MICS

Khyber Pakhtunkhwa

Multiple Indicator Cluster Survey 2016-17

Final Report

June, 2018

Government of Khyber Pakhtunkhwa
حکومت خیبر پختون خوا

unicef

The Khyber Pakhtunkhwa [Pakistan] Multiple Indicator Cluster Survey (MICS) was carried out during 2016-17 by the Bureau of Statistics (BoS), Planning and Development Department, Khyber Pakhtunkhwa (KP) in collaboration with the United Nations International Children's Fund (UNICEF). It was conducted as part of the 5th global round of MICS. Major funding was provided by the Government of KP through Annual Development Programme. UNICEF provided technical support.

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), Sustainable Development Goals (SDGs) and other internationally agreed upon commitments. MICS is flexible to adjust country specific indicators to meet planning needs such as KP- MICS, 2016-17 also collected data on 'safety nets'.

The objective of this report is to facilitate dissemination and use of findings from the KP- MICS 2016-17. This is the final survey report which contains detailed information on all survey findings by various demographic, social, economic and cultural characteristics.

KP-MICS, 2016-17 is available at: **http://www.pndkp.gov.pk** and mics.unicef.org/surveys

MESSAGE

It is indeed my pleasure and pride to share that the Government of Khyber Pakhtunkhwa (GoKP) gives top priority to all such efforts which are leading to bring positive change in the lives of the people. Therefore, development of social sector remains a priority agenda for GoKP. The departments related particularly to social sector development need realistic data on socio-economic indicators as pre-requisites for planning and effective decision making.
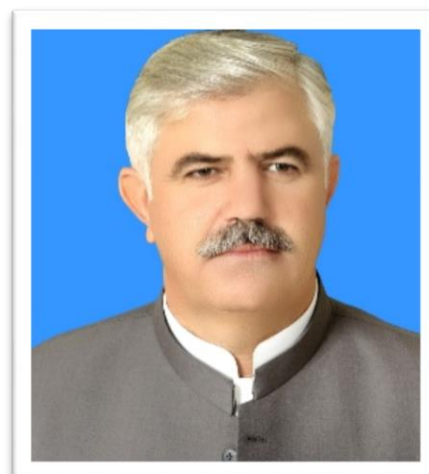
I am pleased to know that Khyber Pakhtunkhwa Multiple Indicator Cluster Survey 2016-17 provides comprehensive data on key indicators related to children and women. It will help facilitate analyzing and assessing divisional and district level situation. MICS data set is statistically sound, internationally comparable enabling realistic and evidence based policies and programs and monitoring progress towards global, national and provincial goals.

Special feature of this survey is that it provides benchmark for a number of indicators at district level. It helps facilitates a culture for using data for planning and equitable resource allocation. It also provides a very robust system for ascertaining the area specific needs, efficient use of resources and regular monitoring of the results and impacts. The survey will also prove to be the most imperative tools in determining government budgetary outlays, particularly for the social sector development down to district level and local level for the benefit of community at large.

The Government of KP is committed to using the results of this report for planning, monitoring and equitable allocation of resources. It will improve district level sustainable development allowing the government to manage effective delivery of basic services. With precise data on variety of key indicators, MICS will help in monitoring commitments of KP Government pertaining to "World Fit for Children Declaration Plan of Action, the goals of the UN General Assembly Special Session on HIV/AIDS, the Education for All Declaration and the MDGs enhanced further into SDGs post 2015 agenda. It will assist the decision-makers to move forward towards new avenues of human and social development in the KP province.

I would like to congratulate Additional Chief Secretary, Secretary Planning & Development, Chief Economist, Director BoS, Core Group and the field teams who worked hard and completed KP-MICS, 2016-17. I would highly compliment UNICEF for providing technical assistance and continuous support at all stages of conducting the survey and publishing the final report. Bureau of Statistics, Planning &Development Department, district administration and other relevant departments deserve appreciation.

I am confident that this report will prove to be a valuable source for planning efforts of Government of KP and development partners, and an authentic reference for academia, non-governmental organizations and research organizations for providing benefits to public at large.

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Mahmood Khan
Chief Minister
Government of Khyber Pakhtunkhwa

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FOREWORD

Multiple Indicator Cluster Survey (MICS) is recognized globally. It provides a unique and comprehensive set of accurate, internationally comparable and reliable data. The Government of Khyber Pakhtunkhwa (KP) is committed to achieve Sustainable Development Goals (SDGs) introduced after the Millennium Development Goals (MDGs) vis-a-vis education and literacy, child mortality, nutrition, child health, reproductive health, antenatal and postnatal health checks, child development, water supply, sanitation, wealth quintiles, poverty status and others.

Bureau of Statistics (BoS) conducted this survey with a sample size of 22,140 households in all the 25 districts of KP in 1107 sampled clusters. MICS is comprehensive and the largest survey of its kind envisaging more than 125 indicators covered in 33 modules. It is a district based unique survey conducted with three questionnaires on Household, Women and Children under-five. UNICEF provided technical assistance and modest financial support ensuring survey process adhering to the global MICS protocols at all the crucial stages of survey design, data collection, monitoring, data processing, analysis, report writing and dissemination of findings.

It is a matter of immense satisfaction that the survey has been completed in all the 25 districts with overall response rate exceeding 98 percent. The survey took more than the stipulated time period due to security situation, difficulty in access to hard-to-reach areas in harsh weather, blockages due to slides in snow bound areas of Malakand and Hazara regions. The national Census conducted in March/April 2017 also caused extra efforts and resources and extended period for data collection.

KP-MICS, 2016-17 provides baseline for a number of new social indicators which were not covered in the earlier MICS survey conducted in 2007-08. The survey will help in realistic allocation of resources at district level, Annual Development Programmes (ADPs), preparing district profiles, setting of goals and targets and monitoring progress on socio-economic development in the province. It would also be extremely useful for line departments, provincial planning institutions, district administration, politicians, local bodies, researchers, academicians, civil society organizations and donors. It will help KP government to realistically plan key social sector interventions.

The objective of this report is to facilitate dissemination and effective use of its results of the survey. This is the final report providing detailed information on more than 125 indicators by various demographic, social, economic and cultural characteristics containing detailed tables and information on division and district level disaggregated data.

P&D Department KP, UNICEF and other stakeholders and field data collection teams highly deserve all the credit for coming up with an excellent KP-MICS, 2016-17 report. Special credit goes to Bureau of Statistics KP for their untiring efforts and hard work. The information provided by respondents remains in trust and will be used for their own benefits at large.

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ACKNOWLEDGEMENTS

Shahab Ali Shah
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Summary Table of Survey Implementation and the Survey Population, Khyber Pakhtunkhwa MICS, 2016-17

Survey implementation

Sample frame	1998 census	**Questionnaires**	Household
			Women (age 15-49)
- Updated	2015		Children under five
Interviewer training		**Fieldwork**	Dec 2016 to May 2017
- Training of Trainers	Aug - Sep 2016		
- Regional trainings	Nov 16 - Jan 17		
Survey sample			
Households		**Children under five**	
- Sampled	22,140	- Eligible	21,359
- Occupied	21,317	- Mothers/caretakers interviewed	20,926
- Interviewed	20,995	- Response rate (Percent)	98.0
- Response rate (Percent)	98.5		
Women			
- Eligible for interviews	37,669		
- Interviewed	36,703		
- Response rate (Percent)	97.4		

Survey population

Average household size	7.6	**Percentage of population living in**	
		- Urban areas	17.5
Percentage of population under:		- Rural areas	82.5
- Age 5	13.3		
- Age 18	47.9		
Percentage of women age 15-49 years with at least one live birth in the last 2 years	22.8		

Housing characteristics / Household or personal assets

Housing characteristics		Household or personal assets	
Percentage of households with		**Percentage of households that own**	
- Electricity	94.4	- A television	41.9
- Finished floor	45.3	- A refrigerator	56.4
- Finished roofing[1]	72.0	- Agricultural land	34.8
- Finished walls	69.3	- Farm animals/livestock	53.8
Mean number of persons per room used for sleeping	4.0	**Percentage of households where at least a member has or owns a**	
		- Mobile phone	96.3
		- Car/van/jeep	10.0
		- Bank account	29.1

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[1] *Includes: metal/T-iron/Girders, wood/wooden beam/bricks, cements etc.*

Summary Table of Findings

Multiple Indicator Cluster Surveys (MICS) and Millennium Development Goals (MDG)/Sustainable Development Goals (SDGs) Indicators, Khyber Pakhtunkhwa, 2016-17

CHILD MORTALITY

Early childhood mortality				
Indicator #		**Indicator**	**Description**	**Value[2]**
MICS	**MDG/ SDG**			
1.2	4.2 /3.2.	Infant mortality rate	Probability of dying between birth and the first birthday	60
1.5	4.1 /-----	Under-five mortality rate	Probability of dying between birth and the fifth birthday	74
[A] Indicator values are per 1,000 live births and rates refer to March 2015. The East Model was assumed to approximate the age pattern of mortality in Khyber-Pakhtunkhwa, Pakistan and calculations are based on the Time Since First Birth (TSFB) version of the indirect children ever born/children surviving method				

NUTRITION

Nutritional status				
INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
2.1a 2.1b	1.8 /-----	Underweight prevalence (a) Moderate and severe (b) Severe	Percentage of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median weight for age of the WHO standard	20.8 7.5
2.2a 2.2b	----/2.2.1	Stunting prevalence (a) Moderate and severe (b) Severe	Percentage of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median height for age of the WHO standard	41.4 20.7
2.3a 2.3b	----/2.2.2	Wasting prevalence (a) Moderate and severe (b) Severe	Percentage of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median weight for height of the WHO standard	8.0 3.0
2.4	----/2.2.2	Overweight prevalence	Percentage of children under age 5 who are above two standard deviations of the median weight for height of the WHO standard	6.8
2. S1[3]		Children's vitamin A supplementation	Number of children who received vitamin during the last six months	66.8

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[2] *See Appendix F for a detailed description of MICS indicators*
[3] In chapter 12 and in the Summary Table of Findings of earlier Pakistan surveys, 'S' is used as part of the indicator because of the module administered to 'ever-married women' only unlike all women in MICS standard definition

Nutritional status				

INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			

Breastfeeding and infant feeding				
2.5		Children ever breastfed	Percentage of women with a live birth in the last 2 years who breastfed their last live-born child at any time	94.5
2.6		Early initiation of breastfeeding	Percentage of women with a live birth in the last 2 years who put their last new-born to the breast within one hour of birth	19.7
2.7		Exclusive breastfeeding under 6 months	Percentage of infants under 6 months of age who are exclusively breastfed	57.2
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 during the previous day	66.3
2.9		Continued breastfeeding at 1 year	Percentage of children age 12-15 months who received breast milk during the previous day	76.7
2.10		Continued breastfeeding at 2 years	Percentage of children age 20-23 months who received breast milk during the previous day	59.4
2.11		Median duration of breastfeeding	The age in months when 50 percent of children age 0-35 months did not receive breast milk during the previous day	22.4
2.12		Age-appropriate breastfeeding	Percentage of children age 0-23 months appropriately fed during the previous day	55.9
2.13		Introduction of solid, semi-solid or soft foods	Percentage of infants age 6-8 months who received solid, semi-solid or soft foods during the previous day	54.1
2.14		Milk feeding frequency for non-breastfed children	Percentage of non-breastfed children age 6-23 months who received at least 2 milk feedings during the previous day	66.7
2.15		Minimum meal frequency	Percentage of children age 6-23 months who received solid, semi-solid and soft foods (plus milk feeds for non-breastfed children) the minimum number of times or more during the previous day	51.3
2.16		Minimum dietary diversity	Percentage of children age 6–23 months who received foods from 4 or more food groups during the previous day	18.4
2.17a 2.17b		Minimum acceptable diet	(a) Percentage of breastfed children age 6–23 months who had at least the minimum dietary diversity and the minimum meal frequency during the previous day (b) Percentage of non-breastfed children age 6–23 months who received at least 2 milk feedings and had at least the minimum dietary diversity not including milk feeds and the minimum meal frequency during the previous day	11.3 11.0
2.18		Bottle feeding	Percentage of children age 0-23 months who were fed with a bottle during the previous day	28.8

Salt iodization				

INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
2.19		Iodized salt consumption	Percentage of households with salt testing 15 parts per million or more	29.3

Nutritional status				
INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
Low-birthweight				
2.20		Low-birthweight infants	Percentage of most recent live births in the last 2 years weighing below 2,500 grams at birth	32.4
2.21		Infants weighed at birth	Percentage of most recent live births in the last 2 years who were weighed at birth	15.6

CHILD HEALTH

Vaccinations				
INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
3.1		Tuberculosis immunization coverage	Percentage of children age 12-23 months who received BCG vaccine by their first birthday	71.5
3.2		Polio immunization coverage	Percentage of children age 12-23 months who received the third dose of OPV vaccine (OPV3) by their first birthday	52.7
3.3		Diphtheria, pertussis and tetanus (DPT) immunization coverage	Percentage of children age 12-23 months who received the third dose of DPT vaccine (DPT3) by their first birthday	49.1
3.4	4.3 /-----	Measles immunization coverage	Percentage of children age 12-23 months who received measles vaccine by their first birthday	46.9
3.8		Full immunization coverage	Percentage of children age 12-23 months who received all vaccinations recommended in the national immunization schedule by their first birthday (measles by second birthday)	32.1
Tetanus toxoid				
INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
3.9		Neonatal tetanus protection	Percentage of women age 15-49 years with a live birth in the last 2 years who were given at least two doses of tetanus toxoid vaccine within the appropriate interval prior to the most recent birth	55.7
Diarrhoea				
INDICATOR #		**Indicator**	**Description**	**Value**
MICS	**MDG/SDG**			
-		Children with diarrhoea	Percentage of children under age 5 with diarrhoea in the last 2 weeks	21.4
3.10		Care-seeking for diarrhoea	Percentage of children under age 5 with diarrhoea in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	51.1
3.11		Diarrhoea treatment with oral rehydration salts (ORS) and zinc	Percentage of children under age 5 with diarrhoea in the last 2 weeks who received ORS and zinc	6.9

Vaccinations

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
3.12		Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	Percentage of children under age 5 with diarrhoea in the last 2 weeks who received ORT (ORS packet, pre-packaged ORS fluid, recommended homemade fluid or increased fluids) and continued feeding during the episode of diarrhoea	32.9

Acute Respiratory Infection (ARI) symptoms

		Children with ARI symptoms	Percentage of children under age 5 with ARI symptoms in the last 2 weeks	20.2
3.13		Care-seeking for children with ARI symptoms	Percentage of children under age 5 with ARI symptoms in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	59.4
3.14		Antibiotic treatment for children with ARI symptoms	Percentage of children under age 5 with ARI symptoms in the last 2 weeks who received antibiotics	39.9

Solid fuel use

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
3.15		Use of solid fuels for cooking	Percentage of household members in households that use solid fuels as the primary source of domestic energy to cook	68.9

Malaria/Fever

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
		Children with fever	Percentage of children under age 5 with fever in the last 2 weeks	34.7
3.20		Care-seeking for fever	Percentage of children under age 5 with fever in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	69.5
3.21		Malaria diagnostics	Percentage of children under age 5 with fever in the last2 weeks who had a finger or heel stick for malaria testing	9.8
3.22	6.8/-----	Anti-malarial treatment of children under age 5	Percentage of children under age 5 with fever in the last 2 weeks who received any antimalarial treatment	1.4
3.23		Treatment with Artemisinin-based Combination Therapy (ACT) among children who received antimalarial treatment	Percentage of children under age 5 with fever in the last 2 weeks who received ACT (or other first-line treatment according to national policy)	7.1
3.25		Intermittent preventive treatment for malaria during pregnancy	Percentage of women age 15-49 years who received three or more doses of SP/Fansidar, at least one of which was received during an ANC visit, to prevent malaria during their live birth in the last 2 years	0.6

WATER AND SANITATION

INDICATOR #		Indicator	Description	Value
MICS	**MDG/SDG**			
4.1	7.8/6.1.1	Use of improved drinking water sources[4]	Percentage of household members using improved sources of drinking water	91.3
4.2		Water treatment	Percentage of household members in households using unimproved drinking water who use an appropriate treatment method	1.8
4.3	7.9/6.2.1	Use of improved sanitation (Not shared)	Percentage of household members using improved sanitation facilities which are not shared	77.8
4.4		Safe disposal of child's stools	Percentage of children age 0-2 years whose last stools were disposed of safely	47.5
4.5		Place for handwashing	Percentage of households with a specific place for hand washing where water and soap or other cleansing agent are present	69.1
4.6	-----/6.2.1	Availability of soap or other cleansing agent	Percentage of households with soap or other cleansing agent	88.8

Water and sanitation

REPRODUCTIVE HEALTH

Contraception and unmet need

INDICATOR #		Indicator	Description	Value
MICS	**MDG/SDG**			
		Total fertility rate	Total fertility rate[A] for women age 15-49 years	4.0
5.1	5.4/3.7.2	Adolescent birth rate	Age-specific fertility rate[A] for women age 15-19 years	62.0
5.2		Early childbearing	Percentage of women age 20-24 years who had at least one live birth before age 18	10.2
5.3	5.3/-----	Contraceptive prevalence rate	Percentage of women age 15-49 years currently married or who are using modern or traditional contraceptive method	32.5
5.4	5.6/13.7.1	Unmet need	Percentage of women age 15-49 years who are currently married who are fecund and want to space their births or limit the number of children they have and who are not currently using contraception	20.8

[A] The age-specific fertility rate is defined as the number of live births to women in a specific age group during a specified period, divided by the average number of women in that age group during the same period, expressed per 1,000 women. The age-specific fertility rate for women age 15-19 years is also termed as the adolescent birth rate.

The total fertility rate (TFR) is calculated by summing the age-specific fertility rates calculated for each of the 5-year age groups of women, from age 15 through to age 49. The TFR denotes the average number of children to which a woman will have given birth by the end of her reproductive years (by age 50) if current fertility rates prevailed.

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[4] *Improved water sources include: piped water (in dwelling, compound, at the neighbor, public tap/stand pipe or coming from river), tube well, protected spring.*

Maternal and newborn health

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
5.5a 5.5b	5.5/----- 5.5/-----	Antenatal care coverage	Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth (a) at least once by skilled health personnel (b) at least four times by any provider	 74.3 44.1
5.6		Content of antenatal care	Percentage of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples during the last pregnancy that led to a live birth	56.1
5.7	5.2/3.1.2	Skilled attendant at delivery	Percentage of women age 15-49 years with a live birth in the last 2 years who were attended by skilled health personnel during their most recent live birth	68.6
5.8		Institutional deliveries	Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered in a health facility	64.5
5.9		Caesarean section	Percentage of women age 15-49 years whose most recent live birth in the last 2 years was delivered by caesarean section	7.5

Post-natal health checks

5.10		Post-partum stay in health facility	Percentage of women age 15-49 years who stayed in the health facility for 12 hours or more after the delivery of their most recent live birth in the last 2 years	26.5
5.11		Post-natal health check for the new-born	Percentage of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery	68.4
5.12		Post-natal health check for the mother	Percentage of women age 15-49 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery of their most recent live birth in the last 2 years	65.0
5.S2		Care provided by Lady Health Worker (LHW)	Number of women ever married aged 15–49 years who have given birth in the previous 2 years and were visited by a Lady Health Worker (LHW) in the last month	36.8

CHILD DEVELOPMENT

Child development

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
6.1		Attendance to early childhood education	Percentage of children age 36-59 months who are attending an early childhood education programme	8.1
6.2		Support for learning	Percentage of children age 36-59 months with whom an adult has engaged in four or more activities to promote learning and school readiness in the last 3 days	36.6
6.3		Father's support for learning	Percentage of children age 36-59 months whose biological father has engaged in four or more activities to promote learning and school readiness in the last 3 days	2.8

Child development

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
6.4		Mother's support for learning	Percentage of children age 36-59 months whose biological mother has engaged in four or more activities to promote learning and school readiness in the last 3 days	4.1
6.5		Availability of children's books	Percentage of children under age 5 who have three or more children's books	3.9
6.6		Availability of playthings	Percentage of children under age 5 who play with two or more types of playthings	48.5
6.7		Inadequate care	Percentage 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 last week	7.3
6.8	-----/4.2.1	Early child development index	Percentage of children age 36-59 months who are developmentally on track in at least three of the following four domains: literacy-numeracy, physical, social-emotional, and learning	68.8

LITERACY AND EDUCATION

Literacy and education

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
7.1	2.3/-----	Literacy rate among young women	Percentage of young women age 15-24 years who are able to read a short simple statement about everyday life or who attended secondary or higher education	52.7
7.S1		Literacy rate 10+ (Reported)	Percentage of household members age 10 years or older where it is reported that they are able to both read & write with understanding in any language excluding Quranic reading, if this was the only response	52.3
7.S2		Literacy rate 15+ (Reported)	Percentage of household members age 15 years or older where it is reported that they are able to both read & write with understanding in any language excluding Quranic reading, if this was the only response	49.6
7.S3	7.53/------	Literacy rate 15-24 Years (Reported)	Percentage of household members age 15-24 years where it is reported that they are able to both read & write with understanding in any language excluding Quranic reading, if this was the only response	68.6
7.2		School readiness	Percentage of children in first grade of primary school who attended pre-school during the previous school year	88.0
7.3		Net intake rate in primary education	Percentage of children of school-entry age who enter the first grade of primary school	22.5
7.4	2.1/-----	Primary school net attendance ratio (adjusted)	Percentage of children of primary school age currently attending primary or secondary school	57.8
7.S4		Primary school gross attendance ratio (adjusted)	Percentage of children of all age currently attending primary or secondary school	86.3
7.5		Secondary school net attendance ratio (adjusted)	Percentage of children of secondary school age currently attending secondary school or higher	42.1
7.S5		Government school attendance rate (primary)	Percentage of children aged 5-9 years attending Government primary schools	65.1

Literacy and education

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
7.6	2.2/-----	Children reaching last grade of primary	Percentage of children entering the first grade of primary school who eventually reach last grade	96.8
7.7		Primary completion rate	Number of children attending the 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)	72.0
7.8		Transition rate to secondary school	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 divided by number of children attending the last grade of primary school during the previous school year	92.7
7.9	3.1/4.5.1	Gender parity index (primary school)	Primary school net attendance ratio (adjusted) for girls divided by primary school net attendance ratio (adjusted) for boys	0.82
7.10	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	0.62

CHILD PROTECTION

Birth registration

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
8.1	-----/16.9.1	Birth registration	Percentage of children under age 5 whose births are reported registered	19.1

Child labour

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
8.2	-----/8.7.1	Child labour	Percentage of children age 5-17 years who are involved in child labour	14.4

Child discipline

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
8.3	-----/16.2.1	Violent discipline	Percentage of children age 1-14 years who experienced psychological aggression or physical punishment during the last one month	81.0

Child marriage and polygyny

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
8.4	-----/5.3.1	Marriage before age 15	Percentage of women age 15-49 years who were first married before age 15	7.7
8.5	-----/5.3.1	Marriage before age 18	Percentage of women age 20-49 years who were first married before age 18	29.6

Child marriage and polygyny

INDICATOR #				
MICS	MDG/SDG	Indicator	Description	Value
8.6		Young women age 15-19 years currently married	Percentage of young women age 15-19 years who are married	18.8
8.7		Polygyny	Percentage of women age 15-49 years who are in a polygynous marriage	3.8
8.8a 8.8b		Spousal age difference	Percentage of young women who are married and whose spouse is 10 or more years older, (a) among women age 15-19 years, (b) among women age 20-24 years	22.3 15.8

Attitudes towards domestic violence

INDICATOR #				
MICS	MDG/SDG	Indicator	Description	Value
8.12		Attitudes towards domestic violence	Percentage of women age 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	75.1

Children's living arrangements

8.13		Children's living arrangements	Percentage of children age 0-17 years living with neither biological parent	1.2
8.14		Prevalence of children with one or both parents dead	Percentage of children age 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 0-17 years with at least one biological parent living abroad	8.1

HIV/AIDS

HIV/AIDS knowledge and attitudes

INDICATOR #				
MICS	MDG/SDG	Indicator	Description	Value
-		Have heard of AIDS	Percentage of women ever married age 15-49 years who have heard of AIDS	21.7
9.S1	6.3/-----	Knowledge about HIV prevention among young people	Percentage of women ever married age 15-24 years who correctly identify ways of preventing the sexual transmission of HIV, and who reject major misconceptions about HIV transmission	1.7
9.S2		Knowledge of mother-to-child transmission of HIV	Percentage of women ever married age 15-49 years who correctly identify all three means of mother-to-child transmission of HIV	9.0

INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
9.S3		Accepting attitudes towards people living with HIV	Percentage of women ever married age 15-49 years expressing accepting attitudes on all four questions toward people living with HIV	20.2

HIV testing				
9.S4		People who know where to be tested for HIV	Percentage of women age 15-49 years who state knowledge of a place to be tested for HIV	3.8
9.S5		People who have been tested for HIV and know the results	Percentage of women age 15-49 years who have been tested for HIV in the last 12 months and who know their results	0.3
9.S7		HIV counselling during antenatal care	Percentage of women age 15-49 years who had a live birth in the last 2 years and received antenatal care during the pregnancy of their most recent birth, reporting that they received counselling on HIV during antenatal care	0.4
9.S8		HIV testing during antenatal care	Percentage of women age 15-49 years who had a live birth in the last 2 years and received antenatal care during the pregnancy of their most recent birth, reporting that they were offered and accepted an HIV test during antenatal care and received their results	0.3

Orphans				
9.16	6.4/-----	Ratio of school attendance of orphans to school attendance of non-orphans	Proportion attending school among children age 10-14 years who have lost both parents divided by proportion attending school among children age 10-14 years whose parents are alive and who are living with one or both parents	0.52

ACCESS TO MASS MEDIA AND ICT

Access to mass media				
INDICATOR #		Indicator	Description	Value
MICS	MDG/SDG			
10.1		Exposure to mass media	Percentage of women age 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television	0.7

Use of information/communication technology				
10.2		Use of computers	Percentage of women age 15-24 years who used a computer during the last 12 months	9.3
10.3	-----/5.b.1	Use of internet	Percentage of women age 15-24 years who used the internet during the last 12 months	8.4

SUBJECTIVE WELL-BEING

<table>
<tr><th colspan="5">Subjective well-being</th></tr>
<tr><th colspan="2">INDICATOR #</th><th rowspan="2">Indicator</th><th rowspan="2">Description</th><th rowspan="2">Value</th></tr>
<tr><th>MICS</th><th>MDG/SDG</th></tr>
<tr><td>11.1</td><td></td><td>Life satisfaction</td><td>Percentage of young women age 15-24 years who are very or somewhat satisfied with their life, overall</td><td>93.0</td></tr>
<tr><td>11.2</td><td></td><td>Happiness</td><td>Percentage of young women age 15-24 years who are very or somewhat happy</td><td>93.2</td></tr>
<tr><td>11.3</td><td></td><td>Perception of a better life</td><td>Percentage of young women age 15-24 years whose life improved during the last one year, and who expect that their life will be better after one year</td><td>59.3</td></tr>
</table>

POVERTY

<table>
<tr><th colspan="2">INDICATOR #</th><th rowspan="2">Indicator</th><th rowspan="2">Description</th><th rowspan="2">Value</th></tr>
<tr><th>MICS</th><th>MDG/SDG</th></tr>
<tr><td>15.1</td><td>--------/1.2.2</td><td>Multidimensional Poverty</td><td>Proportion of men, women and children of all ages living in poverty in all its dimensions, by selected measures of multidimensional poverty.</td><td>0.184</td></tr>
</table>

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List of Abbreviations

ACS	Additional Chief Secretary
AIDS	Acquired Immune Deficiency Syndrome
BCG	Bacillus Calmette-Guérin (Tuberculosis)
BoS	Bureau of Statistics
CE	Chief Economist
CG	Core Group
CM	Chief Minister
CSPro	Census and Survey Processing System
DPT	Diphtheria Pertussis Tetanus
EPI	Expanded Programme on Immunization
GPI	Gender Parity Index
HIV	Human Immunodeficiency Virus
IDD	Iodine Deficiency Disorders
ITN	Insecticide Treated Net
IUD	Intrauterine Device
KP	Khyber Pakhtunkhwa
LAM	Lactational Amenorrhea Method
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MoH	Ministry of Health
MPI	Multidimensional Poverty Index
NAR	Net Attendance Rate
ORT	Oral Rehydration Treatment
PBS	Pakistan Bureau of Statistics
P&DD	Planning and Development Department
ppm	Parts Per Million
SC	Steering Committee
SDGs	Sustainable Development Goals
SPSS	Statistical Package for Social Sciences
TC	Technical Committee
UNAIDS	United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Fund for Population Activities
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
WFFC	World Fit for Children
WHO	World Health Organization

Executive Summary

The Khyber Pakhtunkhwa Multiple Indicator Cluster Survey (KP-MICS), 2016-17 is a household survey covering 22,140 households to provide estimates of around 125 indicators for the province, seven divisions and 25 districts. The results will be used to update indicators used for monitoring the situation of children and women in KP.

KP-MICS, 2016-17 was conducted as part of the fifth global round of MICS. Khyber Pakhtunkhwa Bureau of Statistics (BoS) planned, designed and implemented the survey. Pakistan Bureau of Statistics (PBS) provided sample design, household listing and weights. UNICEF provided technical support and assistance through the Provincial, National, Regional and Global MICS teams. Fieldwork was carried out from December 2016 to May, 2017.

The survey collected information on three standard MICS questionnaires covering 33 modules including topics such as housing characteristics, child and maternal health, HIV/AIDS, domestic violence, child discipline, child protection and use of Information/Communication Technology among other topics. Additional information was also collected on safety nets and life satisfaction. This report contains division and district level disaggregated data and findings of the survey. The key findings of the survey are summarized below:

Infant and under –five Child Mortality

Under-five child mortality rate is estimated at 74 deaths per thousand live births and the Infant mortality rate at 60 deaths per thousand live births. Among divisions, infant mortality rates and under-five mortality rates are lowest in Peshawar division (46 and 54 deaths per thousand live births respectively) and highest in Bannu division (79 and 100 deaths per thousand live births respectively). The data reveals that the probability of dying before the age five for children living in the households in the highest quintile is lower at 54 deaths per thousand live births compared to 84 deaths per thousand live births in the lowest quintile.

Nutritional Status

Information collected on nutrition of children shows that 21 percent of children under-five are underweight. The proportion of children stunted is 41 percent while eight percent are wasted. Among divisions, underweight children (under–five) are lowest in Kohat being 14 percent and highest in D.I.Khan with 25 percent. The three anthropometric indicators vary by household wealth. Nearly half of children living in the households in the lowest quintile are stunted (51 percent) and 30 percent are underweight compared to 29 percent for stunting 14 percent underweight in the highest quintile.

Breastfeeding

Ninety-five percent of the children under-two years have ever been breastfed. Early initiation of the breastfeeding is 20 percent that is children that were put to breast within one hour of birth. Among all the seven divisions, similar percentage prevails varying from 93 percent to 96 percent of children under-two years were ever been breasted. Similar pattern exists (94 percent to 96 percent) in breastfeeding among the poorest to richest wealth quintiles.

Fifty seven percent of children aged 0–5 months are exclusively breastfed while 77 percent of children age 12-15 months are continued breastfed. The median duration of any breastfeeding is 22.4 months and this declines to 3.5 months for exclusive breastfeeding. Fifty five percent of the infant age 6-8 months have been introduced to solid, semi-solid and soft food.

The findings also show that 29 percent of the children age 0-23 months are being fed through a bottle with a nipple. By education of the mother, 42 percent of children whose mothers have higher education are bottle fed compared to 24 percent of children whose mother have pre-school or no education. The findings further show that the practice of bottle feeding with a nipple among children age under six months is not uncommon even though it is discouraged, as 22 percent of the children are fed using a bottle with a nipple.

Results from KP-MICS show that (29 percent) of the households are found to be using adequately iodized salt. Use of iodized salt is lowest in Bannu division (19 percent) and highest in D.I.Khan division (45 percent).

Child Health

KP-MICS, 2016-17 information on child vaccination shows that approximately 72 percent of children age 12-23 months received BCG vaccination by their first birthday and the first dose of PENTA vaccine was given to 67 percent of children. The 70 percent of children received Polio 1 by first birthday and for measles 47 percent of children received the vaccine by first birthday. In KP 67 percent of children aged 6-59 months received a high dose Vitamin A supplement in the 6 months preceding the survey.

Information collected on childhood diseases shows that 21 percent of children under-five had diarrhoea in the two weeks preceding the survey. Of these about half (51 percent) of children, sought advice or treatment from health facilities. Out of these children, 38 percent were given Oral Rehydration Therapy (ORT) or any recommended home- made fluid.

About one fifth (20percent) of the children had symptoms of ARI in the two weeks preceding the survey. Of these, 60 percent were taken to a health facility or provider (16 percent public and 51 percent private health facility). Forty percent children with symptoms of ARI in the last two weeks were given antibiotics.

The results also show that 35 percent of children were found to have an episode of fever, of which 70 percent were taken to a health facility or provider (17 percent public and 49 percent private). Only one percent of children with fever were treated with anti-malarial drug; SP/ Fansidar / Chloroquine while 53 percent were given Paracetamol/ Panadol/ Acetaminophen.

Use of solid fuel is of concern regarding health as it increases risk of diseases such as acute respiratory illness. The findings reveal that 57 percent of the households use solid fuels (wood) for cooking. Overall 26 percent of population use natural gas of which 79 percent are urban and 16 percent are rural. Majority (65percent) of the households in rural areas use solid fuel compared to only 14 percent in urban areas. Eighty five percent of the population living in the households in the lowest quintile use solid fuel for cooking compared to only 12 percent of population in the highest quintile.

Water and Sanitation

KP-MICS, 2016-17 reveals that in KP, 91 percent of the population is using improved sources of drinking water available in their premises. The main sources of improved drinking water are motorized pump (22 percent) and hand pump (15 percent). Eighty five percent of the population is using improved sanitation facilities; higher in urban (91 percent) and lower in rural (83 percent). Most commonly used facilities are flush toilets connected to septic tanks (43 percent), flush to pit (21 percent) and facilities connected to a sewerage system (8 percent). Overall, 73 percent population use improved drinking water sources and improved sanitation in the KP province.

One other issue of interest is disposal of children's stool. The results show that stools of 48 percent of the children under-two years were disposed of safely. The most commonly reported method of

children's stool disposal was rinsing into toilet or latrine (42 percent). For 27 percent of children, stool was thrown into garbage. Safe disposal of child's faeces is found to be higher in urban (61 percent) compared to rural areas (45 percent).

Information collected on handwashing shows that at the time of the survey, 69 percent of households with a place for handwashing had both water and soap (or another cleansing agent) present at the handwashing place. In 17 percent of the households, only water was available at the handwashing place. Overall, a place for handwashing was observed in 93 percent of households.

Reproductive Health

Total Fertility Rate (TFR) as a measure of current fertility is estimated at 4.0 children per woman. Fertility is slightly higher in rural areas compared to urban areas. TFR among women having pre-school or no education is 4.3 and declines to 2.8 children per woman among women with higher education.

Current use of a contraceptive method is reported by 33 percent of currently married women. The most popular modern methods are male condom and injectable each being 9 percent followed by withdrawal 5 percent and female sterilization (2 percent). Unmet need for contraception is 21 percent.

Out of the total women with a live birth in the last two years, 74 percent received antenatal care at least once during their pregnancy from a skilled personnel whereas 24 percent received no antenatal care. Further to that, 44 percent of the women had at least four antenatal care visits. During the antenatal visits, 56 percent of the women had their blood pressure measured, urine and blood sample taken.

Sixty-nine percent of deliveries were attended by skilled personnel. About Sixty-five percent of the births were delivered in a health facility: mostly (36 percent) in private health facility compared to 28 percent in public health facility. Thirty four percent delivered at home.

Traditional birth attendants assisted in the delivery of 14 percent babies (15 percent in rural and 13 percent in urban). Sixty-eight percent of the mothers had a postnatal check-up at health facility or at home. KP-MICS also collected information on visits by Lady Health Workers. In KP, 37 percent women aged 15-49 years, who had given birth in two years preceding the survey, reported that a Lady Health Worker (LHW) has visited them. The proportion of women visited by a LHW is higher in urban (48 percent) than rural areas (35 percent).

Child Development

Among children aged 36-59 months, 8 percent were attending an early childhood education programme. . Support for learning from fathers is 2.8 percent and from mothers is 4.1 percent.
Among children under-five, only 4 percent had at least three children's books and 49 percent had two or more types of playthings in their homes.

Early Child Development Index was calculated to measure the developmental status of children within four domains namely: literacy-numeracy, physical, social-emotional development and learning. Overall, 69 percent of children age 36-59 months were developmentally on track in at least three of the four domains.

Literacy and Education

In KP, 53 percent of the young women age 15-24 years and above are literate. Their percentage is higher (73 percent) in urban and lower (49 percent) in rural areas. Literacy is higher among highest wealth quintiles (82 Percent) than lower wealth quintile (22 percent).

School readiness, that is percentage of children attending first grade at the time of the survey who attended pre-school in previous year, is 88 percent. Male Gross primary school attendance rate is higher (97 percent than Female Gross primary school attendance rate (75 percent). The Net Attendance Rate (NAR) i.e. children age 5-9 years who attend primary is 58 percent and for secondary school, is 64 percent.

Overall, 65 percent of children age 5-9 years are attending government schools and 35 percent private schools. Enrolment in private primary schools is higher in urban (58 percent) than in rural (30 percent) while attendance in government primary schools is lower in urban (42 percent) compared to rural (70 percent). Transition rate from primary to secondary schools is 93 percent. Primary school completion rate is 72 percent.

Total out of school population, in primary and secondary school age are 42 percent and 30 percent respectively. Of these, girls in the total out of school population of primary and secondary school age are 56 percent and 74 percent respectively.

Child Protection

The findings from KP- MICS 2016-17 reveal that 19 percent of children under 5 years were registered at birth (rural: 17 percent and urban: 29 percent). Birth registration ranges from 9 percent in Bannu division to 30 percent in Kohat division. There is variation by wealth quintile; 32 percent of children under-five years living in the households in the highest quintile are registered compared to 9 percent of children living in the households in the lowest quintile.

Twenty seven percent of children age 15–17 years are involved in economic activity for less than 43 hours per week. Their percentage is higher among lowest wealth quintiles (45 percent) than highest wealth quintile (12 percent). Major economic activities observed during the survey in KP included: working in agriculture land, looking after animals, helping in family/relative's business or running own business, selling handicrafts, toys, home- made food, backing and selling of potato chips, fetching water, collecting firewood, collecting and selling stuff from garbage. Twelve percent children are working in hazardous conditions more (14 percent) in rural than in urban areas (6 percent). The hazardous environment included exposing to dust, fumes or gas, exposed to extreme cold, heat, exposed to loud noise, working with chemicals or explosives and exposed to other things, processes or conditions bad for children's health or safety.

As a form of child discipline, 81 percent of children age 1-14 experienced violent discipline in form of psychological aggression or physical punishment, during the last one month. The most severe forms of physical punishment which include hitting the child on the head, ears or face or hitting the child hard and repeatedly were given to 25 percent of children.

Information collected on early marriages shows that 8 percent of the women age 15-49 were married before age 15 while 30 percent of women age 20-49 were married before age 18. The data further show that 22 percent of the currently married women age 15-19 are married to a man that is older by 10 years or more.

KP-MICS results on attitudes towards domestic violence show that 75 percent of women believe that a husband is justified in hitting or beating his wife for at least one of the following reasons: if she goes

out without telling him, neglects the children, argues with him, refuses sex with him or burns the food. Sixty-two percent of women agree and justify violence in instances when a wife neglects the children and 65 percent of women justify violence if a wife goes out without telling her husband.

HIV/ AIDS

In KP, 22 percent of the ever married women have heard of AIDS. Comprehensive knowledge among the women about HIV transmission is much lower (2 percent). About 9 percent of ever married women age 15-49 years know that the HIV can be transmitted from mother to child during pregnancy, delivery and breastfeeding. Out of the ever married women who have heard about HIV/AIDS, 20 percent express accepting attitude towards people living with HIV/AIDS.

While 4 percent of ever married women know a place where one can get tested for HIV, less than one percent of women have actually been tested and about the same proportion of women know the result of their most recent test.

Access to mass media and ICT

Information collected on access to mass media shows that 9 percent of the women read newspapers, 6 percent listen to the radio and 30 percent watch television at least once a week. Thirty six percent of women use any of the three media types at least once a week. Six percent young women age 15-24 years used a computer at least once a week during the last one month

Use of internet is lower, with 8 percent of young women reporting use of internet during the last 12 months. At division level, only 4 percent of young women in Bannu division used a computer during the last year compared with 13 percent of women in Mardan division and 10 percent in Peshawar division during that same period. Use of internet by young women is lower, with 3 percent in D.I.Khan and higher with 11 percent each in Hazara division and Peshawar division during the last 12 months.

Twenty seven percent of the population living in the households in the highest quintile used internet during last 12 months which decreased substantially to less than one percent of population in the lowest quintile.

Subjective well-being

The survey included a module on life satisfaction for women age 15-24 years to understand how satisfied this group of young people is in different areas of their lives, such as their family life, friendships, school, current job, health, where they live, how they are treated by others, how they look, and their current income.

KP-MICS, 2016 -17 data show that overall, 93 percent of the women age 15-24 are satisfied. Six out of ten young women (59 percent) think that their life has improved over the last one year and expect that life will get better in the coming year. The survey reveals further that overall, only 9 percent of young women have an income and of those with income, 82 percent are satisfied with their current income. Only 3 percent of young women have a job and of those 71 percent are satisfied with their job.

Multidimensional Poverty Index

Multidimensional Poverty Index (MPI) constitutes three dimensions; health, education and standard of living. The headcount ratio (H) of multidimensional poverty in KP is 34.5 percent. The average intensity of deprivation among the poor people (A), on average, is 48 percent. Since the MPI is the product of H and A, it yields multi-dimensionally poor people in KP are 16.6 percent of the total deprivations that would be experienced if all people were deprived in all indicators. The proportion of people identified as multi-dimensionally poor in urban areas is considerably lower than in rural areas being 9.4 percent and 22 percent respectively.

Districts Map of Khyber Pakhtunkhwa
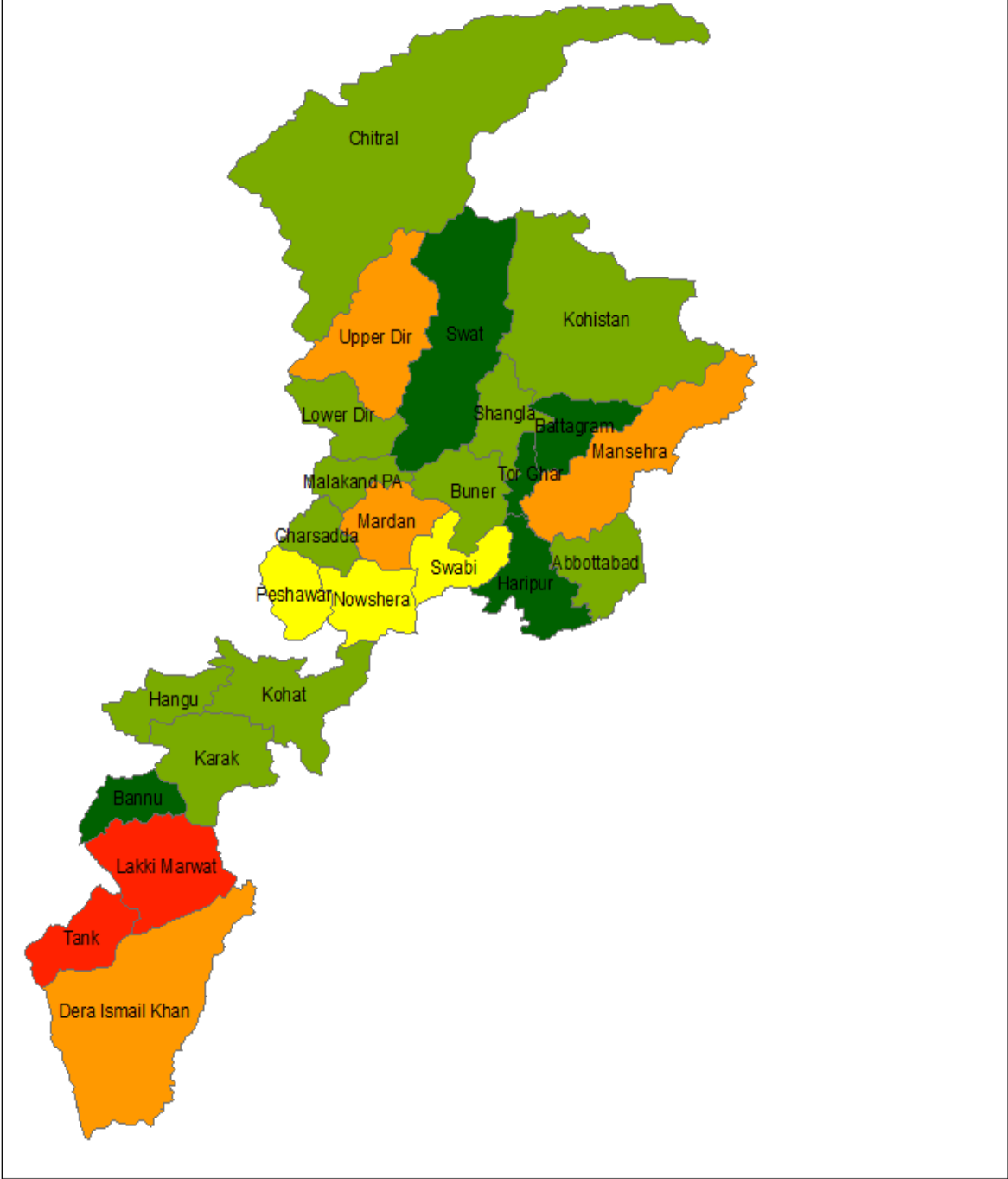
I.   Introduction

Background

This report is based on the Khyber Pakhtunkhwa Multiple Indicator Cluster Survey (MICS), conducted in 2016-17 by the Bureau of Statistics, Planning and Development Department. 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 and the Education for All Declaration. The KP-MICS, 2016-17 results will be critically important for final MDG reporting in 2015, and are expected to form part of the baseline data for the post-2015 era of SDGs.

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 subnational 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."

KP-MICS, 2016-17 essentially follows MICS5 methodology for monitoring MDGs. MICS provides 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

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

Survey Objectives

The KP-MICS has as its primary objectives:

- To provide up-to-date information for assessing the situation of children and women in Khyber Pakhtunkhwa particularly at district level;

- To generate data for the critical assessment of the progress made in various areas, and to put additional efforts in those 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, 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;

- To contribute to the generation of baseline data for SDGs/ post-2015 agenda;

- To validate data from other sources and the results of focused interventions.

Report Structure

This final report presents the results of the indicators and topics covered in the survey. The Key Findings Report of KP-MICS, 2016-17 was shared with the government of Khyber Pakhtunkhwa in March, 2018. The description for each chapter is based on tables within the text that contain provincial level results by background characteristics including area of residence, gender, level of education, wealth quintile, divisional level results. The analytical framework is consistent with national and global format to ensure comparability of data at international level.

The main part of the report comprises 15 chapters, focusing on different socio-economic features of the survey. The first three chapters explain about the survey background and objective, methodology (sample design, questionnaires, training and fieldwork) and sample coverage, characteristics of the households, asset ownership, and wealth quintiles. The remaining 12 chapters present the findings on child mortality, nutrition, child health, water and sanitation, reproductive health, early child development, literacy and education, child protection, HIV/AIDS knowledge, access to mass media and use of information/communication technology, subjective wellbeing, and multiple poverty index.

The six appendices of the report provide: Tables of results of the survey at district level; Sample design provided by Pakistan Bureau Of Statistics; List of Personnel Involved in the Survey/Survey Committees; Estimates of Sampling Errors; Data Quality Tables ; list of Indicators: Numerators and Denominators and the three questionnaires on household, women and children under-five used in the survey

II.   Sample and Survey Methodology

Sample Design

The sample for the Khyber Pakhtunkhwa Multiple Indicator Cluster Survey (KP-MICS) was designed to provide estimates for a large number of indicators on the situation of children and women at the provincial level, for urban and rural areas, for the seven divisions and 25 districts of KP. The urban and rural areas within each district were identified as the main sampling strata. Within each stratum, a specified number of census enumeration areas were selected systematically with probability proportional to size. In each district the sample was proportionally allocated to urban and rural areas. In collaboration with Pakistan Bureau of Statistics (PBS), a household listing was carried out within the selected enumeration areas. A systematic sample of 20 households was drawn in each sample cluster (sample enumeration area) resulting in a total sample of 22,140 households drawn from 1107 clusters in the province.

The detail of districts under each division is as follows:

Bannu:	Bannu, Lakki Marwat
D.I.Khan:	D.I. Khan, Tank
Hazara:	Abbottabad, Batagram, Haripur, Kohistan, Mansehra, Torghar
Kohat:	Hangu, Karak, Kohat
Malakand:	Buner, Chitral, Lower Dir, Malakand protected Area, Shangla, Swat, Upper Dir
Mardan:	Mardan, Swabi
Peshawar:	Charsadda, Nowshera, Peshawar

Four clusters of the selected enumeration areas of Kala Dhaka and Kalam could not be visited. They were inaccessible due to migration in the winter season. Three clusters of district Tank were not accessible due to security reasons. However, these clusters were substituted in consultation with PBS.

The sample was stratified by district, urban and rural areas, and is not self-weighting. For reporting all results from the survey data, sample weights are used. These were calculated and provided by the Pakistan Bureau of Statistics. UNICEF reviewed the sample design including weights for adequacy and soundness. The sample design and weighting procedures are described in more detail in Appendix B.

List of Indicators

The fifth round of the Multiple Indicator Cluster Survey (MICS5), as a standard methodology, has limited space for additional indicators. It is flexible enough to adapt indicators to local environment. KP-MICS Core Group held consultations with key social sector departments and development partners. Based on these consultations, the Core Group made recommendations to finalize the list of indicators including a few additional indicators related to ownership of assets, receiving cash donation, safety nets (getting benefits from government schemes of social protection), and purchasing goods from utility stores and household characteristics. The recommendations were approved by the KP-MICS Technical Committee in its second meeting held on 01 November, 2016. The final list of indicators approved by the Steering Committee is presented in Appendix – F.

Questionnaires

A set of three questionnaires were used in the survey:

1) A household questionnaire which was used to collect basic demographic information on all *de jure* household members (usual residents), the household, and the dwelling;

2) A questionnaire for individual women administered in each household to all women age 15-49 years;

3) Under-5 questionnaire, administered to mothers (or caretakers) for all children under- 5 living in the household. The questionnaires (given at Appendix G) included the following modules:

The Household Questionnaire included the following modules:

1.	List of Household Members	2	Education
3	Child Labour	4	Child Discipline
5	Household Characteristics	6	Water and Sanitation
7	Handwashing	8	Salt Iodization

The following were the additional questions added which were related to socio economic development:

1. Ownership of assets: House, land, livestock
2. Safety nets (Getting benefits from government schemes of social protection)
3. Purchasing goods from Government Utility Stores

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

1.	Woman's Background		
2.	Access to Mass Media and Use of Information/Communication Technology		
3.	Fertility	4	Desire for Last Birth
5	Maternal and New-born Health	6	Post-natal Health Checks
6	Illness Symptoms	8	Contraception
9	Unmet Need	10	Attitudes Toward Domestic Violence
11	Marriage	12	HIV/AIDS
13	Life Satisfaction		

The following were the Non-Global Standard MICS questions included in the Women Questionnaire:

1. Knowledge about HIV prevention among young women
2. Contents of antenatal care
3. Care provided by Lady Health Worker (LHW)

The Questionnaire for Children Under-Five was administered to mothers (or caretakers) of children under five years of age[5] living in the households. In cases when 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:

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[5] *The terms "children under 5", "children age 0-4 years", and "children age 0-59 months" are used interchangeably in this report.*

1. Age
2 Birth Registration
3 Early Childhood Development
4 Breastfeeding and Dietary Intake
4 Immunization
6 Care of Illness
7 Anthropometry

Non-Global Standard MICS Module in the questionnaire for children under-five was included on "Vitamin A Supplementation".

The questionnaires are essentially phrased on the MICS5 model questionnaire[6]. These were customised and translated into Urdu language followed by pre-test conducted in Hazara and Malakand divisions as part of Training of Trainers (ToT) programme. Based on the results of the pre-test, modifications were made to the wording and translation of the questionnaires. KP-MICS, 2016-17 questionnaires are included in Appendix G.

In addition to the administration of questionnaires, fieldwork teams tested salt used for cooking in the households for iodine content, observed the place for handwashing, and measured the weights and heights of children age under 5 years. Details and findings of these observations and measurements are provided in the respective sections of the report.

Training and Field Pre-test

Training-of-Trainers (ToT) was organized for 18 days from 27th July to 13th August, 2016 in Peshawar. Twenty nine participants (23 female and 6 male) participated in the training. From about 12,000 applicants, the selected participants were well qualified holding at least Master degrees in Social Sciences and relevant experience. Some of them were holding MPhil degrees and pursuing PhD. The selected participants represented the entire province belonging to South, Central and North districts of the KP province including districts: D.I.Khan, Bannu, Hango, Peshawar, Nowshera, Swabi, Mardan, Abbottabad, Haripur and Mansehra.

The main objective of Training of Trainers (TOT) was to train and develop capacities of selected master trainers to facilitate further four regional level trainings in the province. ToT and regional trainings followed a comprehensive schedule as outlined under global protocol after necessary review by KP-MICS, Core Team. Training included lectures on interviewing techniques and the contents of the questionnaires, and exercises to gain practice and confidence in asking questions.

Participants were also given adequate opportunity for interactions in paired mock interviews. All the three questionnaires on household, women and children were explained in detail through presentation, case studies and relevant videos using multimedia. Tests through MCQs (multiple choice questions) were administered at the end of each questionnaire. The evaluation of participant's tests were shared among the participants. It helped them to improve understanding and develop further confidence. Considerable improvements were seen from the first to the third test/MCQs and case studies as was evident from their evaluation score attained in the tests.

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[6] *The model MICS5 questionnaires can be found at* **http://mics.unicef.org/tools?round=mics5#survey-design***.*

Field Pre-test

Primary Sampling Unit (PSUs) were selected from the earlier listings of MICS- KP 2008 for conducting pre-test. Twenty households each were selected from the cluster of rural and urban areas for interviewing using systematic sampling with random start. During the pre-test survey, participants were divided into eight groups working in different urban and rural areas.

Three districts from different parts of the province were selected for field test including Abbottabad, Swat (Mingora) and Peshawar. Resource persons and Trainers from BOS and UNICEF also joined these teams in the field to facilitate and monitor field test.

 Pre-testing verified that the questionnaires were functioning well in the KP context and specifically making sure that translation of survey tools in Urdu are accurate; standard questions are clear and response categories are adequate for the survey population; questions are not ambiguous or difficult to understand; changes in wording or improved translation in Urdu were incorporated when required; ensured the questionnaires flow smoothly; reviewed the interviewer instructions in questionnaire /manuals were clear and sufficient; there was adequate space in the questionnaires and all answers can be clearly coded; new codes for common answers that were not included in the original questionnaires were created; average duration of interviews was calculated in order to plan the fieldwork.

Difficult or sensitive questions/modules were identified so that extra training can focus on these questions during the fieldwork training. The Field work of pre-test continued for four days followed by a two days joint debriefing session held in Peshawar on 12th and 13th August, 2016.

Main Training of Enumerators

Four regional trainings were organized to train district level data collection teams. These trainings covered a comprehensive agenda of 18 days duration as outlined under global protocol. The agenda also includes a parallel training on Anthropometry.

The trainings were conducted to cover all the 25 districts as per the following schedule:

#	Place	Venue	Dates of Training	Districts covered
1	Abbottabad	VIP Guest House, Mansehra Road Abbottabad	12 -29 Nov 2016	Haripur, Abbottabd Mansehra, Batagram Kohistan, Torghar
2	Swat	Hilton Palace Fiza Ghat, Bypas Mingora (Swat)	09 -26 Nov 2016	Buner, Malakand Swat, Uper Dir,Lower Dir, Shangla,Chitral
3	DI Khan	Shelton Guest House DIKhan	19 Dec 2016 - 5 Jan 2017	D.I.Khan, Bannu Tank, Karak, Lakki
4	Peshawar	Shelton Guest House University Town Peshawar	24 Dec 2016 - 10 Jan 2017	Peshawar, Kohat, Hangu, Nowshera Mardan, Swabi, Charsadda

Besides in-house trainers, Guest Speakers were also invited for technical sessions of the training including immunization, contraception, salt test, reproductive health and prenatal and postnatal care. On formal request of Director, BOS, experts from Health and Population Welfare Departments deputed their experts/Trainers to impart training in specialized areas of survey tools. The experts explained and made presentations on the concepts. They provided exercises and arranged mock

interviews in pairs. They also provided opportunities to the participants to hold discussions and make presentations.

The Core team of Trainers from BOS and UNICEF were holding feedback sessions every day to review training sessions already completed and to plan sessions for the next day addressing necessary operational issues.

Field work for Data Collection

This is the first time in KP that data was collected successfully from all the 25 districts of the province. Earlier in 2008, MICS teams could not collect data in some districts like Kohistan due to severe resistance at local level. In this regard, Planning and Development Department KP played proactive role to help facilitate field teams enabling them to accomplish their field work successfully. Under the directions of provincial government of KP, all the Divisional Commissioners, Deputy Commissioners and Assistant Commissioners facilitated MICS field work. The District Police Officers under the instructions of Inspector General Police (IGP) provided security through mobile police squads. It was a great support as more than 200 female staff worked for several months in the districts for household data collection. District administration also provided government official accommodation to the survey teams in some locations.

Under the directions of Secretary Local Government, relevant Nazimeen and Councilors of Union Councils and Village Councils provided valuable support and facilitation in the field work. Communities, local leaders, activists and family members of the sampled households devoted their precious time. Data collection teams worked enthusiastically. They worked hard facing harsh weather i.e. extreme cold and hot and difficulties in accessing sampled houses of the clusters in hard to reach areas.

