Định	42	66	Đắk Lắk
11	37	Ninh Bình	43	67	Đắk Nông
II	**2**	**Northern Midlands and Mountains**	44	68	Lâm Đồng
12	02	Hà Giang	**V**	**5**	**Southeast**
13	04	Cao Bằng	45	70	Bình Phước
14	06	Bắc Kạn	46	72	Tây Ninh
15	08	Tuyên Quang	47	74	Bình Dương
16	10	Lào Cai	48	75	Đồng Nai
17	15	Yên Bái	49	77	Bà Rịa - Vũng Tầu
18	19	Thái Nguyên	50	79	Thành phố Hồ Chí Minh
19	20	Lạng Sơn	**VI**	**6**	**Mekong River Delta**
20	24	Bắc Giang	51	80	Long An
21	25	Phú Thọ	52	82	Tiền Giang
22	11	Điện Biên	53	83	Bến Tre
23	12	Lai Châu	54	84	Trà Vinh
24	14	Sơn La	55	86	Vĩnh Long
25	17	Hòa Bình	56	87	Đồng Tháp
III	**3**	**North and South Central Coast**	57	89	An Giang
26	38	Thanh Hóa	58	91	Kiên Giang
27	40	Nghệ An	59	92	Cần Thơ
28	42	Hà Tĩnh	60	93	Hậu Giang
29	44	Quảng Bình	61	94	Sóc Trăng
30	45	Quảng Trị	62	95	Bạc Liêu
31	46	Thừa Thiên - Huế	63	96	Cà Mau
32	48	Đà Nẵng		999	Nước ngoài

MDCP **MP**

In MP3 copy each line number (HL1) of persons 15 years old and older (refer to HL6)
Next, in MP4, copy names from HL2 corresponding to these line numbers.
Ask questions starting with MP5 for each person at a time.

MP3. *Line No.*	**MP4**. *Name.* *Copy from HL2.*	**MP5**. IN WHICH PROVINCE HAS (*name*) REGISTERED FOR RESIDENCY? 98 DK		**MP6.** IN THE LAST 12 MONTHS HAS (*name*) WORKED FOR INCOME *Probe:* WORKED FOR WAGE/SALARY, HOUSEHOLD PRODUCTION OR SERVICE IN PLANTING, BREEDING, FORESTRY, OR AQUACULTURE, ORTRADING/BUSINESS FOR HOUSEHOLD? 1 Yes ⇨ Next Line 2 No 8 DK ⇨ Next Line	**MP7.** WHAT IS THE MAIN REASON (*name)*HAS NOT WORKED IN THE LAST 12 MONTHS? 11 Chronically ill 12 Disabled 13 Do housework 14 Studying 15 Old/retired 16 Could not find the job 96 Other reason (*specify*) 98 DK
Line	Name	Province	Code	Working status	Reason
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
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__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __
__ __			__ __	1 2 8	__ __

Viet Nam Multiple Indicator Cluster Survey 2014

Website: www.mics.gso.gov.vn

General Statistics Office of Viet Nam

unicef

United Nations Children's Fund