KP-MICS, 2016-17 was conducted in 1107 clusters (as identified by PBS) in 25 districts comprising 329 urban and 778 rural Primary Sampling Units (PSUs). Among all the 25 districts, the lowest response rate was 89.5 percent in district Kohistan and 89.6 percent in district Tor Ghar (Table D.HH.1). The main reason was the seasonal migration of two sample clusters of Esa Zai in Kala Dhaka. Due to harsh weather and snow fall, as per local custom, people migrated to lower area in urban locations for three to four months in winter season. Therefore, it was not possible to collect data in these clusters consequently it had an impact on overall response rate of the respective district. Another reason for a bit slow response rate was due to refusal of some local communities in the three districts of Tank (96.5percent), D.I.Khan (94.5 percent) and Shangla (95.5 percent).

The data collection started soon after the completion of regional trainings. Twenty five teams were assigned the task of data collection. Each of these teams comprised of four female interviewers, one male interviewer, one editor, one measurer and a supervisor. List of teams (District wise) is given in Appendix C.

In the beginning, the pace of data collection was a bit slow due to harsh weather, land sliding and snowing in the mountainous areas. The security concerns also caused delays in the districts of Kohistan, Batagram, Upper Dir and Torghar. Field work was also suffered due to national census conducted nationwide by the Government of Pakistan in March and April, 2017. As per government rules during the national census any other survey cannot be conducted simultaneously.

Despite serious security and logistics issues, high level of commitment of the field teams resulted in achievement of such a high response rate which was not possible in previous surveys. Similarly, In the context of KP, despite issues of security due to ongoing war against terrorism (Zarb-e-Azb) by the law enforcement agencies and Pak Army, harsh weather, snowing in hilly areas, it is appreciable that the Field teams were successful in achieving such a high response rate of 98 percent. The field teams were committed and worked hard accomplishing re-visits as and when required to ensure completion of interviews to the maximum extent.

Data Processing

Working in two shifts, 40 data entry operators, two data entry supervisors and four Secondary Editors entered data using CSPro software, Version 5.0. Twenty desktop computers were used.

For quality assurance purposes, all questionnaires were double-entered and internal consistency checks were performed. Data entry and data processing started simultaneously in February, 2017 and completed in June, 2017 with the pace work shown in Figure SM.1

Figure SM. 1: Data collection and processing, KP-MICS, 2016-17
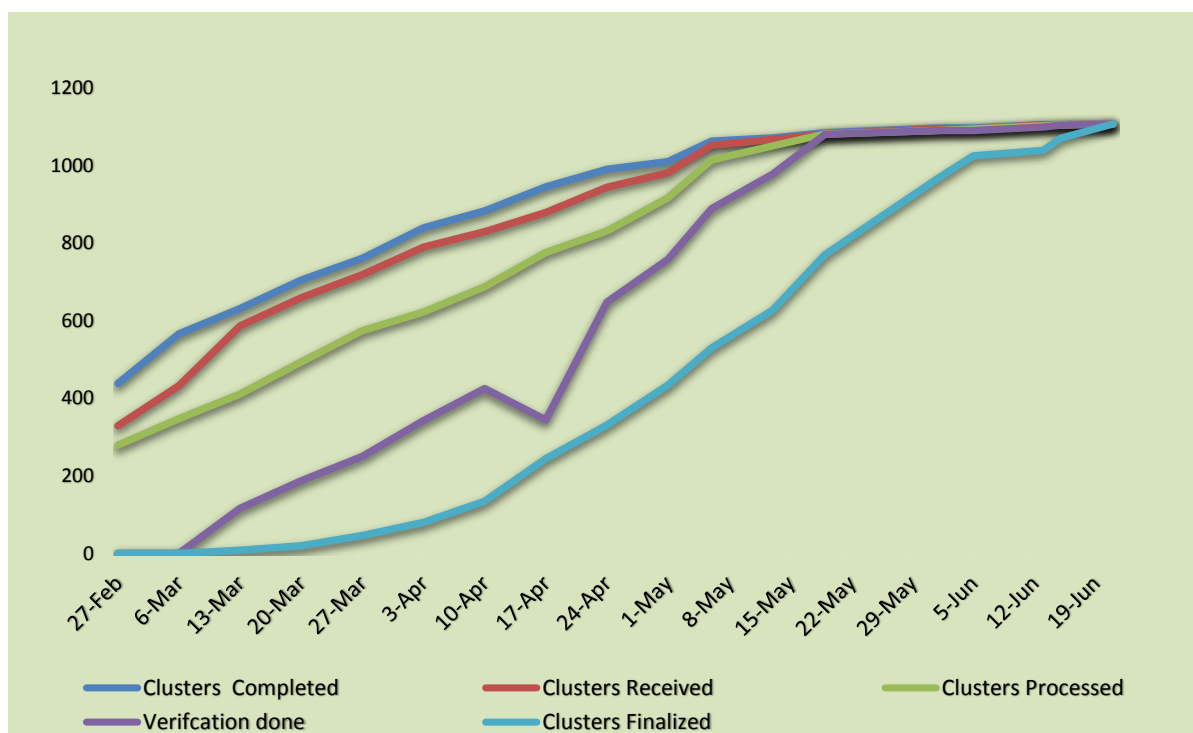
With technical assistance of UNICEF from Pakistan Country Office (PCO), data cleaning was carried out with assistance of secondary editors. Data were analysed using the Statistical Package for Social Sciences (SPSS) software, version 22. The final data set was exported from CSPro to SPSS software for further processing.

Monitoring

The monitoring of field work included conventional as well as innovative system. More than 10 senior officers were deputed as monitors from the P&D Department, KP. Members of Core Group, BoS officials and senior Government officers visited field teams. The monitoring visits were planned in such a way that each field team could be visited more than once during a week.

Figure SM. 2: Field work and data processing: dash board, KP-MICS, 2016-17

MICS KP 2016-17 Field Work & Data Processing - Dashboard									upto 21st June 2017

Total Clusters:	1107	Completed:	1107	Remaining:	0	Rec: in DP	1107

District wise Progress								
		Field Progress						DP Progress	
Code	District	Target			Completed			Cluster Recieved	Cluster Entered
		U	R	T	U	R	T		
1	Abbottabad	18	34	52	18	34	52	52	52
2	Bannu	11	32	43	11	32	43	43	43
3	Batagram	0	33	33	0	33	33	33	33
4	Buner	0	34	34	0	34	34	34	34
5	Charsadda	17	32	49	17	32	49	49	49
6	Chitral	9	31	40	9	31	40	40	40
7	D. I. Khan	12	33	45	12	33	45	45	45
8	Hangu	12	24	36	12	24	36	36	36
9	Haripur	13	33	46	13	33	46	46	46
10	Karak	9	22	31	9	22	31	31	31
11	Kohat	17	29	46	17	29	46	46	46
12	Kohistan	0	42	42	0	42	42	42	42
13	Lakki Marwat	10	29	39	10	29	39	39	39
14	Lower Dir	12	33	45	12	33	45	45	45
15	Malakand Protecte	10	28	38	10	28	38	38	38
16	Mansehra	13	35	48	13	35	48	48	48
17	Mardan	21	32	53	21	32	53	53	53
18	Nowshera	18	31	49	18	31	49	49	49
19	Peshawar	75	25	100	75	25	100	100	100
20	Shangla	0	32	32	0	32	32	32	32
21	Swabi	15	32	47	15	32	47	47	47
22	Swat	19	32	51	19	32	51	51	51
23	Tank	9	25	34	9	25	34	34	34
24	Tor Ghar	0	31	31	0	31	31	31	31
25	Upper Dir	9	34	43	9	34	43	43	43
	Grand Total	329	778	1107	329	778	1107	1107	1107

Field Work Completion Progress: 0% / 100%
- Completed Clusters
- Remaining Clusters

Urban and Rural Targets & Completed Clusters:
Urban Target 329, Urban compl. 329, Rural Target 778, Rural compl. 778

In order to share latest information on the status of data collection from the field, a dashboard information system (Last dash board provided in the figure-SM.2) was designed and implemented at Data Processing Center in BoS Peshawar. The information sent by the field supervisors was updated on daily basis on dash board. It was accessible to UNICEF, TPFM, Core Group and P&D monitoring staff. Necessary directions with corrective measures were given to the field staff on daily basis (through WhatsApp or phone).

UNICEF deployed four teams of Third Party Field Monitoring (TPFM) in the four regions of Hazara, Malakand, Peshawar and D.I.Khan. Each TPFM team comprised of one male Coordinator and two female monitors. GPS device was also given to each team Coordinator. They communicated to TPFM/UNICEF office in Peshawar twice a day, firstly when the team reached the cluster and secondly at the time of leaving the cluster.

With technical assistance of UNICEF Peshawar, four open data kit (ODK) forms were designed for TPFM to monitor interviewer work, measurer work and team management. Android based smart phones with internet connectivity through Telenor SIM were provided to TPFM team supervisors.   In case of non- availability of OMM due to any reason, whatsApp communication as an alternate mechanism worked very well.

The Monitoring Teams were also provided 18 days training along with data collection staff on questionnaire and data collection techniques. The TPFM teams were trained to generate reports on daily basis ensuring quick review/monitoring of the field work. Three WhatsApp groups were formed for Supervisors, MICS field teams and TPFM teams. It was a useful mechanism for frequent communication and sharing of field experience in the data collection process.

The Feld Check Tables (FCTs) were an efficient and effective monitoring tool applied during data collection and processing. These tables were produced by Data Processing Consultant (DPC) on weekly basis using latest field data entered in computers. Findings of FCTs were shared with Head Core Group who issued necessary instructions and corrective measures immediately to the concerned district team supervisors through text/whatsApp messages, telephone calls and personal visits. These tables included descriptive statistics on key variables for each team highlighting issues like age heaping.

Core Team members, UNICEF KP team (PME officer and UNICEF MICS Consultant) and Third Party Field Monitoring teams regularly shared FCTs with the respective team supervisors of each of 25 districts during their debriefing sessions conducted in the field. A number of weaknesses in data collection were identified and addressed before it is too late. Further, to enhance data quality, other corrective measures were also taken including conducting special training in Peshawar in which 29 additional field staff was trained to cope the challenges of drop outs and left outs during field work as and when encountered in the field.

International Review

UNICEF global MICS team closely monitored the survey at all stages. Before the start of survey, Pakistan Country Office (PCO), Regional Office for South (ROSA) and Global team at Headquarters reviewed the sample design, survey tools and trainings including pre-test. The software used for data entry and analysis was adapted from the MICS recommended methodology which was also reviewed by the national and global MICS teams. The data files, syntax files and tabulations were shared with the global MICS team. The data and software review inputs received from these teams were addressed before the finalization of the tables, analysis, Key Finding Report and the Final Report in hand.

III. Sample Coverage and the Characteristics of Households and Respondents

Sample Coverage

In collaboration with and technical assistance of Pakistan Bureau of Statistics, 22,140 households were selected for the sample which were distributed in 1107 clusters in 25 districts of KP. As per MICS5 guidelines, there was no replacement if a selected household was untraceable or unreachable or refused to be interviewed. Accordingly, 21,317 households were found to be occupied. Of these, 20,995 were successfully interviewed achieving a household response rate of 98.5 percent. Despite serious security and logistical issues, high level of commitment of the field teams resulted in achievement of such a high response rate which was not possible in previous surveys.

In the interviewed households, 37,669 women (age 15-49 years) were identified. Of these, 36,703 were successfully interviewed, which corresponds to a 97.4 percent response rate. There were 21,359 children under age five listed in the household questionnaires. Questionnaires were completed for 20,926 of these children, which corresponds to a response rate of 98.0 percent within interviewed households. (Table HH.1).

Overall response rates of 96 percent and 96.5 percent were calculated for the interviews of women and children under-5 respectively.

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

Number of households, women and children under-5 by results of the household, women's and under-5's interviews, and household, women's and under-5's division wise response rates, Khyber Pakhtunkhwa, 2016-17

		Area of residence		Division						
	KP	Urban	Rural	Bannu	D.I. Khan	Hazara	Kohat	Mardan	Peshawar	Malakand
Households										
Sampled	22,140	6,580	15,560	1,640	1,580	5,040	2,260	2,000	3,960	5,660
Occupied	21,317	6,313	15,004	1,562	1,524	4,815	2,171	1,964	3,841	5,440
Interviewed	20,995	6,229	14,766	1,535	1,480	4,703	2,120	1,958	3,811	5,388
Household response rate	98.5	98.7	98.4	98.3	97.1	97.7	97.7	99.7	99.2	99.0
Women										
Eligible	37,669	11,153	26,516	3,000	2,843	7,881	4,226	3,505	6,546	9,668
Interviewed	36,703	10,843	25,860	2,934	2,756	7,634	4,171	3,393	6,404	9,411
Women's response rate	97.4	97.2	97.5	97.8	96.9	96.9	98.7	96.8	97.8	97.3
Women's overall response rate	96.0	95.9	96.0	96.1	94.1	94.6	96.4	96.5	97.1	96.4
Children under-5										
Eligible	21,359	5,592	15,767	1,784	1,885	4,639	2,399	1,836	3,280	5,536
Mothers/caretakers interviewed	20,926	5,467	15,459	1,740	1,852	4,516	2,391	1,790	3,227	5,410
Under-5's response rate	98.0	97.8	98.0	97.5	98.2	97.3	99.7	97.5	98.4	97.7
Under-5's overall response rate	96.5	96.5	96.5	95.8	95.4	95.1	97.3	97.2	97.6	96.8

Characteristics of Households

The weighted age and sex distribution of the survey population is provided in Table HH.2. The distribution is also used to produce the population pyramid in Figure HH.1. In 20,995 households interviewed successfully in the survey, a weighted total of 158,564 household members were listed. Of these, 79,185 were males, and 79,378 were females.

Table HH. 2: Household age distribution by sex						
Percent and frequency distribution of the household population by five-year age groups, dependency age groups, and by child (age 0-17 years) and adult populations (age 18 or more), by sex, Khyber Pakhtunkhwa, 2016-17						
	Total		**Males**		**Females**	
	Number	Percent	Number	Percent	Number	Percent
KP	158,564	100.0	79,185	100.0	79,378	100.0
Age						
0-4	21,063	13.3	10,771	13.6	10,292	13.0
5-9	23,303	14.7	11,848	15.0	11,455	14.4
10-14	21,148	13.3	10,737	13.6	10,411	13.1
15-19	17,211	10.9	9,027	11.4	8,184	10.3
20-24	13,305	8.4	6,647	8.4	6,658	8.4
25-29	12,582	7.9	5,570	7.0	7,012	8.8
30-34	9,537	6.0	4,566	5.8	4,972	6.3
35-39	7,991	5.0	3,706	4.7	4,285	5.4
40-44	6,243	3.9	3,025	3.8	3,218	4.1
45-49	5,885	3.7	2,855	3.6	3,030	3.8
50-54	5,698	3.6	2,672	3.4	3,026	3.8
55-59	4,261	2.7	2,148	2.7	2,113	2.7
60-64	3,954	2.5	2,084	2.6	1,870	2.4
65-69	2,837	1.8	1,518	1.9	1,319	1.7
70-74	1,784	1.1	1,025	1.3	759	1.0
75-79	881	0.6	505	0.6	376	0.5
80-84	528	0.3	298	0.4	230	0.3
85+	335	0.2	170	0.2	165	0.2
DK/Missing	17	0.0	12	0.0	5	0.0
Dependency age groups						
0-14	65,514	41.3	33,357	42.1	32,157	40.5
15-64	86,667	54.7	42,299	53.4	44,368	55.9
65+	6,365	4.0	3,517	4.4	2,848	3.6
DK/Missing	17	0.0	12	0.0	5	0.0
Child and adult populations						
Children age 0-17 years	76,016	47.9	38,927	49.2	37,089	46.7
Adults age 18+ years	82,530	52.0	40,247	50.8	42,284	53.3
DK/Missing	17	0.0	12	0.0	5	0.0

Table HH.2 shows that 41 percent of the population is under 15 years and 4 percent is of age 65 or over, showing a high dependent population. The largest age cohorts are: age groups: 5 – 9 (15 percent), 0 – 4 and 10-14 (13 percent each). The population pyramid is presented in Figure HH.1.

Figure HH. 1:   Age and sex distribution of household
Population, KP-MICS, 2016-17
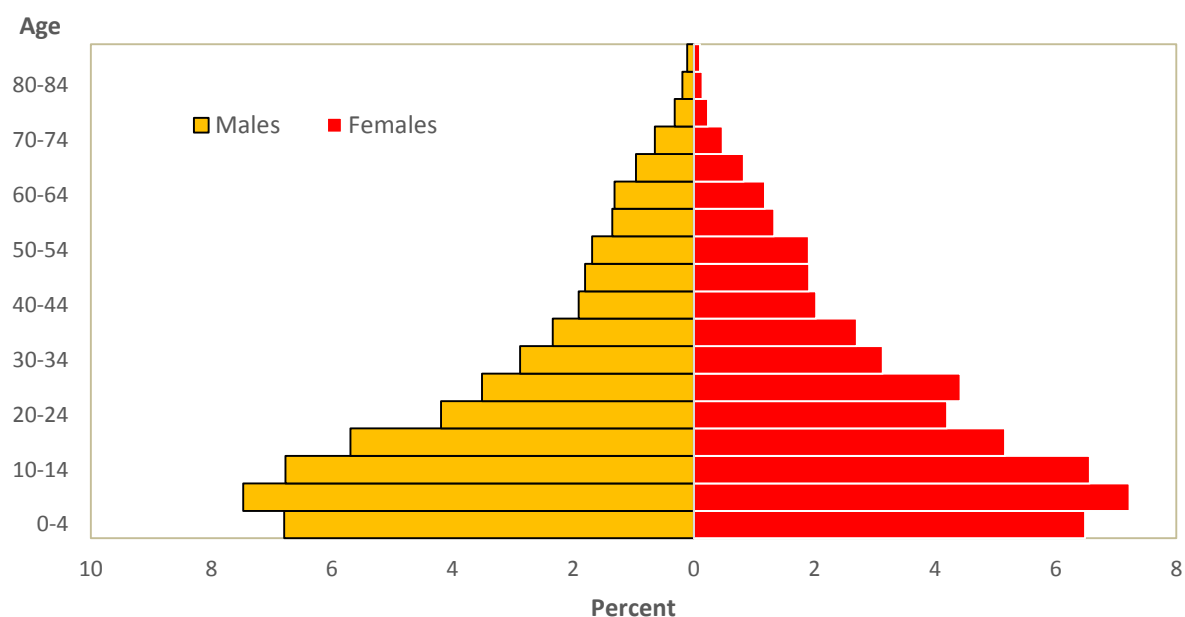
Tables HH.3, HH.4 and HH.5 provide basic information on the households, female respondents age 15-49, male respondents 15-49, and children under-5 respectively. Both unweighted and weighted numbers are presented. Such information is essential for the interpretation of findings presented later in the report and provide background information on the representativeness of the survey sample. The remaining tables in this report are presented only with weighted numbers.[7]

Table HH.3 provides basic background information on the households, including the sex of the household head, division, area, number of household members and education of household head are shown in the table. These background characteristics are used in subsequent tables in this report; the figures in the table are also intended to show the number of observations by major categories of analysis in the report.

Table HH. 3: Household composition

Percent and frequency distribution of households by selected characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of households	
		Weighted	Unweighted
KP	100.0	20,995	20,995
Area of residence			
Urban	17.5	3,672	6,229
Rural	82.5	17,323	14,766
Sex of household head			
Male	90.1	18,924	18,812
Female	9.9	2,071	2,183
Number of household members			
1	0.5	100	85
2	2.7	564	574

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[7] See Appendix B: Sample Design, for more details on sample weights.

Table HH. 3: Household composition

Percent and frequency distribution of households by selected characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of households	
		Weighted	Unweighted
KP	100.0	20,995	20,995
3	5.3	1,110	1,116
4	8.2	1,720	1,819
5	12.8	2,690	2,657
6	14.9	3,132	3,133
7	14.4	3,025	2,932
8	11.5	2,411	2,297
9	8.5	1,794	1,767
10+	21.2	4,450	4,615
Mean household size	7.6	20,995	20,995
Education of household head			
None/pre-school	47.3	9,928	9,851
Primary	10.3	2,162	2,138
Middle	10.8	2,260	2,231
Secondary	17.0	3,575	3,562
Higher	14.6	3,064	3,207
Division			
Bannu	5.7	1,195	1,535
D.I. Khan	6.4	1,352	1,480
Hazara	20.7	4,336	4,703
Kohat	6.7	1,411	2,120
Malakand	22.9	4,799	5,388
Mardan	12.6	2,646	1,958
Peshawar	25.0	5,256	3,811

The weighted and unweighted total number of households are equal, since sample weights were normalized[8]. The table also shows the weighted mean household size estimated by the survey is 7.6 persons per household.

In KP 90 percent of households are headed by males and the rest are headed by females. About 83 percent of households are in rural areas, while the rest are in urban. More than half of households (54 percent) have 5 to 8 members, while less than one percent have one member. Forty seven percent of the household heads have no education or only have pre-school followed by those with secondary education (17 percent) and higher education (15 percent). Ten percent household heads have primary education.

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

Tables HH.4 and HH.5 provide information on the background characteristics of female respondents 15-49 years of age and of children under age 5. In these tables, the total numbers of weighted and unweighted observations are equal, since sample weights have been normalized (standardized).[7] In addition to providing useful information on the background characteristics of women and children

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[8] *ibid*

under age five, the tables are also intended to show the numbers of observations in each background category. These categories are used in the subsequent tabulations of this report.

Table HH. 4: Women's background characteristics

Percent and frequency distribution of women age 15-49 years by selected background characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of women	
		Weighted	Unweighted
KP	100.0	36,703	36,703
Area of residence			
Urban	17.1	6,282	10,843
Rural	82.9	30,421	25,860
Marital status			
Currently married	66.4	24,373	24,502
Widowed	1.2	442	429
Divorced	0.3	123	128
Separated	0.2	66	71
Never married	31.9	11,698	11,572
Age			
15-19	21.8	7,984	7,913
20-24	17.8	6,515	6,623
25-29	18.8	6,897	6,933
30-34	13.3	4,899	5,002
35-39	11.6	4,252	4,153
40-44	8.6	3,173	3,178
45-49	8.1	2,983	2,901
Motherhood and recent births			
Never gave birth	40.5	14,860	14,726
Ever gave birth	59.5	21,843	21,977
Gave birth in last two years	22.8	8,365	8,353
No birth in last two years	36.7	13,478	13,624
Women's education			
None/pre-school	57.2	21,001	20,596
Primary	12.2	4,496	4,171
Middle	7.9	2,887	2,795
Secondary	10.9	4,019	4,163
Higher	11.7	4,298	4,977
Wealth index quintile			
Poorest	18.1	6,632	7,430
Second	19.6	7,202	6,638
Middle	20.1	7,381	6,528
Fourth	20.7	7,611	6,946
Richest	21.5	7,878	9,161
Division			
Bannu	6.4	2,361	2,934
D.I. Khan	7.0	2,551	2,756
Hazara	19.0	6,965	7,634
Kohat	7.2	2,639	4,171
Malakand	22.9	8,395	9,411
Mardan	12.6	4,633	3,393
Peshawar	25.0	9,158	6,404

Table HH.4 includes information on the distribution of women according to division, area, age, marital status, motherhood status, births in last two years, education[9] and wealth index quintiles[10, 11], of the head of the household.

The area of residence of eligible women is almost similar to the household, as expected. The highest proportion of the women, i.e., 21.8 percent, is of age group 15-19 years, which declines with increase in age. About two third (66 percent) of the women are currently married and one third (32 percent)

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[9] *Throughout this report, unless otherwise stated, "education" refers to highest educational level ever attended by the respondent when it is used as a background variable.*

[10] *The wealth index is a composite indicator of wealth. To construct the wealth index, principal components analysis is performed by using information on the ownership of consumer goods, dwelling characteristics, water and sanitation, and other characteristics that are 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 are living in, and is finally divided into 5 equal parts (quintiles) from lowest (poorest) to highest (richest).

In KP-MICS, 2016-17, the following assets are used in these calculations: Main material of the dwelling floor, Main material of the roof, Main material of the exterior walls, type of fuel used for cocking, Household possessions (Electricity, Radio, Television, Non-mobile telephone, Refrigerator/Freezer, Gas, Computer, Air conditioner, Washing machine/Dryer, Air cooler/ Fan, Cooking Range/Micro wave, Sewing/knitting machine, Iron, Water Filter and Dunky pump/Turbine), utilities owned by household members (Watch, Mobile telephone, Bicycle, Motorcycle / Scooter, Animal drawn-cart, Bus / Truck, Boat with motor, Car / Van, Tractor/Trolley), household ownership, ownership of land, having animals (Cattle, milk cows, Buffaloes or bulls, Horses, donkeys, mules or camels, Goats, Sheep and Chickens/ Ducks/ Turkey), possession of bank account, main source of drinking water and type of toilet.

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 applicable for only the particular data set 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, SO and Johnson, K. 2004. The DHS Wealth Index. DHS Comparative Reports No. 6; and Rutstein, SO. 2008. The DHS Wealth Index: Approaches for Rural and Urban Areas. DHS Working Papers No. 60.

[11] *When describing survey results by wealth quintiles, appropriate terminology is used when referring to individual household members, such as for instance "women in the richest population quintile", which is used interchangeably with "women in the wealthiest survey population", "women living in households in the richest population wealth quintile", and similar.*

have never married. About sixty percent of ever married women have ever given birth, of which 23 percent gave birth during last 2 years. About 57 percent of women have only pre-school or no education followed by primary education (12 percent), secondary education (11 percent) and higher education (12 percent). There is, however, only small difference based on household wealth.

Background characteristics of children under 5 are presented in Table HH.5. These include the distribution of children by several attributes: sex, division and area, age in months, respondent type, mother's (or caretaker's) education and wealth quintiles.

The proportion of male under 5 is 51 percent against 49 percent for female, which is similar to the total population composition in the selected households. Eighty five percent of these children reside in rural areas. As regards the share of various age groups, the smallest proportion (10.5 percent) is in age group of 0-5 months which increases in each subsequent five months age group with the highest (22 percent) in age group of 36–47 months. Majority of the children under 5 years (64 percent) have mothers with only pre-school or no education followed by 12 percent whose mothers have primary education and 9 percent have mothers with secondary education or higher.

About 1 percent of children are looked after by primary caretakers and the rest by their mothers. As regards to distribution of children with respect to household wealth, there are more children living in the households in the poorest quintile (21 percent) compared to 19 percent in the richest quintile.

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

Percent and frequency distribution of children under five years of age by selected characteristics of area of residence, sex, age, respondents' education and wealth index quintile, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of under-5 children	
		Weighted	Unweighted
KP	100.0	20,926	20,926
Area of residence			
Urban	15.1	3,168	5,467
Rural	84.9	17,758	15,459
Sex			
Male	51.2	10,716	10,669
Female	48.8	10,210	10,257
Age			
0-5 months	10.5	2,205	2,214
6-11 months	10.6	2,226	2,162
12-23 months	19.3	4,049	4,012
24-35 months	18.8	3,926	4,077
36-47 months	22.1	4,618	4,505
48-59 months	18.6	3,902	3,956
Respondent to the under-5 questionnaire			
Mother	99.4	20,794	20,786
Other primary caretaker	0.6	132	140
Mother's education[a]			
None/pre-school	63.9	13,375	13,344
Primary	12.2	2,563	2,347
Middle	6.6	1,384	1,375
Secondary	8.6	1,791	1,778
Higher	8.7	1,812	2,082
Wealth index quintile			
Poorest	21.0	4,389	4,912
Second	19.9	4,173	3,971

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

Percent and frequency distribution of children under five years of age by selected characteristics of area of residence, sex, age, respondents' education and wealth index quintile, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of under-5 children	
		Weighted	Unweighted
KP	100.0	20,926	20,926
Middle	19.9	4164	3713
Fourth	20.1	4,201	3,887
Richest	19.1	4,000	4,443
Division			
Bannu	7.2	1,505	1,740
D.I. Khan	8.7	1,827	1,852
Hazara	18.7	3,921	4,516
Kohat	7.1	1,492	2,391
Malakand	23.2	4,846	5,410
Mardan	11.9	2,486	1,790
Peshawar	23.2	4,849	3,227

Housing characteristics, asset ownership, and wealth quintiles

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

It can be observed from Table HH.6 that 94 percent of households have electricity (99 percent in urban and 93 percent in rural). Forty-five percent of households have finished (pacca[12]) floor and 54 percent have rudimentary/natural (katcha[13]) floor. More houses have "pacca" roofing (72 percent) than "pacca" floors (45 percent). Sixty-nine percent of households have "pacca" walls; urban houses are more likely to have pacca walls (95 percent) than rural houses (64 percent). About thirty three percent of households have one room for sleeping, whereas the mean number of persons per sleeping room is four.

In Table HH.7 households are distributed according to ownership of assets and dwelling. Forty-two percent of the households have a television, 56 percent have a refrigerator, 13 percent have a computer and 64 percent have a washing machine or dryer. Thirty five percent of households own agricultural land and 54 percent own livestock, while 87 percent own a house. Ownership of agricultural land and livestock is mostly in the rural areas. Ninety-six percent of households have at least a member owning a mobile phone and about 69 percent own a watch. Sixteen percent of households have a member who owns a bicycle, 29 percent own a motorcycle or scooter, 10 percent have a car or van and 29 percent have their bank accounts.

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[12] "Pacca" is a common term of National language (Urdu) in Pakistan which describes finished roofing or finished floor.
[13] "Katcha" is a common term of National language (Urdu) in Pakistan which describes rudimentary/natural roofing or rudimentary/natural floor

Table HH. 6: Housing characteristics

Percent distribution of households by selected housing characteristics of electricity, flooring, roof, exterior walls and rooms used for sleeping, according to area of residence and divisions, Khyber Pakhtunkhwa, 2016-17

		Area of residence		Division						
	KP	Urban	Rural	Bannu	D.I. Khan	Hazara	Kohat	Malakand	Mardan	Peshawar
Electricity										
Yes	94.4	99.4	93.3	98.0	96.2	94.2	94.5	88.1	97.8	97.3
No	5.6	0.6	6.7	2.0	3.8	5.8	5.4	11.9	2.2	2.7
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.1	-	0.0	-	-
Flooring										
Natural floor	54.4	17.2	62.3	86.6	79.4	36.9	61.9	55.7	55.4	51.5
Rudimentary floor										
Finished floor	45.3	82.6	37.4	13.4	20.5	62.1	37.9	44.2	44.3	48.4
Other	0.3	0.2	0.3	0.0	0.1	0.9	0.1	0.1	0.3	0.1
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.1	-	0.0	-	-
Roof										
Natural roofing	0.3	0.1	0.4	0.1	0.1	1.0	0.1	0.4	0.2	-
Rudimentary roofing	26.3	9.4	29.9	25.4	44.5	26.5	18.7	33.2	17.1	22.0
Finished roofing	72.0	89.4	68.3	73.1	52.3	72.1	80.8	64.7	80.6	76.9
Other	1.3	1.1	1.4	1.4	3.0	.5	.4	1.7	2.1	1.1
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.1	-	0.0	-	-
Exterior walls										
Natural walls	20.0	2.3	23.7	14.2	39.0	38.7	7.0	22.0	8.2	8.5
Rudimentary walls	10.2	2.8	11.8	5.3	16.1	8.0	9.5	19.6	7.9	4.5
Finished walls	69.3	94.6	63.9	80.3	43.9	52.7	82.7	57.6	83.5	86.8
Other	0.5	0.3	0.6	0.3	0.9	0.6	0.8	0.8	0.4	0.2
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.1	-	0.0	-	-
Rooms used for sleeping										
1	32.5	31.1	32.8	33.7	35.9	28.8	29.9	29.6	36.3	35.8
2	39.7	38.6	39.9	35.5	34.4	42.7	39.0	39.9	40.1	39.1
3 or more	27.6	30.0	27.1	30.6	28.9	28.2	30.8	30.4	23.3	24.7
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.0	-	0.0	-	-
Total	100.00	100	100	100	100	100	100	100	100	100
Number of households	20,995	3,672	17,323	1,195	1,352	4,336	1,411	4,799	2,646	5,256
Mean number of persons per room used for sleeping	4.02	3.63	4.10	4.53	4.57	3.68	3.80	4.00	4.10	4.08

Table HH. 7: Household and personal assets

Percentage of households by ownership of selected household and personal assets, and percent distribution by ownership of dwelling, according to area of residence and division, Khyber Pakhtunkhwa, 2016-17

	Area of residence			Division						
	KP	Urban	Rural	Bannu	D.I. Khan	Hazara	Kohat	Malakand	Mardan	Peshawar
Percentage of households that own a										
Radio	13.4	12.3	13.7	9.2	9.5	11.1	14.2	17.0	12.5	14.2
Television	41.9	70.7	35.8	27.4	41.8	50.1	42.0	29.2	42.8	49.7
Non-mobile phone	5.1	12.4	3.6	1.7	3.2	6.1	7.0	6.1	3.7	4.9
Refrigerator/freezer	56.4	83.6	50.6	55.9	49.2	45.1	67.1	41.9	66.5	72.8
Computer	13.1	30.6	9.4	9.9	10.3	10.6	13.6	11.0	17.6	16.2
Air Conditioner	6.8	23.0	3.3	5.3	7.5	1.0	5.3	1.6	4.8	17.7
Washing Machine / Dryer	63.7	87.9	58.6	68.0	62.9	54.5	65.0	51.7	68.5	78.6
Air Cooler / Fan	80.5	90.5	78.4	93.8	89.9	71.4	73.2	64.0	97.2	91.1
Cooking Range / Microwave Oven	5.9	19.6	3.0	2.5	4.7	4.9	3.9	4.0	5.1	10.4
Sewing / Knitting Machine	55.1	68.6	52.3	60.4	61.9	48.7	62.7	51.5	59.5	56.6
An Iron	86.4	96.3	84.3	89.1	86.7	83.2	91.9	79.5	88.3	92.2
Water Filter	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Donkey Pump / Turbine	1.7	1.6	1.7	1.7	1.7	1.8	1.7	1.8	1.5	1.7
Percentage of households that own										
Agricultural land	34.8	12.6	39.5	43.8	25.6	46.8	31.9	45.7	28.1	19.5
Farm animals/Livestock	53.8	14.9	62.1	74.5	63.8	60.9	61.4	62.1	45.9	35.2
Percentage of households where at least one member owns or has a										
Watch	68.6	72.7	67.7	76.9	51.1	66.0	78.4	79.2	58.7	65.9
Mobile telephone	96.3	98.5	95.8	96.0	95.7	94.7	97.3	97.1	96.2	96.9
Bicycle	16.2	18.8	15.6	32.1	42.3	5.6	12.6	5.3	25.5	20.7
Motorcycle / Scooter / Rickshaw	29.1	38.1	27.2	37.2	54.0	12.4	33.3	16.7	43.2	37.5
Animal-drawn cart	3.3	0.9	3.8	9.8	10.0	1.8	2.4	0.4	4.9	3.3
Bus / Truck	0.3	0.3	0.3	0.0	0.2	0.2	0.4	0.2	0.3	0.6
Boat with motor	0.1	0.1	0.2	0.0	0.3	0.2	0.1	0.1	0.1	0.3
Car / Van / Jeep	10.0	17.1	8.4	3.2	3.5	9.4	9.0	11.4	7.6	13.8
Tractor / Trolley	1.6	0.5	1.8	0.7	2.7	1.2	2.1	1.3	2.3	1.5
Bank account	29.1	42.6	26.2	21.6	21.7	34.5	43.2	24.3	30.8	27.8
Ownership of dwelling										
Owned by a household member	87.0	70.5	90.4	91.9	95.7	92.2	92.1	88.2	85.3	77.6
Not owned	13.0	29.4	9.5	8.1	4.3	7.8	7.9	11.8	14.7	22.3
Rented	9.2	26.4	5.6	4.8	2.7	4.5	5.5	8.4	8.7	17.9
Other	3.8	3.0	4.0	3.3	1.6	3.3	2.4	3.4	6.0	4.4
DK/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of households	20,995	3,672	17,323	1,195	1,352	4,336	1,411	4,799	2,646	5,256

Table HH.8 shows the distribution of household population according to household wealth quintiles. In urban population positive correlation can be observed with wealth quintiles; the highest proportion of population is living in households in the richest quintile. In contrast, a higher proportion of rural population is living in the households in the poorest quintile. Peshawar division which is highly urban, has 35 percent of its population living in the households in the richest quintile and 5 percent living in the households in the poorest quintile. In contrast, 33 percent of the population in Malakand division is living in the households in the poorest quintile compared to 15 percent of population living in the households in the richest quintile.

Table HH. 8: Wealth quintiles

Percent distribution of the household population by wealth index quintiles, according to area of residence, Khyber Pakhtunkhwa, 2016-17

| | Wealth index quintiles | | | | | Total | Number of household members |
	Poorest	Second	Middle	Fourth	Richest		
KP	20.0	20.0	20.0	20.0	20.0	100.0	158,564
Area of residence							
Urban	1.2	4.0	8.1	18.6	68.2	100.0	25,689
Rural	23.6	23.1	22.3	20.3	10.7	100.0	132,875
Division							
Bannu	18.2	33.0	26.2	16.2	6.5	100.0	10,565
D.I. Khan	23.3	31.4	21.1	14.6	9.6	100.0	11,766
Hazara	32.8	17.2	17.5	16.8	15.7	100.0	30,209
Kohat	13.4	28.5	24.4	19.5	14.2	100.0	10,837
Malakand	33.1	18.2	15.1	19.0	14.5	100.0	37,145
Mardan	7.0	16.6	26.1	26.7	23.6	100.0	19,425
Peshawar	5.2	16.2	20.3	22.9	35.3	100.0	38,616

IV.   Child Mortality

One of the overarching goals of the Millennium Development Goals (MDGs; 4.1, 4.2) and the Sustainable Development Goals (SDGs; 3.2.1) is the reduction of infant and under-five mortality. Specifically, the MDGs call for the reduction in under-five mortality by two-thirds between 1990 and 2015. Monitoring progress towards this goal is an important but difficult objective.

The infant mortality rate is the probability of dying before the first birthday, while the under-five mortality rate is the probability of dying before the fifth birthday.

In KP-MICS, 2016-17 an indirect method, known as the Brass method[14], was used. Robust estimates of the aforementioned indicators are produced by this indirect method, and are comparable with those obtained by applying direct methods.

The data used by the indirect methods are: the mean number of children ever born for five-year time-since-first-birth (TSFB) groups of women age 15 to 49 years, and the proportion of these children who are dead, also for five-year time-since-first-birth groups of women (Table CM.1). The technique converts the proportions dead among children of women in each time-since-first-birth group into probabilities of dying by taking into account the approximate length of exposure of children to the risk of dying, assuming a particular model age pattern of mortality. Based on previous information on mortality in Pakistan, the "East Model" life table was selected as most appropriate.

Table CM. 1: Children ever born, children surviving and proportion dead						
Mean and total numbers of children ever born, children surviving and proportion dead by time since first birth, Khyber Pakhtunkhwa, 2016-17						
	Children ever born		Children surviving		Proportion dead	Number of women age 15-49 years
	Mean	Total	Mean	Total		
KP	2.43	89,025	2.26	82,774	0.07	36,703
Time since first birth						
0-4	1.58	7,922	1.48	7,433	0.06	5,028
5-9	3.08	15,187	2.88	14,223	0.06	4,930
10-14	4.51	18,468	4.22	17,288	0.06	4,098
15-19	5.55	19,059	5.18	17,783	0.07	3,431
20-24	6.29	15,388	5.82	14,219	0.08	2,445

Table CM.2 provides estimates of infant and under-five mortality rates derived from proportion dead among children of women in various time-since-first-birth groups from 0-4 to 20-24. This table provides estimates of infant and under-5 mortality rates for various points in time prior to the survey. These estimates can be used to compare the trend indicated by these rates with those from other data sources.

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[14] *United Nations. 1983. Manual X: Indirect Techniques for Demographic Estimation. United Nations publication, Sales No. E.83.XIII.2; United Nations. 1990. QFIVE, United Nations Program for Child Mortality Estimation. United Nations Population Division; United Nations. 1990. Step-by-step Guide to the Estimation of Child Mortality; and International Union for the Scientific Study of Population. 2013. Tools for Demographic Estimation. United Nations Population Fund.*

Table CM. 2: Infant and under-5 mortality rates by time since first birth groups of women

Indirect estimates of infant and under-5 mortality rates by time since first birth of women, and reference dates for estimates, East Model, Khyber Pakhtunkhwa, 2016-17

	Reference date	Infant mortality rate	Under-5 mortality rate
Time since first birth			
0-4	2015.2	63.8	78.3
5-9	2012.6	57.1	69.1
10-14	2009.9	54.1	65.1
15-19	2007.0	54.4	65.5
20-24	2003.9	57.4	69.6

To obtain the most recent single estimates of the two indicators by background characteristics, estimates from time since first birth groups 0-4 and 5-9 are averaged and presented in Table CM.3.

Table CM. 3: Infant and under-5 mortality rates by background characteristics

Indirect estimates of infant and under-five mortality rates by selected background characteristics, time since first birth version, East Model, Khyber Pakhtunkhwa, 2016-17

	Infant mortality rate[1]	Under-five mortality rate[2]
KP	60	74
Area of residence		
Urban	55	67
Rural	61	75
Sex		
Male	65	77
Female	57	70
Mother's education		
None/Preschool	64	79
Primary	62	77
Middle	54	65
Secondary	50	60
Higher	45	53
Wealth index quintile		
Poorest	68	84
Second	71	88
Middle	65	65
Fourth	54	65
Richest	46	54
Division		
Bannu	79	100
D.I. Khan	72	91
Hazara	68	84
Kohat	54	65
Malakand	62	75
Mardan	59	72
Peshawar	46	54

[1] **MICS indicator 1.2; MDG indicator 4.2; SDG Indicator 3.2.1 - Infant mortality rate**
[2] **MICS indicator 1.5; MDG indicator 4.1 - Under-five mortality rate**
The East Model was assumed to approximate the age pattern of mortality in Pakistan

The infant mortality rate is estimated at 60 deaths per thousand live births, while the probability of dying under age 5 (U5MR) is 74 deaths per thousand live births. Probability of dying during childhood among males is higher than females. The infant mortality rate for males is 65 deaths per thousand live

births compared to 57 deaths per thousand for females, similarly the child mortality for males is 77 deaths per thousand live births compared with 70 deaths per thousand for females (Table CM.3).

Similarly, under-5 mortality rate is higher in rural areas compared to urban areas (75 and 67 deaths per thousand live births respectively). There is a considerable difference in child mortality in terms of mother's educational levels and wealth. There is inverse relationship of infant mortality with mother's education and wealth quintiles. Under-5 mortality for children whose mothers have pre-school or no education is high (79 deaths per thousand live births) and the rates decline as the mother's educational level increases. Similarly, infant mortality rate for children whose mothers have pre-school or no education is much higher compared to children whose mothers have higher secondary education (64 versus 45 deaths per thousand live births). Furthermore, the probability of dying before age 5 for children living in households in the richest quintile is much lower (54 deaths per thousand live births) compared to children living in the households in the poorest quintile (84 deaths per thousand live births). Similarly, infant mortality rate is 68 deaths per thousand live births for children living in the households in the poorest quintile compared to 46 deaths per thousand live births for those living in the households in the richest quintile. Figure CM.1 provides a graphical presentation of the differences of child mortality rates.

Among divisions, infant mortality rates and under-5 mortality rates are lowest in Peshawar division (46 and 54 deaths per thousand live births respectively) and highest in Bannu division (79 and 100 deaths per thousand live births respectively). Infant mortality rate in rural areas is 61 deaths per thousand live births compared to 55 deaths per thousand live births in urban areas.

Figure CM. 1: Child (under five) mortality, KP-MICS, 2016-17
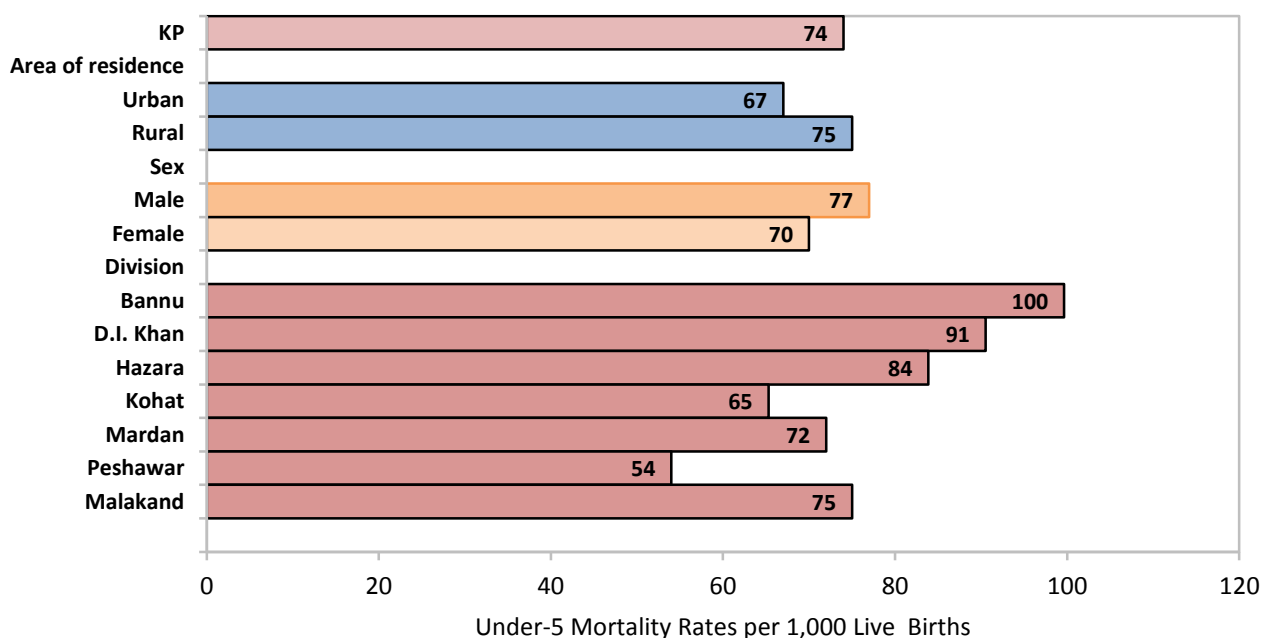
V.   Nutrition

Low Birth Weight

Weight at birth is a good indicator not only of a mother's health and nutritional status but also the new-born'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 most impact: the mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood), and poor nutrition during pregnancy. Inadequate weight gain during pregnancy is particularly important since 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 developing countries like Pakistan, 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 the incidence of low birth weight is that more than half of infants in the countries like Pakistan (developing countries) 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 2500 grams is estimated from two items in the questionnaire: the mother's assessment of the child's size at birth (i.e., very small, smaller than average, average, larger than average, very large) and the mother's recall of the child's weight or the weight as recorded on a health card if the child was weighed at birth[15].

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[15] *For a detailed description of the methodology, see Boerma, J. T., Weinstein, K. I., Rutstein, S.O., and Sommerfelt, A. E., 1996. Source of Data on Birth Weight in Developing Countries in "Bulletin of the World Health Organization"*

Table NU. 1: Low birth weight infants

Percentage of last live-born children in the last two years that are estimated to have weighed below 2,500 grams at birth and percentage of live births weighed at birth, Khyber Pakhtunkhwa, 2016-17

	Percent 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 2,500 grams[1]	Weighed at birth[2]	
KP	4.9	15.3	67.3	8.6	3.9	100.0	32.4	15.6	8,365
Area of residence									
Urban	4.1	14.3	69.3	9.4	3.0	100.0	30.7	27.9	1,334
Rural	5.0	15.4	67.0	8.5	4.1	100.0	32.7	13.3	7,032
Mother's age at birth									
Less than 20 years	7.2	15.8	64.8	9.8	2.4	100.0	33.0	12.9	892
20-34 years	4.6	15.3	67.9	8.4	3.8	100.0	32.3	16.9	6,301
35-49 years	4.8	14.4	66.2	9.1	5.4	100.0	32.5	10.8	1,173
Birth order									
1	5.8	16.2	65.5	9.2	3.3	100.0	32.9	20.2	1,921
2-3	5.1	13.8	70.1	7.6	3.4	100.0	31.9	16.8	3,184
4-5	3.9	15.2	67.4	9.1	4.4	100.0	31.8	13.9	1,942
6+	4.6	17.4	63.2	9.6	5.1	100.0	33.7	8.4	1,319
Mother's education									
None/pre-school	4.5	15.8	66.0	8.9	4.8	100.0	32.9	8.9	5,065
Primary	6.1	16.7	66.9	7.7	2.6	100.0	33.3	17.7	1,105
Middle	8.3	12.0	70.6	7.3	1.8	100.0	31.7	20.5	613
Secondary	5.3	14.4	68.4	9.2	2.7	100.0	31.3	26.3	788
Higher	2.4	13.3	72.6	9.0	2.7	100.0	29.5	41.1	794
Wealth index quintile									
Poorest	6.0	17.7	62.3	7.2	6.8	100.0	35.7	6.4	1,682
Second	5.0	18.7	65.4	7.1	3.8	100.0	34.4	7.5	1,655
Middle	5.2	14.9	67.6	8.7	3.5	100.0	32.3	11.6	1632
Fourth	4.8	12.8	70.3	9.3	2.8	100.0	30.5	19.9	1,763
Richest	3.4	12.3	70.9	11.0	2.4	100.0	29.0	32.7	1,633
Division									
Bannu	3.9	18.3	71.1	5.8	1.0	100.0	32.2	5.5	602
D.I. Khan	3.1	19.0	60.3	4.8	12.7	100.0	38.7	7.2	684
Hazara	4.1	15.5	67.2	6.7	6.5	100.0	33.5	21.4	1,507
Kohat	4.8	15.6	70.4	7.9	1.3	100.0	31.3	12.0	592
Malakand	5.4	15.8	64.5	11.7	2.6	100.0	31.8	11.6	1,996
Mardan	5.6	15.5	67.7	8.9	2.3	100.0	32.1	15.6	1,015
Peshawar	5.6	12.0	70.5	9.4	2.6	100.0	30.4	22.2	1,968

[1] MICS indicator 2.20 - Low-birthweight infants

[2] MICS indicator 2.21 - Infants weighed at birth

Overall 16 percent of births were weighed at birth and approximately 32 percent of infants are estimated to weigh less than 2,500 grams at birth (Table NU.1). Among divisions, Peshawar had the lowest proportion of low birth weight babies (30 percent) and the highest proportion was in D.I. Khan Division (39 percent). The prevalence of low birth weight does not vary considerably by urban and rural areas or mother's education.

Nutritional Status

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

Undernutrition is associated with more than half of all child deaths worldwide. Undernourished children are more likely to die from common childhood ailments, and for those who survive, have recurring sicknesses and faltering growth. Three-quarters of children who die from causes related to malnutrition were only mildly or moderately malnourished – showing no outward sign of their vulnerability. The Millennium Development Goal target is to reduce by half the proportion of people who suffer from hunger between 1990 and 2015. A reduction in the prevalence of malnutrition will also assist in the goal to reduce child mortality.

In a well-nourished population, there is a reference distribution of height and weight for children under age five. Under-nourishment in a population can be gauged by comparing children to a reference population. The reference population used in this report is based on the WHO growth standards[16]. Each of the three nutritional status indicators – weight-for-age, height-for-age, and weight-for-height - can be expressed in standard deviation units (z-scores) from the median of the reference population.

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

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

Weight-for-height can be used to assess wasting and overweight status. Children whose *weight-for-height* is more than two standard deviations below the median of the reference population are classified as *moderately or severely wasted,* while those who fall more than three standard deviations below the median are classified as *severely wasted*. Wasting is usually the result of a recent nutritional deficiency. The indicator of wasting may exhibit significant seasonal shifts associated with changes in the availability of food or disease prevalence. Children whose weight-for-height is more than two standard deviations above the median reference population are classified as moderately or severely overweight. In MICS, weights and heights of all children under 5 years of age were measured using the anthropometric equipment provided [17] by UNICEF. Findings in this section are based on the results of these measurements.

Table NU.2 shows percentages of children classified into each of the above described categories, based on the anthropometric measurements that were taken during fieldwork. Additionally, the table includes mean z-scores for all three anthropometric indicators.

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[16] *http://www.who.int/childgrowth/standards/technical_report*
[17] *See MICS Supply Procurement Instructions: http://www.childinfo.org/mics5_planning.html*

Table NU. 2: Nutritional status of children

Percentage of children under age 5 by nutritional status according to three anthropometric indices: weight for age, height for age, and weight for height, Khyber Pakhtunkhwa, 2016-17

	Weight for age				Height for age				Weight for height				
	Underweight				Stunted				Wasted		Overweight		
	Percent below		Mean Z-Score (SD)	Number of children under age 5	Percent below		Mean Z-Score (SD)	Number of children under age 5	Percent below		Percent above	Mean Z-Score (SD)	Number of children under age 5
	- 2 SD[1]	- 3 SD[2]			- 2 SD[3]	- 3 SD[4]			- 2 SD[5]	- 3 SD[6]	+ 2 SD[7]		
KP	20.8	7.5	-1.1	20,079	41.4	20.7	-1.6	19,527	8.0	3.0	6.8	-0.1	19,608
Area of residence													
Urban	15.4	4.6	-0.8	3,075	34.2	16.1	-1.3	2,966	7.2	2.9	6.5	-0.1	2,953
Rural	21.8	8.0	-1.1	17,005	42.7	21.6	-1.7	16,561	8.2	3.0	6.9	-0.1	16,655
Sex													
Male	22.1	8.1	-1.1	10,252	42.3	21.2	-1.6	9,950	8.8	3.5	6.6	-0.1	9,992
Female	19.6	6.8	-1.0	9,827	40.5	20.3	-1.6	9,577	7.3	2.6	7.1	0.0	9,617
Age													
0-5 months	21.1	10.5	-0.8	2,106	23.7	12.6	-0.6	1,998	16.1	6.8	10.7	-0.3	1,879
6-11 months	16.6	7.5	-0.8	2,146	20.3	9.3	-0.6	2,062	12.5	4.4	7.4	-0.3	2,078
12-17 months	15.5	5.1	-0.7	2,022	32.5	13.3	-1.1	1,967	9.6	3.4	6.1	-0.2	1,973
18-23 months	24.9	9.6	-1.3	1,903	51.4	28.6	-2.0	1,844	10.4	3.7	6.5	-0.2	1,884
24-35 months	24.5	9.3	-1.2	3,785	52.3	29.2	-2.1	3,665	7.6	3.0	7.5	0.0	3,727
36-47 months	21.5	7.2	-1.2	4,411	49.1	24.5	-2.0	4,335	5.0	2.0	6.9	0.1	4,376
48-59 months	19.5	4.4	-1.2	3,705	42.8	18.8	-1.9	3,656	3.3	1.0	4.5	0.0	3,691
Mother's education													
None/pre-school	24.3	8.9	-1.2	12,791	45.4	24.1	-1.8	12,375	8.5	3.2	6.6	-0.1	12,539
Primary	18.1	5.8	-1.0	2,459	40.9	19.3	-1.6	2,423	6.5	2.4	7.9	0.0	2,385
Middle	15.1	4.0	-0.8	1,329	36.9	14.9	-1.3	1,290	8.0	2.4	6.1	0.0	1,284
Secondary	13.4	5.0	-0.8	1,731	29.9	11.6	-1.2	1,699	7.6	3.3	6.3	-0.1	1,669
Higher	10.8	4.5	-0.7	1,769	28.1	12.2	-1.1	1,739	7.0	2.9	8.1	0.0	1,730
Wealth index quintile													
Poorest	29.7	12.1	-1.4	4,109	51.3	29.1	-1.9	3,916	10.1	4.1	8.3	-0.1	4,050
Second	24.0	8.7	-1.2	4,022	47.6	24.9	-1.8	3,901	8.1	2.5	6.4	-0.1	3,930
Middle	19.4	6.7	-1.0	4,033	41.6	20.5	-1.6	3,960	6.8	2.9	6.5	-.1	3,930
Fourth	16.7	5.3	-0.9	4,040	37.5	17.5	-1.5	3,978	6.4	2.5	7.3	0.0	3,942
Richest	13.9	4.4	-0.8	3,875	28.7	11.5	-1.1	3,772	8.5	3.1	5.7	-0.1	3,756

Table NU. 2: Nutritional status of children

Percentage of children under age 5 by nutritional status according to three anthropometric indices: weight for age, height for age, and weight for height, Khyber Pakhtunkhwa, 2016-17

	Weight for age				Height for age				Weight for height				
	Underweight				Stunted				Wasted		Overweight		
	Percent below		Mean Z-Score (SD)	Number of children under age 5	Percent below		Mean Z-Score (SD)	Number of children under age 5	Percent below		Percent above	Mean Z-Score (SD)	Number of children under age 5
	- 2 SD[1]	- 3 SD[2]			- 2 SD[3]	- 3 SD[4]			- 2 SD[5]	- 3 SD[6]	+ 2 SD[7]		
KP	20.8	7.5	-1.1	20,079	41.4	20.7	-1.6	19,527	8.0	3.0	6.8	-0.1	19,608
Division													
Bannu	19.9	5.1	-1.0	1,364	38.7	15.9	-1.5	1,348	3.9	1.2	2.1	-0.1	1,350
D.I. Khan	25.4	10.7	-1.1	1,786	44.1	24.8	-1.7	1,753	10.2	3.6	8.3	-0.2	1,746
Hazara	22.4	8.6	-1.1	3,568	42.0	21.9	-1.6	3,446	9.8	3.6	8.0	-0.1	3,528
Kohat	13.7	4.3	-0.7	1,460	36.1	17.9	-1.4	1,422	5.9	1.7	9.4	0.1	1,446
Malakand	23.0	8.0	-1.1	4,688	47.5	25.9	-1.8	4,479	7.1	3.1	8.5	0.1	4,522
Mardan	16.7	4.8	-1.0	2,445	37.5	15.9	-1.6	2,412	5.4	1.7	4.7	-0.1	2,402
Peshawar	20.4	7.9	-1.1	4,768	38.6	18.2	-1.5	4,667	10.0	3.9	5.5	-0.2	4,614

[1] **MICS indicator 2.1a and MDG indicator 1.8 - Underweight prevalence (moderate and severe)**

[2] **MICS indicator 2.1b - Underweight prevalence (severe)**

[3] **MICS indicator 2.2a - Stunting prevalence (moderate and severe)**

[4] **MICS indicator 2.2b - Stunting prevalence (severe)**

[5] **MICS indicator 2.3a - Wasting prevalence (moderate and severe)**

[6] **MICS indicator 2.3b - Wasting prevalence (severe)**

[7] **MICS indicator 2.4 - Overweight prevalence**

[8] **SDG indicators : 2.2.1; 2.2.2-underweight prevalence**

Children whose full birth date (month and year) were not obtained, and children whose measurements were outside a plausible range are excluded from Table NU.2. Children are excluded from one or more of the anthropometric indicators when their weights and heights have not been measured, whichever applicable. For example, if a child has been weighed but his/her height has not been measured, the child is included in underweight calculations, but not in the calculations for stunting and wasting. Percentages of children by age and reasons for exclusion are shown in the data quality Tables DQ.10, DQ.11, and DQ.12 in Appendix – E. These tables show that due to incomplete dates of birth, implausible measurements, and/or missing weight and/or height, 2.9 percent of children have been excluded from calculations for the weight not measured, 3.3 percent for length/ height not measured.

The Percentage of interviews completed for eligible under-5 children is 98 percent (Table DQ.4). Almost one in five children under age five are moderately or severely underweight (21 percent) and 8 percent are classified as severely underweight (Table NU.2). Forty one percent of children are moderately or severely stunted or too short for their age and 8 percent of children are moderately or severely wasted or too thin for their height, whereas less than 7 percent are overweight or too heavy for their height.

Boys appear to be slightly more likely to be underweight, stunted, and wasted than girls. Children in rural areas are more likely to be underweight and stunted (22 percent and 43 percent respectively) than in urban areas (15 percent and 34 percent respectively). Among divisions, highest proportion of children in D.I. Khan Division are underweight (25 percent) while lowest proportion is found among the children in Kohat division (14 percent). On the other hand, the highest proportion of children in Malakand division are found to be stunted (48 percent) compared to lowest proportion in Kohat division (36 percent). All three nutritional indicators are inversely correlated with mother's education and wealth. Among women with higher education, 28 percent of children are stunted and 11 percent are underweight; these figures are 45 percent and 24 percent respectively among children whose mother have pre-school or no education. More than half of children (51 percent) living in the households in the poorest quintile are stunted compared to 29 percent of children living in the households in the richest quintile. The age pattern shows that a higher percentage of children age 18-23 months are undernourished as prevalence of underweight and stunting is higher in this age group in comparison to children who are younger (Figure NU.1).

Figure NU. 1: Underweight, stunted, wasted and overweight

Children under age 5, KP-MICS, 2016-17
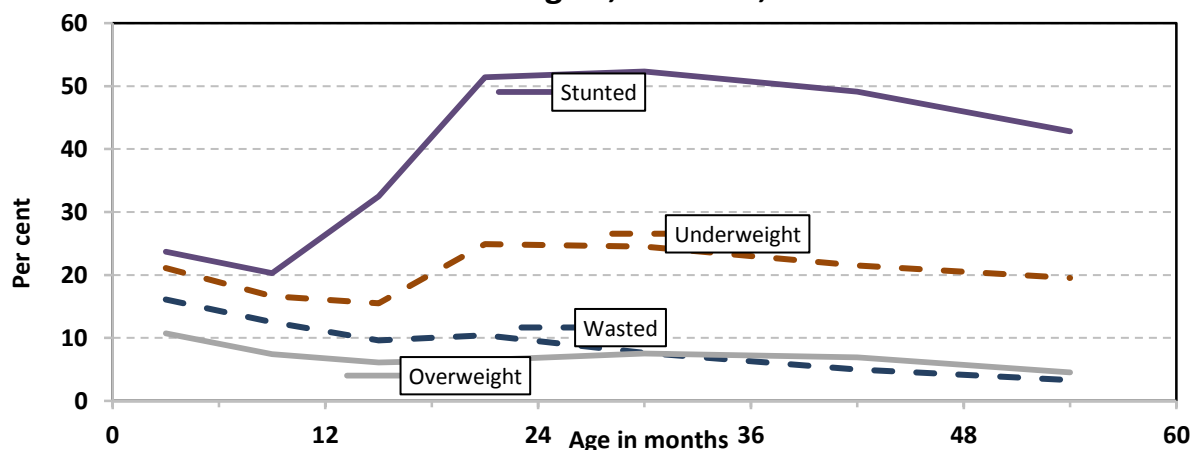
Breastfeeding and Infant and Young Child Feeding

Proper feeding of infants and young children can increase their chances of survival; it can also promote optimal growth and development, especially in the critical window from birth to 2 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 don't start to breastfeed early enough, do not breastfeed exclusively for the recommended 6 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 6 months onwards leads to better health and growth outcomes, with potential to reduce stunting during the first two years of life.[18]

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 2 years of age and beyond.[19] Starting at 6 months, breastfeeding should be combined with safe, age-appropriate feeding of solid, semi-solid and soft foods.[20] A summary of key guiding principles[21, 22] for feeding 6-23 month olds 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); and
(iii)   Appropriate nutrient content of food;

Feeding frequency is used as 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).[23]

These three dimensions of child feeding are combined into an assessment of the 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 form at least 4 food groups; and
(iii)   breast-milk or at least 2 milk feeds (for non-breastfed children).

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[18] 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.
[19] WHO. 2003. *Implementing the Global Strategy for Infant and Young Child Feeding*. Meeting Report Geneva, 3-5 February, 2003.
[20] WHO. 2003. *Global Strategy for Infant and Young Child Feeding*.
[21] PAHO. 2003. *Guiding principles for complementary feeding of the breastfed child*.
[22] WHO. 2005. *Guiding principles for feeding non-breastfed children 6-24 months of age*.
[23] WHO. 2008. **Indicators for assessing infant and young child feeding practices.** *Part 1: Definitions*.

Table	Guiding Principle (age 6-23 months)	Proximate measures
NU.4	Continue frequent, on-demand breastfeeding for two years and beyond	Breastfed in the last 24 hours
NU.6	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 <u>and/or milk feeds</u> provided in the last 24 hours
NU.6	Appropriate nutrient content of food	Four food groups[24] eaten in the last 24 hours
Na	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
NU.9	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
Na	Practice responsive feeding, applying the principles of psycho-social care	No standard indicator exists

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, and within one day of birth, and percentage who received a pre-lacteal feed, Khyber Pakhtunkhwa, 2016-17

		Percentage who were first breastfed:			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	Percentage who received a pre-lacteal feed	
KP	94.5	19.7	70.7	57.7	8,365
Area of residence					
Urban	94.3	22.5	74.1	48.8	1,334
Rural	94.6	19.1	70.0	59.4	7,032
Months since last birth					
0-11 months	95.6	18.8	69.4	59.4	4,448
12-23 months	93.4	20.7	72.1	55.8	3,917
Assistance at delivery					
Skilled attendant	95.6	18.0	70.5	57.7	5,735
Traditional birth attendant	95.5	17.9	73.5	57.5	1,207
Place of delivery					
Home	96.2	23.1	72.4	61.0	2,838
Health facility	95.6	18.4	71.1	57.0	5,392
Public	96.0	18.7	73.5	55.5	2,371
Private	95.2	18.1	69.2	58.2	3,021
Other/DK/Missing	19.7	0.4	14.2	16.0	136
Mother's education					
None/pre-school	95.2	20.4	71.3	58.9	5,065
Primary	94.4	15.2	68.6	59.6	1,105
Middle	95.8	25.2	74.1	57.8	613
Secondary	91.9	18.6	70.1	53.4	788
Higher	92.0	18.3	67.0	51.9	794
Wealth index quintile					
Poorest	95.0	28.5	74.0	57.9	1,682
Second	95.5	16.6	66.2	61.9	1,655
Middle	93.7	15.5	65.9	59.9	1632
Fourth	94.6	17.1	72.0	58.7	1,763
Richest	94.0	20.7	75.0	50.2	1,633
Division					
Bannu	93.7	6.6	31.3	78.8	602
D.I. Khan	94.4	7.5	62.7	73.9	684

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[24] *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, and within one day of birth, and percentage who received a pre-lacteal feed, Khyber Pakhtunkhwa, 2016-17

| | Percentage who were ever breastfed[1] | Percentage who were first breastfed: | | Percentage who received a pre-lacteal feed | Number of last live-born children in the last two years |
		Within one hour of birth[2]	Within one day of birth		
KP	94.5	19.7	70.7	57.7	8,365
Hazara	93.0	23.7	73.3	52.0	1,507
Kohat	92.7	9.0	56.8	66.5	592
Malakand	95.0	27.2	76.2	53.6	1,996
Mardan	95.3	15.6	68.7	70.0	1,015
Peshawar	95.8	22.5	82.9	45.3	1,968
[1] MICS indicator 2.5 - Children ever breastfed					
[2] MICS indicator 2.6 - Early initiation of breastfeeding					

Table NU.3 is based on mothers' reports of what their last-born child, born in 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, and those who received a pre-lacteal feed.[25] Although a very important step in management of lactation and establishment of a physical and emotional relationship between the baby and the mother, 20 percent of babies are breastfed for the first time within one hour of birth, while 71 percent of newborns start breastfeeding within one day of birth. By division, 83 percent of babies in Peshawar division were breastfed within one day of birth compared to only 31 percent of babies in Bannu. The data also show that 58 percent of new-borns receive pre-lacteal feed. The findings are presented in Figure NU.2 by division and area of residence.

Figure NU. 2: **Initiation of breastfeeding, KP-MICS, 2016-17**

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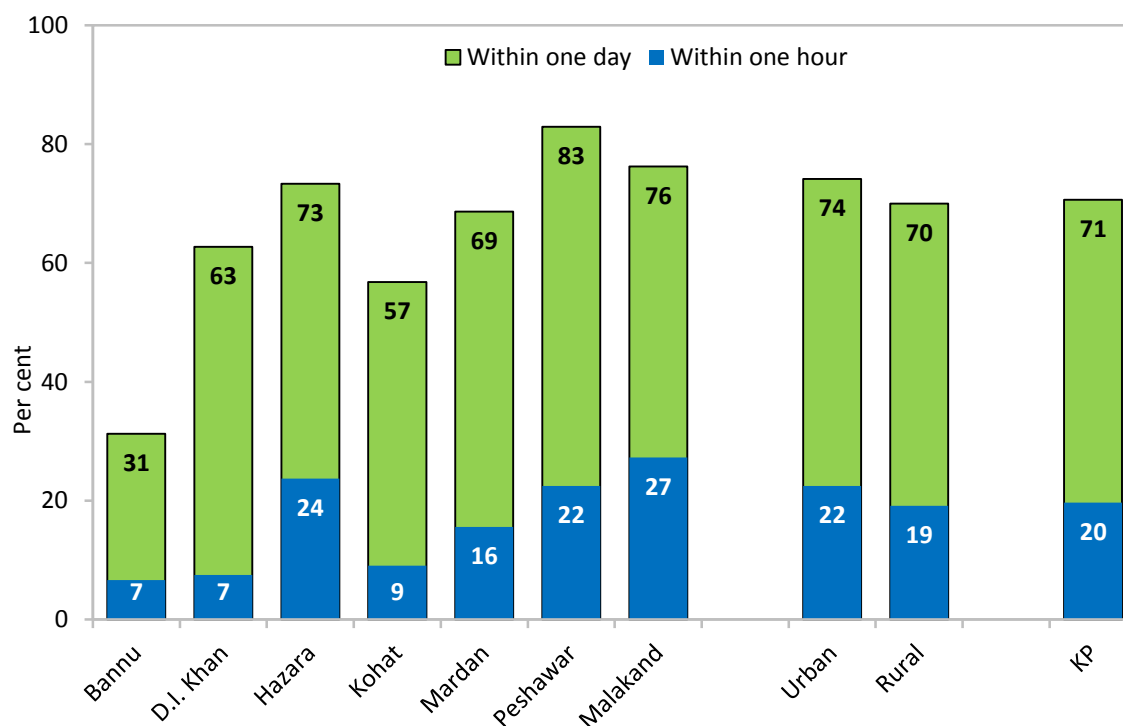
[25] *Prelacteal feed refers to the provision any liquid or food, other than breastmilk, to a newborn during the period when breastmilk flow is generally being established (estimated here as the first 3 days of life).*

The set of Infant and Young Child Feeding indicators reported in tables NU.4 through NU.8 are based on the mother's report 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 infant's age less than 6 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, Khyber Pakhtunkhwa, 2016-17

	Children age 0-5 months				Children age 12-15 months		Children age 20-23 months	
	Percent ever breastfed	Percent exclusively breastfed [1]	Percent predominantly breastfed [2]	Number of children	Percent breastfed (Continued breastfeeding at 1 year) [3]	Number of children	Percent breastfed (Continued breastfeeding at 2 years) [4]	Number of children
KP	97.3	57.2	66.3	2,205	76.7	1,461	59.4	1,290
Area of residence								
Urban	97.0	59.7	65.2	334	70.9	245	49.4	177
Rural	97.4	56.7	66.5	1,871	77.9	1,215	61.0	1,113
Sex								
Male	97.4	56.4	66.2	1,148	77.9	758	61.3	669
Female	97.2	58.0	66.4	1,056	75.5	703	57.4	621
Mother's education								
None/pre-school	97.0	59.9	69.9	1,310	77.8	898	63.9	819
Primary	97.4	49.8	61.9	291	79.0	191	54.2	158
Middle	98.7	52.6	60.9	158	70.8	90	45.9	85
Secondary	99.3	55.9	61.6	225	73.5	142	53.0	121
Higher	96.2	55.2	59.3	221	73.2	139	50.7	107
Wealth index quintile								
Poorest	98.2	67.6	77.5	458	88.2	288	73.1	265
Second	98.1	51.1	64.5	432	76.4	284	60.1	280
Middle	96.1	52.5	62.5	421	73.1	312	59.1	246
Fourth	96.8	55.9	64.5	453	71.8	300	53.1	282
Richest	97.5	58.0	61.9	441	74.5	277	50.5	217
Division								
Bannu	97.3	35.5	55.5	206	62.4	107	49.8	83
D.I. Khan	97.2	35.3	55.9	190	72.2	99	65.5	117
Hazara	97.4	54.0	60.4	378	81.0	213	64.9	243
Kohat	96.9	42.6	63.7	147	61.3	107	52.2	92
Malakand	96.9	70.3	75.7	522	84.1	391	60.0	281
Mardan	96.7	70.4	75.7	245	84.2	187	56.3	156
Peshawar	98.2	60.8	65.5	517	72.3	357	58.6	319

[1] **MICS indicator 2.7 - Exclusive breastfeeding under 6 months**
[2] **MICS indicator 2.8 - Predominant breastfeeding under 6 months**
[3] **MICS indicator 2.9 - Continued breastfeeding at 1 year**
[4] **MICS indicator 2.10 - Continued breastfeeding at 2 years**

Approximately 57 percent of children age less than six months are exclusively breastfed while 66 percent are predominantly breastfed. By age 12-15 months, 77 percent of children are breastfed, and by age 20-23 months, 59 percent continue to be breastfed.

Exclusive breastfeeding for children age less than six months is slightly higher in urban areas than rural areas. In D.I. Khan Division, about one third (35 percent) children are exclusively breastfed which is lowest as compared to children in the other divisions. Predominant breastfeeding ranges from 56 percent in Bannu and D.I.Khan to 76 percent each in Malakand and Mardan divisions.

Figure NU.3 shows the detailed pattern of breastfeeding by the child's age in months. Even at the earliest ages, the majority of children are receiving liquids or foods other than breastmilk, with other milk formula being of highest prevalence, even at the early age of 0-1 months.

Figure NU. 3:   **Infant feeding patterns by age, KP-MICS, 2016-17**
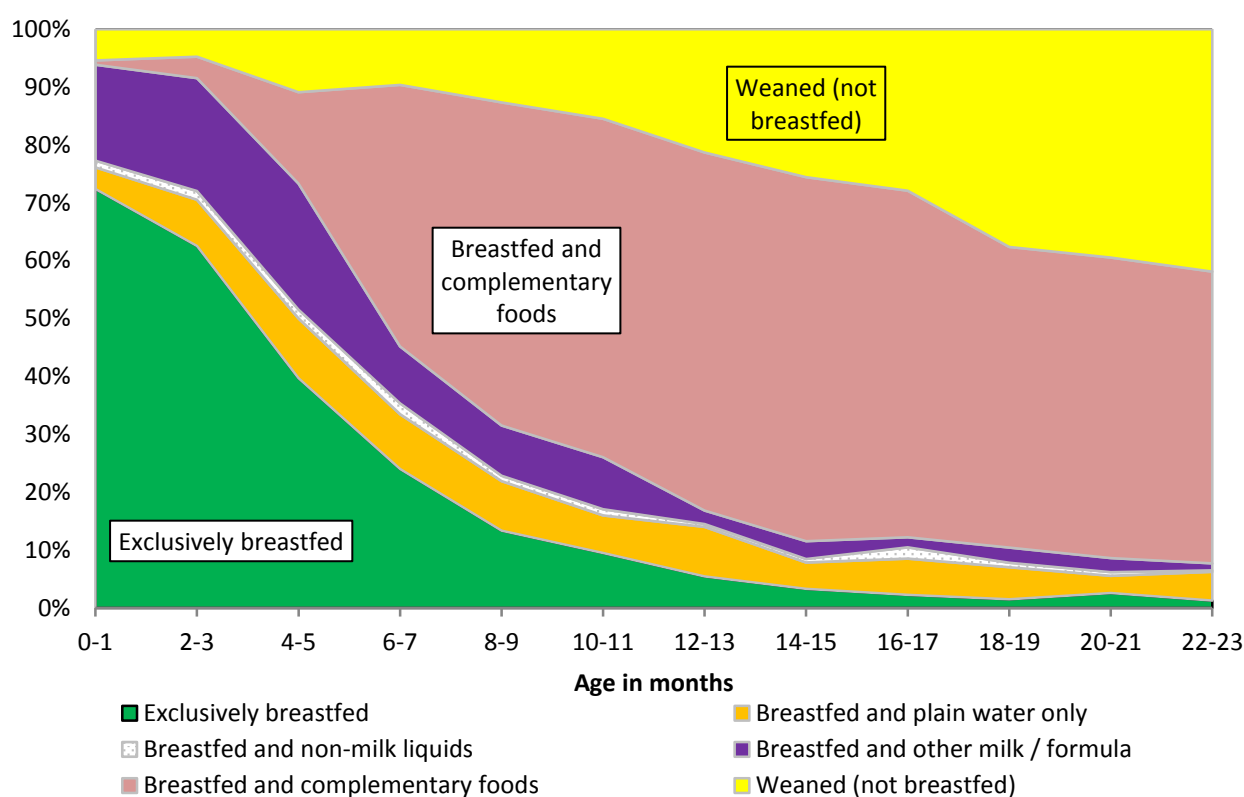
Table NU.5 shows the median duration of breastfeeding by selected background characteristics. Among children under age 3, the median duration is 22.4 months for any breastfeeding, 3.5 months for exclusive breastfeeding, and 4.9 months for predominant breastfeeding.

Table NU. 5: Duration of breastfeeding

Median duration of any breastfeeding, exclusive breastfeeding, and predominant breastfeeding among children age 0-35 months, Khyber Pakhtunkhwa, 2016-17

	Median duration (in months) of:			
	Any breastfeeding[1]	Exclusive breastfeeding	Predominant breastfeeding	Number of children age 0-35 months
Median	22.4	3.5	4.9	12,406
Mean	20.4	4.5	6.4	12,406
Area of residence				
Urban	20.6	3.7	4.5	1,903
Rural	22.6	3.4	5.0	10,503
Sex				
Male	22.7	3.4	4.8	6,369
Female	22.0	3.6	5.0	6,037
Mother's education				
None/pre-school	23.2	3.9	5.4	7,658
Primary	21.1	2.5	4.4	1,585
Middle	19.6	2.8	3.6	872
Secondary	21.3	3.2	4.1	1,134
Higher	21.2	3.3	3.9	1,158
Wealth index quintile				
Poorest	24.2	4.7	6.6	2,521
Second	22.5	2.7	4.9	2,492
Middle	22.3	2.8	4.1	2447
Fourth	21.5	3.3	4.6	2,542
Richest	20.6	3.7	4.4	2,404
Division				
Bannu	20.8	1.6	3.5	888
D.I. Khan	22.9	1.4	3.7	1,074
Hazara	23.0	3.0	4.2	2,314
Kohat	21.0	1.7	4.1	876
Malakand	22.6	5.2	6.0	2,930
Mardan	22.0	4.3	5.2	1,505
Peshawar	22.5	3.9	4.9	2,820

[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 age 0-5 months, exclusive breastfeeding is considered as age-appropriate feeding, while children age 6-23 months are considered to be appropriately fed if they are receiving breastmilk and solid, semi-solid or soft food. As a result of feeding patterns more than half (55 percent) of children age 6-23 months are being appropriately breastfed and age-appropriate breastfeeding among all children age 0-23 months, remain almost similar (56 percent). At divisional level, age-appropriate breastfeeding among all children age 0-23 months ranges from 46 percent in Bannu to 61 percent in Mardan.

Table NU. 6: Age-appropriate breastfeeding

Percentage of children age 0-23 months who were appropriately breastfed during the previous day, Khyber Pakhtunkhwa, 2016-17

	Children age 0-5 months		Children age 6-23 months		Children age 0-23 months	
	Percent exclusively breastfed[1]	Number of children	Percent currently breastfeeding and receiving solid, semi-solid or soft foods	Number of children	Percent appropriately breastfed[2]	Number of children
KP	57.2	2,205	55.4	6,275	55.9	8,480
Area of residence						
Urban	59.7	334	53.9	988	55.4	1,322
Rural	56.7	1,871	55.7	5,287	56.0	7,158
Sex						
Male	56.4	1,148	56.9	3,196	56.8	4,344
Female	58.0	1,056	53.8	3,080	54.9	4,136
Mother's education						
None/pre-school	59.9	1,310	55.0	3,820	56.2	5,130
Primary	49.8	291	56.5	826	54.7	1,117
Middle	52.6	158	57.0	456	55.9	613
Secondary	55.9	225	57.8	582	57.3	807
Higher	55.2	221	53.0	591	53.6	813
Wealth index quintile						
Poorest	67.6	458	55.8	1,229	59.0	1,687
Second	51.1	432	54.2	1,255	53.4	1,687
Middle	52.5	421	56.0	1247	55.1	1,667
Fourth	55.9	453	56.4	1,333	56.3	1,786
Richest	58.0	441	54.5	1,212	55.4	1,653
Division						
Bannu	35.5	206	51.7	412	46.3	618
D.I. Khan	35.3	190	51.0	515	46.8	705
Hazara	54.0	378	58.9	1,133	57.6	1,512
Kohat	42.6	147	50.5	447	48.6	594
Malakand	70.3	522	55.1	1,476	59.0	1,998
Mardan	70.4	245	57.8	800	60.7	1,045
Peshawar	60.8	517	55.8	1,491	57.1	2,008

[1] MICS indicator 2.7 - Exclusive breastfeeding under 6 months

[2] MICS indicator 2.12 - Age-appropriate breastfeeding

Overall, 54 percent of infant age 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 is 53 while it is 63 among infants currently not breastfeeding. The proportion is higher (59 percent) in urban compared to rural areas (53 percent). Similarly, the percentage of children receiving solid, semi-solid or soft food shows a positive relation with household wealth.

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

Percentage of infants age 6-8 months who received solid, semi-solid, or soft foods during the previous day, Khyber Pakhtunkhwa, 2016-17

	Currently breastfeeding		Currently not breastfeeding		All	
	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods[1]	Number of children age 6-8 months
KP	53.0	1,079	63.2	136	54.1	1,215
Area of residence						
Urban	57.7	180	67.1	32	59.1	212
Rural	52.1	899	62.0	104	53.1	1,004
Sex						
Male	54.1	505	61.0	55	54.8	560
Female	52.0	574	64.6	81	53.6	655
Mother's education						
None/pre-school	46.9	681	48.6	64	47.0	745
Primary	57.1	120	(*)	18	59.7	138
Middle	72.4	96	(*)	7	70.5	103
Secondary	64.9	88	(*)	12	65.2	100
Higher	61.1	93	(85.0)	35	67.7	129
Wealth index quintile						
Poorest	42.1	217	(*)	8	41.5	225
Second	42.0	218	(48.4)	30	42.7	247
Middle	62.8	239	42.2	16	61.6	255
Fourth	55.5	208	(69.8)	33	57.5	241
Richest	62.6	198	(80.8)	49	66.2	247
Division						
Bannu	71.5	75	(*)	12	70.1	87
D.I. Khan	48.0	99	(*)	7	48.5	106
Hazara	49.2	177	(*)	36	50.1	213
Kohat	68.6	72	(61.7)	16	67.3	88
Malakand	47.0	252	(43.2)	19	46.8	271
Mardan	52.3	133	(*)	17	54.6	150
Peshawar	54.0	270	(84.1)	29	56.9	299

[1] MICS indicator 2.13 - Introduction of solid, semi-solid or soft foods
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

More than half (51 percent) of the children age 6-23 months are receiving solid, semi-solid and soft foods the minimum number of times (Table NU.8). A slightly higher proportion of children in urban areas (59 percent) were achieving the minimum meal frequency compared to children in rural areas (50 percent). The proportion of children (18 percent), receiving the minimum dietary diversity or foods from at least 4 food groups, was much lower than that for minimum meal frequency indicating the need to focus on improving diet quality and nutrients intake among this vulnerable group. A higher proportion of older (18-23 month) children (30 percent) were achieving the minimum dietary diversity compared to younger (6-8 month old) children (4 percent). The overall assessment using the indicator of minimum acceptable diet revealed that only 11 percent of children are benefitting from a diet sufficient in both diversity and frequency. The proportion is slightly higher in urban areas (16 percent) compared to rural areas (10 percent).

Table NU. 8: Infant and young child feeding (IYCF) practices

Percentage of children age 6-23 months who received appropriate liquids and solid, semi-solid, or soft foods the minimum number of times or more during the previous day, by breastfeeding status, Khyber Pakhtunkhwa, 2016-17

	Currently breastfeeding			Currently not breastfeeding					All			
	Percent of children who received:		Number of children age 6-23 months	Percent of children who received:				Number of children age 6-23 months	Percent of children who received:			Number of children age 6-23 months
	Minimum meal frequency[b]	Minimum acceptable die[1,c]		Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2,c]	At least 2 milk feeds[3]		Minimum dietary diversity[4,a]	Minimum meal frequency[5,b]	Minimum acceptable diet[c]	
KP	13.8	44.8	11.3	4,711	32.5	74.8	11.0	66.7	1,294	18.4	51.3	11.3	6,275
Area of residence												
Urban	18.4	51.2	14.9	680	38.1	77.0	18.0	68.9	269	24.3	58.5	15.8	988
Rural	13.0	43.8	10.7	4,031	31.0	74.3	9.2	66.1	1,025	17.2	49.9	10.4	5,287
Sex												
Male	15.0	44.8	12.4	2,435	31.6	74.8	11.3	67.8	627	19.1	51.0	12.2	3,196
Female	12.4	44.8	10.2	2,276	33.2	74.9	10.7	65.7	667	17.6	51.6	10.3	3,080
Age												
6-8 months	3.0	42.0	2.5	1,079	17.7	74.0	4.1	87.0	92	4.1	44.5	2.6	1,215
9-11 months	9.3	33.1	8.7	873	9.7	75.0	5.1	74.3	96	9.8	37.3	8.4	1,011
12-17 months	16.9	46.2	12.9	1,574	31.5	73.8	11.2	70.6	434	20.3	52.2	12.6	2,090
18-23 months	22.7	54.3	19.2	1,184	38.4	75.6	12.6	60.3	672	29.6	62.0	16.8	1,959
Mother's education												
None/pre-school	11.0	42.0	9.2	2,978	31.7	73.1	10.0	62.8	699	15.2	47.9	9.4	3,820
Primary	15.6	46.3	13.1	597	26.5	75.8	9.1	62.9	194	19.7	53.5	12.1	826
Middle	16.5	50.3	12.7	325	31.6	70.5	11.3	76.0	117	20.2	55.7	12.3	456
Secondary	20.3	50.1	16.9	414	35.0	79.4	14.7	74.7	124	26.5	56.8	16.4	582
Higher	22.4	54.3	17.5	397	41.5	80.9	14.4	75.6	160	27.4	62.0	16.6	591
Wealth index quintile												
Poorest	8.2	37.0	6.8	1,044	26.1	69.1	8.5	53.9	154	10.6	41.1	7.0	1,229
Second	12.5	40.8	9.4	948	22.2	70.6	4.4	60.6	268	15.0	47.3	8.3	1,255
Middle	12.8	49.3	11.5	920	27.0	73.8	6.2	68.4	242	16.7	54.4	10.4	1247
Fourth	14.4	46.7	11.8	966	36.0	76.5	14.3	66.2	310	20.5	54.0	12.4	1,333
Richest	22.3	52.2	18.4	833	44.7	80.3	18.1	77.3	320	28.9	60.0	18.3	1,212

Table NU. 8: Infant and young child feeding (IYCF) practices

Percentage of children age 6-23 months who received appropriate liquids and solid, semi-solid, or soft foods the minimum number of times or more during the previous day, by breastfeeding status, Khyber Pakhtunkhwa, 2016-17

| | Currently breastfeeding | | | Currently not breastfeeding | | | | | All | | | |
| | Percent of children who received: | | Number of children age 6-23 months | Percent of children who received: | | | | Number of children age 6-23 months | Percent of children who received: | | | Number of children age 6-23 months |
	Minimum meal frequency[b]	Minimum acceptable diet[1, c]		Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2, c]	At least 2 milk feeds[3]		Minimum dietary diversity[4, a]	Minimum meal frequency[5, b]	Minimum acceptable diet[c]	
KP	13.8	44.8	11.3	4,711	32.5	74.8	11.0	66.7	1,294	18.4	51.3	11.3	6,275
Division												
Bannu	10.6	35.5	7.3	280	23.4	69.7	8.0	71.9	114	14.7	45.4	7.5	412
D.I. Khan	4.7	35.0	4.1	407	17.8	60.3	5.2	68.8	91	7.2	39.7	4.3	515
Hazara	12.5	47.5	10.0	863	30.4	83.1	11.5	77.5	214	17.1	54.6	10.3	1,133
Kohat	17.4	57.8	15.8	292	32.8	75.9	13.8	71.1	122	22.5	63.1	15.2	447
Malakand	14.0	43.0	11.3	1,184	39.2	72.7	8.8	53.4	231	18.6	47.8	10.9	1,476
Mardan	14.0	44.7	11.0	608	24.3	73.5	6.8	60.4	149	16.7	50.4	10.2	800
Peshawar	17.6	47.4	15.1	1,077	39.0	76.7	15.1	67.7	372	23.6	54.9	15.1	1,491

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

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

[3] MICS 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 4 of 7 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 2 times or more daily for children age 6-8 months and 3 times or more daily for children age 9-23 months. For non-breastfeeding children age 6-23 months it is defined as receiving solid, semi-solid or soft foods, or milk feeds, at least 4 times.

[c] The minimum acceptable diet for breastfed children age 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 2 milk feedings and that the minimum dietary diversity is achieved without counting milk feeds.

The continued practice of bottle-feeding is a matter of concern because of the possible contamination due to unsafe water and lack of hygiene in preparation. Table NU.9 shows that 29 percent of children under 2 years are fed using a bottle with a nipple. More than one-third (37 percent) of the children under 2 years are bottle fed in Bannu division compared to less than one fifth (19 percent) in Malakand division. The practice of bottle feeding is higher in urban (37 percent) compared to rural areas (27 percent). Bottle feeding has a positive relation with education of the mother and household wealth. For example, bottle feeding is 24 percent for children whose mother have pre-school or no education compared to 42 percent among children whose mothers have higher education. The data further show that 22 percent of children age less than six months are fed using a bottle with a nipple even though the children are expected to be exclusively breastfed at that "age".

Table NU. 9: Bottle feeding

Percentage of children age 0-23 months who were fed with a bottle with a nipple during the previous day,
Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 0-23 months fed with a bottle with a nipple[1]	Number of children age 0-23 months
KP	28.8	8,480
Area of residence		
Urban	37.3	1,322
Rural	27.2	7,158
Sex		
Male	29.1	4,344
Female	28.4	4,136
Age		
0-5 months	21.8	2,205
6-11 months	28.5	2,226
12-23 months	32.7	4,049
Mother's education		
None/pre-school	24.2	5,130
Primary	32.1	1,117
Middle	33.1	613
Secondary	37.3	807
Higher	41.5	813
Wealth index quintile		
Poorest	16.9	1,687
Second	26.1	1,687
Middle	31.2	1667
Fourth	29.9	1,786
Richest	40.0	1,653
Division		
Bannu	37.4	618
D.I. Khan	30.5	705
Hazara	35.1	1,512
Kohat	36.4	594
Malakand	19.2	1,998
Mardan	25.8	1,045
Peshawar	29.5	2,008
[1] MICS indicator 2.18 - Bottle feeding		

Salt Iodization

Iodine Deficiency Disorders (IDD) is the world's leading cause of preventable mental retardation and impaired psychomotor development in young children. In its most extreme form, iodine deficiency causes cretinism. It also increases the risks of stillbirth and miscarriage in pregnant women. Iodine deficiency is most commonly and visibly associated with goitre. The IDD takes its greatest toll in impaired mental growth and development, contributing in turn to poor school performance, reduced intellectual ability, and impaired work performance. The indicator is the percentage of households consuming adequately iodized salt (>15 parts per million). In Pakistan iodine deficiency disorders have been recognized as a public health problem for nearly 50 years. Various surveys have reflected that Pakistan is a country with more than half of the population estimated to be at risk for IDD (Iodine Deficiency Disorders). The situation is worse especially in the northern districts of Pakistan which is considered to be one of the most severely endemic areas in the world for IDD.

A National IDD Control Program was initiated in 1989 with a focus on elimination of IDD through Universal Salt Iodization (USI). The Program has been implemented by Government of Pakistan with the support for national USI partners including UNICEF, the Micronutrient Initiative and GAIN (Global Alliance for Improved Nutrition). The Program is being implemented in all provinces with the objective to improve the availability and accessibility of adequately iodized salt to the entire population including the most vulnerable.

Table NU. 10: Iodized salt consumption

Percent distribution of households by consumption of iodized salt, Khyber Pakhtunkhwa, 2016-17

| | Percentage of households in which salt was tested | Number of households | Percent of households with: | | | | | Number of households in which salt was tested or with no salt |
| | | | Salt test result | | | | | |
			No salt	Not iodized 0 PPM	>0 and <15 PPM	15+ PPM[1]	Total	
KP	99.5	20,995	0.2	34.2	36.2	29.3	100.0	20,940
Area of residence								
Urban	99.4	3,672	0.3	24.2	33.3	42.2	100.0	3,661
Rural	99.5	17,323	0.2	36.3	36.9	26.6	100.0	17,278
Education of Head of HH								
None/pre-school	99.4	9,928	0.3	38.1	37.1	24.5	100.0	9,903
Primary	99.7	2,162	0.1	33.0	38.8	28.1	100.0	2,159
Middle	99.2	2,260	0.1	33.8	35.9	30.2	100.0	2,244
Secondary	99.6	3,575	0.3	31.0	36.9	31.8	100.0	3,571
Higher	99.6	3,064	0.1	26.5	31.3	42.0	100.0	3,056
Wealth index quintile								
Poorest	99.3	4,136	0.5	38.4	38.1	23.1	100.0	4,124
Second	99.4	4,138	0.3	39.2	36.9	23.5	100.0	4,125
Middle	99.5	4,120	.1	39.8	35.0	25.1	100.0	4,106
Fourth	99.8	4,255	0.1	31.5	37.3	31.1	100.0	4,252
Richest	99.5	4,345	0.2	22.9	33.9	43.0	100.0	4,332
Division								
Bannu	99.2	1,195	0.6	49.7	30.8	18.9	100.0	1,191
D.I. Khan	99.7	1,352	-	22.7	32.7	44.5	100.0	1,349
Hazara	99.3	4,336	0.4	19.2	48.9	31.6	100.0	4,322
Kohat	99.8	1,411	0.1	48.7	25.8	25.3	100.0	1,410
Malakand	99.7	4,799	0.1	33.2	36.8	29.8	100.0	4,790
Mardan	99.7	2,646	0.1	34.8	33.5	31.6	100.0	2,642
Peshawar	99.3	5,256	0.3	42.7	31.6	25.4	100.0	5,236

[1] MICS indicator 2.19 - Iodized salt consumption

More than 99 percent of households, salt used for cooking was tested for iodine content by using salt test kits to test the presence of potassium iodate content in the salt. Table NU.10 shows that in about less than one percent of households, there is no salt available. These households are, however, included in the denominator of the indicator. In 29 percent of households, salt is found to contain 15 parts per million (ppm) or more of Iodine. Use of iodized salt was lowest in Bannu division (19 percent) and highest in D.I. Khan Division (45 percent). More urban households (42 percent) were found to be using adequately iodized salt compared to 27 percent in rural areas. Similarly, 43 percent of households in the highest wealth quintile are using adequately iodized salt compared to 23 percent of households in the poorest quintile. The consumption of adequately iodized salt is graphically presented in Figure NU.4

Figure NU. 4: **Consumption of iodized salt, KP-MICS, 2016-17**
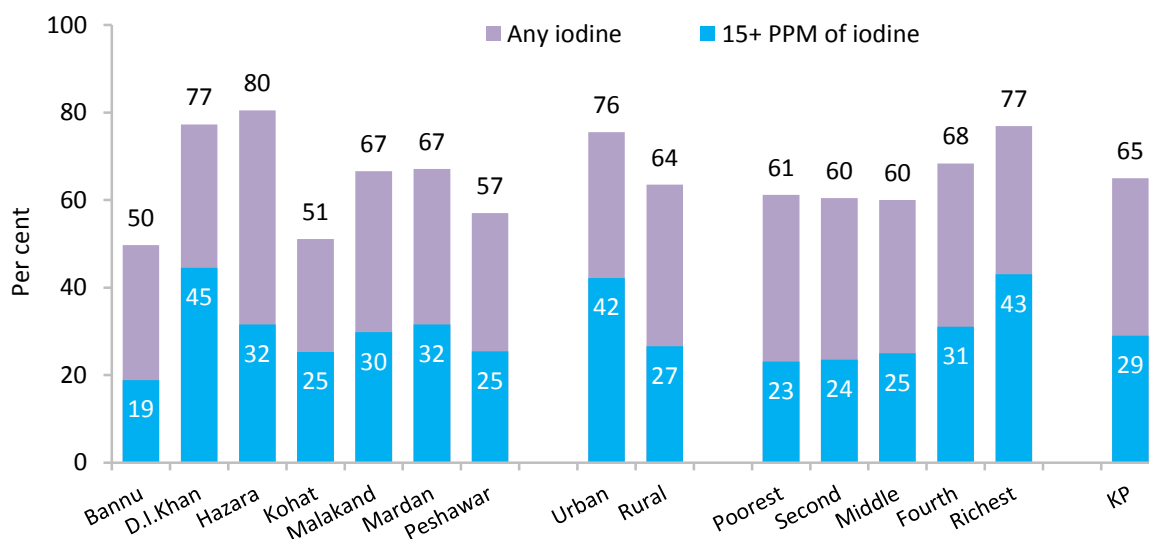
Children's Vitamin A Supplementation

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

The 1990 World Summit for Children set the goal of virtual elimination of vitamin A deficiency and its consequences, including blindness, by the year 2000. This goal was also endorsed at the Policy Conference on Ending Hidden Hunger in 1991, the 1992 International Conference on Nutrition, and the UN General Assembly's Special Session on Children in 2002. The critical role of vitamin A in child health and immune

function makes control of deficiency a primary component of child survival efforts, and therefore critical to the achievement of the fourth Millennium Development Goal: a two-thirds reduction in under-five mortality by the year 2015.

For countries where vitamin A deficiency is common, current international recommendations call for high-dose supplementation every 4–6 months for all children aged 6–59 months living in affected areas. Providing young children with two high-dose vitamin A capsules a year is a safe, cost-effective, efficient strategy for eliminating vitamin A deficiency and improving child survival. Giving vitamin A to new mothers helps protect their children during the first months of life and helps to replenish the mother's own stores of vitamin A which are depleted during pregnancy and lactation. Under Pakistan's National Health Policy 2001, vitamin A supplements are to be provided annually to all children aged 6-59 months on National Immunisation Days through the Expanded Programme on Immunization (EPI) network. This survey uses as an indicator the percentage of children 6–35 months of age who receive at least one high-dose of vitamin A supplement in the preceding 6 months. It is a survey specific additional indicator, which is not part of MICS5 standard questions

KP-MICS, 2016-17 finds that about 67 percent of children aged 6–59 months received at least one dose of vitamin A supplement during the last 6 months period prior to the interview (Table NU.11). Children age 6– 11 months have least coverage (59 percent) compared to older children age 36-47 months who have highest coverage (69 percent). Among divisions, eight in ten children (83 percent) in Mardan division received Vitamin A dose during the last 6 months compared to only five in ten children in Kohat division (52 percent). Considerable differentials exist in Wealth quintile ranging from 51 percent to 78 percent among poorest and richest respectively.

Table NU. 11: Children's vitamin A supplementation

Percent distribution of children age 6-59 months by receipt of a high dose vitamin A supplement in the last 6 months, Khyber Pakhtunkhwa, 2016-17.

	Percentage of children who received Vitamin A during the last 6 months[1]	Number of children age 6-59 months
KP	66.8	18,354
Area of residence		
Urban	76.4	2,788
Rural	65.1	15,566
Sex		
Male	66.0	9,387
Female	67.5	8,967
Age		
6-11	59.2	2,226
12-23	64.5	4,049
24-35	68.6	3,926
36-47	68.8	4,618
48-59	69.4	3,535
Mother's education		
None/pre-school	63.3	11,818
Primary	70.9	2,222
Middle	69.8	1,210
Secondary	75.1	1,540
Higher	76.7	1,565
Wealth index quintile		
Poorest	50.9	3,844
Second	65.9	3,654
Middle	69.6	3,674
Fourth	70.8	3,691
Richest	78.0	3,491
Division		
Bannu	76.4	1,260
D.I. Khan	80.2	1,603
Hazara	55.6	3,464
Kohat	52.0	1,310
Malakand	58.2	4,260
Mardan	83.4	2,196
Peshawar	72.5	4,261

[1] MICS indicator 2.S1 - Vitamin A supplementation

VI.   Child Health

Vaccinations

The Millennium Development Goal 4 (MDG 4) is to reduce child mortality by two thirds between 1990 and 2015. Immunization plays a key part in achieving 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 2 million deaths every year.

The WHO Recommended Routine Immunizations for Children[26] aims at all children to be vaccinated against tuberculosis, diphtheria, pertussis, tetanus, polio, measles, hepatitis B, haemophilus influenzae type b, pneumonia/meningitis, rotavirus, and rubella.

All doses in the primary series are recommended to be completed before the child's first birthday, although depending on the epidemiology of disease in a country, the first doses of measles and rubella containing vaccines may be recommended at 12 months or later. The recommended number and timing of most other doses also vary slightly with local epidemiology and may include booster doses later in childhood.

Pakistan National Immunization Programme provides all the above mentioned vaccinations with birth doses of BCG, Polio, and Hepatitis B vaccines, three doses of the Pentavalent vaccine containing DPT, Hepatitis B, and Haemophilus influenza type b (Hib) antigens, three doses of Polio vaccine, three doses of Pneumococcal (conjugate) vaccine, two or three doses of rotavirus vaccine (depending on vaccine used), two doses of the MMR vaccine containing measles, mumps, and rubella antigens. All vaccinations should be received during the first year of life except the doses of MMR at 12 and 15 months. Taking into consideration this vaccination schedule, the estimates for full immunization coverage from the KP-MICS, 2016-17 are based on children age 12-23 months.

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 MICS 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, PENTA and measles, how many doses were received. The final vaccination coverage estimates are based on information obtained from the vaccination card and the mother's report of vaccinations received by the child.

The percentage of children age 12-23 months and 24-35 months who have received each of the specific vaccinations by source of information (vaccination card, mother's recall or either) is shown in Table CH.1 and Figure CH.1. The denominators for the table are number of children age 12-23 months and 24-35

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[26] *http://www.who.int/immunization/diseases/en. Table 2 includes recommendations for all children and additional antigens recommended only for children residing in certain regions of the world or living in certain high-risk population groups.*

months so that only those children who are old enough to be fully vaccinated are counted. 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, mother's recall or either. In the last column in each panel, only those children who were vaccinated before their first birthday, as recommended, are included. For children without vaccination cards, the proportion of vaccinations given before the first birthday is assumed to be the same as for children with vaccination cards.

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

Percentage of children age 12-23 months and 24-35 months vaccinated against vaccine preventable childhood diseases at any time before the survey and by their first birthday, Khyber Pakhtunkhwa, 2016-17

	Children age 12-23 months:				Children age 24-35 months:			
	Vaccinated at any time before the survey according to:			Vaccinated by 12 months of age[a]	Vaccinated at any time before the survey according to:			Vaccinated by 12 months of age
	Vaccination card	Mother's report	Either		Vaccination card	Mother's report	Either	
Antigen								
BCG [1]	48.6	23.8	72.3	71.5	28.5	36.6	65.1	63.0
Polio								
Polio at birth	48.1	28.6	76.7	75.9	28.2	41.4	69.6	67.3
1	46.7	22.9	69.5	68.1	27.6	31.7	59.2	56.3
2	44.0	16.3	60.4	58.6	26.8	23.2	50.0	47.1
3 [2]	41.4	14.0	55.4	52.7	25.5	20.7	46.2	42.6
PENTA								
1	47.8	19.0	66.8	65.5	28.4	29.6	58.0	55.0
2	44.9	14.4	59.3	57.6	27.7	23.3	51.0	47.9
3 [3,4,5]	42.1	9.6	51.7	49.1	26.5	14.7	41.2	38.0
Measles								
1 [6]	37.2	17.2	54.5	46.9	24.9	29.9	54.8	40.7
2	19.7	0.1	19.8	na	20.8	0.1	20.9	19.7
Fully vaccinated [7,b]	35.7	4.1	39.7	32.1	na	na	na	Na
No vaccinations	-	18.9	18.9	19.0	0.1	25.1	25.2	26.1
Number of children	4,049	4,049	4,049	4,049	3,926	3,926	3,926	3,926

[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 - Hemophilic influenza type B (Hib) immunization coverage**
[6] **MICS indicator 3.4; MDG indicator 4.3 - Measles immunization coverage**
[7] **MICS indicator 3.8; Full immunization coverage**
[a] All MICS indicators refer to results in this column
[b] Includes: BCG, Polio3, Penta (DPT3, HepB3, Hib3), and Measles (MCV1) as per the vaccination schedule in Khyber Pakhtunkhwa

Approximately 72 percent of children age 12-23 months received a BCG vaccination by the age of 12 months and the first dose of PENTA vaccine was given to 67 percent. The percentage declines to 59 percent for the second dose of PENTA, and to 52 percent for the third dose. Similarly, 68 percent of children received Polio 1 by age 12 months and this declines to 53 percent by the third dose. The coverage for the first dose of measles vaccine by 12 months is 47 percent although 55 percent of children 12-23

months received the measles vaccine before the survey. As a result, the percentage of children who had all the recommended vaccinations by their first birthday is low at 32 percent[27].

Figure CH. 1:   **Vaccinations by age 12 months KP-MICS, 2016-17**

Children Age 12-23 months

Category	Percent
BCG	72
Polio at birth	76
Polio1	68
Polio2	59
Polio3	53
PENTA 1	65
PENTA 2	58
PENTA 3	49
Measles	47
Fully vaccinated	32
No vaccinations	19

Children Age 24-35 months

Category	Percent
BCG	63
Polio at birth	67
Polio1	56
Polio2	47
Polio3	43
PENTA 1	55
PENTA 2	48
PENTA 3	38
Measles	41
Fully vaccinated	22
No vaccinations	26
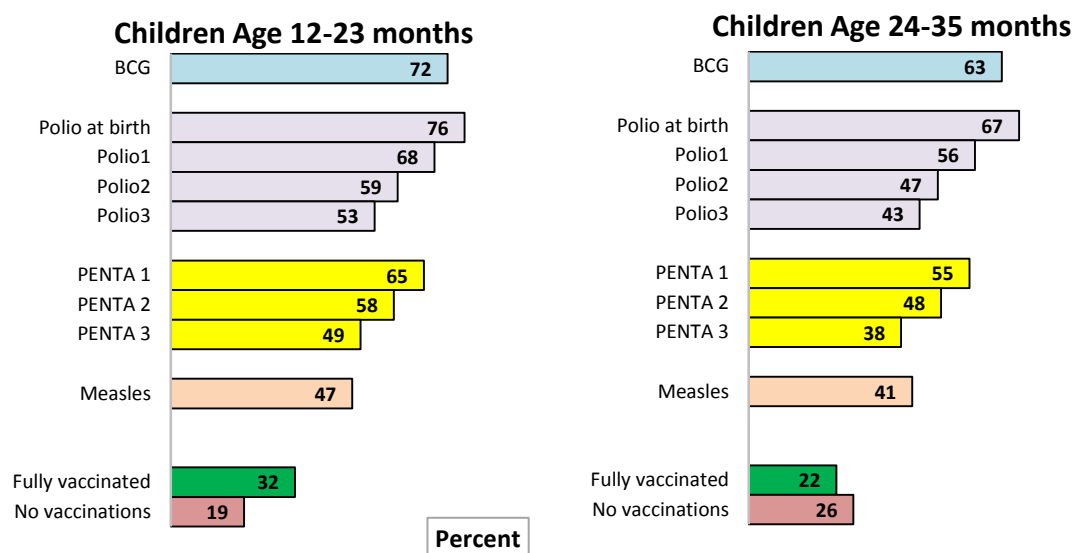
Table CH.2 presents vaccination coverage estimates among children age 12-23 months by background characteristics. The figures indicate children receiving the vaccinations at any time up to the date of the survey, and are based on information from both the vaccination cards and mothers'/caretakers' report. Vaccination cards have been seen by the interviewer for 49 percent of children age 12-23 months.

About 40 percent of the children aged 12-23 months are fully vaccinated, the rates being higher in urban (45 percent) compared to rural (39 percent). At division level, children age 12-23 months that are fully vaccinated are lowest (7 percent) in Bannu division and highest (58 percent) in Mardan division. Vaccination is positively associated with mother's education as it is highest (57 percent) for the children whose mothers have higher education and lowest (31 percent) for those whose mothers have only pre-school or no education.Full vaccination gradually decreased from 51 percent among children in richest quintile households to 26 percent among children in poorest quintile households.

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[27] *It is important to note that data recorded on the vaccination cards was not universally endorsed by the mothers/ caretakers. In some places the field teams received comments from the mothers that sometimes cards were filled without vaccination to show progress. Since this was not in the scope of the survey, it is therefore suggested that health department may initiate a study through a neutral agency to find out the extent of such happenings. It is important to achieve 100 percent coverage of immunization in real terms.*

Table CH. 2: Vaccinations by background characteristics

Percentage of children age 12-23 months currently vaccinated against vaccine preventable childhood diseases, Khyber Pakhtunkhwa, 2016-17

| | | | Percentage of children age 12-23 months who received | | | | | | | | | | |
| | | | POLIO AT | | | PENTA | | | | | | | |
	BCG	Birth	1	2	3	1	2	3	Measles 1 (MCV1)	Full [a]	None	Percentage with vaccination card seen	Number of children age 12-23 months
KP	72.3	76.7	69.5	60.4	55.4	66.8	59.3	51.7	54.5	39.7	18.9	48.7	4,049
Area of residence													
Urban	85.3	85.5	71.6	61.3	55.6	77.8	69.9	61.1	67.5	44.5	11.6	54.4	633
Rural	69.9	75.1	69.1	60.2	55.4	64.7	57.4	49.9	52.1	38.8	20.2	47.7	3,416
Sex													
Male	73.0	77.0	68.4	59.0	54.3	66.9	59.6	51.2	54.6	39.6	19.1	48.4	2,114
Female	71.6	76.4	70.7	61.9	56.7	66.6	59.0	52.3	54.4	39.9	18.6	49.1	1,936
Mother's education													
None/pre-school	64.5	71.0	64.7	55.2	49.9	58.2	50.0	42.2	44.3	31.3	23.4	43.6	2,469
Primary	84.0	86.5	78.5	68.9	64.2	77.3	70.4	63.6	63.2	50.8	9.7	58.3	548
Middle	83.0	83.4	79.6	72.6	66.4	79.6	75.4	67.8	71.8	53.5	12.8	58.0	283
Secondary	85.9	86.4	74.2	65.9	62.2	83.0	77.1	69.0	74.3	51.1	11.7	56.8	372
Higher	84.8	85.3	75.9	67.3	64.0	81.4	74.1	66.7	75.2	57.3	13.9	53.6	377
Wealth index quintile													
Poorest	55.4	67.2	62.6	54.9	49.5	49.0	41.2	36.0	37.0	25.7	24.8	36.3	796
Second	67.0	72.5	68.6	59.6	52.3	61.5	54.5	45.5	46.8	34.3	21.3	45.4	817
Middle	71.5	74.4	68.0	58.6	54.3	65.3	58.0	49.6	51.3	39.0	21.1	52.0	811
Fourth	81.7	83.4	73.8	63.4	59.7	76.7	68.5	59.1	65.3	48.2	15.0	53.2	848
Richest	85.9	86.0	74.6	65.3	61.3	81.2	74.3	68.3	71.9	51.4	12.1	56.6	777
Division													
Bannu	31.1	44.1	47.4	38.6	35.6	30.1	17.8	9.6	18.0	6.6	46.6	20.2	254
D.I. Khan	43.8	50.4	28.0	21.7	16.1	36.7	29.2	18.3	25.4	10.1	47.8	18.2	335
Hazara	69.0	76.7	80.2	75.5	68.1	64.9	59.3	54.4	55.9	43.8	13.6	42.2	737
Kohat	58.7	73.5	63.9	47.0	41.3	49.9	44.6	36.9	44.8	26.7	21.7	34.8	299
Malakand	77.6	81.4	76.0	67.1	61.3	71.8	64.8	58.6	58.7	46.0	15.7	58.7	948
Mardan	92.0	91.2	83.9	72.4	69.0	88.3	81.4	71.8	72.3	57.8	7.1	64.2	523
Peshawar	84.0	83.0	69.1	58.9	55.9	76.2	67.2	58.4	61.5	43.6	14.2	58.0	953

Includes BCG,POLIO3,PENTA3 and Measles-1 (MCV1) as per the vaccination schedule in KP

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 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 1 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 new-born) 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 3 years;
• Received at least 3 doses, the last within the previous 5 years;
• Received at least 4 doses, the last within the previous 10 years;
• Received 5 or more doses anytime during her life.[28]

To assess the status of tetanus vaccination coverage, women who had 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 card on which dates of tetanus toxoid are recorded and referred to information from the cards when available.

Table CH. 3: Neonatal tetanus protection

Percentage of women age 15-49 years with a live birth in the last 2 years protected against neonatal tetanus, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who received at least 2 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 2 years
		2 doses, the last within prior 3 years	3 doses, the last within prior 5 years	4 doses, the last within prior 10 years	5 or more doses during lifetime		
KP	51.8	2.6	0.7	0.5	0.1	55.7	8,365
Area of residence							
Urban	62.0	3.8	1.1	1.0	0.1	68.0	1,334
Rural	49.9	2.4	0.6	0.4	0.1	53.4	7,032
Mother's education							
None/pre-school	42.2	2.2	0.5	0.5	0.1	45.5	5,065
Primary	59.8	3.8	0.4	0.4	-	64.5	1,105
Middle	66.1	2.8	0.8	-	0.3	70.0	613
Secondary	68.1	2.8	1.3	0.6	0.4	73.2	788
Higher	75.2	3.2	1.4	0.2	0.1	80.1	794
Wealth index quintile							
Poorest	30.6	1.7	0.3	0.2	-	32.8	1,682
Second	44.3	1.9	0.3	0.5	0.1	47.2	1,655

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[28] *Deming, M.S. et al. 2002. Tetanus toxoid coverage as an indicator of serological protection against neonatal tetanus. Bulletin of the World Health Organization 80(9):696-703*

Table CH. 3: Neonatal tetanus protection

Percentage of women age 15-49 years with a live birth in the last 2 years protected against neonatal tetanus, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who received at least 2 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 2 years
		2 doses, the last within prior 3 years	3 doses, the last within prior 5 years	4 doses, the last within prior 10 years	5 or more doses during lifetime		
KP	51.8	2.6	0.7	0.5	0.1	55.7	8,365
Middle	51.1	2.9	1.1	.4	0.0	55.6	1,632
Fourth	62.9	2.9	0.6	0.6	0.1	67.1	1,763
Richest	70.1	3.6	1.1	0.6	0.3	75.7	1,633
Division							
Bannu	31.2	2.2	1.0	0.2	-	34.6	602
D.I. Khan	39.7	2.4	0.7	0.2	0.3	43.2	684
Hazara	50.4	2.6	0.2	0.1	-	53.3	1,507
Kohat	45.4	2.9	0.1	0.3	-	48.7	592
Malakand	53.5	1.7	0.5	0.3	0.1	56.0	1,996
Mardan	65.7	2.1	0.3	0.7	-	68.8	1,015
Peshawar	56.6	3.9	1.5	0.9	0.3	63.3	1,968

[1] **MICS indicator 3.9 - Neonatal tetanus protection**

Table CH.3 shows the protection status from tetanus of women who have had a live birth within the last 2 years. Fifty six percent of the women are reported to be protected against tetanus, the proportion being higher in urban (68 percent) compared to rural (53 percent). At the divisional level, Bannu had the lowest proportion of women protected against tetanus (35 percent) compared to Mardan (69 percent) highest. Women with higher education are more likely to be protected against tetanus (80 percent) compared to others which gradually decreased to nearly half (46 percent) among women with only pre-school or no education. Similarly, protection against tetanus shows a positively association with household wealth.

Care of Illness

A key strategy for accelerating progress toward MDG 4 is to tackle the diseases that are the leading killers of children 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 deaths from pneumonia and diarrhoea by reducing mortality from pneumonia to 3 deaths per 1000 live births and mortality from diarrhoea to 1 death per 1000 live births by 2025. Malaria is also a major killer of children under 5, killing about 900 children every day, especially in sub Saharan Africa.

Table CH.4 presents the percentage of children under 5 years of age who were reported to have had an episode of diarrhoea, symptoms of acute respiratory infection (ARI), or fever during the 2 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 or fever, 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 beside 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 a 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, fever 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 is reported, these data should not be used to assess the epidemiological characteristics of these diseases but rather to obtain denominators for the indicators related to use of health services and treatment.

Overall, 21 percent of under five children were reported to have had diarrhoea in the two weeks preceding the survey, 20 percent of children had symptoms of ARI, and 35 percent had an episode of fever (Table CH.4). Children age 12-23 months had the highest prevalence of diarrhoea (29 percent) and diarrhoea was reported to be lowest (13 percent) for children age 48-59 months. Similarly, the prevalence of an episode of fever was 37 percent for children age 0-11 month compared to 29 percent of children age 48-59 months. There is an inverse relation among mother's education with regard to symptoms of diarrhoea reported for their children under five. An episode of diarrhoea was reported higher (22 percent) among the children of mothers with no education/preschool compared to the children of the mothers with higher education (16 percent). Children age 12-23 months had the highest prevalence of diarrhoea (29 percent) and diarrhoea was reported to be lowest (13 percent) for children age 48-59 months.

Table CH. 4: Reported disease episodes

Percentage of children age 0-59 months for whom the mother/caretaker reported an episode of diarrhoea, symptoms of acute respiratory infection (ARI), and/or fever in the last two weeks, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who in the last two weeks had:			Number of children age 0-59 months
	An episode of diarrhoea	Symptoms of ARI	An episode of fever	
KP	21.4	20.2	34.7	20,926
Area of residence				
Urban	21.4	21.0	35.9	3,168
Rural	21.3	20.1	34.5	17,758
Sex				
Male	22.1	21.1	34.8	10,716
Female	20.6	19.3	34.6	10,210
Age				
0-11	23.5	20.8	36.9	4,431
12-23	28.7	23.5	39.1	4,049
24-35	23.6	18.8	35.4	3,926
36-47	18.0	20.1	33.4	4,618
48-59	13.0	17.6	28.5	3,902
Mother's education				
None/pre-school	22.3	20.0	34.2	13,375
Primary	22.5	22.7	37.5	2,563

Table CH. 4: Reported disease episodes

Percentage of children age 0-59 months for whom the mother/caretaker reported an episode of diarrhoea, symptoms of acute respiratory infection (ARI), and/or fever in the last two weeks, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who in the last two weeks had:			Number of children age 0-59 months
	An episode of diarrhoea	Symptoms of ARI	An episode of fever	
KP	21.4	20.2	34.7	20,926
Middle	21.7	19.5	37.7	1,384
Secondary	18.2	21.4	35.4	1,791
Higher	15.8	17.3	31.5	1,812
Wealth index quintile				
Poorest	21.6	18.4	32.6	4,389
Second	23.5	21.5	37.1	4,173
Middle	22.0	20.2	35.1	4,164
Fourth	21.0	21.3	35.9	4,201
Richest	18.5	19.7	32.8	4,000
Division				
Bannu	28.4	17.2	33.6	1,505
D.I. Khan	19.2	10.8	28.0	1,827
Hazara	21.4	15.9	38.7	3,921
Kohat	20.9	25.4	38.7	1,492
Malakand	18.5	22.5	32.3	4,846
Mardan	23.7	25.2	32.0	2,486
Peshawar	21.8	21.7	36.9	4,849

Diarrhoea

Diarrhoea is a leading cause of death among children under five worldwide. Most diarrhoea-related deaths in children are due to dehydration from loss of large quantities of water and electrolytes from the body in liquid stools. Management of diarrhoea – either through oral rehydration salts (ORS) or a recommended home fluid (RHF) – can prevent many of these deaths. 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 the MICS, mothers or caretakers were asked whether their child under age five years 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 highest period-prevalence (29 percent) is seen among children age 12-23 months which grossly corresponds to the weaning period. 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, a health facility or provider was seen in 51 percent of cases for advice or treatment, predominantly in the private sector (42 percent). Care seeking during diarrhoea is highest in D.I. Khan (60 percent) and lowest in Malakand (42 percent) that shows some positive relation with education of mother.

Table CH. 5: Care-seeking during diarrhea

Percentage of children age 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Khyber Pakhtunkhwa, 2016-17

			Percentage of children with diarrhoea for whom:						Number of children age 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						
	An episode of diarrhea	Number of children age 0-59 months	Public	Private	Community health provider[a]	Other source	A health facility or provider[1],[b]		
KP	21.4	20,926	15.1	41.8	0.2	9.6	51.1	34.3	4,469
Area of residence									
Urban	21.4	3,168	18.5	49.1	0.2	5.3	60.2	28.1	679
Rural	21.3	17,758	14.5	40.5	0.3	10.4	49.5	35.4	3,790
Sex									
Male	22.1	10,716	16.0	42.9	0.1	10.0	53.0	31.9	2,363
Female	20.6	10,210	14.1	40.6	0.4	9.2	49.1	37.0	2,105
Age									
0-11	23.5	4,431	13.8	40.9	0.2	7.7	51.9	38.1	1,040
12-23	28.7	4,049	14.9	47.2	0.3	11.2	54.6	27.8	1,164
24-35	23.6	3,925	14.6	38.4	0.4	10.1	47.5	37.2	926
36-47	18.0	4,618	18.3	40.5	0.1	9.2	52.4	33.7	830
48-59	13.0	3,902	13.6	39.6	0.2	9.9	46.2	37.2	509
Mother's education									
None/pre-school	22.3	13,375	14.5	42.2	0.2	9.5	50.3	34.6	2,982
Primary	22.5	2,563	16.2	37.0	0.2	13.5	48.3	34.5	576
Middle	21.7	1,384	13.7	35.1	0.2	9.6	45.2	42.8	300
Secondary	18.2	1,791	18.2	47.9	0.4	8.0	60.0	26.2	325
Higher	15.8	1,811	16.7	47.2	1.0	4.9	62.0	31.6	286
Wealth index quintile									
Poorest	21.6	4,389	14.5	31.9	0.2	11.1	42.3	43.3	947
Second	23.5	4,173	15.6	44.4	0.3	9.4	53.4	31.0	981
Middle	22.0	4164	14.7	42.4	0.5	10.1	49.7	33.5	916
Fourth	21.0	4,201	17.6	41.3	-	10.2	53.8	32.3	883
Richest	18.5	4,000	12.5	50.8	0.1	6.6	58.1	30.7	741
Division									
Bannu	28.4	1,505	14.4	41.6	0.5	15.4	54.7	29.2	428
D.I. Khan	19.2	1,827	14.3	51.6	0.9	12.9	59.5	23.0	351
Hazara	21.4	3,921	16.6	33.1	0.5	9.5	45.2	41.5	838
Kohat	20.9	1,492	12.8	55.5	0.0	8.1	57.8	23.9	312
Malakand	18.5	4,846	13.3	36.8	0.1	11.2	42.3	39.9	896
Mardan	23.7	2,486	10.8	44.5	-	10.3	50.7	35.7	588
Peshawar	21.8	4,849	19.0	44.2	-	5.0	57.4	32.0	1,056

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

[a] Community health providers includes 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 private pharmacy

Table CH.6 provides statistics on drinking and feeding practices during diarrhoea. Six percent of under five children with diarrhoea were given more than usual drinks, while 89 percent the same or less to drink. Overall, 80 percent of children were given somewhat less, same or more than usual to eat (continued feeding), while 8 percent of children were given much less or eat nothing. The scenario was more-or less similar across areas of residence, sex of children or other background characteristics.

Table CH. 6: Feeding practices during diarrhea

Percent distribution of children age 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea, Khyber Pakhtunkhwa, 2016-17

	Had diarrhoea in last two weeks	Number of children age 0-59 months	Drinking practices during diarrhoea:							Eating practices during diarrhoea:							Number of children aged 0-59 months with diarrhoea
			Child was given to drink: Much less	Child was given to drink: Somewhat less	Child was given to drink: About the same	Child was given to drink: More	Child was given to drink: Nothing	Missing/ DK	Total	Child was given to eat: Much less	Child was given to eat: Somewhat less	Child was given to eat: About the same	Child was given to eat: More	Child was given to eat: Nothing	DK/Missing	Total	
KP	21.4	20,926	9.3	33.6	45.6	5.6	4.5	1.4	100.0	10.4	36.6	41.3	2.5	8.2	0.9	100.0	4,469
Area of residence																	
Urban	21.4	3,168	11.9	34.3	43.6	4.9	3.7	1.6	100.0	12.4	34.7	41.6	2.5	6.9	1.8	100.0	679
Rural	21.3	17,758	8.9	33.4	46.0	5.7	4.6	1.4	100.0	10.0	37.0	41.3	2.5	8.5	0.8	100.0	3,790
Sex									100.0							100.0	
Male	22.1	10,716	9.4	33.3	46.2	5.3	4.6	1.3	100.0	10.9	36.3	41.2	2.6	8.2	0.9	100.0	2,363
Female	20.6	10,210	9.3	33.8	45.0	6.0	4.3	1.5	100.0	9.8	37.1	41.5	2.4	8.2	0.9	100.0	2,105
Age									100.0							100.0	
0-11	23.5	4,431	9.3	30.4	49.5	4.0	5.9	0.9	100.0	8.7	31.3	36.2	1.5	20.8	1.5	100.0	1,040
12-23	28.7	4,049	11.4	36.5	44.0	5.2	1.6	1.3	100.0	12.2	41.3	39.2	2.1	4.4	0.8	100.0	1,164
24-35	23.6	3,926	9.3	34.2	42.0	7.3	4.9	2.3	100.0	11.5	37.0	43.9	2.6	4.3	0.8	100.0	926
36-47	18.0	4,618	7.1	33.0	46.5	6.4	5.9	1.2	100.0	8.3	38.5	45.4	2.9	4.2	0.8	100.0	830
48-59	13.0	3,902	8.5	33.0	46.4	5.6	5.0	1.6	100.0	11.0	33.3	45.4	4.7	5.2	0.6	100.0	509
Mother's education																	
None/pre-school	22.3	13,375	8.7	34.2	45.7	5.4	4.7	1.4	100.0	10.1	37.8	40.7	2.4	8.0	1.0	100.0	2,982
Primary	22.5	2,563	11.8	28.9	44.5	5.8	6.3	2.6	100.0	12.4	31.6	44.0	1.6	9.1	1.3	100.0	576
Middle	21.7	1,384	10.9	38.2	39.6	8.4	1.7	1.2	100.0	9.1	35.4	43.4	3.6	8.1	0.3	100.0	300
Secondary	18.2	1,791	10.1	32.8	49.0	4.5	3.6	-	100.0	11.8	34.5	43.2	1.8	8.4	0.2	100.0	325
Higher	15.8	1,812	8.9	31.9	49.4	6.0	2.7	1.1	100.0	9.0	38.8	38.3	4.6	8.5	0.8	100.0	286
Wealth index quintile																	
Poorest	21.6	4,389	9.3	32.7	45.2	7.2	4.6	1.0	100.0	11.1	36.4	41.1	2.5	8.2	0.7	100.0	947
Second	23.5	4,173	9.8	33.0	46.7	5.7	3.8	1.0	100.0	10.5	38.0	42.0	1.5	7.5	0.4	100.0	981
Middle	22.0	4164	8.4	34.7	46.3	3.3	5.1	2.2	100.0	9.8	36.4	40.4	2.3	9.4	1.7	100.0	916
Fourth	21.0	4,201	8.0	35.4	45.6	4.9	4.5	1.6	100.0	10.3	39.5	39.0	3.0	8.2	0.1	100.0	883
Richest	18.5	4,000	11.7	31.8	43.8	7.1	4.4	1.2	100.0	10.2	32.0	44.6	3.5	7.8	1.9	100.0	741
Division																	
Bannu	28.4	1,505	9.9	29.6	57.2	1.2	0.8	1.2	100.0	9.1	45.7	36.6	0.2	7.1	1.3	100.0	428

Table CH. 6: Feeding practices during diarrhea

Percent distribution of children age 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea, Khyber Pakhtunkhwa, 2016-17

	Had diarrhoea in last two weeks	Number of children age 0-59 months	Drinking practices during diarrhoea:							Eating practices during diarrhoea:							Number of children aged 0-59 months with diarrhoea
			Child was given to drink: Much less	Child was given to drink: Somewhat less	Child was given to drink: About the same	Child was given to drink: More	Child was given to drink: Nothing	Missing/DK	Total	Child was given to eat: Much less	Child was given to eat: Somewhat less	Child was given to eat: About the same	Child was given to eat: More	Child was given to eat: Nothing	DK/Missing	Total	
KP	21.4	20,926	9.3	33.6	45.6	5.6	4.5	1.4	100.0	10.4	36.6	41.3	2.5	8.2	0.9	100.0	4,469
D.I. Khan	19.2	1,827	5.1	41.8	47.0	4.6	0.7	0.7	100.0	8.0	45.7	35.8	2.7	7.8	-	100.0	351
Hazara	21.4	3,921	7.9	39.6	38.6	10.9	2.5	0.5	100.0	10.8	41.7	36.6	3.2	7.3	0.3	100.0	838
Kohat	20.9	1,492	7.9	39.0	45.0	5.4	2.8	0.0	100.0	11.3	36.7	44.2	4.5	3.1	0.2	100.0	312
Malakand	18.5	4,846	6.9	29.5	47.7	6.3	7.5	2.1	100.0	6.7	30.6	49.8	1.8	8.8	2.3	100.0	896
Mardan	23.7	2,486	21.6	30.1	37.9	4.5	2.2	3.5	100.0	20.8	28.8	36.5	2.8	10.8	0.3	100.0	588
Peshawar	21.8	4,849	7.3	31.3	48.7	3.5	8.0	1.1	100.0	8.5	35.4	43.5	2.5	9.1	0.9	100.0	1,056

Table CH.7 shows the percentage of children receiving ORS, various types of recommended homemade fluids and zinc during the episode of diarrhoea. Since children may have been given more than one type of liquid, the percentages do not necessarily add to 100. About 32 percent of children with diarrhoea received fluids from any ORS source (ORS packets and pre-pack ORS fluids) and 15 percent of the children were given recommended homemade fluids (boiled water with sugar and salt including other fluids). About 2 out of 5 children (38 percent) with diarrhoea received one or more of the recommended home treatment which included ORS or any recommended homemade fluid. Overall, 16 percent of children with diarrhoea received zinc in one form or another; 7 percent received ORS and zinc.

The percentage of children with diarrhoea who received ORS fluid from Pre-packaged fluid or any ORS is slightly higher in urban (17 percent and 38 percent respectively) than the rural (12 percent and 31 percent respectively) area.

Some positive association is found between receiving any ORS with age of the children. The percentage of children who received any ORS increased from 24 percent among the children aged 0-11 months to 34 percent among the children aged 48-49 month.

Across divisions, treatment with ORS or any recommended homemade fluid, ranged from 31 percent in D.I.Khan division to 51 percent in Hazara division. Children from mothers with higher education are more likely to receive ORS and zinc (14 percent) compared to children from mothers with only pre-school or no education (6 percent). Figure CH.2 shows the variation in prevalence of children under-5 with diarrhoea who received ORS or recommended homemade liquids among different division and with reference to education of mother/caretaker

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

Percentage of children age 0-59 months with diarrhoea in the last two weeks, and treatment with oral rehydration salts (ORS), recommended homemade fluids, and zinc, Khyber Pakhtunkhwa, 2016-17

	Percentage of children with diarrhoea who received:											Number of children aged 0-59 months with diarrhoea
	Oral rehydration salts (ORS)			Recommended homemade fluids			ORS or any recommended homemade fluid	Zinc				
	Fluid from packet	Pre-packaged fluid	Any ORS	Homemade fluid (Boiled water, sugar & salt)	Others	Any recommended homemade fluid		Tablet	Syrup	Any zinc	ORS and zinc[1]	
KP	25.7	12.4	32.1	10.2	7.8	15.4	38.0	2.1	15.9	16.4	6.9	4,469
Area of residence												
Urban	30.8	16.9	37.5	13.3	5.7	17.0	43.1	3.4	19.0	20.2	10.3	679
Rural	24.8	11.5	31.1	9.7	8.2	15.2	37.1	1.8	15.3	15.7	6.3	3,790
Sex												
Male	25.9	12.1	31.9	9.6	6.9	14.5	37.2	2.3	15.8	16.3	6.8	2,363
Female	25.4	12.6	32.3	10.9	8.8	16.5	39.0	1.8	16.0	16.5	7.0	2,105
Age												
0-11	18.3	11.2	24.0	9.6	6.9	13.7	30.8	0.7	12.6	12.7	4.6	1,040
12-23	26.8	13.9	34.8	8.8	7.6	14.5	40.3	1.9	16.6	17.2	8.4	1,164
24-35	26.8	11.8	32.3	9.4	6.8	13.9	38.0	2.9	15.8	16.4	6.4	926
36-47	30.1	12.5	37.0	11.1	8.3	17.3	42.0	2.3	16.9	17.5	7.1	830
48-59	28.8	11.9	33.8	14.9	11.0	20.8	40.9	3.4	19.5	20.4	8.8	509
Mother's education												
None/pre-school	24.0	11.5	29.8	8.9	8.1	14.5	35.0	1.8	14.7	15.1	5.8	2,982
Primary	27.4	11.8	32.6	12.7	6.8	16.7	40.6	2.1	16.4	16.4	6.6	576
Middle	21.7	18.3	35.2	10.0	5.0	14.7	41.4	1.7	17.2	17.8	5.6	300
Secondary	31.0	11.9	38.7	12.6	4.8	16.8	46.3	4.5	19.6	21.9	12.9	325
Higher	38.3	17.3	43.3	16.4	12.6	21.4	51.2	2.6	21.8	22.3	13.8	286
Wealth index quintile												
Poorest	23.4	10.2	28.3	10.3	9.7	16.0	35.2	0.7	11.8	12.1	4.1	947
Second	25.7	10.5	31.0	10.8	7.3	16.5	37.6	2.2	11.4	11.8	5.2	981
Middle	23.3	10.7	28.3	8.6	7.8	14.1	33.6	2.1	16.9	17.2	7.2	916
Fourth	28.1	13.4	36.6	9.4	4.7	12.8	41.3	2.7	18.6	19.7	8.1	883
Richest	28.7	18.5	37.6	12.3	9.6	18.2	43.7	2.7	22.5	23.2	10.8	741
Division												
Bannu	25.3	10.2	30.2	4.6	3.7	8.3	33.4	0.8	10.3	10.5	3.9	428

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

Percentage of children age 0-59 months with diarrhoea in the last two weeks, and treatment with oral rehydration salts (ORS), recommended homemade fluids, and zinc, Khyber Pakhtunkhwa, 2016-17

	Percentage of children with diarrhoea who received:											Number of children aged 0-59 months with diarrhoea
	Oral rehydration salts (ORS)			Recommended homemade fluids			ORS or any recommended homemade fluid	Zinc				
	Fluid from packet	Pre-packaged fluid	Any ORS	Homemade fluid (Boiled water, sugar & salt)	Others	Any recommended homemade fluid		Tablet	Syrup	Any zinc	ORS and zinc[1]	
KP	25.7	12.4	32.1	10.2	7.8	15.4	38.0	2.1	15.9	16.4	6.9	4,469
D.I. Khan	19.0	3.1	20.3	5.2	21.7	25.7	31.2	2.4	13.6	13.6	6.2	351
Hazara	34.1	9.2	37.8	20.8	8.4	24.6	51.0	1.8	9.4	9.7	5.6	838
Kohat	24.6	16.1	31.6	8.7	7.4	12.4	35.9	2.0	16.0	16.8	7.7	312
Malakand	25.4	16.7	34.9	9.5	7.7	15.8	38.3	1.8	22.1	22.7	8.4	896
Mardan	20.7	14.4	32.2	5.1	3.7	7.9	35.1	3.8	19.8	20.7	10.0	588
Peshawar	24.8	12.9	29.9	9.8	6.8	12.4	33.9	1.9	16.6	17.3	6.1	1,056

[1] **MICS indicator 3.11 - Diarrhoea treatment with oral rehydration salts (ORS) and zinc**

Figure CH. 2:   **Children under-5 with diarrhoea who received ORS or recommended homemade liquids, MICS-KP, 2016-17**
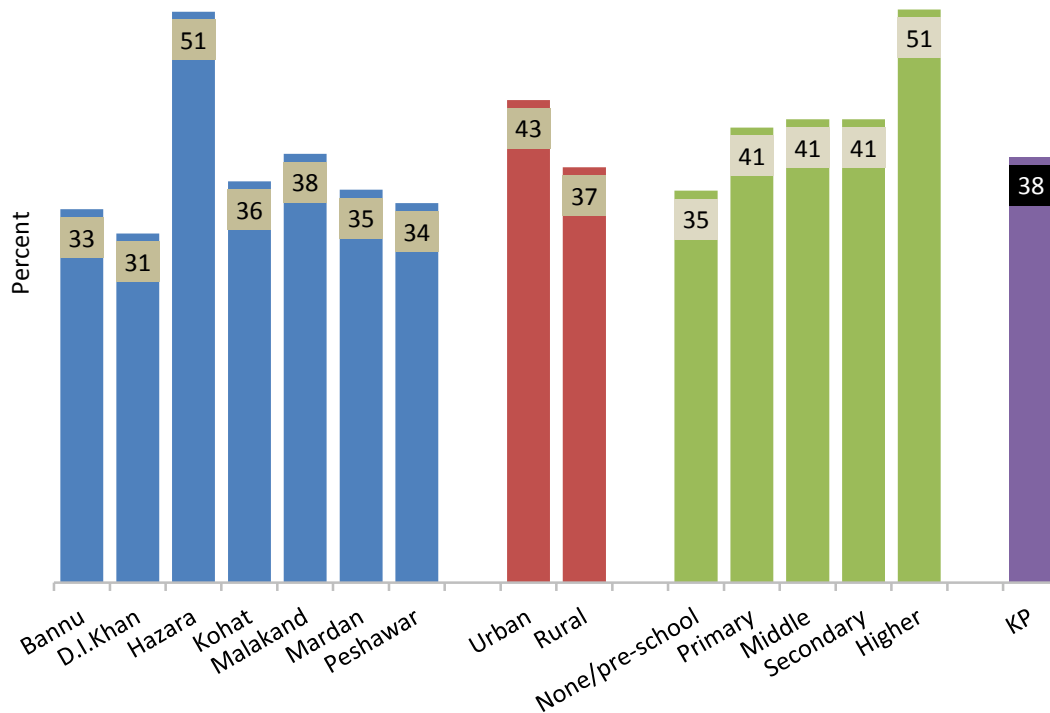
Table CH.8 provides the proportion of children age 0-59 months with diarrhoea in the last two weeks who received oral rehydration therapy with continued feeding, and the percentage of children with diarrhoea who received other treatments. Overall, 35 percent of children with diarrhoea received ORS or increased fluids, 40 percent received ORT (ORS or recommended homemade fluids or increased fluids).

There are some variations in the home management of diarrhoea by background characteristics. The figures for ORT and continued feeding ranges from 26 percent in Mardan division to 44 percent in Hazara division. Similarly, the percentage is slightly higher in urban areas (37 percent) compared to rural areas (32 percent). Home management of diarrhoea is also more likely among children whose mothers have higher education and children living in the households in the richest quintile.

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

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

| | | | | | Children with diarrhoea who were given: | | | | | | | | | | | |
| | | | | | | | | | Other treatment: | | | | | | | |
	Zinc	ORS or increased fluids	ORT (ORS or recommended homemade fluids or increased fluids)	ORT with continued feeding[1]	Pill or syrup: Antibiotic	Pill or syrup: Antimotility	Pill or syrup: Other	Pill or syrup: Unknown	Injection: Antibiotic	Injection: Non-antibiotic	Injection: Unknown	Intravenous	Home remedy, herbal medicine	Other	Not given any treatment or drug	Number of children age 0-59 months with diarrhoea in the last two weeks
KP	16.4	34.8	40.0	32.9	6.1	27.1	0.9	5.7	3.1	0.1	3.0	0.9	6.9	17.6	16.0	4,469
Area of residence																
Urban	20.2	39.6	44.9	37.2	7.5	32.7	1.7	5.2	3.3	0.3	2.4	1.4	6.2	18.3	11.4	679
Rural	15.7	33.9	39.1	32.1	5.8	26.1	0.7	5.8	3.1	0.1	3.1	0.8	7.0	17.5	16.8	3,790
Sex																
Male	16.3	34.3	38.9	31.3	5.9	27.5	1.2	5.8	3.7	0.1	3.4	0.9	6.1	17.8	16.1	2,363
Female	16.5	35.3	41.3	34.6	6.3	26.8	0.5	5.6	2.4	0.2	2.5	1.0	7.8	17.4	15.8	2,105
Age																
0-11	12.7	26.5	32.7	25.0	7.9	26.1	0.5	4.6	2.9	0.1	3.2	1.2	6.6	19.0	21.3	1,040
12-23	17.2	37.8	42.6	35.5	5.8	30.3	1.1	6.5	3.8	0.1	3.3	0.5	5.4	19.4	13.0	1,164
24-35	16.4	35.2	40.2	33.3	5.4	27.4	1.1	4.8	1.8	0.1	2.7	1.3	7.7	16.8	16.7	926
36-47	17.5	39.5	43.6	37.5	5.8	25.7	0.7	5.3	3.8	0.2	2.3	0.8	8.0	15.4	13.3	830
48-59	20.4	36.4	42.7	34.6	4.8	24.0	1.1	8.2	3.0	0.2	3.3	0.8	7.6	16.0	14.7	509
Mother's education																
None/pre-school	15.1	32.3	37.0	30.3	5.3	26.4	0.4	6.4	3.2	0.2	3.3	1.0	7.6	17.7	17.0	2,982
Primary	16.4	35.4	43.1	34.2	7.0	27.3	1.4	5.8	3.9	-	1.5	1.0	5.8	17.4	14.8	576
Middle	17.8	39.6	44.2	36.3	7.7	29.1	2.8	3.3	0.4	-	1.3	0.2	3.9	18.5	16.1	300
Secondary	21.9	40.6	47.4	38.5	6.8	34.1	2.1	2.9	3.4	-	4.7	1.4	5.5	16.8	11.1	325
Higher	22.3	47.2	52.4	47.3	9.8	24.2	1.4	3.6	2.5	-	1.8	0.2	6.6	16.9	13.0	286
Wealth index quintile																
Poorest	12.1	31.2	37.6	31.1	3.3	22.1	0.2	7.2	2.2	0.2	4.5	1.1	10.6	16.7	20.9	947
Second	11.8	34.3	39.8	32.4	7.1	28.0	0.7	5.5	4.2	0.3	2.7	0.8	6.2	16.5	17.1	981
Middle	17.2	30.3	35.2	27.0	5.1	25.9	.6	6.0	2.9	0.1	2.3	.5	4.6	19.8	17.4	916
Fourth	19.7	38.4	42.6	35.1	6.6	31.9	2.0	4.6	1.9	0.1	2.3	1.1	6.5	19.4	10.9	883

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

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

| | | | | | Children with diarrhoea who were given: | | | | | | | | | | | |
| | | | | | | | | | | | | | Other treatment: | | | |
	Zinc	ORS or increased fluids	ORT (ORS or recommended homemade fluids or increased fluids)	ORT with continued feeding[1]	Pill or syrup: Antibiotic	Pill or syrup: Antimotility	Pill or syrup: Other	Pill or syrup: Unknown	Injection: Antibiotic	Injection: Non-antibiotic	Injection: Unknown	Intravenous	Home remedy, herbal medicine	Other	Not given any treatment or drug	Number of children age 0-59 months with diarrhoea in the last two weeks
KP	16.4	34.8	40.0	32.9	6.1	27.1	0.9	5.7	3.1	0.1	3.0	0.9	6.9	17.6	16.0	4,469
Richest	23.2	41.2	46.3	40.4	8.8	28.3	1.0	4.9	4.4	-	3.1	1.1	6.3	15.3	12.4	741
Division																
Bannu	10.5	30.6	33.8	27.3	0.5	35.9	0.2	4.7	1.1	-	3.0	0.4	3.8	28.9	12.6	428
D.I. Khan	13.6	23.0	33.3	28.6	4.9	23.8	0.2	14.3	4.1	-	1.1	-	9.5	26.2	13.7	351
Hazara	9.7	42.3	53.7	44.0	4.3	22.7	0.6	6.7	1.5	0.4	1.6	1.0	13.8	12.7	16.1	838
Kohat	16.8	34.3	37.9	31.0	2.3	32.9	0.7	1.2	1.2	-	6.9	1.4	1.3	24.6	17.0	312
Malakand	22.7	36.3	39.7	34.0	5.0	28.6	2.6	4.8	3.9	-	3.2	0.7	4.4	11.1	16.7	896
Mardan	20.7	36.0	38.3	26.2	9.8	21.8	0.5	5.2	5.2	0.2	4.0	2.3	3.4	24.6	18.3	588
Peshawar	17.3	32.5	35.8	31.0	10.2	28.2	0.4	4.9	3.5	0.2	2.8	0.6	7.5	13.7	15.7	1,056

[1] **MICS indicator 3.12 - Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding**

Table CH.8 also shows the percentage of children having diarrhoea in the two weeks preceding the survey who were given various forms of treatment, leaving 16 percent of them without any treatment or drug. The proportion of children without any treatment or drug is higher among those living in the rural households (17 percent) than in urban areas (11 percent). Figure CH.3 shows the disparity among children with diarrhoea in taking ORT and continued feeding with respect to divisions, levels of mother's education and area of residence

Figure CH. 3:   Children under-5 with diarrhoea receiving oral rehydration therapy (ORT) and continued feeding, KP-MICS,2016-17

Table CH. 9: Source of ORS and zinc

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who were given as treatment for diarrhoea: ORS	Zinc	Number of children age 0-59 months with diarrhoea in the last two weeks	Percentage of children for whom the source of ORS was: Health facilities or providers						Number of children age 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: Health facilities or providers					Number of children age 0-59 months who were given zinc as treatment for diarrhoea in the last two weeks
				Public	Private	Community health providera	Other source	DK/ Missing	A health facility or provider b		Public	Private	Community health providera	Other source	A health facility or provider b	
KP	32.1	16.4	4,469	17.5	59.7	1.2	22.1	0.6	77.3	1,433	10.9	56.3	1.0	32.8	67.2	733
Area of residence																
Urban	37.5	20.2	679	17.9	66.2	2.4	15.6	0.3	84.1	254	10.0	63.3	1.4	26.7	73.3	137
Rural	31.1	15.7	3,790	17.5	58.3	1.0	23.5	0.7	75.8	1,179	11.1	54.6	0.9	34.3	65.7	596
Sex																
Male	31.9	16.3	2,363	17.7	60.1	0.6	21.2	1.0	77.8	754	11.7	54.1	0.6	34.2	65.8	386
Female	32.3	16.5	2,105	17.3	59.3	1.9	23.1	0.3	76.6	679	10.0	58.6	1.5	31.4	68.6	347
Age																
0-11	24.0	12.7	1,040	12.4	57.8	0.2	28.1	1.7	70.2	250	11.3	50.6	1.0	38.1	61.9	132
12-23	34.8	17.2	1,164	19.6	59.1	1.1	20.5	0.8	78.7	405	14.6	63.0	1.4	22.4	77.6	200
24-35	32.3	16.4	926	16.2	60.1	2.5	23.2	0.4	76.4	299	6.8	50.3	1.2	42.9	57.1	152
36-47	37.0	17.5	830	19.1	61.6	1.3	19.3	0.0	80.7	308	11.7	52.3	0.3	36.1	63.9	146
48-59	33.8	20.4	509	19.7	59.9	0.6	20.2	0.2	79.6	172	8.2	64.7	0.8	27.1	72.9	104
Mother's education																
None/pre-school	29.8	15.1	2,982	17.4	61.4	1.5	20.4	0.8	78.8	890	10.3	59.3	1.1	30.4	69.6	451
Primary	32.6	16.4	576	24.9	53.6	0.3	21.5	0.0	78.5	188	10.9	53.1	0.5	36.1	63.9	94
Middle	28.3	17.2	916	21.3	58.5	2.7	20.2	0.0	79.8	260	6.8	59.7	0.0	33.5	66.5	53
Secondary	38.7	21.9	325	13.1	56.7	0.4	29.8	0.4	69.8	126	11.8	47.1	1.3	41.1	58.9	71
Higher	43.3	22.3	286	10.4	61.9	2.4	26.4	1.4	72.3	124	11.2	62.9	0.8	25.9	74.1	64
Wealth index quintile																
Poorest	28.3	12.1	947	21.9	56.3	1.4	21.6	0.1	78.3	268	10.6	49.6	0.0	39.8	60.2	114
Second	31.0	11.8	981	19.3	63.8	0.8	15.3	1.6	83.1	304	17.6	63.8	4.8	18.6	81.4	116
Middle	35.2	17.8	300	19.2	57.4	0.0	23.3	0.0	76.7	106	14.6	40.6	.9	44.8	55.2	53
Fourth	36.6	19.7	883	18.3	56.7	0.8	23.9	1.1	75.0	323	16.6	50.2	0.0	33.2	66.8	174

Table CH. 9: Source of ORS and zinc

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who were given as treatment for diarrhoea: ORS	Zinc	Number of children age 0-59 months with diarrhoea in the last two weeks	Percentage of children for whom the source of ORS was: Health facilities or providers Public	Private	Community health provider[a]	Other source	DK/ Missing	A health facility or provider[b]	Number of children age 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: Health facilities or providers Public	Private	Community health provider[a]	Other source	A health facility or provider[b]	Number of children age 0-59 months who were given zinc as treatment for diarrhoea in the last two weeks
KP	32.1	16.4	4,469	17.5	59.7	1.2	22.1	0.6	77.3	1,433	10.9	56.3	1.0	32.8	67.2	733
Richest	37.6	23.2	741	7.0	63.1	0.7	29.7	0.2	70.1	279	4.6	58.5	1.1	36.9	63.1	172
Division																
Bannu	30.2	10.5	428	12.9	51.7	1.3	32.4	3.0	64.6	129	11.3	36.0	4.9	52.7	47.3	45
D.I. Khan	20.3	13.6	351	14.0	60.0	-	26.0	0.0	74.0	71	25.9	41.3	7.7	32.8	67.2	48
Hazara	37.8	9.7	838	21.9	55.1	1.8	22.8	0.2	77.0	317	27.3	49.3	0.6	23.4	76.6	81
Kohat	31.6	16.8	312	18.1	74.8	1.7	6.8	0.2	93.0	98	5.8	90.2	0.0	4.0	96.0	52
Malakand	34.9	22.7	896	12.8	64.5	0.4	22.7	0.0	77.3	313	8.1	47.9	0.0	44.0	56.0	203
Mardan	32.2	20.7	588	11.8	60.3	1.4	25.6	2.2	72.1	189	4.4	75.2	0.4	20.4	79.6	122
Peshawar	29.9	17.3	1,056	23.7	57.8	1.5	18.5	0.0	81.5	316	8.5	55.1	0.3	36.3	63.7	182

[a] Community health provider includes 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

Table CH.9 provides information on the source of ORS and zinc for children who benefitted from these treatments. The main source of ORS is the private sector (60 percent); the same applies for zinc (56 percent). The quantity of zinc or ORS given to children with diarrhoea, has positive correlation with the age of children. The percentage of children who received ORS increases from 24 percent of the age 0-11 months to 34 percent of the children age 48-49 month. Similarly, the percentage of children who received zinc increased from 13 percent of the age 0-11 months to 20 percent of the children age 48-49 month. Across divisions, treatment with ORS, varied from 20 percent in D.I.Khan division to 38 percent in Hazara division. Children from mothers with higher education are more likely to receive ORS (43 percent) compared to children from mothers with only pre-school or no education (30 percent). Similarly Children from mothers with higher education are more likely to receive zinc (22 percent) compared to children from mothers with only pre-school or no education (15 percent).

Acute Respiratory Infections

Symptoms of ARI are collected during the KP-MICS, 2016-17 to capture suspected pneumonia disease, the leading cause of death in children under five. 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.[29] 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 the accurate level is likely to be higher.

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 the percentage who received antibiotics. Fifty nine percent of children age 0-59 months with symptoms of ARI were taken to a health facility or provider. More children were taken to private facility or provider (51 percent) compared to public facility or provider (16 percent). In KP, the number of children with ARI in urban areas who visited a health facility or provider (70 percent) were higher than the rural areas (57 percent).

Table CH.10 also presents the use of antibiotics for the treatment of children under 5 years with symptoms of ARI by area and sex. Overall, 40 percent of under-5 children with symptoms of ARI received antibiotics during the two weeks prior to the survey. The treatment was received mostly from private health facilities (65 percent) followed by public (8 percent). The percentage was higher in rural (43 percent) than in urban areas (39 percent). There was wide variation among the divisions in use of antibiotic with lowest in Bannu and D.I.Khan divisions (16-17 percent) and highest in Mardan division (52 percent). Household wealth also had a positive association in this regard.

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[29] *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 age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of children with symptoms of ARI for whom: Advice or treatment was sought from:						Percentage of children with symptoms of ARI in the last two weeks who were given antibiotics[2]	Number of children age 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
	Health facilities or providers				A health facility or provider[1,b]	No advice or treatment sought			Health facilities or providers				A health facility or provider[c]	
	Public	Private	Community health provider[a]	Other source					Public	Private	Community health provider[a]	Other source		
KP	15.9	51.2	0.4	9.7	59.4	24.0	39.9	4,230	8.3	65.3	0.3	25.9	73.6	1,687
Area of residence														
Urban	19.8	58.7	0.4	5.4	70.4	16.7	43.4	664	7.8	76.6	0.2	15.5	84.5	288
Rural	15.2	49.8	0.4	10.4	57.4	25.4	39.2	3,565	8.3	63.0	0.3	28.1	71.3	1,399
Sex														
Male	16.7	51.3	0.4	9.3	61.1	23.7	40.5	2,261	7.4	64.2	0.1	27.6	71.7	916
Female	15.0	51.1	0.3	10.1	57.5	24.4	39.2	1,969	9.2	66.6	0.6	23.9	75.8	771
Age														
0-11	16.9	52.3	0.0	8.9	62.7	23.3	41.9	921	8.2	70.0	0.4	21.2	78.1	385
12-23	15.6	53.8	0.5	9.6	60.7	22.1	44.3	953	7.9	64.7	0.0	26.9	72.6	423
24-35	16.8	49.6	0.5	8.2	58.6	25.7	36.6	738	8.1	63.3	0.1	28.6	71.4	270
36-47	15.4	49.5	0.2	10.1	57.7	25.5	38.8	930	12.5	59.9	0.8	27.3	72.4	361
48-59	14.7	50.1	0.6	11.7	56.3	23.9	36.0	688	3.0	69.3	0.0	26.7	72.3	248
Mother's education														
None/pre-school	15.4	49.9	0.3	10.5	56.1	25.0	36.9	2,681	9.0	67.2	0.0	23.3	76.3	989
Primary	19.1	48.1	1.0	9.6	61.1	24.6	39.3	581	6.5	63.9	0.1	28.5	70.4	228
Middle	13.3	54.5	0.2	7.0	61.7	25.2	42.5	270	11.4	60.5	2.5	27.3	71.9	115
Secondary	19.3	51.7	0.0	9.5	67.2	19.8	52.5	383	6.0	54.3	0.0	39.7	60.3	201
Higher	12.8	64.4	0.0	5.2	72.6	18.7	49.0	314	6.4	73.3	1.2	20.3	79.7	154
Wealth index quintile														
Poorest	15.6	41.1	0.2	10.4	49.2	33.0	27.6	809	10.2	61.8	0.0	27.8	72.1	223
Second	14.6	48.9	0.9	11.4	55.3	26.2	38.9	897	12.0	63.3	0.5	23.9	75.3	349
Middle	14.7	53.0	.5	11.0	57.8	22.3	38.1	841	4.1	68.3	.5	26.8	72.4	320
Fourth	19.2	50.8	0.0	9.3	71.1	17.1	51.1	788	5.3	70.2	0.0	23.8	75.5	403
Richest	15.2	62.6	0.1	5.9	71.1	17.1	51.1	788	5.3	70.2	0.0	23.8	75.5	403

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

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	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 age 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:								Health facilities or providers					
	Health facilities or providers				A health facility or provider[1,b]	No advice or treatment sought								
	Public	Private	Community health provider[a]	Other source					Public	Private	Community health provider[a]	Other source	A health facility or provider[c]	
KP	15.9	51.2	0.4	9.7	59.4	24.0	39.9	4,230	8.3	65.3	0.3	25.9	73.6	1,687
Division														
Bannu	12.7	54.2	0.3	9.3	64.8	24.0	15.5	259	10.9	57.6	0.0	31.5	68.5	40
D.I. Khan	18.7	46.6	0.6	20.6	63.5	16.5	17.4	198	17.2	61.1	0.0	21.7	78.3	34
Hazara	20.2	44.2	0.2	7.4	57.5	28.7	43.1	625	12.8	65.4	0.1	21.7	78.2	269
Kohat	15.2	58.8	0.0	10.9	63.9	15.9	30.4	379	11.4	63.5	0.0	24.4	74.9	115
Malakand	16.9	49.2	0.5	9.4	56.5	25.0	38.9	1,090	6.5	65.9	0.8	27.0	72.5	424
Mardan	10.9	53.7	0.6	12.1	56.8	24.4	51.8	627	4.5	63.0	0.0	31.7	67.5	325
Peshawar	15.8	53.3	0.2	7.4	61.5	24.3	45.6	1,052	8.2	67.7	0.3	23.6	75.9	480

[1] MICS indicator 3.13 - Care-seeking for children with acute respiratory infection (ARI) symptoms
[2] MICS indicator 3.14 - Antibiotic treatment for children with ARI symptoms
a Community health providers includes both public (Lady 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 pharmacy
c Includes all public and private health facilities and providers

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

Percentage of women age 15-49 years who are mothers or caretakers of children under age 5 by symptoms that would cause them to take a child under age 5 immediately to a health facility, and percentage of mothers who recognize fast or difficult breathing as signs for seeking care immediately, Khyber Pakhtunkhwa, 2016-17

	Percentage of mothers / caretakers 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 mothers / caretakers of children age 0-59 months
	Is not able to drink or breastfeed	Becomes sicker	Develops a fever	Has fast breathing	Has difficulty breathing	Has blood in stool	Is drinking poorly	Suffered from lose motion	Has other symptoms		
KP	19.2	72.4	75.6	36.9	37.1	19.9	11.6	41.1	17.3	54.5	14,153
Area of residence											
Urban	18.8	72.0	78.9	39.8	36.5	17.7	14.3	37.7	16.6	56.8	2,183
Rural	19.3	72.5	74.9	36.3	37.2	20.3	11.1	41.7	17.4	54.1	11,970
Mother's education											
None/pre-school	18.4	74.3	74.6	35.2	35.5	19.5	10.9	39.4	14.7	52.9	9,010
Primary	19.3	69.0	76.1	38.0	39.2	20.0	11.3	44.5	23.5	56.2	1,695
Middle	22.2	69.1	78.4	40.9	45.1	17.5	12.4	43.7	19.0	60.8	935
Secondary	19.3	65.6	78.4	36.3	39.1	20.4	13.0	44.7	22.4	55.2	1,243
Higher	22.9	72.6	77.0	44.8	37.3	23.6	15.5	42.6	20.7	58.1	1,269
Wealth index quintile											
Poorest	20.6	77.4	69.3	31.0	33.6	20.1	10.4	34.5	13.4	48.7	2,917
Second	18.0	72.0	74.1	35.4	34.3	19.5	11.1	42.4	16.3	51.4	2,806
Middle	19.0	71.9	76.9	38.3	37.2	18.8	11.2	45.9	18.5	55.3	2,739
Fourth	19.2	70.4	79.1	37.7	40.9	21.0	11.6	43.2	20.1	57.7	2,911
Richest	19.2	70.3	78.5	42.3	39.4	19.9	13.9	39.6	18.1	59.5	2,779
Division											
Bannu	19.6	83.6	70.0	27.7	25.0	17.6	5.6	54.9	19.3	42.0	948
D.I. Khan	8.0	74.0	58.5	11.2	20.8	14.8	2.8	58.9	9.9	30.2	1,143
Hazara	25.5	77.5	71.2	35.8	41.4	27.7	16.0	44.0	26.5	52.8	2,709
Kohat	20.7	81.6	86.3	47.1	41.7	28.7	20.0	43.7	26.5	63.2	1,000
Malakand	20.1	68.9	73.5	37.4	37.8	16.6	9.6	31.0	13.3	57.1	3,459
Mardan	10.5	62.7	82.7	40.2	39.3	15.7	11.9	41.9	18.7	56.7	1,664
Peshawar	20.9	70.2	82.1	44.1	39.4	18.7	12.3	37.8	12.2	61.5	3,231

Mothers' knowledge of danger signs is an important determinant of care-seeking behaviour. In the MICS, mothers or caretakers were asked to report symptoms that would cause them to take a child under-five for care immediately at a health facility. The knowledge of mother/caretaker about danger signs of pneumonia are presented in Table CH.11. Overall, 55 percent of women know 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 is if a child develops a fever. About 37 percent of mothers identified fast breathing and difficult breathing as symptoms for taking children immediately to a health care provider. Wide variation was found among divisions with nearly two-third of the women in Peshawar and Kohat division (62-63 percent) have knowledge of at least one of the two danger signs of pneumonia compared to (30 percent) of women in D.I.Khan division.

Solid Fuel Use

More than 3 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 the use of solid fuels is their incomplete combustion, which produces toxic elements such as carbon monoxide, polyaromatic hydrocarbons, and sulphur dioxide (SO2), among others. Use of solid fuels increases the 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 the population using solid fuels as the primary source of domestic energy for cooking, shown in Table CH.12.

Overall, 69 percent of the household population use solid fuels for cooking, consisting mainly of wood (57 percent). Use of solid fuels is low in urban areas (16 percent), but high in rural where they are used by 79 percent of the household population. Differentials with respect to household wealth and the educational level of the household head are also notable. Almost whole the population (99 percent) living in the households in the poorest quintile use solid fuel and this proportion declines to 13 percent of population living in the households in the richest quintile.

The use of solid fuel by place of cooking is depicted in Table CH.13. The presence and extent of indoor pollution are dependent on cooking practices, places used for cooking, as well as types of fuel used. According to the findings, 62 percent of the population living in households using solid fuels for cooking, cook food in a separate room that is used as a kitchen. Thirty seven percent have food cooked within the dwelling unit elsewhere in the household. The use of separate room as kitchen is higher (92 percent) in the households of the richest quintile and lowest in poorest households (44 percent).

Table CH. 12: Solid fuel use

Percent 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, Khyber Pakhtunkhwa, 2016-17

	Electricity	Liquefied Petroleum Gas (LPG)	Natural gas	Biogas	Solid fuels: Coal / Lignite	Solid fuels: Charcoal	Solid fuels: Wood	Solid fuels: Straw / Shrubs / Grass	Solid fuels: Animal dung	Solid fuels: Agricultural crop residue	No food cooked in household	Other	Missing	Total	Solid fuels for cooking[1]	Number of household members
KP	0.1	5.0	25.8	0.1	0.0	0.2	57.0	7.4	4.1	0.3	0.0	0.1	0.0	100.0	68.9	158,564
Area of residence																
Urban	0.2	4.7	78.8	0.4	0.0	0.1	14.4	1.1	0.3	0.0	0.0	0.0	0.0	100.0	15.9	25,689
Rural	0.1	5.1	15.5	0.1	0.0	0.2	65.2	8.6	4.8	0.4	0.0	0.1	0.0	100.0	79.1	132,875
Education of household head																
None/pre-school	0.1	3.0	18.6	0.1	0.0	0.2	63.7	8.5	5.3	0.3	0.0	0.1	0.0	100.0	78.1	76,941
Primary	0.0	4.9	21.9	0.1	-	0.1	61.8	7.2	3.5	0.3	-	0.2	-	100.0	72.9	16,348
Middle	0.0	5.3	29.6	0.0	0.0	0.3	53.1	7.9	3.3	0.2	-	0.1	-	100.0	64.9	16,772
Secondary	0.1	6.7	32.5	0.2	0.0	0.1	50.8	6.3	3.0	0.3	-	0.0	0.0	100.0	60.5	26,219
Higher	0.4	9.6	42.6	0.3	-	0.1	40.1	4.6	1.8	0.4	-	-	-	100.0	47.1	22,238
DK/Missing	(0.0)	(8.3)	(29.6)	(0.0)	(0.0)	(0.0)	(62.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	100.0	(62.1)	46
Wealth index quintiles																
Poorest	0.0	0.4	1.0	-	-	0.4	84.8	7.3	5.7	0.4	0.0	0.1	-	100.0	98.5	31,712
Second	0.0	1.2	6.0	0.0	-	0.2	70.6	14.2	7.5	0.2	0.0	-	-	100.0	92.7	31,716
Middle	.2	2.0	15.9	.1	.0	.1	66.3	10.1	4.8	.7	0.0	0.0	.0	100.0	81.9	31,712
Fourth	0.4	8.3	32.9	0.1	0.0	0.2	51.0	4.6	2.1	0.3	-	0.2	-	100.0	58.2	31,713
Richest	0.1	13.1	73.0	0.4	0.0	0.1	12.1	0.6	0.3	0.0	-	0.1	0.0	100.0	13.2	31,711
Division																
Bannu	0.0	2.7	3.6	0.0	0.0	-	37.5	44.2	8.6	2.9	0.0	0.4	-	100.0	93.3	10,565
D.I. Khan	0.2	1.6	6.1	0.1	0.0	0.0	69.8	3.1	18.9	0.0	-	0.0	0.0	100.0	92.0	11,766
Hazara	0.3	3.2	15.8	0.2	-	0.2	80.2	0.1	0.0	-	-	0.0	-	100.0	80.5	30,209
Kohat	0.0	5.6	32.4	0.1	0.0	-	55.7	4.5	1.6	-	-	-	-	100.0	61.8	10,837
Malakand	0.0	9.6	8.4	0.2	0.0	0.3	72.2	5.0	4.4	0.0	0.0	-	0.0	100.0	81.9	37,145
Mardan	0.0	5.3	25.3	0.1	-	0.5	57.4	10.2	1.0	0.2	0.0	-	-	100.0	69.3	19,425
Peshawar	0.3	3.3	60.7	0.1	-	0.1	25.7	5.9	3.4	0.3	0.0	0.2	-	100.0	35.5	38,616

[1] **MICS indicator 3.15 - Use of solid fuels for cooking**
( ) Figures that are based on 25-49 unweighted cases

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

Percent distribution of household members in households using solid fuels by place of cooking, Khyber Pakhtunkhwa, 2016-17

	Place of cooking:							Number of household members in households using solid fuels for cooking
	In the house							
	In a separate room used as kitchen	Elsewhere in the house	In a separate building	Outdoors	Other place	DK/Missing	Total	
KP	62.0	37.4	0.2	0.2	0.0	0.1	100.0	109,251
Area of residence								
Urban	62.4	36.4	0.1	0.3	0.0	0.8	100.0	4,083
Rural	62.0	37.4	0.3	0.2	0.0	0.1	100.0	105,168
Education of household head								
None/pre-school	57.6	41.8	0.2	0.2	0.0	0.1	100.0	60,084
Primary	61.9	37.4	0.4	0.2	0.0	0.1	100.0	11,919
Middle	63.1	35.9	0.2	0.7	0.0	0.0	100.0	10,892
Secondary	69.7	29.7	0.4	0.1	0.0	0.1	100.0	15,859
Higher	74.1	25.4	0.1	0.2	0.0	0.1	100.0	10,468
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	100.0	28
Wealth index quintiles								
Poorest	44.0	55.0	0.4	0.6	0.0	0.1	100.0	31,248
Second	56.9	42.5	0.3	0.2	0.0	0.1	100.0	29,401
Middle	69.5	30.0	.2	.0	.0	.3	100.0	25,982
Fourth	83.2	16.8	0.0	0.0	0.0	0.0	100.0	18,449
Richest	91.8	7.7	0.0	0.2	0.0	0.4	100.0	4,171
Division								
Bannu	53.7	46.1	0.2	0.0	0.0	0.0	100.0	9,853
D.I. Khan	40.5	58.6	0.6	0.2	0.0	0.1	100.0	10,820
Hazara	67.7	31.6	0.2	0.3	0.0	0.2	100.0	24,321
Kohat	61.1	38.8	0.1	0.0	0.0	0.0	100.0	6,696
Malakand	62.6	36.6	0.3	0.5	0.0	0.0	100.0	30,415
Mardan	67.1	32.6	0.2	0.0	0.0	0.1	100.0	13,452
Peshawar	68.8	30.5	0.2	0.1	0.0	0.4	100.0	13,693

(*) Figures that are based on fewer than 25 unweighted cases

Malaria/Fever

Malaria is a major cause of death of children under age five worldwide. Preventive measures and treatment with an effective antimalarial can dramatically reduce malaria mortality rates among children.

In 2010 the World Health Organization issued a recommendation for universal use of diagnostic testing to confirm malaria infection and apply appropriate treatment based on the results. According to the guidelines, treatment solely on the basis of clinical suspicion should only be considered when a parasitological diagnosis is not accessible. This recommendation was based on studies that showed substantial reduction in the proportion of fever that are associated with malaria to a low level[30]. This recommendation implies that the indicator on proportion of children with fever that received antimalarial treatment is no longer an acceptable indicator of the level of treatment of malaria in the population of children under age five. However, as it remains the MDG indicator and for purposes of comparisons, as well as assessment of patterns across socio-demographic characteristics, it remains a standard MICS indicator.

Children with severe malaria symptoms, such as fever and convulsions, should be taken to a facility. Further, children recovering from malaria should be given extra liquids and food, and younger children should continue breastfeeding.

Mothers were asked to report all of the medicines given to a child to treat the fever, including medicines given at home and/or prescribed at a health facility. Artemisinin-based Combination therapy (ACT) is the recommended first line antimalarial recommended by the World Health Organization. In addition, confirmation of malaria is done on all fever cases through rapid diagnostic test.

Table CH.20 provides information on care-seeking behaviour during an episode of fever in the past two weeks. As shown in Table CH 20, advice is sought from a health facility or a qualified health care provider for 70 percent of children with fever; 49 percent of these services are provided by the private sector and 17 percent by public. However, no advice or treatment is sought in 26 percent of the cases. No correlation is observed between care-seeking from health facility or provider and mother's education.

More than 53 percent of the children with fever were given Paracetamol, Panadol or Acetaminophen followed by 27 percent of children who received antibiotic pill or syrup. Children with fever in the last two weeks were rarely treated with an artemisinin-based combination therapy (ACT) or other antimalarial (Table CH.21).

Overall, 10 percent of children with a fever in the previous two weeks had blood taken from a finger or heel for testing. The responses are similar with respect to area of residence, mother's education and wealth. Around one percent of the children were given any anti-malarial treatment (Table CH.22).

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[30]   *D'Acremont, V et al. 2010. Reduction in the proportion of fevers associated with Plasmodium falciparum parasitaemia in Africa: a systematic review. Malaria Journal 9(24*

Table CH. 2 1: Care-seeking during fever

Percentage of children age 0-59 months with fever in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Khyber Pakhtunkhwa, 2016-17

	Percentage of children for whom:						
	Advice or treatment was sought from:						
	Health facilities or providers				A health facility or provider[1, b]	No advice or treatment sought	Number of children with fever in last two weeks
	Public	Private	Community health provider[a]	Other source			
KP	16.5	49.0	0.3	9.0	69.5	26.0	7,263
Area of residence							
Urban	19.9	54.4	0.3	5.5	76.3	20.8	1,138
Rural	15.9	48.0	0.3	9.6	68.2	27.0	6,125
Age							
0-11	17.1	49.7	0.1	8.3	70.8	26.0	1,636
12-23	15.3	51.8	0.5	9.3	71.6	24.0	1,584
24-35	15.7	46.9	0.2	8.9	66.1	28.7	1,389
36-47	18.6	46.8	0.4	9.0	68.8	25.9	1,542
48-59	15.4	49.9	0.5	9.6	69.8	25.5	1,112
Mother's education							
None/pre-school	15.4	47.4	0.4	10.3	67.8	27.3	4,575
Primary	19.2	47.9	0.4	8.8	69.9	25.4	961
Middle	18.9	50.8	0.1	7.3	73.2	24.1	522
Secondary	20.8	51.7	0.2	5.4	73.5	22.5	635
Higher	14.2	59.8	0.0	4.7	74.8	21.9	570
Wealth index quintiles							
Poorest	15.7	38.4	0.3	11.0	59.3	35.3	1,431
Second	15.7	48.3	0.5	10.6	68.4	26.1	1,546
Middle	18.6	51.4	0.1	8.6	74.4	21.9	1,463
Fourth	18.6	51.4	0.1	8.6	74.4	21.9	1,510
Richest	16.4	58.6	0.1	4.8	76.3	20.4	1,313
Sex							
Male	17.3	49.8	0.3	8.8	70.6	24.8	3,726
Female	15.7	48.2	0.3	9.2	68.3	27.3	3,537
Division							
Bannu	13.0	46.9	0.4	15.8	72.1	24.9	505
D.I.Khan	13.6	50.2	1.1	15.9	67.9	21.3	511
Hazara	19.7	42.0	0.3	7.2	64.0	31.9	1,518
Kohat	13.9	62.7	0.0	7.7	79.2	16.1	577
Malakand	16.7	44.4	0.2	9.9	65.6	29.3	1,566
Mardan	11.6	53.9	0.5	10.4	72.4	24.0	797
Peshawar	18.4	52.7	0.1	5.7	72.8	23.8	1,789

[1] MICS indicator 3.20 - Care-seeking for fever

[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 as well as shops

Table CH. 2 2: Treatment of children with fever

Percentage of children age 0-59 months who had a fever in the last two weeks, by type of medicine given for the illness, Khyber Pakhtunkhwa, 2016-17

| | Children with a fever in the last two weeks who were given: | | | | | | | | | | | | | Number of children with fever in last two weeks |
| | Anti-malarials | | | | | | Other medications | | | | | | | |
	SP/ Fansidar	Chloroquine	Amodia-quine	Quinine	Artemisinin-based Combination Therapy (ACT)	Other anti-malarial	Antibiotic pill or syrup	Antibiotic injection	Paracetamol/ Panadol/ Acetaminophen	Aspirin	Ibuprofen	Other	DK/Missing	
KP	0.8	0.2	0.0	0.0	0.1	0.3	26.8	9.9	52.9	2.1	36.8	20.4	3.0	7,263
Area of residence														
Urban	0.3	0.4	0.0	0.2	0.1	0.8	29.9	12.8	54.6	2.4	43.4	21.0	1.3	1,138
Rural	0.8	0.2	0.0	0.0	0.1	0.2	26.3	9.4	52.6	2.0	35.6	20.3	3.3	6,125
Sex														
Male	0.8	0.2	0.0	0.0	0.1	0.3	27.8	9.5	54.0	2.1	35.6	21.0	2.9	3,726
Female	0.7	0.3	0.0	0.0	0.1	0.3	25.8	10.3	51.7	2.0	38.0	19.7	3.1	3,537
Age														
0-11	0.6	0.1	0.1	0.1	0.1	0.3	26.4	8.4	58.6	1.3	32.5	20.3	2.0	1,636
12-23	0.5	0.0	0.0	0.0	0.1	0.6	27.8	12.0	53.3	3.1	36.7	22.7	3.2	1,584
24-35	0.7	0.6	0.0	0.1	0.1	0.3	25.7	8.5	51.3	1.5	38.6	20.7	3.6	1,389
36-47	1.1	0.3	0.0	0.0	0.0	0.2	26.9	10.5	49.1	2.7	38.2	18.9	3.5	1,542
48-59	0.9	0.1	0.0	0.0	0.1	0.1	27.6	10.0	51.1	1.6	39.2	18.9	2.8	1,112
Mother's education														
None/pre-school	0.7	0.2	0.0	0.1	0.1	0.3	23.6	10.1	49.3	2.0	38.0	18.9	3.9	4,575
Primary	1.1	0.4	0.0	0.0	0.1	0.2	28.5	7.5	57.9	2.6	34.0	22.0	1.3	961
Middle	1.1	0.6	0.0	0.0	0.2	0.3	29.3	9.6	54.5	1.6	38.9	22.4	2.9	522
Secondary	1.1	0.3	0.0	0.0	0.0	0.6	34.6	11.6	59.8	3.1	35.5	23.1	1.7	635
Higher	0.1	0.3	0.0	0.0	0.1	0.1	39.0	10.9	64.2	1.3	31.8	24.7	0.6	570
Wealth index quintiles														
Poorest	0.5	0.0	0.0	0.0	0.0	0.3	17.3	6.7	47.8	2.2	35.0	17.6	5.5	1,431
Second	0.6	0.0	0.0	0.0	0.2	0.2	24.6	11.1	49.3	1.9	36.7	22.2	4.5	1,546
Middle	0.6	0.5	0.1	0.2	0.2	0.3	26.4	11.0	50.3	2.2	37.8	21.8	1.8	1,463
Fourth	1.4	0.3	0.0	0.0	0.1	0.2	32.3	8.5	58.9	2.2	36.0	19.2	2.0	1,510
Richest	0.6	0.3	0.0	0.0	0.0	0.5	34.1	12.4	58.6	2.0	38.8	21.1	1.0	1,313

Table CH. 2 2: Treatment of children with fever

Percentage of children age 0-59 months who had a fever in the last two weeks, by type of medicine given for the illness, Khyber Pakhtunkhwa, 2016-17

| | Children with a fever in the last two weeks who were given: | | | | | | | | | | | | | Number of children with fever in last two weeks |
| | Anti-malarials | | | | | | Other medications | | | | | | | |
	SP/ Fansidar	Chloroquine	Amodia-quine	Quinine	Artemisinin-based Combination Therapy (ACT)	Other anti-malarial	Antibiotic pill or syrup	Antibiotic injection	Paracetamol/ Panadol/ Acetaminophen	Aspirin	Ibuprofen	Other	DK/Missing	
KP	0.8	0.2	0.0	0.0	0.1	0.3	26.8	9.9	52.9	2.1	36.8	20.4	3.0	7,263
Division														
Bannu	0.2	0.3	0.0	0.0	0.0	0.0	8.0	5.8	36.5	1.0	59.1	35.7	5.1	505
D.I. Khan	0.4	0.2	0.0	0.0	0.0	0.3	6.1	5.7	54.1	0.5	16.4	20.3	11.7	511
Hazara	2.3	0.4	0.0	0.0	0.1	0.0	31.9	5.8	58.2	0.7	25.8	20.3	2.1	1,518
Kohat	0.1	0.0	0.0	0.0	0.9	1.7	19.5	9.7	32.3	1.1	46.9	41.2	1.6	577
Malakand	0.2	0.2	0.1	0.1	0.0	0.4	26.8	8.3	57.2	2.3	37.0	14.2	3.2	1,566
Mardan	1.3	0.6	0.0	0.0	0.0	0.0	40.0	15.2	57.6	3.3	42.9	16.5	0.8	797
Peshawar	0.2	0.0	0.0	0.1	0.0	0.1	30.4	14.9	53.3	3.5	39.6	16.6	2.0	1,789

Table CH. 2 3: Diagnostics and anti-malarial treatment of children

Percentage of children age 0-59 months who had a fever in the last two weeks who had a finger or heel stick for malaria testing, who were given Artemisinin-combination Treatment (ACT) and any anti-malarial drugs, and percentage who were given ACT among those who were given anti-malarial drugs, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who:					Number of children age 0-59 months with fever in the last two weeks	Treatment with Artemisinin-based Combination Therapy (ACT) among children who received anti-malarial treatment[3]	Number of children age 0-59 months with fever in the last two weeks who were given any antimalarial drugs
					Were given:			
	Had blood taken from a finger or heel for testing[1]	Artemisinin-combination Treatment (ACT)	ACT the same or next day	Any antimalarial drugs[2]	Any antimalarial drugs same or next day			
KP	9.8	0.1	0.1	1.4	1.1	7,263	7.1	100
Area of residence								
Urban	12.7	0.1	0.0	1.7	1.1	1,138	3.8	19
Rural	9.3	0.1	0.1	1.3	1.1	6,125	7.8	81
Mother's education								
None/pre-school	9.1	0.1	0.0	1.2	0.9	4,575	6.7	57
Primary	8.4	0.1	0.1	1.8	1.8	961	8.0	17
Middle	13.3	0.2	0.0	2.0	1.7	522	7.5	11
Secondary	11.6	0.0	0.0	1.8	1.3	635	2.6	12
Higher	12.9	0.1	0.1	0.5	0.5	570	22.4	3
Wealth index quintiles								
Poorest	6.3	0.0	0.0	0.9	0.7	1,431	4.1	12
Second	8.5	0.2	0.1	1.0	0.8	1,546	16.8	16
Middle	8.7	.2	.0	1.7	1.1	1463	10.6	25
Fourth	11.2	0.1	0.1	1.9	1.8	1,510	4.2	28
Richest	14.8	0.0	0.0	1.4	1.0	1,313	0.0	18
Division								
Bannu	10.0	0.0	0.0	0.5	0.5	505	0.0	3
D.I. Khan	5.5	0.0	0.0	0.9	0.3	511	0.0	5
Hazara	6.8	0.1	0.1	2.8	2.5	1,518	4.2	42
Kohat	14.2	0.9	0.4	2.7	2.1	577	34.4	15
Malakand	12.7	0.0	0.0	0.9	0.6	1,566	0.0	13
Mardan	11.1	0.0	0.0	1.6	1.0	797	0.0	13
Peshawar	9.0	0.0	0.0	0.5	0.4	1,789	0.0	8

[1] **MICS indicator 3.21 - Malaria diagnostics usage**
[2] **MICS indicator 3.22; MDG indicator 6.8 - Anti-malarial treatment of children under age 5**
[3] **MICS indicator 3.23 - Treatment with Artemisinin-based Combination Therapy (ACT) among children who received anti-malarial treatment**

Table CH. 23 presents the source of antimalarial for children under age five who were treated with an antimalarial. The treatment was obtained from a health facility or provider in 92 percent of the cases treated with antimalarial, mostly from the private sector (70 percent).

Pregnant women living in places where malaria is highly prevalent are highly vulnerable to malaria. Once infected, pregnant women risk anaemia, premature delivery and stillbirth. Their babies face increased risk of low birth weight, which carries an increased chance to die in infancy[31]. WHO recommends that in areas of moderate-to-high malaria transmission, all pregnant women be provided an intermittent preventive treatment with sulfadoxine-pyrimethamine (SP) at every scheduled antenatal care visit. In the KP-MICS, 2016-17, women were asked of the medicines they had received to prevent malaria in their last pregnancy during the 2 years preceding the survey. Women are

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[31] *Shulman CE, Dorman EK. Importance and prevention of malaria in pregnancy. Trans R Soc Trop Med Hyg. 2003; 97(1), 30–55*

considered to have received intermittent preventive therapy if they have received at least 3 doses of SP/Fansidar during the pregnancy, at least one of which was taken during antenatal care.

Intermittent preventive treatment for malaria in pregnant women who gave birth in the two years preceding the survey is presented in Table CH.25. Less than one percent of the women took the intermittent preventive treatment (three or more doses of SP/Fansidar) for malaria, whereas 5 percent took any medicine to prevent malaria at any ANC visit during pregnancy.

Table CH. 2 4: Source of anti-malarial

Percentage of children age 0-59 months with fever in the last two weeks who were given anti-malarial by the source of anti-malarial, Khyber Pakhtunkhwa, 2016-17

	Percentage of children who were given anti-malarial	Number of children age 0-59 months with fever in the last two weeks	Percentage of children for whom the source of anti-malarial was:					Number of children age 0-59 months who were given anti-malarial as treatment for fever in the last two weeks
			Health facilities or providers					
			Public	Private	Community health provider[a]	Other source	A health facility or provider[b]	
KP	1.4	7,263	14.7	70.0	0.0	12.8	92.2	100
Area of residence								
Urban	1.7	1,138	(9.1)	(83.3)	(0.0)	(4.4)	(96.8)	19
Rural	1.3	6,125	16.1	66.9	0.0	14.8	91.1	81
Sex								
Male	1.4	3,726	13.3	67.7	0.0	15.3	88.1	50
Female	1.4	3,537	16.2	72.4	0.0	10.3	96.4	49
Age								
0-11	1.1	1,636	(22.3)	(48.1)	(0.0)	(22.5)	(85.9)	18
12-23	1.2	1,584	(12.2)	(70.2)	(0.0)	(17.6)	(90.8)	19
24-35	1.8	1,389	(4.8)	(80.6)	(0.0)	(11.6)	(90.1)	25
36-47	1.6	1,542	(*)	(*)	(*)	(*)	(*)	25
48-59	1.2	1,112	(*)	(*)	(*)	(*)	(*)	13
Mother's education								
None/pre-school	1.2	4,575	10.2	73.7	0.0	13.7	93.4	57
Primary	1.8	961	(*)	(*)	(*)	(*)	(*)	17
Middle	2.0	522	(*)	(*)	(*)	(*)	(*)	11
Secondary	1.8	635	(*)	(*)	(*)	(*)	(*)	12
Higher	0.5	570	(*)	(*)	(*)	(*)	(*)	3
Wealth index quintile								
Poorest	0.9	1,431	(*)	(*)	(*)	(*)	(*)	12
Second	1.0	1,546	(*)	(*)	(*)	(*)	(*)	16
Middle	1.7	1463	.7	83.2	0.0	13.7	94.8	25
Fourth	1.9	1,510	(14.7)	(77.9)	(0.0)	(7.4)	(95.5)	28
Richest	1.4	1,313	(*)	(*)	(*)	(*)	(*)	18
Division								
Bannu	0.5	505	(*)	(*)	(*)	(*)	(*)	3
D.I. Khan	0.9	511	(*)	(*)	(*)	(*)	(*)	5
Hazara	2.8	1,518	25.1	66.1	0.0	7.8	92.0	42
Kohat	2.7	577	(4.5)	(51.8)	(0.0)	(41.6)	(93.4)	15
Malakand	0.9	1,566	(*)	(*)	(*)	(*)	(*)	13
Mardan	1.6	797	(*)	(*)	(*)	(*)	(*)	13
Peshawar	0.5	1,789	(*)	(*)	(*)	(*)	(*)	8

[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 as well as shops

( ) Figures that are based on 25-49 unweighted cases

(*) Figures that are based on fewer than 25 unweighted cases

Table CH. 2 5: Intermittent preventive treatment for malaria

Percentage of women age 15-49 years who had a live birth during the two years preceding the survey and who received intermittent preventive treatment (IPT) for malaria during pregnancy at any antenatal care visit, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who received antenatal care (ANC)	Number of women with a live birth in the last two years	Who took any medicine to prevent malaria at any ANC visit during pregnancy	Percentage of pregnant women: who took SP/Fansidar at least once during an ANC visit and in total took:				Number of women with a live birth in the last two years and who received antenatal care
				At least once	Two or more times	Three or more times[1]	Four or more times	
KP	74.3	8,365	4.5	2.0	1.4	0.6	0.3	6,218
Area of residence								
Urban	88.3	1,334	4.1	2.1	1.4	0.5	0.2	1,178
Rural	71.7	7,032	4.6	2.0	1.4	0.6	0.3	5,040
Education of household head								
None/pre-school	66.3	5,065	4.4	1.9	1.4	0.5	0.3	3,358
Primary	83.1	1,105	5.6	3.3	1.7	1.0	0.3	919
Middle	84.1	613	3.3	1.1	1.0	.4	.1	515
Secondary	88.2	788	3.9	1.2	1.0	0.2	0.1	695
Higher	92.1	794	5.0	2.2	1.5	0.9	0.3	731
Wealth index quintiles								
Poorest	49.1	1,682	4.2	2.0	1.6	0.5	0.2	826
Second	69.6	1,655	4.1	1.8	1.0	0.5	0.3	1,153
Middle	77.1	1632	4.8	2.0	1.6	.8	.6	1,258
Fourth	77.1	1632	4.8	2.0	1.6	.8	.6	1,497
Richest	90.9	1,633	5.2	2.6	2.0	0.6	0.1	1,484
Division								
Bannu	63.0	602	14.5	2.5	1.2	0.6	0.4	379
D.I. Khan	62.9	684	3.6	1.0	0.0	0.0	0.0	430
Hazara	66.6	1,507	2.5	1.7	1.0	0.7	0.3	1,005
Kohat	77.5	592	3.4	1.2	1.0	0.7	0.1	459
Malakand	74.2	1,996	3.4	1.6	1.1	0.4	0.2	1,481
Mardan	82.8	1,015	5.2	4.5	3.2	1.4	0.8	841
Peshawar	82.5	1,968	4.6	1.6	1.3	0.3	0.0	1,623
MICS indicator 3.25 - Intermittent preventive treatment for malaria								

VII. Water and Sanitation

Safe drinking water is a basic necessity for good health. Unsafe drinking water can be a significant determinant of diseases such as cholera, typhoid, and schistosomiasis. Drinking water can be contaminated with chemical and physical contaminants with harmful effects on human health. In addition to preventing disease, improved access to drinking water may be particularly important for women and children, especially in rural areas, who bear the primary responsibility for carrying water, often for long distances[32].

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 disease by more than a third[33], and can substantially lessen the adverse health impacts of other disorders among millions of children in many countries.

The MDG target 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 more details on water and sanitation and to access some reference documents, please visit data.unicef.org[34] or the website of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation[35]

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 considered as an improved water source only if the household is using an improved water source for handwashing and cooking.

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[32] *WHO/UNICEF. 2012. Progress on Drinking water and Sanitation: 2012 update*
[33] *Cairncross, S et al. 2010. Water, sanitation and hygiene for the prevention of diarrhoea. International Journal of Epidemiology 39: i193-i205*
[34] http://data.unicef.org/water-sanitation
[35] *http:// www.wssinfo.org*

Table WS. 1: Use of improved water sources

Percent distribution of household population according to main source of drinking water and percentage of household population using improved drinking water sources, Khyber Pakhtunkhwa, 2016-17

| | Main source of drinking water | | | | | | | | | | | | | | | | | | | | | |
| | Improved sources | | | | | | | | | | | Unimproved sources | | | | | | | | | | |
	Piped into dwelling	Piped into compound, yard or plot	Piped to neighbour	Public tap / standpipe	Tube well	Hand pump	Motorized Pump (Donkey / Turbine)	Protected well	Protected spring	Rain water collection (Pond)	Bottled water[a]	Unprotected well	Unprotected spring	Tanker-truck	Cart with small tank / drum/Cane	Surface water (river, stream, dam, lake, pond, canal, irrigation channel)	Bottled water [a]	Other	Missing	Total	Percentage using improved sources of drinking water[1]	Number of household members
KP	22.4	2.0	3.6	7.6	2.8	14.6	22.4	10.1	5.5	0.3	0.0	1.5	4.2	0.7	0.5	1.3	0.0	0.5	0.0	100.0	91.3	158,564
Area of residence																						
Urban	21.0	1.1	2.6	23.3	4.9	6.3	31.7	5.1	0.6	0.0	0.1	0.3	0.1	1.4	0.5	0.5	0.0	0.4	0.0	100.0	96.8	25,689
Rural	22.7	2.2	3.8	4.5	2.4	16.2	20.6	11.1	6.5	0.3	0.0	1.7	5.0	0.6	0.4	1.5	0.0	0.5	0.0	100.0	90.2	132,875
Education of household head																						
None/pre-school	21.3	2.3	3.8	6.8	2.8	16.4	17.7	10.6	7.5	0.4	0.0	1.7	5.6	0.4	0.4	1.7	0.0	0.5	0.0	100.0	89.6	76,941
Primary	24.4	1.5	4.8	7.1	2.6	14.8	21.2	7.7	5.3	0.2	0.0	1.8	5.5	0.8	0.5	1.3	0.0	0.4	0.0	100.0	89.6	16,348
Middle	22.1	2.1	3.9	7.5	2.9	13.2	26.2	9.7	3.8	0.4	0.0	1.4	2.8	1.0	0.9	1.1	0.0	1.0	0.0	100.0	91.9	16,772
Secondary	23.0	1.9	2.9	7.9	2.2	13.6	26.9	10.7	4.0	0.2	0.0	1.5	2.3	1.2	0.4	0.9	0.0	0.5	0.0	100.0	93.3	26,219
Higher	24.4	1.3	2.6	10.0	3.6	10.4	31.5	9.8	1.7	0.1	0.1	0.6	1.8	0.8	0.4	0.8	0.0	0.2	0.0	100.0	95.4	22,238
DK/Missing	(5.5)	(0.0)	(0.0)	(7.4)	(0.0)	(62.1)	(25.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(100.0)	(100.0)	46
Wealth index quintile																						
Poorest	21.4	3.9	4.8	3.1	2.1	11.8	2.1	7.5	16.7	0.8	0.0	3.2	15.3	0.6	1.1	4.8	0.0	0.6	0.0	100.0	74.4	31,712
Second	21.8	2.5	5.4	4.8	2.7	25.7	10.0	10.9	5.9	0.4	0.0	2.4	3.4	1.2	0.7	1.3	0.0	0.9	0.0	100.0	90.0	31,716
Middle	23.2	2.2	3.6	5.3	2.7	21.1	21.3	12.2	3.1	.1	.0	1.3	1.8	1.1	.2	.2	0.0	.5	.0	100.0	95.0	31,712
Fourth	24.5	0.9	2.9	7.9	2.8	10.4	35.3	12.3	1.4	0.1	0.0	0.5	0.5	0.5	0.1	0.1	0.0	0.1	0.0	100.0	98.3	31,713
Richest	21.1	0.4	1.3	16.6	3.8	4.1	43.3	7.7	0.6	0.0	0.1	0.1	0.1	0.2	0.3	0.3	0.0	0.2	0.0	100.0	98.8	31,711
Division																						
Bannu	23.6	0.6	5.6	3.3	12.9	25.9	18.3	1.6	0.6	1.4	0.0	0.1	0.0	1.1	2.5	0.7	0.0	2.0	0.0	100.0	93.6	10,565
D.I. Khan	13.5	0.4	2.6	6.7	3.3	42.0	16.6	1.3	0.2	1.3	0.0	0.4	0.0	0.6	2.5	8.1	0.0	0.4	0.0	100.0	87.9	11,766
Hazara	36.5	3.4	3.4	5.8	0.8	2.5	7.3	7.6	14.6	0.1	0.0	3.4	13.2	0.0	0.0	1.2	0.0	0.3	0.0	100.0	81.9	30,209
Kohat	17.6	0.5	3.5	7.7	4.6	11.0	22.5	17.1	0.7	0.3	0.0	4.6	0.7	7.7	0.6	0.4	0.0	0.4	0.0	100.0	85.5	10,837
Malakand	35.0	4.5	3.7	6.0	0.9	3.2	11.5	14.1	10.1	0.2	0.0	1.0	7.1	0.3	0.2	1.8	0.0	0.2	0.0	100.0	89.4	37,145
Mardan	5.4	0.8	2.8	4.9	0.4	24.6	52.1	6.4	0.3	0.0	0.0	1.3	0.1	0.0	0.0	0.0	0.0	0.9	0.0	100.0	97.6	19,425
Peshawar	11.5	0.3	3.9	13.1	3.9	19.6	32.6	13.2	1.0	0.1	0.1	0.5	0.0	0.0	0.0	0.0	0.0	0.3	0.0	100.0	99.2	38,616

[1] MICS indicator 4.1; MDG indicator 7.8 - Use of improved drinking water sources

[2] SDG indicators: 6.1.1 and 6.1.2-Use of improved drinking water sources, use of improved sanitation (not shared), Percentage of households with soap or other cleansing agent

[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.

( ) Figures that are based on 25-49 unweighted cases

More than 91 percent of the population uses an improved source of drinking water; 97 percent in urban areas and 90 percent in rural areas. At division level, it ranges from 82 percent in Hazara to 99 percent in Peshawar.

The most common drinking water source is a motorized pump and piped into dwelling each being 22 percent followed by a hand pump (15 percent). There is huge disparities among divisions on improved sources of drinking water. More than half (52 percent) of the population in Mardan are using drinking water from a motorized pump while in D.I. Khan a hand pump is the most commonly used source of drinking water (42 percent). In Hazara and Malakand division, for more than 35 percent households piped into the dwelling is the main source in this regard. The main water sources are depicted in Figure WS.1.

Figure WS. 1: **Percent distribution of household members by source of drinking water KP-MICS 2016-17**
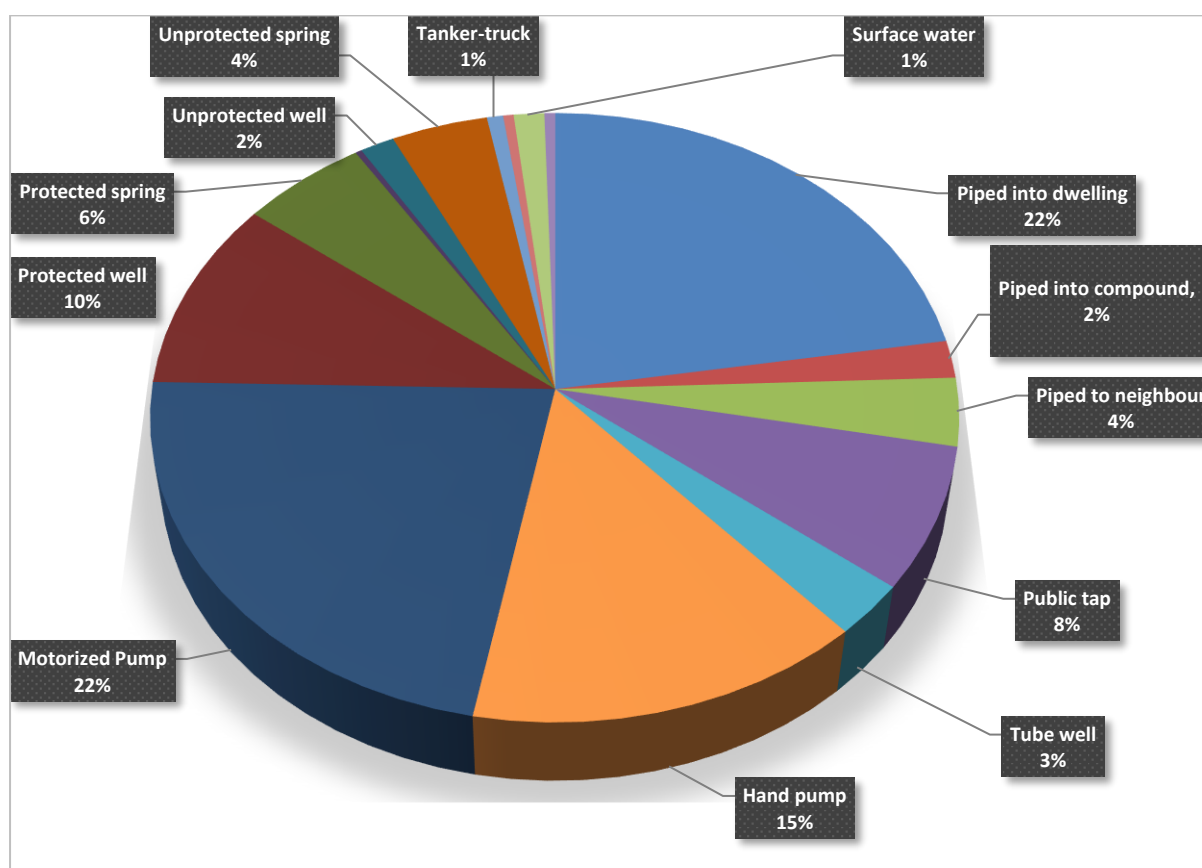
Use of water treatment by households is presented in Table WS.2. Households were asked about ways they may be treating water at home to make it safer to drink. Boiling water, adding bleach or chlorine, using a water filter, and using solar disinfection are considered as effective treatment of drinking 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. Out of those household members who are using unimproved drinking water sources, only 2 percent are found using an appropriate water treatment. Regardless of water source (whether improved or not), less than 3 percent of the population boils the water and less than one percent uses a water filter.

Table WS. 2: Household water treatment

Percentage of household population by drinking water treatment method used in the household, and for household members living in households where an unimproved drinking water source is used, the percentage who are using an appropriate treatment method, Khyber Pakhtunkhwa, 2016-17

	Water treatment method used in the household									Number of household members	Percentage of household members in households using unimproved drinking water sources and using an appropriate water treatment method[1]	Number of household members in households using unimproved drinking water sources
	None	Boil	Add bleach/ chlorine	Strain through a cloth	Use water filter	Solar dis-infection	Let it stand and settle	Other	DK/Missing			
KP	95.2	2.2	0.1	1.4	0.6	0.1	0.6	0.1	0.0	158,564	1.8	13,814
Area of residence												
Urban	90.3	6.1	0.1	1.0	2.2	0.0	0.6	0.2	0.0	25,689	2.2	829
Rural	96.1	1.5	0.1	1.5	0.3	0.1	0.6	0.1	0.0	132,875	1.8	12,985
Main source of drinking water												
Improved	95.5	2.3	0.1	1.0	0.7	0.1	0.5	0.1	0.0	144,750	0.0	0
Unimproved	92.2	1.4	0.0	5.9	0.0	0.4	1.7	0.2	0.0	13,814	1.8	13,814
Education of household head												
None/pre-school	96.3	1.2	0.0	1.6	0.1	0.2	0.8	0.1	0.0	76,941	1.5	7,980
Primary	96.8	1.5	0.0	1.0	0.3	0.1	0.7	0.2	0.0	16,348	0.6	1,694
Middle	95.8	2.2	0.0	1.7	0.5	0.0	0.4	0.0	0.0	16,772	1.6	1,360
Secondary	94.3	3.1	0.2	1.5	0.7	0.0	0.3	0.1	0.0	26,219	4.3	1,759
Higher	90.5	5.5	0.1	1.1	2.6	0.0	0.3	0.2	0.1	22,238	2.0	1,021
DK/Missing	(100.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	46	0.0	0
Wealth index quintile												
Poorest	96.4	0.9	0.0	2.3	0.0	0.2	0.6	0.1	0.0	31,712	1.1	8,110
Second	95.6	1.3	0.0	2.2	0.0	0.1	1.1	0.0	0.0	31,716	2.3	3,163
Middle	96.7	1.2	.1	1.0	.2	.2	.7	.1	.0	31712	3.3	1,601
Fourth	96.8	1.8	0.1	0.7	0.2	0.0	0.4	0.1	0.0	31,713	5.3	545
Richest	90.4	6.0	0.1	0.9	2.7	0.0	0.2	0.3	0.0	31,711	0.9	395
Division												
Bannu	91.0	0.8	0.1	6.0	0.1	0.3	2.2	0.0	0.0	10,565	0.0	672
D.I. Khan	95.3	0.2	0.0	4.2	0.0	0.6	0.8	0.0	0.0	11,766	4.4	1,418
Hazara	93.7	4.0	0.1	1.8	0.4	0.2	0.2	0.2	0.0	30,209	2.2	5,461
Kohat	93.8	2.4	0.0	2.2	0.4	0.0	2.0	0.0	0.1	10,837	2.4	1,567
Malakand	97.6	1.4	0.0	0.4	0.3	0.0	0.2	0.1	0.0	37,145	0.7	3,938
Mardan	97.5	1.0	0.0	0.3	0.7	0.0	0.2	0.1	0.0	19,425	0.0	459
Peshawar	94.2	3.3	0.1	0.4	1.4	0.0	0.6	0.2	0.0	38,616	0.0	300

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

( ) Figures that are based on 25-49 unweighted cases

The amount of time it takes to fetch water is presented in Table WS.3 and the person who usually collects the water is included in Table WS.4. Note that for Table WS.3, household members using water on premises are also shown in this table and for others, the results refer to one roundtrip from home to drinking water source. Information on the number of trips made in one day was not collected.

The availability of water on premises is associated with greater use, better family hygiene and better health outcomes. Table WS.3 shows that for 82 percent of the household population, the drinking water source is on premises. For a water collection round trip of 30 minutes or more, it has been observed that households carry progressively less water and are likely to compromise on the minimal basic drinking water needs of the household.[36] For 5 percent of the household population, it takes the household more than 30 minutes or more to get to the water source and bring water. In rural areas a higher percentage (6 percent) of household members live in households that spend this amount of time in collecting water compared to those in urban areas (1 percent).

Table WS. 3: Time to source of drinking water

Percent 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, Khyber Pakhtunkhwa, 2016-17

	Time to source of drinking water									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	DK/ Missing	Water on premises	Less than 30 minutes	30 minutes or more	DK/ Missing	Total	
KP	82.1	4.0	5.0	0.2	1.4	2.0	5.1	0.2	100.0	158,564
Area of residence										
Urban	93.8	1.8	0.9	0.3	0.7	1.1	1.1	0.4	100.0	25,689
Rural	79.8	4.4	5.7	0.2	1.5	2.2	5.8	0.2	100.0	132,875
Education of household head										
None/pre-school	78.1	4.7	6.7	0.2	1.6	2.4	6.2	0.2	100.0	76,941
Primary	79.6	4.3	5.2	0.5	1.7	2.6	6.0	0.1	100.0	16,348
Middle	83.0	4.4	4.3	0.2	1.3	1.6	5.1	0.1	100.0	16,772
Secondary	86.6	3.4	3.2	0.1	1.4	1.5	3.4	0.4	100.0	26,219
Higher	91.8	2.0	1.5	0.1	0.4	1.2	2.6	0.4	100.0	22,238
DK/Missing	(100.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	100.0	46
Wealth index quintile										
Poorest	52.3	8.6	13.0	0.5	2.9	5.7	16.8	0.2	100.0	31,712
Second	77.2	5.4	7.3	0.1	2.1	2.2	5.4	0.4	100.0	31,716
Middle	88.6	3.4	2.9	.1	1.2	1.3	2.3	.1	100.0	31712
Fourth	94.8	1.8	1.3	0.3	0.5	0.5	0.5	0.1	100.0	31,713
Richest	97.6	0.9	0.2	0.1	0.3	0.5	0.3	0.2	100.0	31,711
Division										
Bannu	86.0	1.5	6.1	0.1	0.7	0.6	4.9	0.1	100.0	10,565
D.I. Khan	80.7	2.0	4.7	0.6	1.0	2.8	6.8	1.4	100.0	11,766
Hazara	64.3	8.4	9.1	0.2	2.1	5.0	10.9	0.1	100.0	30,209
Kohat	70.6	6.6	7.9	0.3	2.8	2.1	9.0	0.6	100.0	10,837
Malakand	79.6	3.6	5.8	0.4	1.6	2.5	6.4	0.1	100.0	37,145
Mardan	95.2	1.6	0.8	0.1	1.4	0.6	0.3	0.0	100.0	19,425
Peshawar	94.4	2.8	2.0	0.1	0.5	0.1	0.1	0.1	100.0	38,616

( ) Figures that are based on 25-49 unweighted cases

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[36] *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.4 shows that 20 percent an adult male usually collects drinking water when the source is not on the premises. Adult women collect water in 70 percent of cases, while for the rest of the households, female or male children under age 15 collect water (7 percent). In rural areas, an adult woman usually collects drinking water (73 percent) in contrast to urban areas where males have a greater role (51 percent) in collecting the water.

Table WS. 4: Person collecting water

Percentage of households without drinking water on premises, and percent distribution of households without drinking water on premises according to the person usually collecting drinking water used in the household, Khyber Pakhtunkhwa, 2016-17

	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	Adult man	Female child under age 15	Male child under age 15	DK/ Missing	Total	
KP	17.3	20,995	70.2	20.1	4.2	3.3	2.2	100.0	3,623
Area of residence									
Urban	5.6	3,672	33.7	51.3	5.2	4.4	5.4	100.0	207
Rural	19.7	17,323	72.5	18.2	4.1	3.2	2.0	100.0	3,416
Education of household head									
None/pre-school	21.5	9,928	74.9	16.2	3.9	2.9	2.1	100.0	2,132
Primary	19.9	2,162	74.2	14.9	5.8	3.8	1.3	100.0	430
Middle	16.6	2,260	61.2	27.0	4.7	3.7	3.4	100.0	375
Secondary	12.6	3,575	62.2	28.5	3.4	3.4	2.5	100.0	451
Higher	7.7	3,064	51.0	38.0	3.6	5.2	2.2	100.0	237
DK/Missing	(*)	6	(*)	(*)	(*)	(*)	(*)	100.0	0
Wealth index quintile									
Poorest	46.0	4,136	78.4	13.1	4.3	2.7	1.5	100.0	1,902
Second	22.0	4,138	65.6	23.3	5.3	3.6	2.2	100.0	911
Middle	11.9	4120	63.7	27.4	2.1	3.4	3.5	100.0	492
Fourth	5.0	4,255	53.2	34.7	2.6	6.0	3.5	100.0	214
Richest	2.4	4,345	28.7	56.7	3.5	5.6	5.4	100.0	104
Division									
Bannu	13.3	1,195	18.6	53.0	10.5	16.7	1.2	100.0	159
D.I. Khan	21.0	1,352	42.1	51.6	1.8	1.7	2.8	100.0	284
Hazara	33.7	4,336	84.4	9.8	3.2	1.6	1.0	100.0	1,461
Kohat	27.2	1,411	59.0	35.2	0.7	1.4	3.6	100.0	384
Malakand	19.8	4,799	71.7	14.7	5.3	4.7	3.6	100.0	949
Mardan	3.6	2,646	64.0	14.6	11.3	6.3	3.8	100.0	95
Peshawar	5.6	5,256	67.2	22.6	6.4	3.1	0.8	100.0	292

(*) Figures that are based on fewer than 25 unweighted cases

Use of Improved Sanitation

An improved sanitation facility is defined as one that hygienically separates human excreta from human 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. The data on the use of improved sanitation facilities in KP are provided in Table WS.5.

Eighty five percent of the population is living in households using improved sanitation facilities (Table WS.5), with a higher proportion in urban areas (96 percent) compared to rural areas (83 percent). Across divisions, use of improved sanitation facilities is most common in Peshawar division (94 percent) while it is little lower in Hazara and Malakand division (80 percent). The table indicates that use of improved sanitation facilities is strongly associated with wealth. Fifty three percent of the population living in the households in poorest quintile is using improved sanitation compared to 99 percent of the population living in the households in richest quintile.

In KP around 9 percent of the population has no access to toilet facilities. In rural areas, the percentage of the population practicing open defecation is 10 percent in contrast to only less than 1 percent in urban areas.

Table WS. 5: Types of sanitation facilities

Percent distribution of household population according to type of toilet facility used by the household, Khyber Pakhtunkhwa, 2016-17

	Type of toilet facility used by household														
	Improved sanitation facility							Unimproved sanitation facility							
	Flush/Pour flush to:														
	Piped sewer system	Septic tank	Pit latrine	Unknown place/not sure/DK where	Ventilated improved pit latrine	Pit latrine with slab	Compos-ting toilet	Flush/Pour flush to somewhere else	Pit latrine without slab/open pit	Bucket	Hanging toilet/latrine	Other	Open defecation (no facility, bush, field)	Total	Number of household members
KP	7.8	43.4	20.6	0.6	4.4	5.6	3.0	2.0	2.2	1.1	0.5	0.0	8.7	100.0	158,564
Area of residence															
Urban	22.2	55.5	13.2	0.5	2.2	2.0	0.4	2.2	0.9	0.3	0.2	0.1	0.3	100.0	25,689
Rural	5.0	41.1	22.1	0.6	4.8	6.3	3.4	2.0	2.5	1.3	0.6	0.0	10.3	100.0	132,875
Education of household head															
None/pre-school	6.2	37.1	20.8	0.6	5.5	5.3	3.9	2.1	3.0	1.7	0.6	0.0	13.1	100.0	76,941
Primary	7.6	41.2	19.4	0.3	4.9	7.0	3.4	3.7	2.0	0.7	0.6	0.0	9.1	100.0	16,348
Middle	9.2	46.5	19.9	0.4	3.9	6.3	2.3	2.3	2.2	1.0	0.5	0.0	5.4	100.0	16,772
Secondary	8.2	50.9	22.5	0.6	3.6	5.2	1.7	1.5	1.3	0.3	0.5	0.0	3.6	100.0	26,219
Higher	12.0	55.7	19.3	0.6	1.7	5.2	1.2	0.7	1.1	0.5	0.3	0.0	1.7	100.0	22,238
DK/Missing	(4.6)	(67.6)	(0.0)	(0.0)	(0.0)	(2.8)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(25.0)	100.0	46
Wealth index quintile															
Poorest	1.2	14.3	16.1	0.8	9.8	5.8	5.3	2.8	5.5	2.0	1.0	0.0	35.5	100.0	31,712
Second	4.3	33.1	24.7	0.5	6.8	7.8	6.6	2.1	4.0	2.5	0.9	0.0	6.8	100.0	31,716
Middle	6.7	49.7	24.4	0.8	3.0	7.2	2.5	2.2	1.1	0.9	0.6	0.0	1.1	100.0	31,712
Fourth	9.2	57.6	23.2	0.5	1.6	4.2	0.5	2.0	0.5	0.1	0.2	0.1	0.2	100.0	31,713
Richest	17.7	62.5	14.7	0.2	0.8	2.9	0.0	0.9	0.1	0.0	0.0	0.0	0.0	100.0	31,711
Division															
Bannu	3.8	31.7	22.7	0.0	4.5	6.1	23.2	0.2	2.4	0.1	0.6	0.0	4.6	100.0	10,565
D.I. Khan	11.0	43.5	12.4	0.0	6.6	8.3	0.6	0.3	7.2	0.1	1.1	0.0	8.9	100.0	11,766
Hazara	6.6	55.9	9.5	0.3	1.8	5.6	0.0	4.2	1.2	0.2	0.2	0.0	14.4	100.0	30,209
Kohat	12.5	28.2	24.4	0.1	10.6	5.8	0.7	0.3	7.6	0.4	2.8	0.1	6.5	100.0	10,837
Malakand	6.5	24.0	30.1	1.2	7.7	8.8	1.6	1.8	1.3	1.2	0.2	0.0	15.7	100.0	37,145
Mardan	2.4	44.2	30.1	0.3	0.9	4.5	4.3	3.2	1.9	4.5	0.5	0.0	3.1	100.0	19,425
Peshawar	11.6	59.3	16.3	0.8	2.6	2.0	1.7	1.3	1.1	0.9	0.2	0.0	2.1	100.0	38,616

( ) Figures that are based on 25-49 unweighted cases

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

Table WS.6 shows that 78 percent of the household population is using an improved sanitation facility which is not shared. Only 7 percent of households use an improved sanitation facility that is public or shared with other households. The population living in the households in the poorest quintile is less likely to use the improved sanitation (48 percent) that is not shared compared to the population residing in the households in the higher quintiles (95 percent). Figures WS.2 and WS 3 present the distribution of the survey population by use of improved sources of drinking water and sanitation facilities.

Table WS. 6: Use and sharing of sanitation facilities

Percent distribution of household population by use of private and public sanitation facilities and use of shared facilities, by users of improved and unimproved sanitation facilities, Khyber Pakhtunkhwa, 2016-17

| | 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	5 households or less	More than 5 households	DK/Missing	Not shared	Public facility	5 households or less	More than 5 households	DK/Missing			
KP	77.8	0.1	6.5	0.8	0.2	5.2	0.0	0.6	0.1	0.0	8.7	100.0	158,564
Area of residence													
Urban	90.7	0.1	4.4	0.7	0.2	3.4	0.0	0.2	0.0	0.0	0.3	100.0	25,689
Rural	75.2	0.1	6.9	0.8	0.2	5.6	0.0	0.6	0.1	0.0	10.3	100.0	132,875
Education of household head													
None/pre-school	72.1	0.1	6.2	0.9	0.3	6.5	0.0	0.7	0.1	0.0	13.1	100.0	76,941
Primary	74.4	0.1	8.0	1.4	0.1	6.3	0.0	0.5	0.1	0.1	9.1	100.0	16,348
Middle	79.0	0.3	8.8	0.5	0.1	5.4	0.1	0.5	0.0	0.0	5.4	100.0	16,772
Secondary	85.5	0.0	6.4	0.7	0.1	3.2	0.0	0.5	0.0	0.0	3.6	100.0	26,219
Higher	89.8	0.2	5.0	0.5	0.2	2.3	0.0	0.3	0.0	0.0	1.7	100.0	22,238
DK/Missing	(50.0)	(0.0)	(25.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(25.0)	100.0	46
Wealth index quintile													
Poorest	48.1	0.1	4.6	0.4	0.1	10.2	0.0	0.9	0.1	0.1	35.5	100.0	31,712
Second	73.7	0.2	8.6	1.2	0.0	8.1	0.0	1.1	0.2	0.1	6.8	100.0	31,716
Middle	83.1	.1	9.3	1.2	.5	4.1	.0	.6	0.0	0.0	1.1	100.0	31712
Fourth	88.5	0.1	7.2	0.9	0.2	2.7	0.0	0.2	0.0	0.0	0.2	100.0	31,713
Richest	95.3	0.1	3.0	0.4	0.1	1.1	0.0	0.0	0.0	0.0	0.0	100.0	31,711
Division													
Bannu	80.4	0.4	10.6	0.5	0.1	3.0	0.0	0.3	0.1	0.0	4.6	100.0	10,565
D.I. Khan	76.1	0.0	5.9	0.4	0.0	7.4	0.0	1.3	0.0	0.0	8.9	100.0	11,766
Hazara	74.3	0.1	5.0	0.3	0.0	5.5	0.0	0.2	0.1	0.1	14.4	100.0	30,209
Kohat	69.3	0.2	10.7	1.8	0.3	8.4	0.0	2.2	0.3	0.2	6.5	100.0	10,837
Malakand	74.4	0.1	4.8	0.5	0.1	4.1	0.0	0.4	0.0	0.0	15.7	100.0	37,145
Mardan	75.2	0.1	9.7	1.7	0.2	9.0	0.1	0.9	0.0	0.0	3.1	100.0	19,425
Peshawar	87.1	0.1	5.7	1.0	0.5	3.2	0.0	0.2	0.1	0.0	2.1	100.0	38,616

[1] **MICS indicator 4.4 - Safe disposal of child's faeces**
( ) Figures that are based on 25-49 unweighted cases

Figure WS. 2:   **Use of improved water and sanitation in urban and rural areas, KP-MICS, 2016-17**
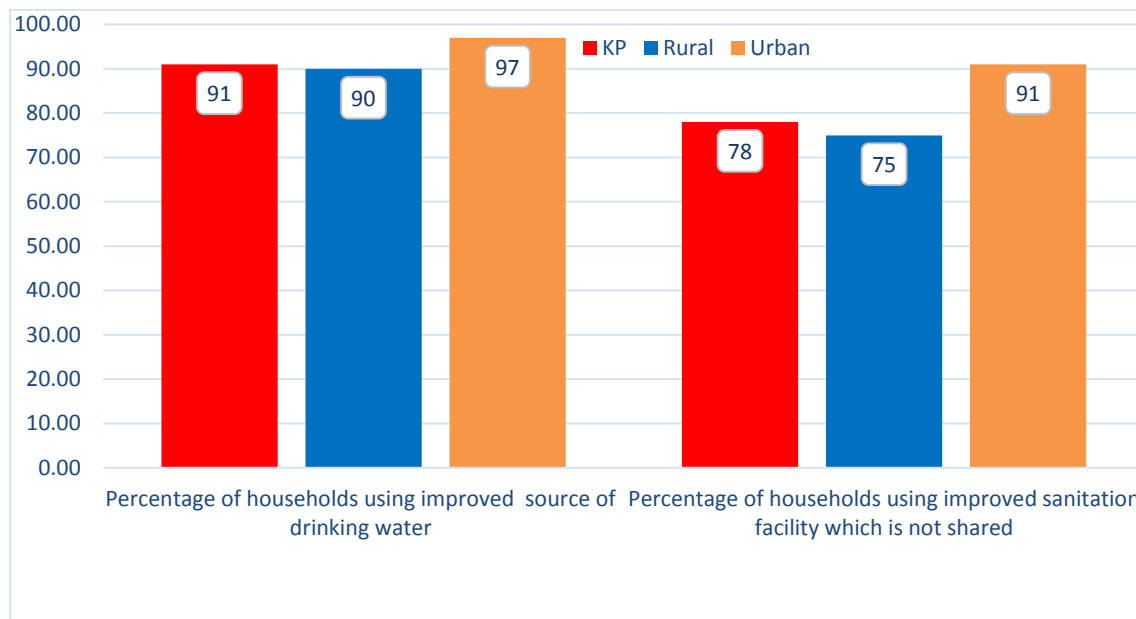
Figure WS. 3:   **Percent distribution of household members by use and sharing of sanitation facilities, KP-MICS, 2016-17**
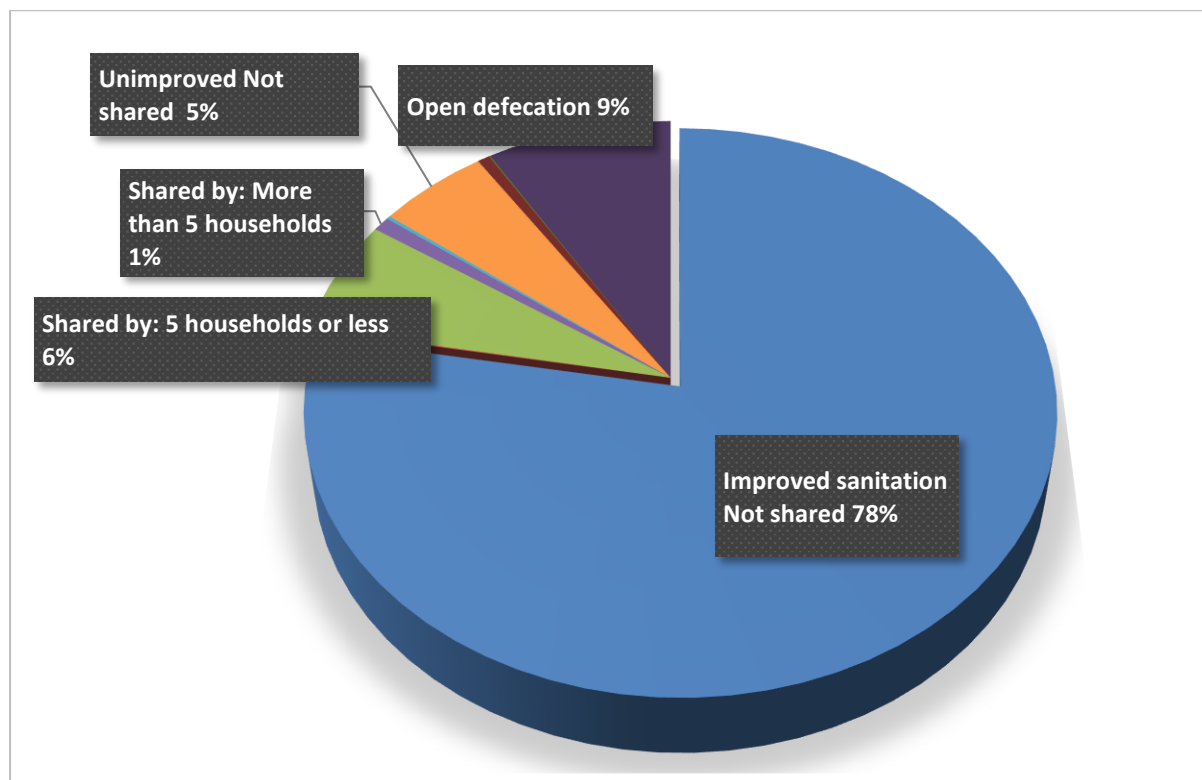
Having access to both an improved drinking water source and an improved sanitation facility brings the largest public health benefits to a household[37]. In its 2008 report[38], the JMP developed a new way of presenting the access figures, by disaggregating and refining the data on drinking-water and sanitation and reflecting them in "ladder" format. This ladder allows 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 with no sanitation facilities at all – who revert to open defecation, of those reliant on technologies defined by JMP as "unimproved," of those sharing sanitation facilities of otherwise acceptable technology, and those using "improved" sanitation facilities.

Table WS.7 presents the percentages of household population by these drinking water and sanitation ladders. The table also shows the percentage of household members using both improved sources of drinking water[39] and an improved sanitary means of excreta disposal. Overall, 73 percent of the population is using both improved drinking water and improved sanitation. At divisional level, access to an improved drinking water source and improved sanitation facility is highest in Peshawar (87 percent) followed by Bannu (76 percent) and lowest in Kohat division (60 percent). The population in urban areas is more likely to use improved drinking water sources and improved sanitation than in rural areas (88 percent and 70 percent respectively). There are also notable differences across wealth quintiles ranging from 38 percent of population living in the households in the poorest quintile to 94 percent of population living in the households in the richest quintile. The results are presented by area of residence and wealth quintiles in Figure WS.4

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[37] *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.*

[38] *WHO/UNICEF JMP. 2008. MDG assessment report.*
http://www.wssinfo.org/fileadmin/user_upload/resources/1251794333-JMP_08_en.pdf

[39] *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, Khyber Pakhtunkhwa, 2016-17

| | Improved drinking water[1, a] | | | | Percentage of household population using: | | | | | Improved drinking water sources and improved sanitation | Number of household members |
| | | | | | Unimproved sanitation | | | | | | |
	Piped into dwelling, plot or yard	Other improved	Unimproved drinking water	Total	Improved sanitation[2]	Shared improved facilities	Unimproved facilities	Open defecation	Total		
KP	24.4	66.9	8.7	100.0	77.8	7.6	5.9	8.7	100.0	72.8	158,564
Area of residence											
Urban	22.1	74.7	3.2	100.0	90.7	5.3	3.7	0.3	100.0	87.9	25,689
Rural	24.8	65.4	9.8	100.0	75.2	8.1	6.3	10.3	100.0	69.9	132,875
Education of household head											
None/pre-school	23.6	66.0	10.4	100.0	72.1	7.4	7.4	13.1	100.0	66.9	76,941
Primary	25.9	63.7	10.4	100.0	74.4	9.5	7.0	9.1	100.0	68.4	16,348
Middle	24.2	67.7	8.1	100.0	79.0	9.6	6.0	5.4	100.0	74.3	16,772
Secondary	24.9	68.4	6.7	100.0	85.5	7.2	3.6	3.6	100.0	80.6	26,219
Higher	25.6	69.8	4.6	100.0	89.8	5.9	2.6	1.7	100.0	86.5	22,238
DK/Missing	(5.5)	(94.5)	(0.0)	100.0	(50.0)	(25.0)	(0.0)	(25.0)	100.0	(50.0)	46
Wealth index quintile											
Poorest	25.4	49.1	25.6	100.0	48.1	5.1	11.2	35.5	100.0	37.9	31,712
Second	24.3	65.7	10.0	100.0	73.7	10.0	9.5	6.8	100.0	66.3	31,716
Middle	25.5	69.5	5.0	100.0	83.1	11.0	4.8	1.1	100.0	78.9	31712
Fourth	25.3	73.0	1.7	100.0	88.5	8.4	2.9	0.2	100.0	87.0	31,713
Richest	21.5	77.3	1.2	100.0	95.3	3.6	1.2	-	100.0	94.1	31,711
Division											
Bannu	24.2	69.5	6.4	100.0	80.4	11.6	3.4	4.6	100.0	75.5	10,565
D.I. Khan	13.9	74.1	12.1	100.0	76.1	6.4	8.7	8.9	100.0	67.1	11,766
Hazara	39.9	42.0	18.1	100.0	74.3	5.4	5.9	14.4	100.0	64.9	30,209
Kohat	18.1	67.4	14.5	100.0	69.3	13.0	11.2	6.5	100.0	60.5	10,837
Malakand	39.5	49.8	10.6	100.0	74.4	5.4	4.6	15.7	100.0	69.1	37,145
Mardan	6.2	91.4	2.4	100.0	75.2	11.6	10.1	3.1	100.0	74.1	19,425
Peshawar	11.8	87.4	0.8	100.0	87.1	7.3	3.5	2.1	100.0	86.5	38,616

[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.

( ) Figures that are based on 25-49 unweighted cases

Figure WS. 4:   **Use of improved drinking water sources and improved sanitation facilities by household members, KP-MICS, 2016-17**
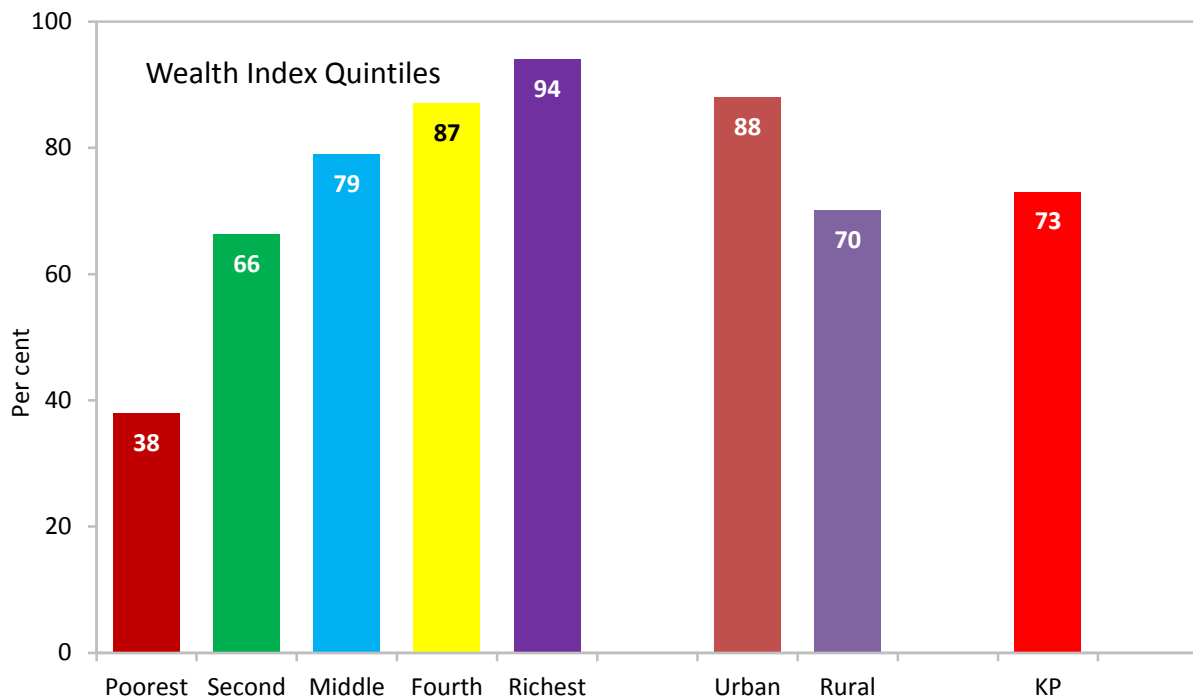
Safe disposal of a child's faeces is disposing of the stool, by the child using a toilet or by rinsing it into a toilet or latrine. Putting disposable diapers with solid waste, a very common practice throughout the world has thus far been classified as an inadequate means of disposal of child faeces for concerns about poor disposal of solid waste itself. This classification is currently under review.

Disposal of faeces of children 0-2 years of age is presented in Table WS.8. The stools of 48 percent of the children age 0-2 years were disposed of safely. The most commonly method of children's stool disposal is putting or rinsing into toilet or latrine (42 percent). For 27 percent of children, stool was thrown into garbage followed by 22 percent put/rinsed into drain or ditch but 6 percent of children used toilet or latrine. Safe disposal of child's faeces is more common in urban (61 percent) compared to rural areas (45 percent). Mothers with only pre-school or no education are less likely to dispose-off the stool safely (42 percent) compared to those in other education groups (52-57 percent)

Table WS. 8: Disposal of child's faeces

Percent distribution of children age 0-2 years according to place of disposal of child's faeces, and the percentage of children age 0-2 years whose stools were disposed of safely the last time the child passed stools, Khyber Pakhtunkhwa, 2016-17

| | Place of disposal of child's faeces | | | | | | | | | Percentage of children whose last stools were disposed of safely[1] | Number of children age 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/Missing	Total		
KP	5.9	41.5	21.8	26.8	0.6	1.9	0.4	1.1	100.0	47.5	12,467
Area of residence											
Urban	9.4	51.2	16.8	20.4	0.1	0.5	0.4	1.2	100.0	60.6	1,917
Rural	5.3	39.8	22.7	27.9	0.6	2.2	0.4	1.1	100.0	45.1	10,550
Type of sanitation facility used by household members											
Improved	6.7	44.8	20.5	25.0	0.5	1.2	0.4	1.1	100.0	51.4	10,609
Unimproved	3.2	29.6	31.7	29.9	0.2	3.6	0.6	1.2	100.0	32.8	737
Open defecation	0.8	18.9	27.3	41.8	1.5	8.2	0.4	1.1	100.0	19.7	1,121
Mother's education											
None/pre-school	3.8	38.5	23.7	28.9	0.7	2.6	0.5	1.3	100.0	42.3	7,693
Primary	7.8	48.8	21.8	19.4	0.2	0.9	0.2	0.9	100.0	56.6	1,590
Middle	9.2	42.9	19.9	25.6	0.2	0.7	0.5	1.0	100.0	52.1	877
Secondary	8.3	47.5	15.8	26.3	0.4	1.4	0.0	0.3	100.0	55.8	1,140
Higher	12.5	44.9	16.1	24.1	0.6	0.3	0.3	1.1	100.0	57.4	1,166
Wealth index quintile											
Poorest	1.9	25.0	28.7	36.5	1.1	5.2	0.5	1.0	100.0	26.9	2,530
Second	4.7	36.8	23.6	30.6	0.6	2.0	0.4	1.2	100.0	41.6	2,510
Middle	6.1	45.2	19.6	25.2	.7	1.4	0.5	1.2	100.0	51.3	2,460
Fourth	7.6	50.5	19.3	20.7	0.2	0.7	0.2	0.9	100.0	58.0	2,552
Richest	9.4	50.6	17.5	20.6	0.2	0.2	0.3	1.1	100.0	60.0	2,415
Division											
Bannu	7.4	60.7	21.4	8.7	0.0	0.6	0.0	1.2	100.0	68.1	892
D.I. Khan	1.7	33.0	22.4	37.2	0.3	4.6	0.2	0.6	100.0	34.6	1,081
Hazara	9.8	33.7	25.3	27.3	0.8	1.7	0.3	1.1	100.0	43.5	2,332
Kohat	6.3	34.4	19.4	35.1	1.3	1.7	0.6	1.2	100.0	40.7	883
Malakand	4.8	37.7	20.7	31.4	0.7	3.1	0.6	1.0	100.0	42.5	2,936
Mardan	5.9	46.5	23.7	19.1	0.5	1.9	0.3	2.0	100.0	52.4	1,511
Peshawar	4.9	48.9	19.5	24.7	0.3	0.4	0.4	0.9	100.0	53.8	2,831

[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 both the incidence of diarrhoea and pneumonia in children under five[40]. It is most effective when done using water and soap 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 asking if a household has a specific place where people wash their hands and, if yes, observing whether water and soap (or other local cleansing materials) are available at this place[41].

In KP, a specific place for handwashing is observed in 93 percent of the households while only 7 percent of households could not indicate a specific place where household members usually wash their hands (Table WS.9). Among households where a place for handwashing is observed, 69 percent had both water and soap (or another cleansing agent) present at the specific place. In 17 percent of the households, only water is available at the specific place, while in less than 1 percent of the households, the place has soap but no water. The remaining 5 percent of households have neither water nor soap available at the specific place for handwashing.

Among divisions, 77 percent of households in Peshawar division have water and soap available at a place for handwashing compared to 52 percent of households in Kohat division. There are also notable differences by wealth quintile. Percentage of households in the richest wealth quintile having water and soap available at a place for handwashing is more than twice as high compared to households in the poorest wealth quintile (93 percent and 42 percent respectively).

Results presented in Table WS.10 show that 2 percent of the households were not able or refused to show any soap present in the household, whereas another 6 percent did not have any soap in the households, leaving the remaining 92 percent of households, in which either the soap was observed or shown to the interviewer

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[40] *Cairncross, S and Valdmanis, V. 2006. Water supply, sanitation and hygiene promotion Chapter 41 in Disease Control Priorities in Developing Countries. 2nd Edition, Edt. Jameson et al. The World Bank*
[41] *Ram, P et al. editors. 2008. Use of a novel method to detect reactivity to structured observation for measurement of handwashing behavior. American Society of Tropical Medicine and Hygiene.*

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 percent distribution of households by availability of water and soap at specific place for handwashing, Khyber Pakhtunkhwa, 2016-17

	Percentage of households:			Place for handwashing observed									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
				Water is available and:			Water is not available and:							
					No soap:			No soap:						
	Where place for handwashing was observed	With no specific place for handwashing in the dwelling, yard, or plot	Number of households	Soap present	Ash, mud, or sand present	No other cleansing agent present	Soap present	Ash, mud, or sand present	No other cleansing agent present	No specific place for handwashing in the dwelling, yard, or plot	Total		
KP	92.7	7.1	20,995	68.7	0.5	17.4	1.3	0.0	5.1	7.1	100.0	69.1	20,946
Area of residence													
Urban	96.3	3.4	3,672	85.6	0.1	9.4	0.4	0.0	0.9	3.4	100.0	85.8	3,662
Rural	91.9	7.9	17,323	65.1	0.6	19.1	1.4	0.0	5.9	7.9	100.0	65.6	17,283
Education of household head													
None/pre-school	92.0	7.7	9,928	62.0	0.6	22.0	1.6	0.1	6.0	7.8	100.0	62.6	9,901
Primary	93.0	6.7	2,162	66.0	0.6	18.6	1.3	0.0	6.8	6.7	100.0	66.6	2,157
Middle	93.0	6.9	2,260	68.7	0.4	17.4	0.8	0.0	5.7	6.9	100.0	69.1	2,258
Secondary	92.7	7.1	3,575	76.5	0.5	11.2	1.0	0.0	3.7	7.1	100.0	77.0	3,567
Higher	94.3	5.5	3,064	82.8	0.2	8.8	0.7	0.0	1.9	5.5	100.0	83.1	3,058
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	100.0	(*)	6
Wealth index quintiles													
Poorest	85.9	13.5	4,136	41.5	0.8	25.5	3.9	0.2	14.5	13.6	100.0	42.4	4,112
Second	90.3	9.5	4,138	56.6	0.8	25.1	1.4	0.0	6.6	9.5	100.0	57.3	4,130
Middle	93.1	6.8	4120	69.3	.4	19.6	.7	.0	3.2	6.8	100.0	69.7	4,113
Fourth	95.7	4.3	4,255	81.2	0.4	12.8	0.3	0.0	1.1	4.3	100.0	81.6	4,253
Richest	98.0	1.8	4,345	93.0	0.1	4.8	0.0	0.0	0.3	1.8	100.0	93.1	4,337
Division													
Bannu	93.2	6.6	1,195	63.9	0.7	16.9	1.2	0.2	10.3	6.7	100.0	64.7	1,193
D.I. Khan	94.0	5.8	1,352	66.3	1.6	24.8	0.3	0.0	1.2	5.8	100.0	67.9	1,350
Hazara	93.8	5.7	4,336	68.1	0.3	14.8	1.3	0.0	9.8	5.7	100.0	68.4	4,315
Kohat	73.2	26.7	1,411	51.1	0.6	14.8	2.3	0.0	4.5	26.7	100.0	51.7	1,409
Malakand	92.8	7.0	4,799	66.2	0.4	17.5	3.1	0.0	5.9	7.0	100.0	66.5	4,788
Mardan	97.0	2.8	2,646	72.2	0.1	22.0	0.2	0.0	2.7	2.8	100.0	72.3	2,643
Peshawar	94.2	5.7	5,256	76.0	0.5	16.1	0.1	0.1	1.6	5.7	100.0	76.6	5,248

[1] **MICS indicator 4.5 - Place for handwashing**
(*) Figures that are based on fewer than 25 unweighted cases

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

Percent distribution of households by availability of soap or other cleansing agent in the dwelling, Khyber Pakhtunkhwa, 2016-17

| | 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 household |
	Soap or other cleansing agent observed	Soap or other cleansing agent not observed: Soap or other cleansing agent shown	Soap or other cleansing agent not observed at place for handwashing: No soap or other cleansing agent in household	Soap or other cleansing agent not observed at place for handwashing: Not able/Does not want to show cleansing agent	Missing	Soap or other cleansing agent not observed: Soap or other cleansing agent shown	Soap or other cleansing agent not observed at place for handwashing: No soap or other cleansing agent in household	Soap or other cleansing agent not observed at place for handwashing: Not able/Does not want to show cleansing agent	Missing			
KP	70.3	14.2	6.4	1.7	0.1	4.3	1.7	1.2	0.0	100.0	88.8	20,995
Area of residence												
Urban	86.0	6.5	2.9	0.8	0.0	2.1	0.6	1.0	0.0	100.0	94.6	3,672
Rural	67.0	15.8	7.1	1.9	0.1	4.8	2.0	1.3	0.0	100.0	87.6	17,323
Education of household head												
None/pre-school	64.1	17.0	8.8	2.1	0.1	4.9	1.7	1.4	0.0	100.0	85.9	9,928
Primary	67.7	17.2	6.3	1.8	0.0	3.8	1.3	1.8	0.0	100.0	88.7	2,162
Middle	69.9	15.0	5.7	2.2	0.2	4.4	1.7	0.9	0.0	100.0	89.2	2,260
Secondary	77.9	9.8	3.9	1.2	0.0	4.1	2.3	0.8	0.0	100.0	91.8	3,575
Higher	83.6	7.4	2.3	0.9	0.1	3.2	1.5	0.9	0.0	100.0	94.2	3,064
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	100.0	(*)	6
Wealth index quintile												
Poorest	46.2	21.6	15.0	3.1	0.1	8.3	3.7	2.1	0.0	100.0	76.1	4,136
Second	58.7	20.9	8.3	2.4	0.1	5.6	2.6	1.5	0.0	100.0	85.1	4,138
Middle	70.3	15.3	5.6	1.8	.0	4.2	1.7	1.0	0.0	100.0	89.9	4,120
Fourth	81.8	10.1	2.9	0.9	0.0	2.7	0.6	0.9	0.0	100.0	94.6	4,255
Richest	92.9	3.6	0.7	0.7	0.1	1.2	0.2	0.6	0.0	100.0	97.7	4,345
Division												
Bannu	66.0	20.5	3.7	2.7	0.3	4.7	0.6	1.4	0.1	100.0	91.3	1,195
D.I.Khan	68.1	15.7	6.0	4.2	0.0	4.4	.6	1.1	0.0	100.0	88.2	1,352
Hazara	69.4	14.1	8.4	1.8	0.1	4.0	1.1	1.0	0.0	100.0	87.5	4,336
Kohat	53.9	15.4	3.1	0.6	0.1	11.4	14.4	1.0	0.0	100.0	80.7	1,411
Malakand	69.5	14.8	7.0	1.5	0.1	4.6	1.1	1.4	0.0	100.0	88.9	4,799
Mardan	72.4	15.1	7.2	2.4	0.1	2.6	0.2	0.2	0.0	100.0	90.0	2,646
Peshawar	76.6	11.0	5.5	1.1	0.1	3.3	0.8	1.7	0.0	100.0	90.9	5,256

[1] **MICS indicator 4.6 - Availability of soap or other cleansing agent**   (*) Figures that are based on fewer than 25 unweighted cases

VIII. Reproductive Health

Fertility

Measures of current fertility are presented in Table RH.1. In MICS, age specific and total fertility rates are calculated by using information on the date of last birth of each woman and are based on the one year period (1-12 months) preceding the survey. Rates are underestimated by a very small margin due to absence of information on multiple births (twins, triplets, etc.) and on women who may have had multiple deliveries during the one year period preceding the survey. The total fertility rate (TFR) is calculated by summing the age-specific fertility rates calculated for each of the 5-year age groups of women, from age 15 through 49. The total fertility rate (TFR) is a synthetic measure that denotes the number of live births a woman would have if she were subject to the current age-specific fertility rates throughout her reproductive years (15-49 years). The general fertility rate (GFR) is the number of live births occurring during the specified period per 1,000 women age 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, age-specific and total fertility rates, the general fertility rate, and the crude birth rate for the one-year period preceding the survey, by area, Khyber Pakhtunkhwa,2016-17			
Age	Urban	Rural	Total
15-19 [1]	63.0	61.4	61.7
20-24	176.2	184.6	183.2
25-29	212.6	214.3	214.0
30-34	150.0	177.4	172.6
35-39	90.1	124.2	118.2
40-44	19.9	45.1	40.5
45-49	-	21.4	17.9
TFR [a]	3.6	4.1	4.0
GFR [b]	117.9	131.4	129.1
CBR [c]	29.1	30.3	30.1
[1] MICS indicator 5.1; MDG indicator 5.4 - Adolescent birth rate			
[a] TFR: Total fertility rate expressed per woman age 15-49			
[b] GFR: General fertility rate expressed per 1,000 women age 15-49			
[c] CBR: Crude birth rate expressed per 1,000 population			

Table RH.1 shows current fertility in KP at the provincial level and by area. The TFR for the one year preceding the MICS KP 2016-17 is 4 births per woman. It is slightly higher in rural areas (4.1) than in urban (3.6). The data in the table show that age specific fertility rates (ASFRs) are higher for all age groups in rural areas compared to urban areas. The urban-rural difference in fertility is most pronounced for women in the 35-39 age group; 90 births per 1,000 women in urban versus 124 births per 1,000 in rural areas. The overall age pattern of fertility, as reflected in the ASFRs, indicates that childbearing begins early. Fertility among young women rapidly increases from 62 births per 1,000 for women age 15-19 to a peak of 214 births per 1,000 among women age 25-29, and declines thereafter (Figure RH.1)

Figure RH 1:   Age-specific fertility rates by area, KP-MICS,2016-17
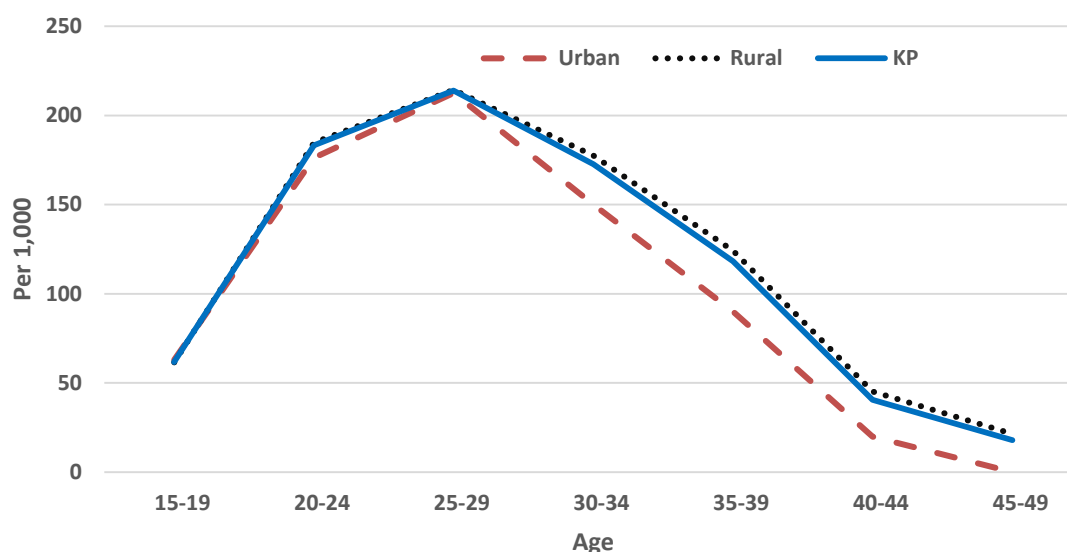
Table RH.2 shows adolescent birth rates and total fertility rates. The adolescent birth rate (age-specific fertility rate for women age 15-19) is defined as the number of births to women age 15-19 years during the one year period preceding the survey, divided by the average number of women age 15-19 (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 and total fertility rate		
Adolescent birth rates and total fertility rates for the *one-year* period preceding the survey, Khyber Pakhtunkhwa, 2016-17		
	Adolescent birth rate[1] (Age-specific fertility rate for women age 15-19)	Total fertility rate
KP	61.7	4.0
Area of residence		
Urban	63.0	3.6
Rural	61.4	4.1
Education of household head		
None/Preschool	83.7	4.3
Primary	62.9	4.2
Middle	57.1	4.0
Secondary	47.7	3.7
Higher	21.7	2.8
Wealth index quintile		
Poorest	47.8	4.8
Second	49.5	4.3
Middle	67.4	3.8
Fourth	78.4	3.9
Richest	64.0	3.5
Division		
Bannu	66.7	5.5
D.I. Khan	91.8	4.9
Hazara	39.6	3.7
Kohat	53.8	3.7
Mardan	75.5	3.7
Peshawar	49.6	3.8
Malakand	76.9	4.2
[1] MICS indicator 5.1; MDG indicator 5.4 - Adolescent birth rate		
[2] SDG indicator-3.7.2_Total fertility rate, Adolescent birth rate		

As revealed in the table RH.2 the Adolescent birth rate is 62 per 1000 women; highest in D.I. Khan (92 per 1000 and lowest in Hazara (40 per 1000 women). Lower TFR is found among higher education groups and richest wealth quintile which increased gradually among women with none/pre-school education or in poorest wealth quintile.

Overall the Total fertility rate (TFR) is 4.0 in the province. TFR is highest (4.3) among women having only pre-school or no education and gradually declines as the woman's education increases. Similar pattern is observed across wealth quintiles. At division level, total fertility rate ranges from 3.7 each in Hazara, Kohat and Mardan division to 5.5 in Bannu.

Table RH.3 presents some early childbearing[42] indicators for women age 15-19 and 20-24 while Table RH.4 presents the trends for early childbearing.

Table RH. 3: Early childbearing							
Percentage of women ever-married age 15-19 years who have had a live birth, are pregnant with the first child, have begun childbearing, and who have had a live birth before age 15, and percentage of women age 20-24 years who have had a live birth before age 18, Khyber Pakhtunkhwa, 2016-17							
	Percentage of ever-married women age 15-19 who:				Number of women ever-married age 15-19	Percentage of women ever-married age 20-24 who have had a live birth before age 18[1]	Number of women ever-married age 20-24
	Have had a live birth	Are pregnant with first child	Have begun childbearing	Have had a live birth before age 15			
KP	40.8	19.4	60.2	3.8	1,518	18.0	3,704
Area of residence							
Urban	43.4	19.8	63.2	4.5	233	18.6	552
Rural	40.3	19.4	59.6	3.7	1,285	17.9	3,152
Education of household head							
None/pre-school	43.1	19.3	62.4	5.3	766	22.0	1,933
Primary	35.7	17.8	53.5	1.4	272	19.7	573
Middle	43.5	17.2	60.7	5.0	202	18.8	322
Secondary	42.0	18.9	60.9	1.7	196	11.0	467
Higher	25.9	33.0	58.9	.2	82	4.4	410
DK/Missing	(*)	(*)	(*)	(*)	3		
Wealth index quintile							
Poorest	41.5	16.7	58.2	5.9	290	22.9	698
Second	40.9	18.6	59.5	5.5	279	19.8	676
Middle	40.9	19.6	60.6	2.7	333	13.3	743
Fourth	42.3	18.3	60.6	2.6	327	16.8	792
Richest	38.0	24.0	62.0	3.0	290	17.7	795
Division							
Bannu	48.4	20.6	68.9	3.1	85	16.0	220
D. I. Khan	42.7	14.6	57.2	8.6	116	18.5	280
Hazara	32.8	13.2	46.0	4.1	237	17.2	777
Kohat	51.2	13.9	65.1	12.1	99	19.5	259
Malakand	43.6	17.5	61.0	3.0	485	21.8	899
Mardan	37.1	30.9	67.9	1.2	206	16.3	497
Peshawar	38.7	23.1	61.9	2.3	291	15.4	773
[1] **MICS indicator 5.2 - Early childbearing**							
(*) Figures that are based on fewer than 25 unweighted cases							

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[42] *Childbearing is the process of giving birth to children. While early childbearing is defined as having had live births before specific young ages, for the purposes of Table RH.3, women age 15-19 years who have begun childbearing includes those who have had a live birth as well as those who have not had a live birth but are pregnant with their first child.*

Table RH. 4: Trends in early childbearing

Percentage of ever-married women who have had a live birth, by age 15 and 18, by area and age group, Khyber Pakhtunkhwa, 2016-17

	Urban				Rural				All			
	Percentage of ever-married women with a live birth before age 15	Number of women ever-married age 15-49 years	Percentage of ever-married women with a live birth before age 18	Number of women ever-married age 20-49 years	Percentage of ever-married women with a live birth before age 15	Number of women ever-married age 15-49 years	Percentage of ever-married women with a live birth before age 18	Number of women ever-married age 20-49 years	Percentage of ever-married women with a live birth before age 15	Number of women ever-married age 15-49 years	Percentage of ever-married women with a live birth before age 18	Number of women ever-married age 20-49 years
KP	2.9	4,131	16.6	3,899	2.9	20,873	16.9	19,587	2.9	25,004	16.8	23,486
Age												
15-19	0.8	1,345	na	na	0.7	6,639	na	na	0.7	7,984	na	na
20-24	0.7	1,100	9.3	1,100	1.1	5,415	10.4	5,415	1.0	6,515	10.2	6,515
25-29	2.0	1,176	12.2	1,176	2.1	5,722	13.2	5,722	2.1	6,897	13.0	6,897
30-34	3.3	848	14.3	848	2.8	4,051	16.0	4,051	2.9	4,899	15.7	4,899
35-39	2.6	730	14.0	730	3.5	3,523	15.1	3,523	3.4	4,252	14.9	4,252
40-44	2.0	582	15.4	582	3.2	2,591	16.2	2,591	3.0	3,173	16.0	3,173
45-49	3.4	502	17.9	502	2.5	2,481	15.7	2,481	2.6	2,983	16.1	2,983

(*) Figures that are based on fewer than 25 unweighted cases

As shown in Table RH.3, 40.8 percent of women age 15-19 have already had a birth, 19.4 percent are pregnant with their first child, and 3.8 percent have had a live birth before age 15. The table also indicates that 18 percent of women age 20-24 have had a live birth before age 18. At divisional level, early childbearing among women age 20-24 ranges from 15.4 percent in Peshawar to 21 percent in Malakand. Education of woman and household wealth are negatively correlated with early childbearing. For example, early childbearing is highest (22 percent) among women with only pre-school or no education and declines to only 4.4 percent for women having higher education. Similarly early childbearing is highest among the women in poorest wealth index quintile (23 percent) which declines to 18 percent for women in richest wealth quintile

Table RH.4 displays the data of early childbearing with respect to the age groups of the ever married women. The table reveals that 3 percent of the women have a live birth before age 15 years, and 17 percent before age 18.

Contraception

Appropriate family planning is important to the health of women and children by: 1) preventing pregnancies that are too early or too late; 2) extending the period between births; and 3) limiting the 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 many is critical.

Current use of contraception is reported by 33 percent of currently married women[43] as given in Table RH.5. Out of the women using contraception, 26 percent are using a modern method and 6 percent are using a traditional method. The most popular modern method is the male condom (9 percent). The next most popular method is withdrawal, which is reported by 5 percent. As regards to other modern methods of contraception, about 1 percent of married women reported using IUD and 9 percent injectable, whereas, 2 percent of the women use sterilization.

The survey reveals (Table RH 05) that contraceptive prevalence ranges from 19 percent in D.I.Khan division to 44 percent in Peshawar division. About 44 percent of married women in urban areas and 30 percent in rural areas use any method of contraception. The findings by division and area of residence are depicted in Figure RH.2. Adolescents are far less likely to use contraception than older women; 10 percent of married women age 15-19 currently use a method of contraception compared to 21 percent of 20-24 year olds, while among older women contraceptive use ranges from 27 percent to 43 percent.

Household wealth and number of living children also have a positive relationship with the use of contraception. Contraceptive prevalence is 22 percent in the poorest women compared to 41 percent among richest women. On the other hand, it is only 1.5 percent among women with no child and 18 percent among women with one child, but 45 percent among women with 4 or more children.

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[43] *All references to "married women" in this chapter include women who are married.*

Figure RH 2:   Differentials in contraceptive use,
                     KP-MICS, 2016-17

Table RH. 5: Use of contraception

Percentage of women ever-married age 15-49 years currently married who are using (or whose husband is using) a contraceptive method, Khyber Pakhtunkhwa, 2016-17

	Percent of women currently married who are using (or whose husband is using):																	Number of women ever-married age 15-49 years currently married
	No method	Female sterilization	Male sterilization	IUD	Injectables	Implants	Pill	Male condom	Female condom	Diaphragm/Foam/Jelly	Periodic abstinence	Withdrawal	Other	Missing	Any modern method	Any tradi-tional method	Any method[1]	
KP	67.5	1.9	0.1	1.1	9.4	0.2	3.9	9.4	0.1	0.4	1.0	4.9	0.2	0.0	26.3	6.1	32.5	24,373
Area of residence																		
Urban	56.2	3.0	0.1	1.5	9.2	0.2	4.5	14.6	0.2	0.5	1.6	8.0	0.3	0.1	33.8	9.9	43.8	4,006
Rural	69.7	1.7	0.1	1.0	9.5	0.2	3.7	8.4	0.1	0.3	0.9	4.3	0.2	0.0	24.9	5.3	30.3	20,367
Age																		
15-19	89.9	0.0	0.0	0.0	2.3	0.0	1.3	3.9	0.0	0.0	0.5	2.0	0.0	0.0	7.5	2.6	10.1	1,503
20-24	79.2	0.1	0.0	0.3	4.8	0.0	2.9	8.1	0.1	0.0	0.8	3.6	0.1	0.0	16.2	4.5	20.8	3,666
25-29	72.8	0.3	0.0	0.7	7.6	0.1	3.2	9.7	0.0	0.0	0.8	4.5	0.1	0.0	21.8	5.4	27.2	5,449
30-34	63.4	1.1	0.1	1.0	10.2	0.3	4.7	12.6	0.1	0.2	1.3	4.7	0.2	0.1	30.5	6.1	36.6	4,278
35-39	56.8	2.7	0.0	1.8	12.6	0.1	5.0	11.8	0.2	0.3	1.1	7.3	0.2	0.1	34.5	8.6	43.2	3,869
40-44	57.6	3.8	0.1	1.6	14.1	0.2	4.9	8.7	0.1	1.0	1.2	6.1	0.4	0.0	34.7	7.7	42.4	2,890
45-49	61.2	6.8	0.0	1.9	12.5	0.2	3.8	6.0	0.0	1.3	1.5	4.5	0.3	0.1	32.5	6.3	38.8	2,718
Number of living children																		
0	98.5	0.0	0.0	0.0	0.2	0.0	0.3	0.6	0.0	0.1	0.0	0.2	0.0	0.0	1.2	0.3	1.5	3,214
1	82.1	0.1	0.0	0.1	3.0	0.0	2.3	8.0	0.0	0.1	1.0	3.3	0.0	0.0	13.6	4.3	17.9	3,304
2	69.6	0.7	0.1	0.3	6.9	0.2	3.7	11.5	0.2	0.1	1.1	5.5	0.2	0.0	23.7	6.8	30.4	3,557
3	62.1	1.5	0.1	1.5	10.7	0.2	4.3	12.6	0.2	0.3	1.1	5.3	0.1	0.1	31.3	6.5	37.9	3,637
4+	54.8	3.6	0.1	1.7	14.6	0.3	5.3	10.7	0.1	0.7	1.3	6.4	0.3	0.1	37.1	8.0	45.2	10,661
Education of household head																		
None/pre-school	68.2	2.2	0.0	1.0	10.7	0.1	4.0	7.1	0.1	0.4	1.0	5.1	0.2	0.1	25.5	6.2	31.8	16,124

Table RH. 5: Use of contraception

Percentage of women ever-married age 15-49 years currently married who are using (or whose husband is using) a contraceptive method, Khyber Pakhtunkhwa, 2016-17

	Percent of women currently married who are using (or whose husband is using):																	Number of women ever-married age 15-49 years currently married
	No method	Female sterilization	Male sterilization	IUD	Injectables	Implants	Pill	Male condom	Female condom	Diaphragm/Foam/Jelly	Periodic abstinence	Withdrawal	Other	Missing	Any modern method	Any tradi-tional method	Any method[1]	
KP	67.5	1.9	0.1	1.1	9.4	0.2	3.9	9.4	0.1	0.4	1.0	4.9	0.2	0.0	26.3	6.1	32.5	24,373
Primary	67.5	1.9	0.1	1.3	8.4	0.6	4.0	10.1	0.3	0.4	1.2	3.7	0.3	0.0	27.2	5.2	32.5	2,774
Middle	67.5	1.1	0.0	0.9	6.3	0.0	4.9	13.9	0.1	0.5	0.9	3.5	0.4	0.0	27.7	4.7	32.5	1,466
Secondary	63.8	1.4	0.2	1.4	7.4	0.1	2.1	16.6	0.1	0.2	0.9	5.6	0.2	0.0	29.5	6.7	36.2	1,981
Higher	65.6	1.1	0.2	0.8	5.0	0.1	3.7	16.6	0.1	0.1	1.3	5.3	0.2	0.0	27.7	6.7	34.4	2,029
Wealth index quintile																		
Poorest	78.5	1.1	0.0	0.7	8.9	0.2	3.5	3.6	0.0	0.2	0.2	3.1	0.0	0.0	18.1	3.4	21.5	4,667
Second	69.9	1.8	0.0	0.9	10.0	0.1	3.7	7.9	0.0	0.2	0.8	4.5	0.2	0.0	24.6	5.5	30.1	4,720
Middle	67.9	1.9	0.0	1.2	10.1	.2	3.5	8.7	.1	.5	1.0	4.6	.2	.0	26.2	5.8	32.1	4,856
Fourth	63.2	2.1	0.1	1.0	10.6	0.2	4.6	11.2	0.1	0.4	1.3	4.8	0.3	0.1	30.3	6.3	36.8	5,040
Richest	59.2	2.6	0.1	1.4	7.6	0.1	4.0	15.1	0.2	0.5	1.7	7.2	0.3	0.0	31.6	9.2	40.8	5,090
Division																		
Bannu	72.2	0.7	0.1	1.1	8.0	0.0	4.7	7.4	0.0	0.2	1.3	4.3	0.1	0.0	22.2	5.6	27.8	1,494
D.I. Khan	81.1	1.6	0.0	2.1	3.6	0.1	2.5	8.3	0.0	0.0	0.1	0.6	0.0	0.0	18.3	0.7	18.9	1,778
Hazara	76.7	3.3	0.0	0.7	5.9	0.5	1.7	8.7	0.1	0.7	0.4	1.2	0.2	0.0	21.5	1.8	23.3	4,808
Kohat	71.4	1.6	0.1	1.1	4.2	0.1	3.6	8.5	0.0	0.1	5.0	3.7	0.5	0.0	19.4	9.2	28.6	1,691
Malakand	67.3	1.3	0.2	0.6	15.2	0.1	5.5	5.7	0.1	0.2	0.4	3.4	0.0	0.1	28.8	3.8	32.7	5,890
Mardan	62.7	2.4	0.0	1.4	9.4	0.2	3.8	10.0	0.2	0.7	0.6	8.7	0.0	0.0	28.0	9.2	37.3	2,987
Peshawar	56.0	1.7	0.0	1.3	10.2	0.1	4.3	14.7	0.1	0.3	1.5	9.3	0.4	0.1	32.7	11.3	44.0	5,725

[1] MICS indicator 5.3; MDG indicator 5.3 - Contraceptive prevalence rate

Unmet Need

Unmet need for contraception refers to fecund women who are married and are 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 MICS 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 need for contraception, unmet need, and the demand for contraception satisfied.

Unmet need for spacing is defined as the percentage of women who are married and are not using a method of contraception AND

- are not pregnant, and not postpartum amenorrheic[44], and are fecund[45], and say they want to wait two or more years for their next birth OR
- are not pregnant, and not postpartum amenorrheic, and are fecund, and unsure whether they want another child OR
- are pregnant, and say that pregnancy was mistimed: would have wanted to wait OR
- are postpartum amenorrheic, and say that the birth was mistimed: would have wanted to wait.

Unmet need for limiting is defined as percentage of women who are married and are not using a method of contraception AND

- are not pregnant, and not postpartum amenorrheic, and 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 that they did not want the birth.

Total unmet need for contraception is the sum of unmet need for spacing and unmet need for limiting. Unmet need for contraception is almost 21 percent; 8 percent for limiting and 13 percent for spacing. Unmet need is highest (25 percent) in the age group of 30-34 years and gradually decreases to 10 percent in the age group of 45-49 years (Table RH.6). This indicator is also known as unmet need for family planning and is one of the indicators used to track progress toward the MDG 5 of improving maternal health

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[44] *A woman is postpartum amenorrheic if she had a birth in last two years and is not currently pregnant, and her menstrual period has not returned since the birth of the last child*
[45] *A woman is considered infecund 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 that she has had hysterectomy, or that she has never menstruated, or that she is menopausal, or that she has been trying to get pregnant for 2 or more years without result in response to questions on why she thinks she is not physically able to get pregnant at the time of survey 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 5 years, is currently not using contraception and is currently married and was continuously married during the last 5 years preceding the survey.

Table RH. 6: Unmet need for contraception

Percentage of women ever-married age 15-49 years currently married or in with an unmet need for family planning and percentage of demand for contraception satisfied, Khyber Pakhtunkhwa, 2016-17

	Met need for contraception			Unmet need for contraception			Number of women currently married	Percentage of demand for contraception satisfied	Number of women currently married with need for contraception
	For spacing	For limiting	Total	For spacing	For limiting	Total[1]			
KP	12.3	20.1	32.5	13.0	7.8	20.8	24,373	61.0	12,984
Area of residence									
Urban	16.3	27.5	43.8	10.1	6.9	17.0	4,006	72.0	2,435
Rural	11.6	18.7	30.3	13.6	7.9	21.5	20,367	58.4	10,549
Age									
15-19	9.5	0.5	10.1	19.4	0.6	20.0	1,503	33.5	452
20-24	18.0	2.8	20.8	20.8	2.2	23.1	3,666	47.4	1,607
25-29	18.8	8.4	27.2	18.4	5.5	23.9	5,449	53.2	2,786
30-34	15.0	21.6	36.6	14.3	10.8	25.1	4,278	59.3	2,641
35-39	8.6	34.6	43.2	8.8	12.1	20.9	3,869	67.4	2,483
40-44	4.6	37.7	42.4	3.9	12.3	16.1	2,890	72.4	1,691
45-49	2.6	36.3	38.8	1.9	8.0	9.9	2,718	79.7	1,324
Education of household head									
None/pre-school	10.1	21.6	31.8	12.4	8.4	20.8	16,124	60.4	8,482
Primary	14.2	18.3	32.5	13.5	7.4	20.9	2,774	60.8	1,482
Middle	17.0	15.6	32.5	13.4	5.9	19.3	1,466	62.7	759
Secondary	17.5	18.6	36.2	14.3	7.3	21.6	1,981	62.6	1,145
Higher	18.9	15.5	34.4	15.5	5.1	20.6	2,029	62.6	1,116
Wealth index quintiles									
Poorest	8.5	13.1	21.5	17.4	7.9	25.3	4,667	45.9	2,187
Second	10.6	19.5	30.1	12.5	9.1	21.6	4,720	58.3	2,440
Middle	11.7	20.3	32.1	11.5	8.6	20.1	4,856	61.4	2,534
Fourth	14.1	22.7	36.8	13.1	6.6	19.7	5,040	65.1	2,848
Richest	16.4	24.4	40.8	10.8	6.8	17.6	5,090	69.8	2,975
Division									
Bannu	12.2	15.6	27.8	16.6	8.2	24.8	1,494	52.9	786
D.I. Khan	8.9	10.0	18.9	13.1	8.4	21.6	1,778	46.8	720
Hazara	7.9	15.4	23.3	15.6	8.4	24.0	4,808	49.2	2,278
Kohat	11.4	17.2	28.6	12.6	10.2	22.8	1,691	55.6	869
Malakand	14.0	18.7	32.7	14.7	7.2	21.9	5,890	59.9	3,214
Mardan	11.1	26.2	37.3	10.9	8.3	19.2	2,987	66.0	1,687
Peshawar	16.4	27.6	44.0	9.4	6.5	15.9	5,725	73.5	3,429

[1] **MICS indicator 5.4; MDG indicator 5.6 - Unmet need**
[2] **SDG indicator 13.7.1 –Unmet need**

Met need for limiting includes married women who are using (or whose husband is using) a contraceptive method[46], and who want no more children, are using male or female sterilization, or declare themselves as infecund. Met need for spacing includes women who are using (or whose husband is using) a contraceptive method, and who want to have another child, or are undecided whether to have another child. The total of met need for spacing and limiting adds up to the total met need for contraception. The table shows that the total met need for contraception is 33 percent; for spacing 12 percent and for limiting 20 percent

Using information on contraception and unmet need, the percentage of demand for contraception satisfied is also estimated from the MICS data. The percentage of demand satisfied is defined as the

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

proportion of women currently married who are 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 who are currently using contraception. The findings show that the total demand for family planning satisfied is quite high (61 percent), though the demand satisfied in rural areas is low (58 percent) compared to urban areas (72 percent). Demand for contraception satisfied is 34 percent among women age 15-19, 47 percent for women age 20-24, and gradually increased to 80 percent for women age 45-49 years.

Table RH.6 also shows that the total met need is higher than the total unmet need for family planning. Unmet need is highest among rural women and is strongly associated with wealth; women living in households in the poorest quintile have the highest level of unmet need and vice versa.

Antenatal Care

The antenatal period presents important opportunities for reaching pregnant women with a number of interventions that may be vital to their health and well-being and that of their infants. Better understanding of foetal growth and development and its relationship to the mother's health has resulted in increased attention to the potential of antenatal care as an intervention to improve both maternal and new-born health. For example, antenatal care can be used to inform women and families about risks and symptoms in pregnancy and about the risks of labour and delivery, and therefore it may provide the route for ensuring that 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, which is recognized as an important factor in improving infant survival. Tetanus immunization during pregnancy can be life-saving for both the mother and the infant. The prevention and treatment of malaria among pregnant women, management of anaemia during pregnancy and treatment of sexually transmitted infections (STIs) can significantly improve foetal outcomes and improve maternal health. Adverse outcomes such as low birth weight can be reduced through a combination of interventions to improve women's nutritional status and prevent infections (e.g., malaria and STIs) during pregnancy. More recently, the potential of the antenatal care as an entry point for HIV prevention and care, in particular for the prevention of HIV transmission from mother to child, has led to renewed interest in access to and use of antenatal services.

WHO recommends a minimum of four antenatal visits based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific on the content on antenatal care visits, which include:
- Blood pressure measurement
- Urine testing for bacteriuria and proteinuria
- Blood testing to detect syphilis and severe anaemia
- Weight/height measurement (optional).

It is of crucial importance for pregnant women to start attending antenatal care visits as early in pregnancy as possible in order to prevent and detect pregnancy conditions that could affect both the woman and her baby. Antenatal care should continue throughout the entire pregnancy.

Antenatal care coverage indicators (at least one visit with a skilled provider[47] and 4 or more visits with any providers) are used to track progress toward the Millennium Development Goal 5 of improving maternal health.

In KP, a skilled birth attendants include doctors, nurses, midwives and Lady Health Visitors (LHVs) whereas, traditional birth attendants (TBAs) and Lady Health Workers (LHWs) are not skilled birth attendants. The type of personnel providing antenatal care to ever married women age 15-49 years who gave birth in the two years preceding the survey is presented in Table RH.7. The results show that 24 percent of the women do not receive antenatal care. Coverage of antenatal care by a skilled birth attendant is 74 percent, which is higher in urban (88 percent) than rural areas (72 percent). The majority of the women received antenatal care from medical doctors (67 percent) while the traditional birth attendants (TBAs) provided antenatal care to less than one percent women. The Lady Health Visitor (LHV) provided antenatal care to a small proportion of 5 percent of women.

At division level, proportion of women who received antenatal care was lowest (63 percent) in the two divisions of Bannu and D.I.Khan and highest (83 percent) in the two divisions of Peshawar and Mardan. Younger women are more likely to seek antenatal care than the older women. Receiving antenatal care increases markedly with woman's education and household wealth. For example, 49 percent of women living in households in the poorest quintile, received antenatal care compared to 91 percent of women living in the households in the richest quintile.

Table RH.8 shows the number of antenatal care visits during the latest pregnancy that took place within the two years preceding the survey, regardless of provider, by selected characteristics. Almost seven in ten mothers (69 percent) received antenatal care more than once; almost half of women received antenatal care at least four times (44 percent) and 14 percent had three visits. Mothers from the poorest households and those with pre-school or no education are less likely than more advantaged mothers to receive antenatal care four or more times. For example, 21 percent of mothers living in the households in the poorest quintile reported four or more antenatal care visits compared to 71 percent of mothers living in the households in the richest quintile. Proportion of women having four or more antenatal care visits was lower in rural areas (40 percent) compared to urban area (65 percent).

Table RH.8 also provides information about the timing of the first antenatal care visit. Overall, 56 percent of ever married 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 2.0 months of pregnancy at the first visit among those who received antenatal care.

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[47] *An SBA is defined as "an accredited health professional such as a midwife, doctor or nurse who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period, and in the identification, management and referral of complications in women and new-borns" Ref: WHO. Geneva: World Health Organization (WHO). Department of Reproductive Health and Research (RHR); 2004. Making pregnancy safer the critical role of the skilled attendant: a joint statement by WHO, ICM and FIGO. The categories of SBA are 1. Doctor, 2. Nurse, 3. Midwife, 4. Lady Health Visitor (LHV)*

Table RH. 7: Antenatal care coverage

Percent distribution of women ever-married age 15-49 years with a live birth in the last two years by antenatal care provider during the pregnancy for the last birth, Khyber Pakhtunkhwa, 2016-17

	Provider of antenatal care[a]									Any skilled provider[1]	Number of women with a live birth in the last two years
	Medical doctor	Nurse/ Midwife	Lady Health Visitor (LHV)	Lady Health Worker (LHW)	Traditional birth attendant (TBA)	Relatives/Fr iends	Other	No antenatal care	Total		
KP	67.2	2.0	5.1	0.2	0.6	1.1	0.2	23.5	100.0	74.3	8,365
Area of residence											
Urban	83.1	1.3	3.9	0.3	0.2	0.8	0.2	10.3	100.0	88.3	1,334
Rural	64.1	2.2	5.4	0.2	0.7	1.2	0.2	26.1	100.0	71.7	7,032
Mother's age at birth											
Less than 20	70.6	2.2	4.9	0.2	1.0	1.4	0.0	19.7	100.0	77.7	892
20-34	68.3	1.9	5.1	0.3	0.5	1.1	0.2	22.6	100.0	75.3	6,301
35-49	58.4	2.7	5.3	0.1	0.7	1.2	0.0	31.6	100.0	66.4	1,173
Mother's Education											
None/pre-school	58.3	2.2	5.8	0.2	0.7	1.0	0.2	31.6	100.0	66.3	5,065
Primary	75.0	2.0	6.1	0.2	0.5	1.2	0.0	15.0	100.0	83.1	1,105
Middle	78.6	1.8	3.7	0.5	0.7	2.3	0.2	12.2	100.0	84.1	613
Secondary	82.1	2.0	4.1	0.2	0.3	0.9	0.2	10.2	100.0	88.2	788
Higher	89.2	1.0	1.8	0.1	0.1	1.1	0.4	6.2	100.0	92.1	794
Wealth index quintiles											
Poorest	41.1	2.8	5.2	0.3	1.1	1.3	0.2	48.1	100.0	49.1	1,682
Second	59.0	4.1	6.5	0.2	0.4	1.0	0.3	28.4	100.0	69.6	1,655
Middle	68.3	1.5	7.3	.4	.7	1.2	.1	20.5	100.0	77.1	1,632
Fourth	80.1	1.3	3.6	0.2	0.6	1.2	0.1	13.0	100.0	84.9	1,763
Richest	87.2	0.5	3.2	0.1	0.1	1.0	0.2	7.7	100.0	90.9	1,633
Division											
Bannu	58.6	0.7	3.6	0.9	0.1	1.2	0.2	34.7	100.0	63.0	602
D.I. Khan	44.4	5.4	13.1	0.0	1.5	0.2	0.3	35.1	100.0	62.9	684
Hazara	61.8	2.4	2.5	0.1	0.7	1.2	0.1	31.3	100.0	66.6	1,507
Kohat	73.6	0.8	3.1	0.9	2.0	1.5	0.0	18.0	100.0	77.5	592
Malakand	64.7	3.0	6.5	0.2	0.2	1.6	0.3	23.5	100.0	74.2	1,996
Mardan	75.4	1.8	5.5	0.1	0.3	0.3	0.3	16.2	100.0	82.8	1,015
Peshawar	78.0	0.5	4.0	0.1	0.4	1.2	0.1	15.7	100.0	82.5	1,968

[1] MICS indicator 5.5a; MDG indicator 5.5 - Antenatal care coverage

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Percent distribution of women who had:							Percent 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	One visit	Two visits	Three visits	4 or more visits[1]	DK/ Missing	Total	No antenatal care visits	First trimester	4-5 months	6-7 months	8+ months	DK/Missing	Total			
KP	23.6	5.7	10.9	14.4	44.1	1.2	100.0	23.5	55.6	12.4	5.6	2.1	0.7	100.0	8,365	2.0	6,334
Area of residence																	
Urban	10.3	3.5	7.7	12.0	65.2	1.3	100.0	10.3	74.2	10.8	3.1	1.1	0.6	100.0	1,334	2.0	1,190
Rural	26.1	6.2	11.5	14.9	40.2	1.2	100.0	26.1	52.1	12.7	6.0	2.3	0.8	100.0	7,032	3.0	5,145
Mother's age at birth																	
Less than 20	19.7	5.6	11.2	13.2	48.7	1.7	100.0	19.7	58.6	12.4	6.3	1.9	1.1	100.0	892	2.0	706
20-34	22.6	5.6	10.9	14.7	45.0	1.2	100.0	22.6	57.2	12.1	5.5	2.1	0.6	100.0	6,301	2.0	4,838
35-49	31.7	6.5	10.1	14.1	36.2	1.4	100.0	31.6	45.0	14.0	5.8	2.6	1.0	100.0	1,173	3.0	790
Mother's Education																	
None/pre-school	31.6	7.1	12.7	14.1	33.4	1.2	100.0	31.6	45.2	13.4	6.6	2.4	0.8	100.0	5,065	3.0	3,423
Primary	15.0	4.5	12.0	16.7	50.0	1.8	100.0	15.0	63.2	13.3	5.0	2.7	0.8	100.0	1,105	2.0	930
Middle	12.2	5.1	8.4	16.3	56.8	1.1	100.0	12.2	69.2	11.6	4.6	2.1	0.4	100.0	613	2.0	536
Secondary	10.2	3.4	5.9	14.0	65.5	1.0	100.0	10.2	74.9	9.6	3.5	1.2	0.6	100.0	788	2.0	702
Higher	6.2	1.8	4.7	12.4	73.7	1.2	100.0	6.2	82.2	7.9	2.7	0.7	0.3	100.0	794	2.0	742
Wealth index quintile																	
Poorest	48.2	7.2	11.6	11.0	21.4	0.6	100.0	48.1	31.3	12.3	5.6	2.2	0.6	100.0	1,682	3.0	864
Second	28.4	7.4	14.2	16.7	32.1	1.1	100.0	28.4	47.1	13.7	6.6	3.4	0.8	100.0	1,655	3.0	1,172
Middle	20.5	8.3	12.7	16.8	39.7	2.1	100.0	20.5	55.5	12.3	7.2	2.9	1.6	100.0	1,632	2	1,272
Fourth	13.1	4.0	10.2	15.5	56.1	1.2	100.0	13.0	65.7	13.5	6.1	1.4	0.3	100.0	1,763	2.0	1,528
Richest	7.7	2.0	5.6	12.1	71.3	1.3	100.0	7.7	78.7	10.0	2.3	0.8	0.5	100.0	1,633	2.0	1,499
Division																	
Bannu	34.7	12.1	16.5	12.5	23.2	0.9	100.0	34.7	29.8	15.5	14.3	5.7	0.1	100.0	602	4.0	392
D.I. Khan	35.2	14.0	19.2	14.3	16.2	1.2	100.0	35.1	31.1	15.5	11.8	4.0	2.4	100.0	684	4.0	428
Hazara	31.3	3.7	10.1	14.7	38.7	1.5	100.0	31.3	51.3	11.4	4.1	1.1	0.8	100.0	1,507	3.0	1,024
Kohat	18.0	6.2	10.4	16.5	47.8	1.1	100.0	18.0	53.0	18.4	7.0	3.1	0.4	100.0	592	3.0	483
Malakand	23.6	3.0	9.5	15.2	47.6	1.1	100.0	23.5	58.9	12.1	3.5	1.3	0.7	100.0	1,996	2.0	1,513
Mardan	16.2	7.3	11.6	12.8	50.3	1.8	100.0	16.2	62.0	11.8	6.0	3.9	0.2	100.0	1,015	2.0	850
Peshawar	15.8	4.3	7.9	14.3	56.6	1.1	100.0	15.7	69.6	9.8	3.4	0.8	0.7	100.0	1,968	2.0	1,645

[1] **MICS indicator 5.5b; MDG indicator 5.5 - Antenatal care coverage**

The coverage of key services that pregnant women are expected to receive during antenatal care are shown in Table RH.9. Among those women who had a live birth during the two years preceding the survey, 60 percent reported that a blood sample was taken during antenatal care visits, 71 percent reported that their blood pressure was checked, and 62 percent indicated that urine specimen was taken. All three tests were conducted for 56 percent of the women, higher in urban (76 percent) compared to rural areas (52 percent).

Table RH. 9: Content of antenatal care

Percentage of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who, during the pregnancy of their last birth, had:				
	Blood pressure measured	Urine sample taken	Blood sample taken	Blood pressure measured, urine and blood sample taken[1]	Number of women with a live birth in the last two years
KP	71.2	61.7	60.2	56.1	8,365
Area of residence					
Urban	87.2	81.2	78.9	76.0	1,334
Rural	68.2	58.0	56.7	52.3	7,032
Mother's age at birth					
Less than 20	72.5	64.1	63.4	56.9	892
20-34	72.2	63.0	61.3	57.4	6,301
35-49	64.7	52.8	51.7	48.4	1,173
Mother's Education					
None/pre-school	62.8	51.8	49.9	45.9	5,065
Primary	79.4	69.4	67.9	63.1	1,105
Middle	82.3	75.7	74.9	70.4	613
Secondary	85.3	79.4	79.7	75.0	788
Higher	91.1	85.1	84.7	81.8	794
Wealth index quintile					
Poorest	47.1	37.4	36.1	32.6	1,682
Second	64.1	52.3	49.5	45.1	1,655
Middle	73.0	61.6	59.7	55.6	1,632
Fourth	81.8	73.0	71.7	67.1	1,763
Richest	90.1	84.0	84.1	80.2	1,633
Division					
Bannu	57.8	37.9	30.1	23.9	602
D.I. Khan	58.1	23.4	24.7	18.5	684
Hazara	65.5	60.8	57.3	55.5	1,507
Kohat	76.6	65.0	64.0	59.1	592
Malakand	68.6	65.5	65.6	59.2	1,996
Mardan	78.3	64.8	64.2	60.2	1,015
Peshawar	81.6	76.4	75.3	73.4	1,968

[1] MICS indicator 5.6 - Content of antenatal care

Assistance at Delivery

About three quarters of all maternal deaths occur due to direct obstetric causes[48]. 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 toward the Millennium Development Goal 5 of improving maternal health.

The MICS included a number of questions to assess the proportion of births attended by a skilled attendant. About 69 percent of births occurring in the two years preceding the survey were delivered by skilled personnel (Table RH.10). Across divisions, almost eight in ten women in the two divisions of Kohat and Peshawar delivered their babies with the assistance of a skilled birth attendant compared to over half women in D.I.Khan division. The more educated a woman is, the more likely to have delivered with the assistance of a skilled attendant. Eighty-eight percent of the women with higher education delivered with the assistance of a skilled attendant compared to 61 percent of the women with only pre-school or no education. Similarly, women living in the households in the richest quintile are almost two times more likely to deliver by skilled birth attendant compared to women living in the households in poorest quintile (87 percent and 44 percent respectively).

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[48] *Say, L et al. 2014. Global causes of maternal death: a WHO systematic analysis. The Lancet Global Health 2(6): e323-33. DOI: 10.1016/S2214-109X(14)70227-X*

Table RH. 10: Assistance during delivery and caesarian section

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

| | Person assisting at delivery | | | | | | | | Percent delivered by C-section | | | | |
	Medical doctor	Nurse/ Midwife	Lady Health Visitor (LHV)	Traditional birth attendant (TBA)	Relative/Friend	Other	No attendant	Total	Delivery assisted by any skilled attendant[1]	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
KP	56.4	4.6	7.6	14.4	13.7	2.7	0.6	100.0	68.6	4.3	3.2	7.5	8,365
Area of residence													
Urban	70.5	4.6	6.3	12.8	3.1	2.3	0.3	100.0	81.5	7.6	5.0	12.6	1,334
Rural	53.7	4.5	7.8	14.7	15.8	2.8	0.6	100.0	66.1	3.7	2.9	6.5	7,032
Mother's age at birth													
Less than 20	58.7	5.5	5.8	12.5	15.1	2.4	0.0	100.0	70.0	2.8	2.4	5.2	892
20-34	57.3	4.4	7.8	14.5	12.9	2.7	0.5	100.0	69.4	4.8	3.4	8.2	6,301
35-49	49.9	4.6	8.2	15.5	17.2	3.0	1.6	100.0	62.7	2.7	2.8	5.4	1,173
Place of delivery													
Home	3.3	3.1	6.6	41.4	39.9	4.1	1.6	100.0	13.0	0.0	0.0	0.0	2,838
Health facility	85.5	5.4	8.2	0.5	0.2	0.1	0.0	100.0	99.2	6.7	5.0	11.6	5,392
Public	88.4	7.9	3.4	0.2	0.1	0.1	0.0	100.0	99.6	6.2	4.8	11.0	2,371
Private	83.3	3.5	12.0	0.8	0.2	0.1	0.0	100.0	98.8	7.1	5.1	12.2	3,021
Other/DK/Missing	9.5	0.0	4.0	2.8	4.4	78.6	0.7	100.0	13.5	0.0	0.0	0.0	136
Mother's Education													
None/pre-school	49.0	4.0	7.9	16.5	18.7	3.2	0.7	100.0	61.0	2.3	1.9	4.2	5,065
Primary	59.6	5.1	7.8	13.9	11.0	2.0	0.7	100.0	72.4	4.0	4.1	8.1	1,105
Middle	66.7	6.4	6.9	10.9	6.2	2.5	0.4	100.0	79.9	5.7	2.6	8.3	613
Secondary	69.5	5.1	8.4	12.4	2.0	2.2	0.4	100.0	83.1	6.5	5.6	12.1	788
Higher	78.2	5.1	5.0	6.9	3.4	1.4	0.0	100.0	88.3	14.2	8.1	22.3	794
Wealth index quintiles													
Poorest	34.6	4.3	4.9	15.5	34.1	5.1	1.3	100.0	43.9	0.8	0.9	1.7	1,682
Second	48.4	5.7	8.5	17.4	17.0	2.6	0.5	100.0	62.6	2.0	2.5	4.4	1,655
Middle	54.8	4.8	10.0	16.4	10.7	2.5	.7	100.0	69.6	3.1	3.2	6.2	1,632
Fourth	67.4	4.4	8.1	13.6	4.9	1.4	0.3	100.0	79.9	5.9	3.7	9.6	1,763
Richest	76.7	3.7	6.4	9.2	2.0	2.0	0.1	100.0	86.7	9.7	5.8	15.5	1,633
Division													
Bannu	46.5	6.0	11.4	10.5	22.8	1.7	1.1	100.0	63.8	4.8	2.4	7.2	602
D.I. Khan	33.9	7.0	14.5	37.1	6.5	0.6	0.3	100.0	55.4	1.6	2.8	4.4	684
Hazara	47.6	2.2	2.2	19.7	24.6	2.4	1.3	100.0	52.0	6.4	5.0	11.3	1,507
Kohat	70.1	4.9	4.5	8.8	9.8	1.8	0.2	100.0	79.5	7.5	5.1	12.7	592
Malakand	57.1	6.3	8.6	8.2	15.4	4.3	0.2	100.0	72.0	2.6	2.6	5.2	1,996
Mardan	54.3	6.3	9.1	15.5	11.0	3.0	0.8	100.0	69.7	5.6	1.8	7.5	1,015
Peshawar	70.3	2.3	7.3	11.1	6.1	2.5	0.4	100.0	79.9	3.5	3.0	6.5	1,968

Table RH. 10: Assistance during delivery and caesarian section

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

| | Person assisting at delivery | | | | | | | | Percent delivered by C-section | | | | Number of women who had a live birth in the last two years |
	Medical doctor	Nurse/ Midwife	Lady Health Visitor (LHV)	Traditional birth attendant (TBA)	Relative/Friend	Other	No attendant	Total	Delivery assisted by any skilled attendant[1]	Decided before onset of labour pains	Decided after onset of labour pains	Total[2]	
KP	56.4	4.6	7.6	14.4	13.7	2.7	0.6	100.0	68.6	4.3	3.2	7.5	8,365

[1] **MICS indicator 5.7; MDG indicator 5.2 - Skilled attendant at delivery**   [2] **MICS indicator 5.9 - Caesarean section**
[3] **SDG indicator 3.1.2- Delivery assisted by any skilled attendant**

Figure RH 3:   **Person assisting at delivery, KP-MICS, 2016-17**
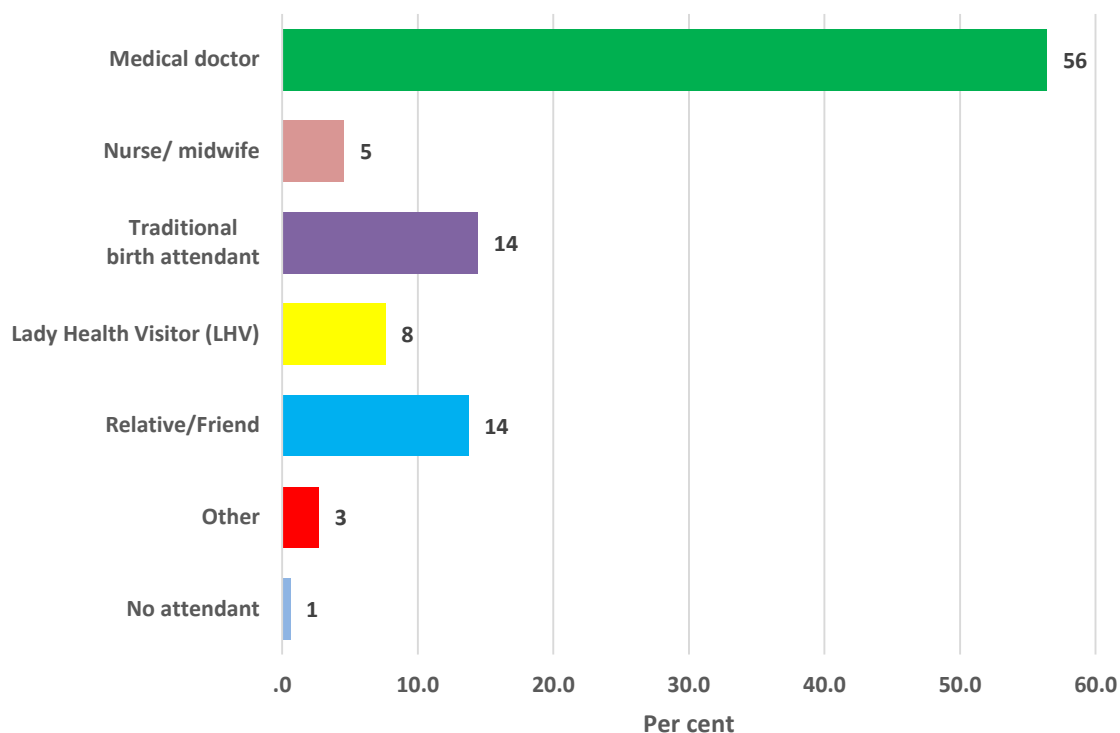
Table RH.10 also shows information on women who delivered by caesarean section (C-section) and provides additional information on the timing of the decision to conduct a C-section (before labour pains began or after) in order to better assess if such decisions are mostly driven by medical or non–medical reasons.

Overall, 8 percent of ever married women who delivered in the last two years had a C-section; for 4 percent of women, the decision was taken before the onset of labour pains and for 3 percent after the pains. The prevalence of C-section births is higher in urban (13 percent) compared to rural areas (7 percent). Women living in the households in the richest quintile are more likely to have a C-section (16 percent) compared to only 2 percent for women living in the households in the poorest quintile. Similar trend can be seen with women's education.

Place of Delivery

Increasing the proportion of births that are delivered in health facilities is an important factor in reducing the health risks to both the mother and the baby. Proper medical attention and hygienic conditions during delivery can reduce the risks of complications and infection that can cause morbidity and mortality to either the mother or the baby. Table RH.11 presents the percent distribution of women age 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

Percent distribution of women ever-married age 15-49 years with a live birth in the last two years by place of delivery of their last birth, Khyber Pakhtunkhwa, 2016-17

	Place of delivery						Delivered in health facility[1]	Number of women with a live birth in the last two years
	Health facility							
	Public sector	Private sector	Home	Other	DK/Missing	Total		
KP	28.3	36.1	33.9	0.3	1.3	100.0	64.5	8,365
Area of residence								
Urban	34.0	45.0	18.7	0.4	1.9	100.0	79.0	1,334
Rural	27.3	34.4	36.8	0.3	1.2	100.0	61.7	7,032
Mother's age at birth								
Less than 20	29.6	37.1	31.5	0.3	1.4	100.0	66.8	892
20-34	29.0	36.4	33.0	0.3	1.2	100.0	65.5	6,301
35-49	23.6	33.7	40.6	0.4	1.7	100.0	57.3	1,173
Number of antenatal care visits								
None	11.9	15.0	67.5	0.1	5.5	100.0	26.9	1,974
1-3 visits	30.0	34.6	35.0	0.4	0.0	100.0	64.6	2,595
4+ visits	36.2	48.3	15.0	0.3	0.1	100.0	84.6	3,692
Mother's Education								
None/pre-school	24.0	32.3	42.2	0.2	1.3	100.0	56.3	5,065
Primary	34.0	34.7	29.6	0.6	1.1	100.0	68.7	1,105
Middle	41.3	33.1	22.9	0.7	1.9	100.0	74.4	613
Secondary	31.7	49.4	17.2	0.1	1.7	100.0	81.1	788
Higher	34.7	51.5	12.0	0.7	1.1	100.0	86.2	794
Wealth index quintiles								
Poorest	18.2	22.0	57.5	0.4	1.9	100.0	40.2	1,682
Second	26.0	31.4	41.8	0.1	0.8	100.0	57.4	1,655
Middle	28.3	37.0	32.8	.6	1.3	100.0	65.4	1,632
Fourth	33.7	41.6	23.4	0.2	1.0	100.0	75.4	1,763
Richest	35.4	48.5	14.1	0.4	1.6	100.0	83.9	1,633
Division								
Bannu	21.8	32.2	45.3	0.3	0.4	100.0	54.1	602
D.I. Khan	15.7	33.2	50.8	0.1	0.1	100.0	48.9	684
Hazara	21.5	27.6	48.4	0.9	1.6	100.0	49.1	1,507
Kohat	27.2	49.9	21.6	0.2	1.1	100.0	77.1	592
Malakand	31.2	38.6	28.5	0.1	1.6	100.0	69.8	1,996
Mardan	28.6	33.4	36.7	0.4	0.9	100.0	62.0	1,015
Peshawar	37.3	39.5	21.3	0.2	1.8	100.0	76.8	1,968

[1] MICS indicator 5.8 - Institutional deliveries

About 65 percent of births are delivered in a health facility; 28 percent occur in public sector facilities and 36 percent in private. The findings also show that 34 percent of births occur at home. The proportion of institutional deliveries varies from 49 percent in D.I. Khan and Hazara divisions to 77 percent in Kohat and Peshawar divisions. Only 27 percent who did not receive antenatal care delivered in a health facility compared to 85 percent of women who had at least four antenatal visits. Women with higher education are more likely to deliver in a health facility compared to their lowest counterparts (86 percent compared to 56 percent). Similarly, women living in the households in the richest quintile are more likely to deliver in a health facility compared to women living in the households in the poorest quintile.

Post-natal Health Checks

The time of birth and immediately after is a critical window of opportunity to deliver lifesaving interventions for both the mother and the new-born. Across the world, approximately 3 million new-borns annually die in the first month of life [49] and the majority of these deaths occur within a day or two of birth[50], which is also the time when the majority of maternal deaths occur[51].

Despite the importance of the first few days following birth, large-scale, nationally representative household survey programmes have not systematically included questions on the post-natal period and care for the mother and new-born. In 2008, the Countdown to 2015 initiative, which monitors progress on maternal, new-born 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[52].

Following the establishment and discussions of an Inter-Agency Group on PNC and drawing on lessons learned from earlier attempts of collecting PNC data, a new questionnaire module for MICS was developed and validated. Named the Post-natal Health Checks (PNHC) module, the objective is to collect information on new-borns' 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 scale up and ensure that the platform for providing essential services is in place. Content is considered more difficult to measure, particularly because the respondent is asked to recall services delivered up to two years preceding the interview.

Table RH.12 displays the percent distribution of women age 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.

Overall, 27 percent of women, who gave birth in a health facility, stay 12 hours or more in the facility after delivery. A slightly higher proportion (32 percent) of urban women stay 12 hours or more than rural women (25 percent). As expected, nearly all women (93 percent) giving birth through C-section stay 12 hours or more in the facility after giving birth. A positive correlation can be observed between longer stay at facility after delivery and wealth; 68 percent of the women living in the households in the poorest quintile stay at a facility for less than 6 hours and 22 percent for 12 hours or more compared to 35 percent of the women living in the households in the richest quintile who stay in a health facility for 12 hours or more. A similar trend on length of stay in a health facility after delivery is observed for women's education.

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[49] *UN Interagency Group for Child Mortality Estimation. 2013. Levels and Trends in Child Mortality: Report 2013*
[50] *Lawn, JE et al. 2005. 4 million neonatal deaths: When? Where? Why? Lancet 2005; 365:891–900*
[51] *WHO, UNICEF, UNFPA, The World Bank. 2012. Trends in Maternal Mortality: 1990-2010. World Health Organization.*
[52] *HMN, UNICEF, WHO. 2008. Countdown to 2015: Tracking Progress in Maternal, Newborn & Child Survival, The 2008 Report. UNICEF.*

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Duration of stay in health facility								Number of women who had their last birth delivered in a health facility in the last 2 years
	Less than 6 hours	6-11 hours	12-23 hours	1-2 days	3 days or more	DK/ Missing	Total	12 hours or more[1]	
KP	64.6	8.4	1.2	15.7	9.6	0.5	100.0	26.5	5,392
Area of residence									
Urban	59.6	8.1	0.7	18.5	12.9	0.3	100.0	32.1	1,054
Rural	65.8	8.5	1.3	15.0	8.8	0.6	100.0	25.1	4,338
Mother's age at birth									
Less than 20	67.6	9.6	1.2	13.1	8.1	0.3	100.0	22.5	595
20-34	63.5	8.4	1.2	16.1	10.1	0.6	100.0	27.4	4,124
35-49	68.4	7.1	1.1	15.1	8.0	0.4	100.0	24.1	672
Type of health facility									
Public	61.4	9.0	1.2	17.7	10.5	0.3	100.0	29.3	2,371
Private	67.1	7.9	1.2	14.1	8.9	0.7	100.0	24.2	3,021
Type of delivery									
Vaginal birth	72.4	9.4	1.2	14.1	2.2	0.6	100.0	17.5	4,754
C-section	6.2	0.8	0.7	27.4	64.9	0.1	100.0	92.9	638
Mother's Education									
None/pre-school	69.8	8.7	1.2	13.4	6.3	0.7	100.0	20.9	2,853
Primary	67.4	8.4	0.3	14.3	9.2	0.4	100.0	23.9	759
Middle	62.9	9.0	2.5	14.8	10.8	0.0	100.0	28.1	456
Secondary	57.4	9.2	1.0	18.9	12.7	0.8	100.0	32.6	639
Higher	47.9	6.0	1.3	24.3	20.2	0.4	100.0	45.8	685
Wealth index quintiles									
Poorest	68.4	9.4	0.8	16.1	4.7	0.6	100.0	21.6	677
Second	68.3	8.2	0.7	15.4	6.7	0.7	100.0	22.8	950
Middle	68.2	8.5	.9	13.9	7.4	1.3	100.0	22.1	1,067
Fourth	64.3	8.8	1.9	14.5	10.2	0.3	100.0	26.7	1,329
Richest	57.7	7.6	1.2	18.2	15.2	0.1	100.0	34.6	1,370
Division									
Bannu	65.8	9.1	1.1	13.3	10.8	0.0	100.0	25.2	326
D.I. Khan	79.9	3.6	0.3	7.8	6.5	1.9	100.0	14.5	335
Hazara	43.8	8.2	1.0	24.1	22.8	0.1	100.0	47.9	740
Kohat	69.3	5.4	0.5	13.4	9.9	1.4	100.0	23.9	456
Malakand	65.4	10.5	2.0	15.9	5.6	0.6	100.0	23.5	1,394
Mardan	74.8	5.1	0.5	10.9	7.5	1.1	100.0	19.0	630
Peshawar	64.7	9.7	1.2	16.2	8.1	0.0	100.0	25.5	1,511

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

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

Table RH.13 describes the percentage of babies born in the last two years who received health checks and post-natal care visits from any health provider after birth. It may be noted that health checks following birth while in facility or at home refer to checks provided by any health provider regardless of timing, whereas post-natal care visits refer to a separate visit to check on the health of the new-

born and provide preventive care services and therefore do not include health checks following birth while in facility or at home. The indicator Post-natal health checks includes any health check after birth received while in the health facility or at home, regardless of timing, as well as PNC visits within two days of delivery.

Overall, 68 percent of new-borns receive a health check following birth whether in a facility or at home. With regard to PNC visits, they predominantly occur after the first week following the birth (3 percent) more than three quarters of the new-borns have no postnatal care visits. However, a total of 68 percent of all new-borns receive a post-natal health check at any time after birth. This percentage varies from 60 percent in Hazara division to 78 percent in Kohat division. Urban new-borns are more likely to receive both a health check following birth (82 percent) and a post-natal health check (82 percent) than their rural counterparts (65 percent and 66 percent respectively).

Table RH. 13: Post-natal health checks for new-borns

Percentage of women ever-married age 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, percent 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 postnatal health checks, Khyber Pakhtunkhwa, 2016-17

| | Health check following birth while in facility or at home[a] | PNC visit for new-borns[b] | | | | | | | | Post-natal health check for the newborn[1, c] | Number of last live births in the last two years |
		Same day	1 day following birth	2 days following birth	3-6 days following birth	After the first week following birth	No post-natal care visit	DK/ Missing	Total		
KP	67.7	3.3	4.7	1.7	3.8	2.8	83.3	0.4	100.0	68.4	8,365
Area of residence											
Urban	81.5	4.4	6.1	2.3	6.6	4.9	75.0	0.7	100.0	82.1	1,334
Rural	65.0	3.1	4.4	1.6	3.3	2.4	84.9	0.4	100.0	65.8	7,032
Mother's age at birth											
Less than 20	67.3	2.5	5.4	2.4	3.7	3.2	81.9	1.0	100.0	67.7	892
20-34	68.4	3.5	4.8	1.6	4.1	3.0	82.7	0.4	100.0	69.3	6,301
35-49	64.0	2.6	3.7	1.6	2.8	1.5	87.4	0.4	100.0	64.4	1,173
Place of delivery											
Home	40.0	4.7	1.3	0.7	1.1	0.8	90.9	0.5	100.0	41.3	2,838
Health facility	83.8	2.6	6.6	2.3	5.4	3.9	78.9	0.4	100.0	84.3	5,392
Public	83.0	2.2	6.4	2.0	4.7	3.6	80.6	0.4	100.0	83.5	2,371
Private	84.4	2.8	6.8	2.4	5.9	4.2	77.5	0.4	100.0	84.9	3,021
Other/DK/Missing	4.7	1.6	0.0	0.0	0.0	0.0	98.4	0.0	100.0	5.9	136
Mother's Education											
None/pre-school	61.7	3.2	3.4	1.3	2.4	1.6	87.7	0.4	100.0	62.5	5,065
Primary	68.1	2.8	3.8	1.0	3.2	2.8	85.8	0.6	100.0	68.8	1,105
Middle	76.3	3.0	7.1	2.5	5.3	3.7	78.5	0.1	100.0	76.7	613
Secondary	81.9	4.4	8.5	4.1	6.5	3.6	72.0	0.8	100.0	82.8	788
Higher	84.5	3.3	8.7	2.3	10.4	8.6	66.5	0.2	100.0	84.9	794
Wealth index quintiles											
Poorest	44.5	1.8	3.3	0.8	1.7	0.8	90.8	0.8	100.0	45.4	1,682
Second	62.9	4.1	3.3	1.1	2.4	1.2	87.8	0.1	100.0	63.8	1,655
Middle	67.9	2.8	3.4	1.7	2.7	2.5	86.7	.2	100.0	68.9	1,632
Fourth	79.5	4.3	6.2	2.2	4.3	3.3	79.1	0.7	100.0	79.9	1,763
Richest	83.4	3.4	7.2	2.6	8.1	6.1	72.2	0.5	100.0	83.8	1,633
Division											
Bannu	61.6	2.7	0.7	0.3	1.5	2.2	92.6	0.0	100.0	62.7	602
D.I. Khan	70.8	2.5	0.5	0.8	1.3	1.7	92.9	0.2	100.0	71.3	684
Hazara	58.8	2.3	3.8	2.0	5.2	4.4	82.1	0.2	100.0	59.9	1,507
Kohat	77.0	4.0	3.0	1.2	3.5	2.3	85.7	0.3	100.0	77.9	592
Malakand	65.3	3.1	7.4	2.1	4.1	1.4	81.0	0.9	100.0	65.9	1,996
Mardan	65.8	7.3	4.6	1.8	4.1	3.6	77.9	0.6	100.0	67.2	1,015
Peshawar	75.8	2.4	5.8	1.8	4.1	3.1	82.4	0.4	100.0	76.0	1,968

[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] Post-natal care visits (PNC) 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.(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.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Location of first PNC visit for new-borns					Provider of first PNC visit for new-borns					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	Other location	Total	Doctor/ nurse/ midwife	Lady health visitor (LHV)	Lady health worker (LHW)	Traditional birth attendant	Total	
KP	18.6	33.4	47.9	0.1	100.0	81.3	5.5	1.2	12.1	100.0	1,128
Area of residence											
Urban	16.4	28.2	55.2	0.2	100.0	82.8	3.5	0.6	13.2	100.0	259
Rural	19.3	34.9	45.7	0.1	100.0	80.8	6.1	1.4	11.7	100.0	869
Mother's age at birth											
Less than 20	15.9	35.7	48.5	0.0	100.0	82.6	3.8	1.1	12.4	100.0	124
20-34	18.8	33.7	47.4	0.1	100.0	81.0	5.3	1.3	12.4	100.0	879
35-49	20.1	28.6	51.3	0.0	100.0	81.7	8.4	0.6	9.3	100.0	125
Place of delivery											
Home	81.2	10.6	8.2	0.0	100.0	25.4	12.7	2.8	59.2	100.0	221
Health facility	3.4	38.9	57.7	0.1	100.0	95.0	3.7	0.8	0.5	100.0	905
Public	3.0	91.0	5.9	0.1	100.0	96.6	2.8	0.2	0.5	100.0	364
Private	3.6	3.8	92.6	0.0	100.0	93.9	4.4	1.3	0.5	100.0	541
Other/DK/Missing	-	-	-	-	-	-	-	-	-	-	2
Women's Education											
None/pre-school	25.3	34.0	40.5	0.1	100.0	75.3	6.5	1.5	16.8	100.0	518
Primary	20.3	40.9	38.8	0.0	100.0	80.9	3.4	0.5	15.2	100.0	120
Middle	16.3	45.5	38.2	0.0	100.0	86.3	0.7	2.9	10.2	100.0	109
Secondary	14.3	25.6	60.1	0.0	100.0	84.8	6.6	0.9	7.8	100.0	186
Higher	5.3	27.5	66.9	0.3	100.0	91.4	5.6	0.3	2.8	100.0	196
Wealth index quintiles											
Poorest	22.7	38.4	38.5	0.4	100.0	74.7	7.6	1.0	16.7	100.0	127

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Location of first PNC visit for new-borns					Provider of first PNC visit for new-borns					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	Other location	Total	Doctor/ nurse/ midwife	Lady health visitor (LHV)	Lady health worker (LHW)	Traditional birth attendant	Total	
KP	18.6	33.4	47.9	0.1	100.0	81.3	5.5	1.2	12.1	100.0	1,128
Second	27.4	41.1	31.5	0.0	100.0	74.1	6.4	0.5	19.0	100.0	181
Middle	24.1	39.0	36.8	0.0	100.0	78.3	7.9	1.8	12.0	100.0	174
Fourth	16.3	30.0	53.7	0.0	100.0	82.6	6.3	2.4	8.8	100.0	299
Richest	11.8	27.6	60.4	0.1	100.0	87.8	2.3	0.3	9.5	100.0	347
Division											
Bannu	41.9	25.8	32.3	0.0	100.0	60.4	20.6	0.6	18.4	100.0	31
D.I. Khan	31.7	30.5	37.9	0.0	100.0	66.1	2.3	0.0	31.7	100.0	35
Hazara	24.4	29.3	45.8	0.5	100.0	75.7	1.3	2.0	20.9	100.0	200
Kohat	12.8	27.6	59.6	0.0	100.0	92.5	3.0	0.0	4.6	100.0	69
Malakand	15.5	36.9	47.6	0.0	100.0	81.3	6.2	2.8	9.7	100.0	335
Mardan	17.6	35.6	46.9	0.0	100.0	86.7	3.5	0.0	9.8	100.0	181
Peshawar	16.1	33.3	50.6	0.0	100.0	83.2	8.2	0.0	8.6	100.0	276

Out of those new-borns whose PNC visits occur within one week of birth, about 48 percent are in a private facility and 19 percent at home. More than 81 percent of the first PNC visits for new-borns are provided by a doctor, nurse or midwife. This however does not mark a large differences across population groups. For example, the urban-rural distribution shows that 83 percent first PNC visits among urban new-borns are attended by a doctor, nurse, or midwife compared to 81 percent among rural new-borns.

Table RH.15 displays a pattern somewhat similar to Table RH.13. Overall, 64 percent of mothers receive a health check following birth while in a facility or at home. PNC visits after the first week following birth are only 3 percent. As regards the postnatal health checks, it is reported by 65 percent of the mothers. There is a positive correlation to both education and household wealth, with the percentage of post-natal health checks of mothers increasing with education and wealth. Health checks following birth occur mainly in health facility (81 percent), whereas for mothers delivering at home the figure is lower at 36 percent.

Tables RH.15 and RH.16 deals with PNC visits for mothers by location and type of provider and are identical to Tables RH.13 and RH.14 that presented data for new-borns.

Overall, 50 percent of the first PNC visits for mothers occur in a private facility. This proportion varies across background characteristics. The largest variation is found according to household wealth, where only 33 percent of the women living in the households in the poorest quintile have their first PNC visit in a private facility compared to 63 percent of women living in the households in the richest quintile. A similar distribution is found according to education of the women as well as their area of residence.

With regards to provider of the first PNC visit for mothers, the variations across background characteristics are not large, their prevalence among urban women of doctor/nurse/midwife at 83 percent against their rural counterparts at 80 percent. As expected, almost all women giving birth by C-section are seen by a doctor/nurse/midwife at their first PNC visit.

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

Percentage of women ever-married age 15-49 years with a live birth in the last two years who received health checks while in facility or at home following birth, percent 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, Khyber Pakhtunkhwa, 2016-17

	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	1 day following birth	2 days following birth	3-6 days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
KP	64.4	1.8	2.0	1.3	2.8	3.4	88.5	0.2	100.0	65.0	8,365
Area of residence											
Urban	78.5	2.4	3.2	1.4	3.9	5.5	83.4	0.2	100.0	79.2	1,334
Rural	61.7	1.7	1.8	1.2	2.5	3.0	89.5	0.2	100.0	62.3	7,032
Mother's age at birth											
Less than 20	64.1	1.8	2.3	0.9	1.9	3.8	88.9	0.4	100.0	64.3	892
20-34	65.0	1.8	2.1	1.3	3.0	3.6	88.0	0.3	100.0	65.8	6,301
35-49	60.8	1.5	1.8	1.1	2.1	2.3	91.2	0.0	100.0	61.3	1,173
Place of delivery											
Home	36.0	2.2	1.1	0.8	0.8	0.8	94.1	0.1	100.0	37.3	2,838
Health facility	80.7	1.5	2.6	1.5	3.9	4.8	85.4	0.3	100.0	81.0	5,392
Public	79.5	1.4	2.1	1.4	3.3	3.7	87.8	0.4	100.0	79.8	2,371
Private	81.7	1.7	3.0	1.6	4.3	5.7	83.5	0.2	100.0	82.0	3,021
Other/DK/Missing	4.7	1.2	0.0	0.0	0.4	1.0	97.4	0.0	100.0	5.9	136
Type of delivery											
Vaginal birth	61.6	1.9	2.1	1.2	1.2	1.4	92.1	0.2	100.0	62.3	7,728
C-section	97.4	0.5	1.1	2.2	21.5	27.6	46.0	1.2	100.0	97.4	638
Mother's Education											
None/pre-school	58.0	1.5	1.7	1.0	1.9	2.1	91.7	0.2	100.0	58.8	5,065
Primary	66.9	1.6	1.4	1.0	3.0	3.0	89.9	0.2	100.0	67.6	1,105
Middle	72.5	1.8	2.4	1.2	3.3	4.4	86.4	0.5	100.0	72.9	613
Secondary	76.4	3.7	4.1	2.6	4.6	4.6	79.8	0.6	100.0	76.7	788
Higher	82.9	2.1	3.0	1.9	6.0	10.3	76.5	0.3	100.0	83.1	794
Wealth index quintiles											
Poorest	42.4	1.3	1.7	0.6	0.9	0.6	94.5	0.3	100.0	43.3	1,682
Second	59.5	2.3	1.1	0.8	2.2	2.1	91.3	0.2	100.0	60.3	1,655
Middle	64.4	1.0	2.2	1.4	1.9	3.6	89.7	.2	100.0	65.0	1,632

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

Percentage of women ever-married age 15-49 years with a live birth in the last two years who received health checks while in facility or at home following birth, percent 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, Khyber Pakhtunkhwa, 2016-17

	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	1 day following birth	2 days following birth	3-6 days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
KP	64.4	1.8	2.0	1.3	2.8	3.4	88.5	0.2	100.0	65.0	8,365
Fourth	74.8	2.4	2.5	1.7	3.4	4.0	85.7	0.3	100.0	75.2	1,763
Richest	80.6	1.8	2.7	1.8	5.4	6.7	81.4	0.2	100.0	80.9	1,633
Division											
Bannu	59.2	1.1	0.9	0.2	2.5	5.9	89.4	0.0	100.0	59.6	602
D.I. Khan	64.1	0.7	0.7	0.9	1.2	1.9	94.6	0.0	100.0	64.6	684
Hazara	56.7	1.4	1.9	1.2	3.9	4.6	86.7	0.4	100.0	56.9	1,507
Kohat	73.9	2.8	2.1	1.5	3.8	4.3	85.4	0.1	100.0	74.9	592
Malakand	62.0	1.1	2.7	1.6	2.6	1.6	89.9	0.5	100.0	62.5	1,996
Mardan	62.8	4.3	2.6	2.2	2.7	4.3	83.7	0.2	100.0	64.8	1,015
Peshawar	72.1	1.7	2.0	0.9	2.3	3.4	89.7	0.1	100.0	72.6	1,968

[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] Post-natal care visits (PNC) refer 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 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.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	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	Other location	Total	Doctor/ nurse/ midwife	Auxiliary midwife	Community health worker	Traditional birth attendant	Total	
KP	20.9	29.2	49.9	0.1	100.0	80.7	8.8	1.0	9.5	100.0	655
Area of residence											
Urban	17.5	26.2	56.0	0.4	100.0	82.8	6.1	0.4	10.7	100.0	145
Rural	21.8	30.1	48.1	0.0	100.0	80.0	9.6	1.2	9.1	100.0	509
Mother's age at birth											
Less than 20	14.5	31.0	54.6	0.0	100.0	79.1	12.0	0.0	9.0	100.0	62
20-34	21.5	29.4	49.0	0.1	100.0	81.3	7.6	1.3	9.8	100.0	517
35-49	21.8	26.5	51.7	0.0	100.0	77.9	14.6	0.0	7.6	100.0	76
Duration of stay in health facility											
Less than 12 hours	8.3	34.0	57.7	0.0	100.0	88.4	8.8	0.4	2.3	100.0	274
12-23 hours	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	9
1-2 days	1.5	31.2	66.8	0.5	100.0	91.3	8.7	0.0	0.0	100.0	107
3 days or more	2.1	39.2	58.7	0.0	100.0	98.6	1.4	0.0	0.0	100.0	120
Not delivered in health facility	75.4	9.9	14.7	0.0	100.0	42.0	15.6	3.8	38.5	100.0	145
Place of delivery											
Home	77.9	7.6	14.5	0.0	100.0	40.0	16.2	3.9	39.8	100.0	140
Health facility	5.4	35.0	59.5	0.1	100.0	91.7	6.9	0.2	1.2	100.0	513
Public	6.0	87.0	6.7	0.3	100.0	95.1	4.2	0.0	0.7	100.0	193
Private	5.0	3.5	91.5	0.0	100.0	89.6	8.5	0.4	1.5	100.0	319
Other/DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	2
Type of delivery											
Vaginal birth	27.2	27.0	45.8	0.0	100.0	75.3	10.8	1.4	12.6	100.0	493
C-section	1.5	36.0	62.2	0.3	100.0	97.2	2.8	0.0	0.0	100.0	161
Mother's Education											
None/pre-school	26.5	29.2	44.3	0.0	100.0	78.5	10.0	0.4	11.1	100.0	303
Primary	23.9	38.0	38.1	0.0	100.0	74.8	8.8	0.7	15.6	100.0	77
Middle	17.7	39.6	42.8	0.0	100.0	86.1	1.4	5.8	6.7	100.0	53

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	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	Other location	Total	Doctor/ nurse/ midwife	Auxiliary midwife	Community health worker	Traditional birth attendant	Total	
KP	20.9	29.2	49.9	0.1	100.0	80.7	8.8	1.0	9.5	100.0	655
Secondary	17.3	24.7	58.1	0.0	100.0	79.3	11.5	1.6	7.7	100.0	118
Higher	7.9	22.5	69.1	0.5	100.0	90.2	6.2	0.0	3.6	100.0	103
Wealth index quintiles											
Poorest	38.9	27.9	33.3	0.0	100.0	72.9	11.5	0.0	15.6	100.0	76
Second	22.7	35.8	41.5	0.0	100.0	77.5	8.6	0.0	13.9	100.0	107
Middle	24.2	35.6	40.2	0.0	100.0	77.8	7.5	4.4	10.3	100.0	106
Fourth	19.8	26.8	53.5	0.0	100.0	79.4	12.5	0.9	7.3	100.0	175
Richest	11.8	24.8	63.2	0.3	100.0	88.3	5.3	0.3	6.1	100.0	191
Division											
Bannu	(22.9)	(17.7)	(59.3)	(0.0)	100.0	(81.1)	(16.5)	(0.0)	(2.4)	100.0	28
D.I. Khan	(*)	(*)	(*)	(*)	100.0	(*)	(*)	(*)	(*)	100.0	25
Hazara	24.8	27.9	46.9	0.4	100.0	72.5	3.3	1.6	22.6	100.0	127
Kohat	11.1	29.7	59.2	0.0	100.0	93.2	2.3	0.0	4.5	100.0	60
Malakand	15.2	27.8	57.0	0.0	100.0	83.3	11.1	1.0	4.6	100.0	162
Mardan	23.9	35.2	40.8	0.0	100.0	82.4	7.0	1.6	9.1	100.0	119
Peshawar	20.3	31.3	48.4	0.0	100.0	79.1	15.3	0.9	4.7	100.0	133

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table RH.17 exhibits the distribution of women with a live birth in the two years preceding the survey by receipt of health checks within 2 days of birth for the mother and the new-born. The table indicates that for 62 percent of live births, both the mothers and their new-borns, receive a health check following birth within 2 days of birth, whereas for 29 percent of births neither mother nor new-born received it. There are positive correlations of health checks with household wealth and the education of the woman, where increasing wealth and education tends to equate with better coverage and vice versa. As expected, the opposite is true for births without health checks.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Post-natal health checks within two days of birth for:						Number of women with a live birth in the last two years
	Both mothers and new-borns	Mothers only	New-borns only	Neither mother nor newborn	DK/Missing	Total	
KP	62.2	2.6	6.1	29.0	0.1	100.0	8,365
Area of residence							
Urban	75.9	3.1	6.0	14.8	0.2	100.0	1,334
Rural	59.7	2.5	6.1	31.6	0.1	100.0	7,032
Mother's age at birth							
Less than 20	61.5	2.6	6.0	29.7	0.2	100.0	892
20-34	62.8	2.8	6.3	27.9	0.1	100.0	6,301
35-49	59.6	1.6	4.8	34.0	0.0	100.0	1,173
Place of delivery							
Home	35.1	2.1	6.1	56.6	0.1	100.0	2,838
Health facility	78.0	3.0	6.2	12.8	0.1	100.0	5,392
Public	76.6	3.1	6.7	13.4	0.2	100.0	2,371
Private	79.0	2.9	5.8	12.3	0.1	100.0	3,021
Other/DK/Missing	5.9	0.0	0.0	94.1	0.0	100.0	136
Type of delivery							
Vaginal birth	59.7	2.6	6.5	31.2	0.1	100.0	7,728
C-section	93.5	3.2	0.9	1.7	0.7	100.0	638
Mother's Education							
None/pre-school	56.3	2.4	6.1	35.1	0.1	100.0	5,065
Primary	63.8	3.6	4.8	27.6	0.2	100.0	1,105
Middle	70.4	2.5	6.3	20.7	0.0	100.0	613
Secondary	73.4	2.9	9.2	14.2	0.3	100.0	788
Higher	80.5	2.4	4.3	12.7	0.1	100.0	794
Wealth index quintiles							
Poorest	41.0	2.3	4.4	52.3	0.1	100.0	1,682
Second	57.7	2.6	6.2	33.5	0.0	100.0	1,655
Middle	61.9	3.0	7.0	28.0	.1	100.0	1,632
Fourth	73.0	2.0	6.7	18.1	0.3	100.0	1,763
Richest	77.6	3.2	6.1	12.9	0.1	100.0	1,633
Mother tongue of head of household							
Pushto	64.0	2.5	6.0	27.3	0.1	100.0	6,311
Hindko	63.3	3.5	7.3	25.8	0.1	100.0	1,027
Other languages	50.3	2.2	5.2	42.2	0.1	100.0	1,027
Division							
Bannu	58.8	0.7	3.9	36.5	0.0	100.0	602
D.I. Khan	62.7	1.9	8.6	26.8	0.0	100.0	684
Hazara	53.7	3.1	6.2	36.9	0.1	100.0	1,507
Kohat	70.8	3.9	6.9	18.2	0.1	100.0	592
Malakand	60.1	2.2	5.6	31.9	0.2	100.0	1,996
Mardan	61.0	3.6	6.0	29.2	0.2	100.0	1,015
Peshawar	69.9	2.6	6.0	21.4	0.1	100.0	1,968

Lady Health Worker Visits

As part of a national strategy to reduce poverty and improve health by bringing health services to communities, Ministry of Health of the Government of Pakistan in Pakistan implemented the Lady Health Worker Programme (LHWP). Rooted in the concept of primary care, the LHWP plays a key role in Pakistan's strategy to achieve the MDGs, strengthen its primary health care system.

LHWs are expected to be agents of change within their communities by providing integrated preventative and curative health services to their neighbours. Their peer status enables them to connect with patients and navigate local customs, languages, and social relationships more effectively than outsiders. In effect, these women are liaisons between the formal health system and their community. Each LHW is associated with a government health facility within the community, where she receives training, a stipend, and medical supplies.

LHWs are each responsible for approximately 1,000 people within a catchment area of 200 houses. They work directly out of their homes, which are commonly called "health houses." The government has placed a specific focus on training LHWs from rural areas, which often have poor access to care LHWs visit households to increase awareness on reproductive health and nutrition, facilitate registration of births and deaths, distribute medication for family planning and immunize children according to the national schedule.

Basic maternal and child health services that LHWs provide include reproductive health education, promotion of healthy behaviours, preventive care, family planning, HIV/AIDS care, and basic curative care. LHWs provide regular treatment for diarrhoea, malaria, acute respiratory tract infections, and intestinal worms, and offer contraceptives as part of family planning. They also play a role in expanding access to public health initiatives, such as the Expanded Programme on Immunization (EPI).

LHWs play a particularly important role for mothers and children by coordinating with traditional birth attendants and midwives to ensure that mothers receive adequate care. Each LHW is affiliated with either a rural health Center (RHC) or a basic health unit (BHU), where the LHW is trained and will refer her clients to. In an RHC or BHU, clients of LHWs can receive basic health care services. For more complicated conditions, LHWs are trained to refer patients to nearby clinics. The survey collected information from respondents on whether the LHWs of their vicinity visit the households during the past month.

Table RH.18 show that 37 percent women with a live birth reported that a LHWs visited the house during the past month in KP. LHW visit was reported by more women in urban areas (48 percent) compared to their rural counterparts (35 percent). The data shows that the reporting of LHW visit is directly associated with the delivered mother's education and wealth quintiles. Percentage of women who were visited by the LHW by division is ranging from 19 percent in Bannu division to 57 percent in Mardan division.

Among those women who had reported the visit of a lady health worker in their area, services received from LHWs included ORT, vitamins, medicines are 43 percent, Education or advice is 35 percent and to weigh child is 4 percent. Responses about purpose of LHW shows that the majority of respondents declared ORT, vitamins, medicine as the prime purpose. There is almost a similar pattern observed in services received from LHWs by division, urban-rural residence, education and wealth.

Table RH. 18: Lady health worker (LHW) visits

Percentage of women with a live birth in the last 2 years who reported that a LHW visited the house during the past month, Khyber Pakhtunkhwa, 2016-17.

| | HH visited by lady health worker (LHW) during past month | | | | Number of women with a live birth in the last two years | Purpose of Visit | | | | | Number of women visited by LHW |
	Yes[1]	No	DK	Missing		ORT, vitamins, medicines	To weigh child	Education / advice	Other	DK	
KP	36.8	61.6	1.6	0.0	8,365	43.0	3.9	34.6	38.0	1.7	3,076
Area of residence											
Urban	47.5	49.9	2.6	0.0	1,334	43.2	5.1	42.4	30.5	1.3	631
Rural	34.8	63.8	1.4	0.0	7,032	42.9	3.6	32.6	39.9	1.8	2,445
Women's education											
None/pre-school	29.0	69.4	1.6	0.0	5,065	41.7	1.6	29.1	40.5	2.5	1,466
Primary	42.7	56.0	1.3	0.1	1,105	41.9	5.0	36.2	39.5	1.7	472
Middle	45.6	52.3	2.0	0.0	613	46.8	3.3	38.6	36.2	1.2	279
Secondary	52.3	46.2	1.4	0.1	788	42.9	9.1	40.7	32.3	1.2	411
Higher	56.4	41.9	1.7	0.0	794	46.1	5.8	42.5	34.5	0.2	447
Wealth index quintile											
Poorest	22.4	75.6	2.0	0.0	1,682	39.0	2.3	27.4	51.1	1.1	377
Second	35.8	63.2	1.0	0.1	1,655	39.5	2.6	23.6	46.3	2.9	592
Middle	37.2	61.1	1.6	0.0	1,632	44.3	4.2	33.4	38.7	1.6	607
Fourth	42.6	56.2	1.1	0.1	1,763	46.4	4.4	38.4	32.4	2.3	750
Richest	46.1	51.8	2.1	0.0	1,633	43.3	5.0	44.0	29.9	0.6	750
Division											
Bannu	18.7	80.1	1.2	0.0	602	41.7	4.2	4.6	59.1	0.9	113
D.I. Khan	46.6	52.3	1.1	0.0	684	32.3	-	23.0	48.6	1.6	316
Hazara	39.3	59.0	1.7	0.0	1,507	45.4	11.8	48.3	34.8	2.0	593
Kohat	39.4	59.5	1.1	0.0	592	34.1	0.3	8.0	64.4	1.1	233
Malakand	29.9	68.3	1.6	0.1	1,996	53.6	2.1	32.4	35.4	2.5	596
Mardan	56.9	41.8	1.3	0.0	1,015	35.6	1.9	34.5	47.6	1.0	578
Peshawar	33.0	65.1	1.9	0.0	1,968	46.2	3.3	44.5	16.5	1.8	647

[1] MICS indicator 5.S1 - Care provided by Lady Health Worker (LHW)

IX. Early Childhood Development

Early Childhood Care and Education

Readiness of children for primary school can be improved through attendance to early childhood education programmes or through pre-school attendance. Early childhood education programmes include programmes for children that have organised learning components as opposed to baby-sitting and day-care which do not typically have organised education and learning.

ECE is the formal teaching and care of young children by people other than their family or in settings outside of the home.

Early childhood has received a renewed focus globally after the adoption of Sustainable Development Goals (SDGs) in 2015. The Government of Pakistan acknowledges and accepts ECE as an important area of concern. The National Plan of Action (2001-2015) states "Early Childhood Education, termed Katchi or pre-primary, is defined as both formal and informal as well as public or private education services for children aged 3-5 years"[53].

Pakistan is committed to the Dakar Framework of Action, the first goal of which is to expand and improve comprehensive ECE for all children, especially for the most vulnerable and disadvantaged'. In Pakistan, there was no public policy, commitment and investment in ECE till late 1990s. For the first time National Education Policy (1998-2010) mentioned ECE and called for introduction of Katchi/Pre-Primary Class as a formal class in Primary Schools, extending primary education to a six-year programme. National Education Policy 2009 identified 3 areas to improve provision of ECE across the country: (i) wider participation; (ii) better quality; and (iii) improved governance[54]

In KP, Early Childhood Education (ECE) has been recognized in principle in formal education policy but still require efforts to feature it in regular educational budget. There are 253,449 children going to schools as un-admitted. There are no specialized teachers available for this level of education in the public sector, though private sector has provided greater input in terms of school provision and training facilities and recognition for ECE teachers. In KP the age for admission in school is 5 years and the class in which he is admitted is katchi class. As ECE is prior to katchi class so the age for ECE is 3 to 5 years of age[55]

It can be observed from the Table CD.1 that 8 percent of children age 36-59 months are attending an organised early childhood education programme. Among children age 36-59 months, attendance to early childhood education programmes is more prevalent in Mardan division (14 percent), which is quite low in Malakand and D.I. Khan (4 percent each). Age differential is notable; the figure is higher in children aged 48-59 months at 13 percent compared to 4 percent in 36-47 months children. No real gender differentials exists, but differentials by socioeconomic status seem to be significant. Fourteen percent of children living in the richest households attended such programmes and this proportion drops to 3 percent among children living in the poorest households. Twenty percent of children living with mothers having higher education attended such programmes and this proportion drops to 6 percent among children living in the households with mothers having none/preschool.

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[53] *Releasing Confidence and Creativity, Sindh Education Foundation, 2009*

[54] *Education Policy Analysis Report of Khyber Pakhtunkhwa, Ghulam Mustafa, UNESCO, Pakistan*

[55] *Education Policy Analysis Report of Khyber Pakhtunkhwa, Ghulam Mustafa, UNESCO, Pakistan*

Table CD. 1: Early childhood education		
Percentage of children age 36-59 months who are attending an organized early childhood education programme, Khyber Pakhtunkhwa, 2016-17		
	Percentage of children age 36-59 months attending early childhood education[1]	Number of children age 36-59 months
KP	8.1	8,520
Area of residence		
Urban	11.3	1,265
Rural	7.5	7,255
Sex		
Male	8.4	4,347
Female	7.8	4,173
Age of child		
36-47 months	3.8	4,618
48-59 months	13.1	3,902
Mother's education		
None/pre-school	5.7	5,717
Primary	10.1	979
Middle	12.4	512
Secondary	11.0	658
Higher	19.8	654
Wealth index quintile		
Poorest	2.6	1,868
Second	5.3	1,680
Middle	10.0	1,717
Fourth	9.7	1,659
Richest	13.7	1,596
Division		
Bannu	9.1	616
D.I. Khan	3.9	754
Hazara	11.4	1,607
Kohat	6.6	616
Malakand	3.7	1,916
Mardan	13.7	982
Peshawar	8.5	2,030
[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 3-4 years of life, and the quality of home care is a major determinant of the child's development during this period[56]. In this context, engagement of adults in activities with children, presence of books in the home for the child, and the conditions of care are important indicators of quality of home care. As set out in A World Fit for Children, "children should be physically healthy, mentally alert, emotionally secure, socially competent and ready to learn.[57]"

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 or yard, playing with children, and spending time with children naming, counting, or drawing things.

For over one-third (37 percent) of children age 36-59 months, an adult household member engaged in four or more activities that promote learning and school readiness during the 3 days preceding the survey (Table CD.2). The mean number of activities that adults engaged with children is 2.9. The table

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[56] 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. Socioeconomic Risk, Parenting During the Preschool Years and Child Health Age 6 Years. European Journal of Public Health 17(5): 511–2.

[57] UNICEF. 2002. A World Fit For Children adopted by the UN General Assembly at the 27th Special Session, 10 May 2002: 2.

also indicates that the father's involvement in such activities is somewhat limited which is only 3 percent. Most children (86 percent) are living with their biological fathers. As regards to mother's involvement in four or more activities that promote learning and school readiness during the 3 days preceding the survey, it is 4 percent while almost all (99 percent) are living with their biological mothers.

There are no gender differentials in terms of engagement of adults in activities with children. However differentials exists based on area of residence; a larger proportion of adults in urban (48 percent) engages in learning and school readiness activities with children than in rural areas (35 percent). Strong differences by mother's education, socio-economic status and divisions are also observed. Adult engagement in activities with children was greatest in Mardan divisions (52 percent) and lowest in D.I.Khan division (25 percent), while the proportion was 55 percent for children living in the richest households, as opposed to children living in the poorest households (20 percent).

Table CD. 2: Support for learning

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	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 age 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 age 36-59 months living with their biological fathers	Percentage of children with whom biological mothers have engaged in four or more activities[3]	Mean number of activities with biological mothers	Number of children age 36-59 months living with their biological mothers
			Biological father	Biological mother							
KP	36.6	2.9	86.1	99.2	8,520	2.8	0.7	7,337	4.1	0.7	8,448
Area of residence											
Urban	47.9	3.2	92.4	99.0	1,265	6.2	1.0	1,169	9.6	1.2	1,252
Rural	34.7	2.8	85.0	99.2	7,255	2.1	0.7	6,169	3.1	0.6	7,196
Sex											
Male	37.4	2.9	85.8	99.1	4,347	2.7	0.7	3,730	4.2	0.7	4,310
Female	35.9	2.8	86.5	99.2	4,173	2.8	0.7	3,608	4.0	0.7	4,139
Age											
36-47 months	34.5	2.8	85.5	99.1	4,618	2.3	0.7	3,950	4.2	0.7	4,578
48-59 months	39.2	3.0	86.8	99.2	3,902	3.2	0.7	3,387	4.0	0.7	3,870
Mother's education[a]											
None/pre-school	28.7	2.6	86.6	99.0	5,717	1.8	0.6	4,952	1.1	0.5	5,663
Primary	45.6	3.2	82.6	99.6	979	3.8	0.8	809	3.7	0.8	974
Middle	50.3	3.4	86.3	99.4	512	3.9	0.9	442	6.0	1.1	509
Secondary	53.9	3.5	85.7	99.2	658	5.1	0.9	564	11.5	1.3	652
Higher	64.6	4.0	87.3	99.3	654	6.6	1.0	571	21.4	1.9	650
Father's education											
None/pre-school	22.8	2.4	100.0	99.6	2,253	.8	0.6	2,253	0.9	0.5	2,245
Primary	29.6	2.7	100.0	100.0	791	2.7	0.7	791	3.1	0.5	791
Middle	39.3	2.9	100.0	99.2	1,041	2.9	0.8	1,041	3.0	0.6	1,033
Secondary	44.5	3.2	100.0	99.1	1,678	4.2	0.9	1,678	5.3	0.8	1,663
Higher	52.9	3.5	100.0	99.8	1,573	5.7	1.0	1,573	8.8	1.1	1,570
Father not in the household	32.7	2.7	0.1	96.8	1,184	.3	0.2	1	3.7	0.8	1,146
DK/Missing	100.0	5.0	100.0	100.0	1	0.0	2.0	1	0.0	3.0	1
Wealth index quintiles											
Poorest	19.9	2.3	86.5	99.4	1,868	0.6	0.5	1,617	0.8	0.4	1,857
Second	31.0	2.7	85.9	99.6	1,680	1.4	0.6	1,443	1.8	0.5	1,674
Middle	36.4	2.8	85.2	99.1	1,717	1.7	.6	1,462	2.1	.6	1,702
Fourth	44.1	3.2	84.0	99.1	1,659	2.8	0.7	1,393	3.9	0.8	1,644

Table CD. 2: Support for learning

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

| | 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 age 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 age 36-59 months living with their biological fathers | Percentage of children with whom biological mothers have engaged in four or more activities[3] | Mean number of activities with biological mothers | Number of children age 36-59 months living with their biological mothers |
			Biological father	Biological mother							
KP	36.6	2.9	86.1	99.2	8,520	2.8	0.7	7,337	4.1	0.7	8,448
Richest	54.8	3.5	89.1	98.6	1,596	7.7	1.1	1,422	12.6	1.4	1,573
Division											
Bannu	43.7	3.1	87.1	99.0	616	0.9	0.6	536	1.0	0.7	610
D.I. Khan	24.8	2.4	95.6	99.0	754	1.4	0.6	720	1.4	0.4	746
Hazara	32.4	2.8	84.2	98.8	1,607	2.1	0.6	1,354	5.5	0.7	1,587
Kohat	39.3	2.8	77.4	99.2	616	5.0	0.7	477	7.8	1.1	611
Malakand	31.2	2.8	79.6	99.7	1,916	2.4	0.7	1,525	2.6	0.6	1,910
Mardan	51.9	3.4	86.4	99.1	982	3.2	0.7	848	4.8	0.8	973
Peshawar	39.2	3.0	92.5	99.1	2,030	3.8	0.9	1,876	4.7	0.8	2,011

[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

(*) Figures that are based on fewer than 25 unweighted cases

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

Exposure to books in early years not only provides the child with greater understanding of the nature of print, but may also give the child opportunities to see others reading, such as older siblings doing school work. Presence of books is important for later school performance. The mothers/caretakers of all children under 5 were asked about number of children's books or picture books they have for the child, and the types of playthings that are available at home.

In KP, only 4 percent of children age 0-59 months live in households where at least 3 children's books are present for the child (Table CD.3). The proportion of children with 10 or more books declines to a negligible proportion (0.2 percent). Hazara division has highest percentage (7 percent) of children who have three or more books at home as compared to the other divisions.

While no gender differentials are observed, a higher percentage of urban children have access to children's books than those living in rural households. The proportion of under-5 children who have 3 or more children's books is 7 percent in urban areas, compared to 3 percent in rural areas. The presence of children's books is positively correlated with the child's age; in the homes of 6 percent of children age 24-59 months, there are 3 or more children's books, while the figure is less than half percent for children age 0-23 months. There are also notable differences by mother's education and wealth quintile.

Table CD. 3: Learning materials

Percentage of children under age 5 by numbers of children's books present in the household, and by playthings that child plays with, Khyber Pakhtunkhwa, 2016-17

	Percentage of children living in households that have for the child:			Percentage of children who play with:			Number of children under age 5
	3 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]	
KP	3.9	0.2	37.2	61.5	50.9	48.5	20,926
Area of residence							
Urban	7.4	0.4	40.7	74.6	51.3	53.3	3,168
Rural	3.3	0.2	36.6	59.1	50.9	47.7	17,757
Sex							
Male	4.0	0.2	36.2	62.9	50.0	47.7	10,716
Female	3.9	0.2	38.3	60.0	51.9	49.4	10,210
Age							
0-23 months	0.3	0.1	23.4	44.9	34.6	31.3	8,480
24-59 months	6.4	0.3	46.6	72.7	62.1	60.3	12,446
Mother's education							
None/pre-school	1.8	0.1	38.7	55.8	51.4	46.9	13,375
Primary	4.4	0.1	35.5	67.3	50.6	50.8	2,563
Middle	6.7	0.2	34.9	69.6	50.5	50.9	1,384
Secondary	7.0	0.6	32.5	72.1	49.6	50.2	1,791
Higher	13.7	0.7	34.5	78.2	49.9	53.9	1,811
Wealth index quintiles							
Poorest	0.7	0.1	37.7	42.8	51.1	40.7	4,389
Second	1.6	0.0	37.6	55.1	49.4	45.5	4,173
Middle	3.2	.1	37.3	64.9	51.3	51.0	4,164
Fourth	4.7	0.1	35.1	69.0	51.0	51.7	4,201
Richest	9.8	0.8	38.2	77.1	52.0	54.5	4,000
Division							
Bannu	1.5	0.0	21.1	61.7	40.1	39.6	1,505
D.I. Khan	2.0	0.1	38.4	64.4	44.4	49.0	1,827
Hazara	6.5	0.4	33.6	61.9	53.5	49.4	3,921
Kohat	4.7	0.1	44.5	70.7	51.0	55.3	1,492
Malakand	1.9	0.1	37.3	53.7	51.6	44.4	4,846
Mardan	5.5	0.4	36.4	60.0	54.1	52.9	2,486
Peshawar	4.4	0.1	42.7	65.6	52.5	50.3	4,849

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

[2] MICS indicator 6.6 - Availability of playthings

Table CD.3 also shows that 49 percent of children age 0-59 months had 2 or more types of playthings to play with in their homes. The proportion is almost double among older children 24-59 months (60 percent) compared to their younger ones (31 percent in 0-23 months). The types of playthings included in the questionnaires were 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). A higher proportion of children (62 percent) play with toys that come from a store and 51 percent play with household objects or objects found outside the house; however, the percentage for homemade toys is 37 percent. By division, the proportion of children who have 2 or more types of playthings ranges from 40 percent in Bannu to 55 percent in Kohat.

Leaving children alone or in the presence of other young children is known to increase the risk of injuries[58]. In the present survey, two questions were asked to find out whether children age 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. This data is displayed in Table CD.4.

The table shows that 3 percent of children age 0-59 months were left in the care of other children under 10 years of age, while 6 percent were left alone during the week preceding the interview. Combining the two care indicators, it is calculated that a total of 7 percent of children were left with inadequate care during the past week, either by being left alone or in the care of another child under 10 years of age. No differences are observed by sex of the child. More children living in the poorest households were left with inadequate care (11 percent) than children living in the richest households (6 percent).

Table CD. 4: Inadequate care			
Percentage of children under age 5 left alone or left in the care of another child younger than 10 years of age for more than one hour at least once during the past week, Khyber Pakhtunkhwa, 2016-17			
	Percentage of children under age 5:		Number of children under age 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]	
KP	5.9	3.3	7.3	20,926
Area of residence				
Urban	4.2	2.3	5.0	3,168
Rural	6.2	3.5	7.8	17,758
Sex				
Male	5.9	3.3	7.4	10,716
Female	5.9	3.3	7.3	10,210
Age				
0-23	3.0	2.1	4.1	8,480
24-59	7.8	4.1	9.6	12,446
Mother's education				
None/pre-school	6.1	3.8	7.8	13,375
Primary	6.0	2.4	7.0	2,563
Middle	4.0	1.9	4.7	1,384
Secondary	4.9	1.6	5.8	1,791
Higher	6.2	3.6	8.2	1,812
Wealth index quintiles				
Poorest	8.2	5.8	10.8	4,389

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[58] *Grossman, DC. 2000. The History of Injury Control and the Epidemiology of Child and Adolescent Injuries. The Future of Children, 10(1): 23-52.*

Table CD. 4: Inadequate care

Percentage of children under age 5 left alone or left in the care of another child younger than 10 years of age for more than one hour at least once during the past week, Khyber Pakhtunkhwa, 2016-17

| | Percentage of children under age 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 under age 5
KP	5.9	3.3	7.3	20,926
Second	5.9	3.5	7.5	4,173
Middle	5.5	3.1	6.9	4164
Fourth	4.8	2.2	5.8	4,201
Richest	4.8	1.9	5.5	4,000
Division				
Bannu	4.2	3.8	6.5	1,505
D.I. Khan	4.8	1.6	5.2	1,827
Hazara	11.0	3.7	13.3	3,921
Kohat	6.4	7.5	9.7	1,492
Malakand	7.6	4.8	9.0	4,846
Mardan	1.6	1.5	2.3	2,486
Peshawar	3.0	1.7	3.9	4,849

[1] MICS indicator 6.7 - Inadequate care

Developmental Status of Children

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 relating 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.[59]

A 10-item module was used to calculate the Early Child Development Index (ECDI). The primary purpose of the ECDI is to inform public policy regarding the developmental status of children in KP.

The index is based on selected milestones that children are expected to achieve by ages 3 and 4. 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 ten 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 1 to 10. If at least two of these are true, then the child is considered developmentally on track
- 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 distracted easily.

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[59] *Shonkoff, J and Phillips, D (eds). 2000. From neurons to neighborhoods: the science of early childhood development. Committee on Integrating the Science of Early Childhood Development, National Research Council, 2000.*

- 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.

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

The results are presented in Table CD.5. In KP, 69 percent of children age 36-59 months are developmentally on track. As expected, ECDI is higher in the older children compared to those that are younger since children mature more skills with increasing age; 75 percent among children age 48-59 months and 63 percent among those age 36-47 months. It is quite high among children attending an early childhood education (92 percent) compared to their non-attending counterparts (67 percent).

The analysis of four domains of child development shows that 93 percent of children are on track in physical domain and 89 percent in learning but much less on track in social-emotional (62 percent) and literacy-numeracy (39 percent). In each individual domain the higher score is associated with attending an early childhood education programme and older children age 48-59 months.

Table CD. 5: Early child development index

Percentage of children age 36-59 months who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains, and the early child development index score, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 36-59 months who are developmentally on track for indicated domains				Early child development index score[1]	Percentage of children not on track in any of the four domains	Number of children age 36-59 months
	Literacy-numeracy	Physical	Social-Emotional	Learning			
KP	39.1	92.6	61.7	88.7	68.8	1.9	8,520
Area of residence							
Urban	48.3	91.7	64.4	91.6	74.5	2.1	1,265
Rural	37.4	92.7	61.3	88.2	67.8	1.8	7,255
Sex							
Male	38.9	92.3	61.7	88.5	67.6	1.5	4,347
Female	39.2	92.9	61.7	88.9	70.0	2.3	4,173
Age							
36-47 months	31.1	90.2	60.6	86.4	63.4	3.1	4,618
48-59 months	48.4	95.4	63.1	91.3	75.1	0.4	3,902
Attendance to early childhood education							
Attending	80.5	98.6	68.6	96.3	91.6	0.0	688
Not attending	35.4	92.1	61.1	88.0	66.8	2.0	7,833
Mother's education							
None/pre-school	33.8	92.6	61.4	87.1	65.2	2.0	5,717
Primary	44.0	92.5	63.4	90.8	72.6	1.7	979
Middle	44.5	94.1	59.5	93.2	75.0	1.3	512
Secondary	53.4	92.8	62.1	92.0	78.4	1.8	658
Higher	59.2	91.5	63.5	92.4	79.5	1.8	654
Wealth index quintiles							
Poorest	22.4	89.5	60.6	83.2	57.1	2.1	1,868
Second	34.5	91.4	60.6	85.9	64.4	2.4	1,680
Middle	43.4	93.9	61.6	90.0	72.1	1.7	1,717
Fourth	42.1	95.0	62.8	91.2	72.4	1.4	1,659

Table CD. 5: Early child development index

Percentage of children age 36-59 months who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains, and the early child development index score, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 36-59 months who are developmentally on track for indicated domains				Early child development index score[1]	Percentage of children not on track in any of the four domains	Number of children age 36-59 months
	Literacy-numeracy	Physical	Social-Emotional	Learning			
KP	39.1	92.6	61.7	88.7	68.8	1.9	8,520
Richest	55.6	93.6	63.3	93.9	79.6	1.7	1,596
Division							
Bannu	33.4	93.4	70.2	91.7	74.9	2.0	616
D.I. Khan	30.3	88.7	66.6	92.7	69.9	2.5	754
Hazara	25.4	87.4	60.6	87.2	58.0	2.0	1,607
Kohat	44.7	94.0	63.6	73.4	63.2	2.9	616
Malakand	41.1	94.8	57.3	90.4	70.1	1.3	1,916
Mardan	42.6	96.0	63.5	90.6	75.7	2.1	982
Peshawar	49.5	93.8	61.0	89.5	72.1	1.5	2,030

[1] **MICS indicator 6.8 - Early child development index**
[2] **SDG indicator 4.2.1- Early child development index**

X.   Literacy and Education

Literacy among Young Women

The Youth Literacy Rate reflects the outcomes of primary education over the previous 10 years or so. 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 KP-MICS 2016-17, since only a women's questionnaire was administered, the results are based on females age 15-24. Literacy is assessed on the ability of the respondent to read a short simple statement or based on school attendance.

The proportion of literates are presented in Table ED.1. The data in the table indicate that 53 percent of young women in KP are literate. Literacy status varies by area of residence - 73 percent in urban compared to 49 percent in rural. Of women who stated that primary school was their highest level of education, 49 percent were actually able to read the statement shown to them. Among divisions, the proportion of literate women is highest in Hazara division (62 percent) and lowest in D.I.Khan division (31 percent). There is a strong association between household wealth and literacy. Women living in the households in the richest quintile are almost four times more likely to be literate than women living in the households in the poorest quintile.

Table ED. 1: Literacy (young women)

Percentage of women age 15-24 years who are literate, Khyber Pakhtunkhwa, 2016-17

	Percentage literate[1]	Percentage not known	Number of women age 15-24 years
KP	52.7	0.1	14,499
Area of residence			
Urban	73.0	0.2	2,445
Rural	48.5	0.1	12,054
Education			
None/pre-school	1.7	0.1	5,807
Primary	49.4	0.4	2,280
Middle	100.0	0.0	1,779
Secondary	100.0	0.0	2,477
Higher	100.0	0.0	2,154
DK/Missing	(*)	(*)	3
Age			
15-19	55.1	0.1	7,984
20-24	49.6	0.1	6,515
Wealth index quintile			
Poorest	21.5	0.0	2,555
Second	38.1	0.1	2,881
Middle	52.5	0.2	2,971
Fourth	63.4	0.1	2,969
Richest	81.5	0.2	3,123
Division			
Bannu	38.8	0.0	929
D. I. Khan	32.0	0.0	940
Hazara	62.0	0.0	2,726
Kohat	51.2	0.2	1,086
Malakand	51.2	0.1	3,347
Mardan	59.1	0.4	1,889
Peshawar	52.9	0.1	3,581

[1] MICS indicator 7.1; MDG indicator 2.3 - Literacy rate among young women
(*) Figures that are based on fewer than 25 unweighted cases

School Readiness

Attendance to pre-school education is important for the readiness of children to primary school. Table ED.2 shows the proportion of children in the first grade of primary school (regardless of age) who attended pre-school the previous year[60]. Overall, 88 percent of children who are currently attending the first grade of primary school were attending pre-school the previous year. The percentage is quite low in D.I.Khan (51 percent) compared to other divisions (84 percent or more).

Table ED. 2: School readiness		
Percentage of children attending first grade of primary school who attended pre-school the previous year, Khyber Pakhtunkhwa, 2016-17		
	Percentage of children attending first grade who attended preschool in previous year[1]	Number of children attending first grade of primary school
KP	88.0	4,169
Area of residence		
Urban	91.7	665
Rural	87.3	3,505
Sex		
Male	87.5	2,246
Female	88.5	1,924
Mother's education		
None/pre-school	87.2	2,970
Primary	86.3	455
Middle	95.6	200
Secondary	92.4	282
Higher	90.9	258
Cannot be determined	(*)	1
Wealth index quintile		
Poorest	82.4	756
Second	87.6	869
Middle	88.0	915
Fourth	89.3	842
Richest	92.4	788
Division		
Bannu	94.6	306
D. I. Khan	51.1	228
Hazara	85.4	752
Kohat	93.1	277
Malakand	88.4	928
Mardan	84.0	585
Peshawar	95.2	1,092
[1] MICS indicator 7.2 - School readiness		
(*) Figures that are based on fewer than 25 unweighted cases		

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[60] *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 the first grade 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 the first grade of primary school for the first time; these children are not captured in the numerator of the indicator.*

Primary and Secondary School Participation

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

In KP, the official entry age to primary school is at age 5 and secondary school at age 12. There are 5 grades in primary school and 5 in secondary school. In primary school, grades are referred to as class 1 to class 5 and for secondary school, grades are referred to as class 6 to class 10. The school year typically runs from April of one year to March of the following year.

Of children who are of primary school entry age (age 5) in KP, 23 percent are attending the first grade of primary school (Table ED.3) with no sex differentials. However, differentials are present by urban-rural areas. Children's participation to primary school is timelier in urban area (31 percent) than in rural area (21 percent). A positive correlation in school participation with mother's education and socio-economic status is observed; for children age 5 whose mothers have higher education, 34 percent are attending the first grade compared to 19 percent of children whose mothers have no education or only pre-school. Of children living in the richest households, the proportion is 30 percent, while it is only about 12 percent among children living in the poorest households. By division, it is higher in Kohat, Mardan and Peshawar (27-29 percent), but lower in Bannu, D.I.Khan and Malakand (15-16 percent each).

Table ED.3 also provides information of children entering class 1 at the age of 6 years. In KP, 49 percent of children aged 6 years enter class 1 and this proportion is higher in urban (60 percent) than rural areas (47 percent).

Table ED. 3: Primary school entry

Percentage of children of primary school entry age entering grade 1 (net intake rate) and percentage of children age 6 years entering grade 1,Khyber Pakhtunkhwa, 2016-17

	Percentage of children of primary school entry age entering grade 1[1]	Number of children of primary school entry age (5 years old)	Percentage of children age 6 years entering grade 1	Number of children age 6 years
KP	22.5	4,745	48.5	4,842
Area of residence				
Urban	31.0	703	60.0	666
Rural	21.1	4,042	46.7	4,176
Sex				
Male	23.6	2,393	52.3	2,466
Female	21.5	2,352	44.7	2,376
Mother's education				
None/pre-school	18.6	3,414	42.7	3,669
Primary	30.9	518	63.8	455
Middle	30.5	215	67.0	218
Secondary	35.6	309	72.2	274
Higher	34.4	286	66.2	225
Cannot be determined	(*)	3	(*)	0
Wealth index quintile				
Poorest	12.4	1,135	33.6	1,111
Second	19.5	975	42.4	1,094
Middle	28.3	903	56.3	959

Table ED. 3: Primary school entry

Percentage of children of primary school entry age entering grade 1 (net intake rate) and percentage of children age 6 years entering grade 1,Khyber Pakhtunkhwa, 2016-17

	Percentage of children of primary school entry age entering grade 1[1]	Number of children of primary school entry age (5 years old)	Percentage of children age 6 years entering grade 1	Number of children age 6 years
KP	22.5	4,745	48.5	4,842
Fourth	25.9	868	54.3	903
Richest	30.0	863	62.2	775
Division				
Bannu	15.8	342	29.9	354
D. I. Khan	15.2	291	38.6	380
Hazara	25.9	899	52.3	889
Kohat	28.1	300	64.2	306
Malakand	15.9	1,208	42.4	1,207
Mardan	29.1	520	59.8	548
Peshawar	26.8	1,119	51.3	1,159

[1] **MICS indicator 7.3 - Net intake rate in primary education**
(*) Figures that are based on fewer than 25 unweighted cases

Table ED.4 provides the percentage of children of primary school age 5 to 9 years who are attending primary or secondary school[61] and those who are out of school. Fifty eight percent of children of primary school age are attending school, slightly higher in urban areas (69 percent) compared to rural (56 percent). Sex differential is also important; 64 percent among boys compared to 52 percent among girls, which is more prominent in poorest households (51 and 30 percent respectively). About 42 percent of the children are defined as out of school which comprise 27 percent not attending school or preschool and 16 percent are attending pre-school. It may be noted that the children attending pre-school are appeared to be starting school late and are counted as out of school. This high out-of-school rate is primarily due to a very low attendance rate (50 percent) of children age 6, who appeared to be starting late in primary school, as seen by a relatively high percentage attending pre-school (23 percent).

Similar relationship is observed with mother's education and household wealth. For mothers with only pre-school or no education, 53 percent of the children are attending school compared to over 70 percent for mothers in other educational groups. Similarly, only one-third of children living in the poorest households (41 percent) are attending school and this increases to 70 percent among the children living in the richest households. At division level, net attendance ratio of primary level in the children ranges from 40 percent in D.I.Khan division to 70 percent in Mardan division.

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[61] *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 net attendance and out of school children

Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), percentage attending preschool, and percentage out of school, Khyber Pakhtunkhwa, 2016-17

	Male					Female					Total				
		Percentage of children:					Percentage of children:					Percentage of children:			
	Net attendance ratio (adjusted)	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children	Net attendance ratio (adjusted)	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children	Net attendance ratio (adjusted)[1]	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children
KP	63.5	20.2	16.2	36.4	11,728	51.8	33.3	14.8	48.2	11,224	57.8	26.7	15.5	42.1	22,952
Area of residence															
Urban	69.5	10.6	19.8	30.4	1,648	67.8	15.6	16.6	32.1	1,615	68.7	13.1	18.2	31.3	3,264
Rural	62.5	21.8	15.6	37.4	10,080	49.1	36.3	14.5	50.9	9,609	56.0	28.9	15.1	44.0	19,689
Age at beginning of school year															
5	24.4	41.6	33.8	75.4	2516	21.4	48.1	30.4	78.5	2374	22.9	44.8	32.1	76.9	4,890
6	54.0	21.0	24.8	45.8	2,466	45.6	34.0	20.4	54.4	2,376	49.9	27.4	22.6	50.0	4,842
7	72.6	16.0	11.4	27.3	2,405	59.9	29.3	10.7	40.0	2,438	66.2	22.7	11.0	33.7	4,843
8	83.0	11.1	5.9	16.9	1,998	69.8	25.6	4.6	30.2	1,953	76.5	18.2	5.2	23.5	3,951
9	86.1	11.5	2.4	13.8	2,466	65.5	31.7	2.7	34.4	2,105	76.6	20.8	2.5	23.3	4,572
Mother's education															
None/pre-school	60.7	24.1	15.1	39.2	8,990	45.4	41.0	13.6	54.6	8,524	53.2	32.3	14.4	46.7	17,515
Primary	70.9	9.1	19.9	29.1	1,081	69.5	13.6	16.8	30.5	1,039	70.3	11.3	18.4	29.7	2,120
Middle	75.9	6.8	17.3	24.1	489	69.4	7.0	23.6	30.6	469	72.7	6.9	20.4	27.3	959
Secondary	73.5	7.0	19.1	26.1	608	76.2	5.1	18.6	23.7	660	74.9	6.0	18.8	24.9	1,268
Higher	72.4	5.8	21.6	27.4	555	74.0	8.1	17.9	26.0	527	73.2	7.0	19.8	26.7	1,082
Cannot be determined	(*)	(*)	(*)	(*)	5	(*)	(*)	(*)	(*)	3	(*)	(*)	(*)	(*)	8
Wealth index quintile															
Poorest	50.6	38.7	10.6	49.3	2,894	29.6	61.7	8.5	70.2	2,619	40.6	49.6	9.6	59.2	5,513
Second	62.1	20.0	17.9	37.9	2,626	47.6	38.7	13.7	52.4	2,449	55.1	29.0	15.8	44.9	5,075
Middle	70.2	14.3	15.4	29.7	2217	58.1	25.4	16.4	41.8	2,222	64.1	19.9	15.9	35.8	4,438
Fourth	69.5	11.6	18.8	30.4	2,055	62.9	18.6	18.4	37.0	2,134	66.1	15.2	18.6	33.8	4,190
Richest	70.7	8.9	20.2	29.1	1,937	68.6	12.1	19.3	31.4	1,799	69.7	10.5	19.8	30.2	3,736
Division															
Bannu	57.6	17.0	25.3	42.3	859	33.5	47.5	18.7	66.3	867	45.5	32.3	22.0	54.3	1,727

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

Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), percentage attending preschool, and percentage out of school, Khyber Pakhtunkhwa, 2016-17

	Male					Female					Total				
		Percentage of children:					Percentage of children:					Percentage of children:			
	Net attendance ratio (adjusted)	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children	Net attendance ratio (adjusted)	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children	Net attendance ratio (adjusted)[1]	Not attending school or preschool	Attending preschool	Out of school[a]	Number of children
KP	63.5	20.2	16.2	36.4	11,728	51.8	33.3	14.8	48.2	11,224	57.8	26.7	15.5	42.1	22,952
D. I. Khan	46.0	38.3	15.7	54.0	743	33.3	49.1	17.3	66.4	724	39.7	43.6	16.5	60.1	1,775
Hazara	63.4	23.2	13.3	36.5	2,174	53.4	34.0	12.6	46.6	2,054	58.5	28.4	13.0	41.4	4,227
Kohat	73.7	9.0	17.3	26.2	796	60.2	28.1	11.6	39.8	672	67.6	17.7	14.7	32.4	1,467
Malakand	60.9	26.1	12.7	38.8	3,000	47.3	40.9	11.7	52.6	2,825	54.3	33.2	12.2	45.5	5,825
Mardan	71.6	11.2	17.2	28.4	1,289	68.0	15.9	16.1	32.0	1,237	69.8	13.5	16.7	30.2	2,525
Peshawar	66.5	14.9	18.6	33.5	2,716	57.0	24.8	18.2	43.0	2,689	61.8	19.8	18.4	38.2	5,406

[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 preschool
(*) Figures that are based on fewer than 25 unweighted cases

Table ED.4B presents the gross attendance ratio (GAR) for primary school, which considers the number of children of all ages who are attending primary or secondary school as a percentage of the total number of children of primary school age (5–9 years).

The gross attendance ratio (GAR) at the primary level in the KP is 86 percent. The rate varies by sex, area of residence, mother's education and household wealth. Boys have higher GAR (97 percent) than girls (75 percent) the same is true for urban areas (98 percent) compared to rural areas (84 percent). Gross primary attendance ratio increases sharply following the wealth quintiles upwards, from 64 percent in the lowest quintile to 97 percent in the highest quintile. The higher GAR (86 percent) than the NAR (58 percent) indicates that many children in primary school at the time of the survey were over the official primary school age.

Table ED 4. 1b: Primary school gross attendance ratio (5-9) years

Percentage of children of all ages attending primary school or secondary school (adjusted gross attendance), Khyber Pakhtunkhwa, 2016-17

	Male		Female		Total	
	Gross attendance ratio (adjusted)	Number of children	Gross attendance ratio (adjusted)	Number of children	Gross attendance ratio (adjusted)[1]	Number of children
KP	97.0	11,728	75.4	11,224	86.3	22,952
Area of residence						
Urban	99.3	1,648	95.8	1615	97.5	3,264
Rural	96.3	10,080	72.0	9609	84.4	19,689
Mother's education						
None/pre-school	96.8	8,990	70.4	8,524	83.9	17,515
Primary	97.9	1,081	90.0	1,039	94.0	2,120
Middle	93.7	489	88.3	469	91.0	959
Secondary	94.8	608	92.1	660	93.4	1,268
Higher	88.5	555	93.5	527	90.9	1,082
Cannot be determined	(*)	5	(*)	3	(*)	8
Wealth index quintile						
Poorest	81.5	2,894	44.9	2,619	64.1	5,513
Second	98.7	2,626	68.9	2,449	84.3	5,075
Middle	104.5	2,217	87.1	2,222	95.8	4,438
Fourth	104.6	2,055	92.2	2,134	98.3	4,190
Richest	99.4	1,937	94.6	1,799	97.1	3,736
Division						
Bannu	85.6	859	50.0	867	67.7	1,727
D. I. Khan	71.6	743	48.6	724	60.2	1,775
Hazara	96.4	2,174	73.0	2,054	85.0	4,227
Kohat	104.8	796	86.9	672	96.6	1,467
Malakand	95.7	3,000	71.3	2,825	83.9	5,825
Mardan	107.3	1,289	96.4	1,237	102.0	2,525
Peshawar	101.2	2,716	85.7	2,689	93.5	5,406

Numerator: Children of all ages currently attending grade 1-5   Denominator: Children aged 5-9 years
[1] MICS indicator 7.S4 – Primary School Gross Attendance Ration (adjusted)
(*) Figures that are based on fewer than 25 unweighted cases

The secondary school net attendance ratio is presented in Table ED.5[62]. It is observed that 42 percent of the children are attending secondary school. Of the remaining, 23 percent are still attending primary school, and the rest (34 percent) are out of school. Secondary school net attendance is higher in urban (55 percent) than rural areas (40 percent). Also, it has a positive relation with wealth status of the household as well as the level of mother's education.

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[62] *Ratios presented in this table are "adjusted" since they include not only secondary school attendance, but also attendance to higher levels in the numerator.*

Table ED. 5: 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, Khyber Pakhtunkhwa, 2016-17

	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)[1]	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]	
KP	52.9	27.4	19.6	13,851	30.8	19.2	49.9	13,235	42.1	23.4	34.4	27,086
Area of residence												
Urban	61.1	23.7	15.1	20,39	48.1	20.8	30.9	2,047	54.6	22.2	23.1	4,085
Rural	51.5	28.1	20.3	118,12	27.6	18.9	53.4	11,189	39.9	23.6	36.4	23,000
Age at beginning of school year												
10	17.2	70.5	12.2	1,945	12.7	57.3	30.1	1,961	14.9	63.9	21.2	3,906
11	37.8	49.9	12.3	2,333	25.1	34.9	40.0	2,132	31.7	42.7	25.5	4,465
12	55.4	30.3	14.3	1,982	34.9	20.1	44.9	2,166	44.7	25.0	30.3	4,148
13	64.1	18.4	17.4	2,043	40.5	6.2	53.1	1,999	52.4	12.4	35.0	4,042
14	70.1	9.1	20.6	1,997	37.6	3.7	58.7	1,758	54.9	6.6	38.4	3,755
15	66.3	4.2	29.5	1,855	32.6	1.8	65.3	1,697	50.2	3.0	46.6	3,552
16	63.4	1.5	34.7	1,696	33.8	1.0	64.9	1,523	49.4	1.3	49.0	3,219
Mother's education												
None/pre-school	50.2	27.9	21.8	11,515	25.2	19.5	55.1	10,624	38.2	23.9	37.8	22,138
Primary	60.9	31.0	8.1	912	55.2	22.6	21.9	839	58.1	27.0	14.7	1,751
Middle	69.1	25.2	5.6	373	64.9	23.6	11.5	381	67.0	24.4	8.6	754
Secondary	72.6	23.5	3.8	506	73.7	19.3	7.0	513	73.1	21.4	5.4	1,019
Higher	72.0	23.3	4.4	335	70.3	22.8	6.9	352	71.1	23.0	5.7	686
Cannot be determined [b]	60.3	7.4	32.3	211	12.1	0.7	86.8	527	25.9	2.6	71.2	738
Wealth index quintile												
Poorest	38.0	29.5	32.4	2,962	9.9	13.5	76.6	2,796	24.4	21.7	53.8	5,758
Second	46.8	31.7	21.4	2,987	22.9	17.3	59.6	2,847	35.2	24.7	40.0	5,833
Middle	53.0	33.5	13.5	2,078	27.5	29.7	42.7	2,003	40.5	31.6	27.8	4,081
Fourth	58.1	27.4	14.4	2,599	41.0	23.2	35.7	2,638	49.5	25.3	25.1	5,237
Richest	67.9	22.4	9.4	2,444	56.2	19.4	24.2	2,313	62.2	21.0	16.6	4,757

Table ED. 5: 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, Khyber Pakhtunkhwa, 2016-17

	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)[1]	**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]	
KP	52.9	27.4	19.6	13,851	30.8	19.2	49.9	13,235	42.1	23.4	34.4	27,086
Division												
Bannu	55.2	26.2	18.5	921	20.6	15.2	64.0	880	38.3	20.8	40.8	1,801
D. I. Khan	39.5	22.3	38.1	786	16.1	13.0	70.9	748	28.1	17.8	54.1	1,534
Hazara	49.8	28.4	21.7	2,420	34.6	17.1	48.1	2,213	42.5	23.0	34.3	4,633
Kohat	62.0	26.1	11.7	933	30.9	17.6	51.2	919	46.6	21.9	31.3	1,852
Malakand	52.5	29.5	17.9	3,524	31.7	19.8	48.3	3,325	42.4	24.8	32.7	6,849
Mardan	60.3	24.5	15.0	1,799	37.8	20.4	41.7	1,630	49.6	22.6	27.7	3,429
Peshawar	52.1	28.0	19.7	3,301	30.8	22.5	46.7	3,347	41.3	25.2	33.3	6,647

[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

[b] Children age 15 or higher at the time of the interview whose mothers were not living in the household

The percentage of children entering the first grade who eventually reach the last grade of primary school is presented in Table ED.6. Of all children starting grade one, almost all (97 percent) eventually reach the last grade of primary school. The MICS included only those questions on school attendance in the current and previous year. Thus, the indicator is calculated synthetically by computing the cumulative probability of survival rate 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 entered primary school up to the time it reached the last grade.

Repeaters are excluded from the calculation of the indicator because it is not known whether they will eventually graduate. As an example, the probability that a child will move from the first grade to the second grade is computed by dividing the number of children who moved from the first grade to the next (during the two consecutive school years covered by the survey) by the number of children who have moved from the first to the second grade plus the number of children who were in the first grade the previous school year but dropped out. Both the numerator and denominator exclude children who repeated during those two school years.

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

Percentage of children entering first grade of primary school who eventually reach the last grade of primary school (Survival rate to last grade of primary school), Khyber Pakhtunkhwa, 2016-17

	Percent attended grade 1 last school year who are in grade 2 this school year	Percent attending grade 2 last school year who are attending grade 3 this school year	Percent attending grade 3 last school year who are attending grade 4 this school year	Percent attending grade 4 last school year who are attending grade 5 this school year	Percent who reached grade 5 of those who had entered grade 1[1]
KP	99.6	99.1	99.4	98.8	96.8
Area of residence					
Urban	99.8	99.8	99.2	99.6	98.4
Rural	99.6	99.0	99.4	98.6	96.6
Sex					
Male	99.9	99.3	99.9	99.6	98.7
Female	99.2	98.8	98.6	97.5	94.2
Mother's education					
None/pre-school	99.4	98.9	99.2	99.0	96.6
Primary	100.0	99.8	99.5	97.9	97.3
Middle	100.0	100.0	100.0	100.0	100.0
Secondary	100.0	100.0	100.0	99.1	99.1
Higher	100.0	100.0	100.0	98.9	98.9
Cannot be determined	100.0	63.3	100.0	68.5	43.4
Wealth index quintile					
Poorest	99.5	98.3	99.2	99.0	96.1
Second	99.2	98.7	99.3	98.4	95.7
Middle	99.4	99.8	99.6	98.8	97.6
Fourth	99.8	99.2	99.2	98.6	96.8
Richest	100.0	99.3	99.6	99.1	98.0
Division					
Bannu	100.0	100.0	99.0	98.9	97.9
D. I. Khan	100.0	96.9	97.2	100.0	94.3
Hazara	99.5	99.6	99.4	98.7	97.2
Kohat	99.5	99.2	100.0	98.6	97.3
Malakand	99.8	98.6	99.8	98.2	96.4
Mardan	98.7	98.5	99.5	98.0	94.8
Peshawar	99.7	99.6	99.1	99.6	9.2
[1] **MICS indicator 7.6; MDG indicator 2.2 - Children reaching last grade of primary**					

The primary school completion rate and transition rate to secondary education are presented in Table ED.7. The primary 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 graduation age at the beginning of the current (or most recent) school year.

Table ED.7 shows that the primary school completion rate is 72 percent. About 93 percent of the children who were attending the last grade of primary school in the previous school year were found to be attending the first grade of secondary school in the school year of the survey. The table also provides "effective" transition rate which takes account of the presence of repeaters in the final grade of primary school. This indicator better reflects situations in which pupils repeat the last grade of primary education but eventually make the transition to the secondary level. The simple transition rate tends to underestimate pupils' progression to secondary school as it assumes that the repeaters never reach secondary school. The table shows that in total 95 percent of the children in the last grade of primary school are expected to move on to secondary school.

Primary school completion rate varies greatly between divisions ranging from 45 percent in D.I.Khan to 87 percent in Mardan. Sex differential is also notable with 81 percent among boys and 62 percent among girls whereas it is higher in urban areas (85 percent) and lower in rural areas (70 percent). Mother's education and wealth also have strong association with primary school completion rate.

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

Primary school completion rates and transition and effective transition rates to secondary school, Khyber Pakhtunkhwa, 2016-17

	Primary school completion rate[1]	Number of children of primary school completion age	Transition rate to secondary school[2]	Number of children who were in the last grade of primary school the previous year	Effective transition rate to 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
KP	72.0	4,572	92.7	2,577	94.8	2,521
Area of residence						
Urban	84.9	634	94.7	446	96.3	439
Rural	69.9	3,938	92.3	2,130	94.5	2,082
Sex						
Male	80.5	2,466	93.9	1,626	96.3	1,586
Female	62.0	2,105	90.7	951	92.3	935
Mother's education						
None/pre-school	67.4	3,724	93.1	1,882	95.5	1,835
Primary	82.4	345	92.3	239	92.8	238
Middle	85.8	154	91.7	114	94.4	111
Secondary	95.9	189	93.9	170	95.9	166
Higher	97.1	155	93.8	113	94.2	113
Cannot be determined	(*)	4	(*)	17	(*)	17
Wealth index quintile						
Poorest	48.3	1,154	89.9	367	92.0	359
Second	67.4	1,061	92.6	506	95.1	493
Middle	75.7	906	91.5	562	94.3	545
Fourth	89.0	796	93.7	558	95.4	548
Richest	95.2	654	94.9	585	96.1	577
Division						
Bannu	51.4	359	98.5	138	98.5	138
D. I. Khan	44.7	353	93.2	109	93.2	109
Hazara	73.5	815	89.4	432	92.5	417
Kohat	78.2	298	96.6	184	97.2	183
Malakand	72.4	1,170	92.9	685	95.2	669
Mardan	86.6	489	89.0	398	92.3	384
Peshawar	77.4	1,088	94.6	630	96.1	620

[1] **MICS indicator 7.7 - Primary completion rate**
[2] **MICS indicator 7.8 - Transition rate to secondary school**   (*) Figures that are based on fewer than 25 unweighted cases

The ratio of girls to boys attending primary and secondary education is provided in Table ED.8. These ratios are better known as the Gender Parity Index (GPI). Notice that the ratios included here are obtained from net attendance rather than gross attendance ratios. The latter provide an erroneous description of the GPI mainly because, in most cases, the majority of over-age children attending primary education tend to be boys in KP.

The table shows that gender parity for primary and secondary school is 0.8 and 0.6 respectively. The difference in gender parity also exists based on wealth of the households. Of the children living in the poorest households, the gender parity for primary schools is 0.6 and for secondary schools is 0.3. The gender parity for primary schools is 1.00 for children living in the richest households compared to 0.6 in the poorest households; the scenario is similar at secondary level as well (0.9 in the richest and 0.3 in the poorest households). There is a considerable variations among divisions with regard to gender parity in secondary school ranging from 0.4 in Bannu and D.I.Khan divisions to 0.7 in Hazara, Malakand and Mardan divisions.

Table ED. 8: Education gender parity index (GPI)

Ratio of adjusted net attendance ratios of girls to boys, in primary and secondary school, Khyber Pakhtunkhwa, 2016-17

	Primary school			Secondary school		
	Primary school adjusted net attendance ratio (ANAR), girls	Primary school adjusted net attendance ratio (ANAR, boys	Gender parity index (GPI) for primary school adjusted NAR[1]	Secondary school adjusted net attendance ratio (ANAR, girls	Secondary school adjusted net attendance ratio (ANAR, boys	Gender parity index (GPI) for secondary school adjusted ANAR[2]
KP	51.8	63.5	0.8	30.2	48.9	0.6
Area of residence						
Urban	67.8	69.5	1.0	46.6	57.1	0.8
Rural	49.1	62.5	0.8	27.4	47.6	0.6
Mother's education						
None/pre-school	45.4	60.7	0.7	24.3	46.4	0.5
Primary	69.5	70.9	1.0	53.1	55.7	1.0
Middle	69.4	75.9	0.9	62.6	62.3	1.0
Secondary	76.2	73.5	1.0	69.9	69.0	1.0
Higher	74.0	72.4	1.0	65.3	67.6	1.0
Cannot be determined[a]	58.7	61.2	1.0	11.6	49.2	0.2
Wealth index quintile						
Poorest	29.6	50.6	0.6	9.7	34.6	0.3
Second	47.6	62.1	0.8	24.2	44.0	0.5
Middle	58.1	70.2	0.8	27.5	53.0	0.5
Fourth	62.9	69.5	0.9	41.7	54.4	0.8
Richest	68.6	70.7	1.0	54.3	63.0	0.9
Division						
Bannu	33.5	57.6	0.6	19.4	51.2	0.4
D. I. Khan	33.3	46.0	0.7	15.8	35.2	0.4
Hazara	53.4	63.4	0.8	33.3	45.6	0.7
Kohat	60.2	73.7	0.8	31.6	59.3	0.5
Malakand	47.3	60.9	0.8	31.0	47.4	0.7
Mardan	68.0	71.6	0.9	38.9	57.1	0.7
Peshawar	57.0	66.5	0.9	30.2	48.8	0.6

[1] **MICS indicator 7.9; MDG indicator 3.1 - Gender parity index (primary school)**

[2] **MICS indicator 7.10; MDG indicator 3.1 - Gender parity index (secondary school)**

3 SDG indicator 4.5.1- Gender parity index

[a] **Children age 15 or higher at the time of the interview whose mothers were not living in the household**

The percentage of girls in the total out-of-school population, in both primary and secondary schools, is provided in Table ED.9. The table shows that at the primary level, girls account for more than half (56 per cent) of the out-of-school population. However, at the secondary level, girls' share increases to 74 per cent. In rural areas, girls constitute a larger proportion of the out-of-school population at both primary and secondary school levels i.e., girls in rural areas account for 57 per cent of out-of-school population of primary school age compared to 51 per cent in urban areas. Similarly, of the total for secondary school age, 75 per cent girls are in rural areas compared to 69 per cent in urban areas.

Table ED. 9: Out of school gender parity

Percentage of girls in the total out of school population, in primary and secondary school, Khyber Pakhtunkhwa, 2016-17

	Primary school				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
KP	42.1	22,952	55.9	9,674	29.7	20,315	74.3	6,044
Area of residence								
Urban	31.3	3,264	50.9	1,020	18.0	2,984	68.6	538
Rural	44.0	19,689	56.5	8,654	31.8	17,331	74.8	5,505
Mother's education								
None/pre-school	46.7	17,515	56.9	8,177	33.7	16,796	74.0	5,656
Primary	29.7	2,120	50.2	631	11.9	1,373	78.6	163
Middle	27.3	959	54.9	261	6.7	588	(72.8)	39
Secondary	24.9	1,268	49.6	315	4.3	824	(61.0)	35
Higher	26.7	1,082	47.4	289	5.2	561	(69.0)	29
Cannot be determined[a]	(*)	8	(*)	1	69.8	173	85.8	121
Wealth index quintile								
Poorest	59.2	5,513	56.3	3,265	50.3	4,453	71.5	2,240
Second	44.9	5,075	56.3	2,277	33.8	4,401	77.0	1,488
Middle	35.8	4,438	58.5	1,588	27.8	4,081	75.4	1,135
Fourth	33.8	4,190	55.8	1,416	18.8	3,929	76.2	740
Richest	30.2	3,736	50.0	1,129	12.8	3,451	73.2	441
Division								
Bannu	54.3	1,727	61.3	938	37.7	1,370	80.9	517
D. I. Khan	60.1	1,467	54.5	882	51.5	1,171	66.9	603
Hazara	41.4	4,227	54.7	1,751	29.6	3,427	69.8	1,014
Kohat	32.4	1,467	56.1	476	25.5	1,371	86.5	349
Malakand	45.5	5,825	56.1	2,649	29.1	5,229	74.8	1,519
Mardan	30.2	2,525	52.0	762	21.7	2,534	74.1	549
Peshawar	38.2	5,406	55.9	2,067	27.5	4,964	74.7	1,366

[a] Children age 15 or higher at the time of the interview whose mothers were not living in the household
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table ED. 10: Pre-school attendance

Percentage of children of aged 3-4 years attending pre-school, Khyber Pakhtunkhwa, 2016-17

	Male		Female		Total	
	Pre-school attendance	Number of children age 3-4 years	Pre-school attendance	Number of children age 3-4 years	Pre-school attendance	Number of children age 3-4 years
KP	23.3	4,531	21.8	4,244	22.6	8,775
Area of residence						
Urban	33.3	651	27.9	647	30.6	1,297
Rural	21.6	3,881	20.7	3,597	21.2	7,478
Age						
3	14.5	2,013	13.1	1,902	13.8	3,915
4	30.3	2,518	28.9	2,342	29.6	4,860
Education of household head						
None/pre-school	15.1	2,113	14.9	2,003	15.0	4,116
Primary	25.8	520	22.0	478	24.0	998
Middle	28.4	506	21.9	440	25.4	945
Secondary	29.7	767	30.4	701	30.0	1,468
Higher	36.7	626	34.2	622	35.4	1,247
DK/Missing	(*)	0	(*)	1	(*)	1
Wealth index quintile						
Poorest	10.5	1,025	9.2	941	9.9	1,966
Second	18.4	940	16.3	862	17.4	1,802
Middle	22.9	902	24.1	835	23.5	1,737
Fourth	30.9	827	27.4	846	29.1	1,672
Richest	37.3	837	34.9	761	36.2	1,597
Division						
Bannu	31.3	340	21.4	296	26.7	636
D. I. Khan	16.7	341	19.1	277	17.8	618
Hazara	30.4	879	29.9	790	30.2	1,669
Kohat	25.1	301	22.7	309	23.9	609
Malakand	10.3	1,099	11.5	1,072	10.9	2,171
Mardan	27.8	525	29.8	516	28.7	1,041
Peshawar	28.7	985	23.6	924	26.2	1,910

(*) Figures that are based on fewer than 25 unweighted cases

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

Figure ED. 1:   **Education indicators by sex, KP-MICS, 2016-17**

School readiness
88   **89**

Net intake rate in primary education		Primary school completion rate	Transition rate to secondary school
24 **22**		**81** **62**	**94** **91**

Attendance to early childhood education	Primary school attendance	Secondary school attendance
8.4 **7.8**	**64** **52**	**53** **31**

Children reaching last grade of primary	Boys Girls
99 **94**	
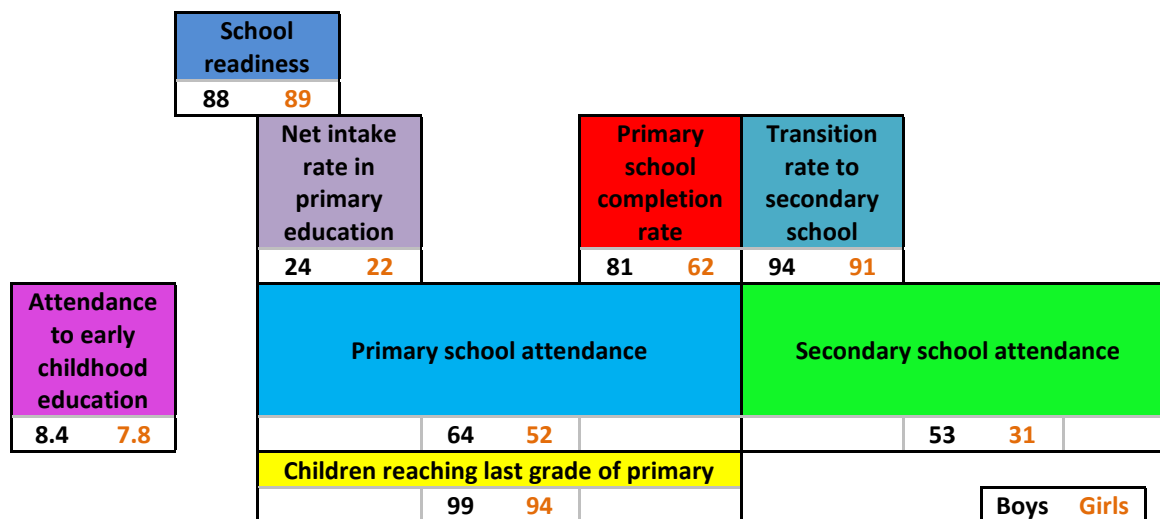
Note: All indicator values are in per cent

Literacy Rate

Literacy is an important indicator for monitoring progress towards universal education. It was assessed in KP-MICS 2016-17 by asking the respondent whether each household member had the ability to read and write with understanding in any language from a list of languages (Urdu, English, Pushto, Hindko and others), but excluding Quranic reading if this was the only response. Literacy rate for population age 10 years or older, 15 years or older and 15-24 years are derived from the survey through specific questions that are not the part of MICS5 standard questionnaires and this method is different from the method used to measure female literacy as discussed at the start of this chapter.

Literacy Rate (10+ years)

Literacy rate amongst household members age 10 years or older is presented in Table ED.11. More than half (52 percent) of the KP population age 10 or older is literate. There is marked variation between males (69 percent) and females (36 percent). Across divisions, literacy rate is highest in Kohat (58 percent) and Hazara (57 percent) and lowest in D.I.Khan division (43 percent). Literacy among rural population is lower (49 percent) compared to urban population (67 percent).

Literacy rate (10+ years) decreases with the increasing age. While only 14 percent of population age 75 years or older is literate, the corresponding figure is over 60 percent among population age 10-24 years. However, a positive association between literacy rate (10+ years) and the education of household head and household wealth is observed. Literacy rate increases sharply from 29 percent of population living in the poorest households to 74 percent of population living in the richest households. Similarly, literacy rate markedly increases with education level of the head of the household from 36 percent for population whose household head has no education or only pre-school to 76 percent of population whose household head has higher education. The same trends are observed across the other background characteristics for literacy rate among population age 15 or above.

Gender disparities also exist by area of residence. In rural areas, 67 percent males are literate compared to only 32 percent of females; the gap is narrower in urban areas (males 78 percent, females 56 percent, respectively).

Table ED. 11: Literacy rate among population age 10 years or above

Percentage of household members aged 10 years or above who are literate, Khyber Pakhtunkhwa, 2016-17

	Male		Female		Total	
	Literacy rate	Number of household members age 10 years or above	Literacy rate	Number of household members age 10 years or above	Literacy rate[1]	Number of household members age 10 years or above
KP	68.9	56,549	35.9	57,629	52.3	114,178
Area of residence						
Urban	78.2	9,600	55.5	9,517	66.9	19,117
Rural	67.0	46,949	32.1	48,112	49.3	95,061
Education of household head						
None/pre-school	48.3	27,502	24.0	28,196	36.0	55,699
Primary	78.2	5,783	35.4	5,812	56.8	11,594
Middle	87.6	5,971	41.2	5,942	64.5	11,913
Secondary	91.2	9,468	48.7	9,383	70.0	18,851
Higher	93.0	7,812	58.9	8,279	75.5	16,091
DK/Missing	(*)	12	(*)	17	(62.2)	30
Age groups (yrs)						
10 – 14	72.6	10,735	55.1	10,411	64.0	21,145
15 – 19	84.6	9,021	56.8	8,184	71.4	17,205
20 – 24	79.7	6,644	50.3	6,658	65.0	13,302
25 – 29	75.4	5,569	38.0	7,010	54.6	12,578
30 – 34	73.2	4,566	34.3	4,971	52.9	9,537
35 – 39	74.2	3,706	26.2	4,285	48.5	7,991
40 – 44	66.8	3,023	17.7	3,218	41.5	6,241
45 – 49	55.3	2,855	10.4	3,030	32.2	5,885
50 – 54	47.0	2,672	8.8	3,026	26.7	5,698
55 – 59	46.7	2,147	7.3	2,113	27.1	4,260
60 – 64	45.0	2,084	5.0	1,870	26.0	3,954
65 – 69	39.8	1,518	4.2	1,319	23.2	2,837
70 – 74	31.8	1,025	3.0	759	19.5	1,784
75 +	22.9	986	1.5	775	13.5	1,761
Wealth index quintile						
Poorest	46.2	10,830	12.6	10,984	29.3	21,814
Second	62.3	11,115	25.1	11,375	43.5	22,491
Middle	70.4	11,480	34.0	11,580	52.1	23,060
Fourth	76.9	11,333	44.4	11,793	60.3	23,126
Richest	86.8	11,791	61.4	11,896	74.1	23,687
Division						
Bannu	69.3	3,593	25.3	3,756	46.8	7,348
D. I. Khan	60.7	3,430	25.1	3,276	43.3	6,706
Hazara	72.3	10,812	42.7	11,119	57.3	21,931
Kohat	79.8	3,715	37.6	4,101	57.7	7,816
Malakand	64.7	12,907	32.0	13,353	48.1	26,259

Table ED. 11: Literacy rate among population age 10 years or above

Percentage of household members aged 10 years or above who are literate, Khyber Pakhtunkhwa, 2016-17

	Male		Female		Total	
	Literacy rate	Number of household members age 10 years or above	Literacy rate	Number of household members age 10 years or above	Literacy rate[1]	Number of household members age 10 years or above
KP	68.9	56,549	35.9	57,629	52.3	114,178
Mardan	71.3	7,168	39.4	7,162	55.3	14,330
Peshawar	67.9	14,193	38.0	14,127	53.0	28,320
Literacy Rate 15+ years	68.0	45,814	31.7	47,218	49.6	93,032

[1] MICS indicator 7.S1 - Literacy rate 10+ (Reported)
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Literacy Rate (15+ years)

Overall, literacy rate among 10 + years and 15+ years is 52 percent and 50 percent respectively. The literacy rate among population age 15+ in urban area is higher (81 percent) than the literacy rate of 10 + years population (67 percent). The literacy rates are lower in rural areas (49 percent) and particularly for females (32 percent) among the 10 + years population Literacy rate is higher (88 percent) in the households head with higher education than the household head with no education (57 percent). Similar pattern of variation in literacy rate exists among richest and the poorest quintile of wealth index.

Table ED . 13: Literacy rate among population age 15-24 years

Percentage of household members age 15-24 years who are literate, Khyber Pakhtunkhwa, 2016-17

	Male		Female		Total	
	Literacy rate	Number of household members age 15-24 years	Literacy rate	Number of household members age 15-24 years	Literacy rate[1]	Number of household members age 15-24 years
KP	82.5	15,665	53.9	14,842	68.6	30,506
Area of residence						
Urban	87.8	2,583	73.9	2,507	81.0	5,089
Rural	81.5	13,082	49.8	12,335	66.1	25,417
Education of household head						
None/pre-school	73.1	8,013	39.6	7,455	57.0	15,468
Primary	85.6	1,583	55.0	1,429	71.0	3,012
Middle	91.1	1,667	63.3	1,524	77.8	3,191
Secondary	94.6	2,464	69.2	2,340	82.2	4,804
Higher	96.2	1,934	80.0	2,090	87.8	4,024
DK/Missing	(*)	3	(*)	4	(*)	8
Age groups (yrs)						
15 – 19	84.6	9,021	56.8	8,184	71.4	17,205
20 – 24	79.7	6,644	50.3	6,658	65.0	13,302
Wealth index quintile						
Poorest	64.7	2,964	22.2	2,632	44.7	5,595
Second	79.4	3,098	40.1	2,940	60.3	6,038
Middle	84.8	3,293	53.8	3,031	70.0	6,324
Fourth	88.3	3,179	65.2	3,028	77.0	6,208

Percentage of household members age 15-24 years who are literate, Khyber Pakhtunkhwa, 2016-17					
Richest	94.2	3,131	81.9	3,211	88.0	6,342
Division					
Bannu	84.9	1,014	40.5	943	63.5	1,957
D. I. Khan	71.7	953	33.6	785	54.5	1,738
Hazara	85.0	2,788	63.4	2,801	74.1	5,588
Kohat	91.3	1,029	56.4	1,103	73.3	2,132
Malakand	80.9	3,659	50.7	3,431	66.3	7,090
Mardan	86.4	2,044	59.4	1,933	73.3	3,977
Peshawar	80.0	3,995	54.4	3,663	67.8	7,657

[1] **MICS indicator 7.S3 - Literacy rate 15-24 years (Reported)**
(*) Figures that are based on fewer than 25 unweighted cases

Public and private primary school attendance rate

Table ED.14 provides the percentage of children (5-9 years) attending primary schools by type of school. In KP, 65 percent of the children are attending government/public school and 35 percent are attending a private school. Children in rural areas and those living in the poorest households are more likely to attend the government schools. The attendance in government schools declines from 90 per cent for children living in the poorest households to 27 per cent of children living in the richest households. About 70 percent of children in rural areas attend government schools while 30 percent attend private schools, the reverse is true for urban areas (42 and 58 percent, respectively).

Table ED. 14: Public and private primary school attendance rate

Percentage of children (5-9 years) attending primary schools by type of school, Khyber Pakhtunkhwa, 2016-17

	Attending primary school					Number of children 5-9 years old
	Attending Government / Public primary school[1]	Attending Private primary school	Attending Other types	Attending primary school but DK / Missing type of school	Total	
KP	65.1	34.8	0.1	0.0	100.0	13,256
Area of residence						
Urban	41.7	57.7	0.5	0.1	100.0	2,242
Rural	69.8	30.1	0.1	0.0	100.0	11,013
Education of household head						
None/pre-school	75.6	24.2	0.1	0.1	100.0	5,598
Primary	70.9	28.9	0.1	0.0	100.0	1,420
Middle	65.8	34.1	0.1	0.0	100.0	1,557
Secondary	57.8	42.1	0.1	0.0	100.0	2,496
Higher	41.6	58.0	0.4	0.0	100.0	2,178
DK/Missing	(*)	(*)	(*)	(*)	(*)	8
Age at beginning of school year						
5	59.9	39.9	0.1	0.1	100.0	1,115
6	63.9	36.0	0.1	0.0	100.0	2,416
7	65.1	34.7	0.2	0.1	100.0	3,205
8	63.5	36.4	0.1	0.0	100.0	3,023
9	68.9	31.0	0.1	0.0	100.0	3,496
Wealth index quintile						
Poorest	90.1	9.9	0.0	0.0	100.0	2,235
Second	83.6	16.3	0.0	0.0	100.0	2,795
Middle	72.4	27.5	0.1	0.0	100.0	2,847
Fourth	54.3	45.7	0.0	0.0	100.0	2,774
Richest	27.1	72.3	0.5	0.1	100.0	2,605
Division						
Bannu	80.2	19.8	0.0	0.0	100.0	788
D. I. Khan	65.6	34.4	0.0	0.0	100.0	582
Hazara	65.2	34.4	0.3	0.0	100.0	2,474
Kohat	66.2	33.7	0.2	0.0	100.0	992
Malakand	70.7	29.3	0.0	0.0	100.0	3,161
Mardan	66.7	33.1	0.0	0.2	100.0	1,764
Peshawar	54.5	45.3	0.2	0.0	100.0	3,338

[1] **MICS indicator 7.S5 - Government school attendance rate (Primary)**
(*) Figures that are based on fewer than 25 unweighted cases

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 around one in four children under the age of five worldwide have never been recorded.[63] This lack of formal recognition by the State usually means that a child is unable to obtain a birth certificate. As a result, he or she may be denied health care or education. 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.[64]

In Khyber Pakhtunkhwa, Birth Certificates are issued by Concern village and neighbourhood council. To apply for the birth certificate of a child under 18 years, one can obtain birth registration form from secretary of the office of the respective union council (UC). The information required to fill up the Birth registration form include: Person and Parents name; Place of birth & date of Birth; One copy of parent's National Identity card to be attached along with school certificate for educated person. Copies of certificates are required to be attested by gazetted class one Government officer. Affidavit is also required on a Stamp Paper of worth PKR 30 duly attested by Oath Commissioner for uneducated person. Applications are submitted to the Secretary of the concerned UC. The UC process birth registration through respective office of the National Database & Registration Authority (NADRA) which after necessary verification and validation, issues computerized Birth Certificates.

Registering a birth in Khyber Pakhtunkhwa can be a cumbersome and involved process – especially for those families whose child is born at home. Presently, more than 50 percent of deliveries in the country take place within the home. Despite the existence of over 6000 administrative offices in the country mandated to process the registration, challenges continue to be posed within the civil registration and national ID card systems, further exacerbated by the fact that Pakistan currently hosts over three million refugees.[65]

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[63] UNICEF. 2014. *The State of the World's Children 2015*. UNICEF.
[64] UNICEF. 2013. *Every Child's Birth Right: Inequities and trends in birth registration*. UNICEF.
[65] *PROGRESS REPORT 2013-2015 Results for children in Pakistan BIRTH REGISTRATION, UNICEF, Pakistan, July, 2015*

Table CP. 1: Birth registration

Percentage of children under age 5 by whether birth is registered and percentage of children not registered whose mothers/caretakers know how to register birth, Khyber Pakhtunkhwa, 2016-17

| | Children under age 5 whose birth is registered with civil authorities | | | | Number of children under age 5 | Children under age 5 whose birth is not registered | |
| | Has birth certificate | | | | | | |
	Seen	Not seen	No birth certificate	Total registered[1]		Percent of children whose mother/caretaker knows how to register birth	Number of children under age 5 without birth registration
KP	8.7	4.8	5.6	19.1	20,926	11.2	16,928
Area of residence							
Urban	13.9	7.8	7.4	29.0	3,168	19.2	2,249
Rural	7.7	4.3	5.3	17.3	17,758	10.0	14,679
Sex							
Male	8.7	5.0	5.6	19.2	10,716	11.2	8,654
Female	8.7	4.7	5.6	19.0	10,210	11.2	8,274
Age							
0-11	5.7	3.3	5.1	14.2	4,431	11.4	3,802
12-23	8.3	4.9	5.6	18.8	4,049	13.0	3,287
24-35	9.1	5.0	5.9	20.1	3,926	10.6	3,137
36-47	9.9	6.0	5.1	21.0	4,618	10.8	3,649
48-59	10.5	4.8	6.5	21.8	3,902	10.0	3,052
Mother's education							
None/pre-school	5.8	2.9	4.4	13.1	13,375	5.8	11,624
Primary	10.0	6.3	6.2	22.6	2,563	17.6	1,985
Middle	10.5	8.0	7.8	26.2	1,384	18.7	1,021
Secondary	16.4	8.6	8.9	33.9	1,791	24.3	1,184
Higher	18.7	11.1	8.7	38.5	1,812	35.7	1,114
Wealth index quintile							
Poorest	4.2	2.1	2.8	9.0	4,389	3.9	3,994
Second	6.0	4.0	4.8	14.8	4,173	7.4	3,556
Middle	7.7	4.2	6.1	18.1	4,164	9.7	3,411
Fourth	9.8	5.7	7.1	22.7	4,201	16.0	3,247
Richest	16.2	8.4	7.5	32.0	4,000	22.9	2,720
Division							
Bannu	3.2	3.1	3.1	9.4	1,505	15.3	1,363
D.I. Khan	1.9	2.0	21.1	25.0	1,827	3.8	1,370
Hazara	11.5	8.1	4.7	24.3	3,921	21.7	2,967
Kohat	18.7	3.9	7.4	30.1	1,492	19.5	1,043
Malakand	6.8	4.1	1.2	12.1	4,846	4.4	4,259
Mardan	6.5	3.6	7.1	17.2	2,486	10.3	2,059
Peshawar	10.4	5.4	4.4	20.3	4,849	10.0	3,867

[1] MICS indicator 8.1 - Birth registration

The births of 19 percent of children under five years in KP-MICS, 2016-17 is observed to have been registered (Table CP.1). Registration of birth becomes more likely as a child grows older. There are no significant variations in birth registration depending on the sex of the child. Birth registration ranges from 9 percent in Bannu division to 30 percent in Kohat division. In urban areas, 29 percent of children are registered compared to 17 percent in rural areas.

In addition, child registration is highly associated with household wealth and mother's education. For example, 32 percent of children living in the richest households are registered compared to only 9 percent of children living in the poorest households. There are significant differences between the proportion of children whose births are reported as registered and those who actually have a birth certificate. Overall, only 14 percent of children possess a birth certificate. These findings are also presented in Figure CP.1.

Figure CP. 1: Children under-5 whose births are registered, KP-MICS, 2016-17
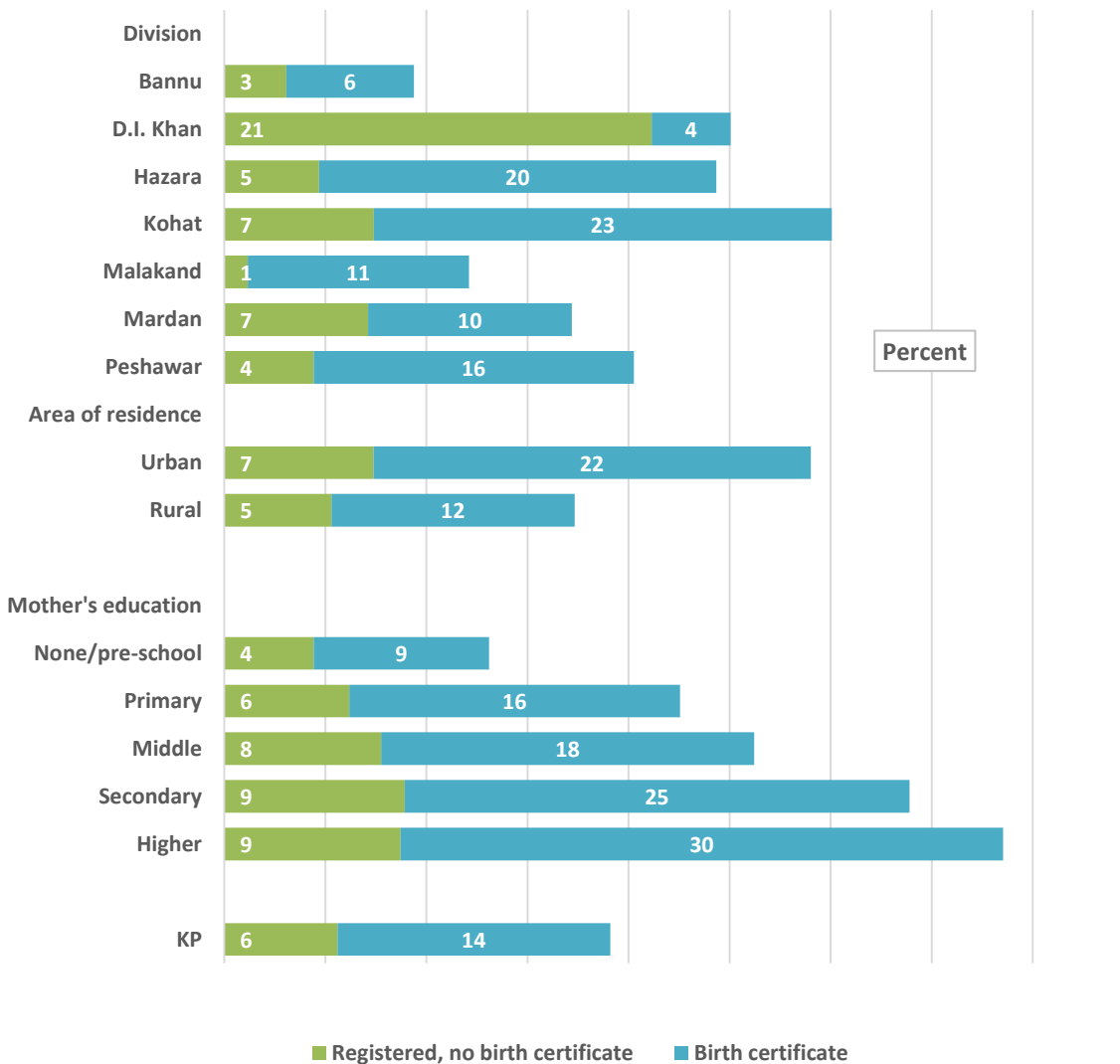
The lack of adequate knowledge of how to register a child can present major obstacle to the fulfilment of a child's right to identity. Data show that 89 percent of mothers of unregistered children report not knowing how to register a child's birth, which shows that the lack of knowledge of the registration process is clearly a major barrier in KP.   This proportion rises to 96 percent each in D.I.Khan and Malakand divisions.

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 Convention on the Rights of the Child states: "States Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development".

The Government of Pakistan has ratified ILO core Conventions related to child labour: Minimum Age Convention, 1973 (No. 138); Worst Forms of Child Labour Convention, 1999 (No. 182).The ILO, through its International Programme on the Elimination of Child Labour (IPEC) is providing technical assistance to the Government of Pakistan and Employers and Workers organizations for the prevention elimination of child labour for the country. Child labour is among the priorities of the Decent Work Country Programme (DWCP) that has been agreed by the Ministry of Labour and Manpower, Pakistan Employers Federation and Pakistan Workers Federation. Under the ILO's child labour programme various successful initiatives have been carried out in the Soccer Ball, Carpet weaving, surgical, glass bangles, deep sea fishing, leather tanneries, domestic work, coalmines, rag-picking, auto-workshops, and brick kiln sectors. ILO has also responded to rehabilitate child labour in the earthquake affected areas.

KP government has taken credit for introducing the first ever Child Labour Policy in the country. Labour Policy had been devised keeping in view international standards and after consultation with other stakeholders. The policy would ensure far-reaching steps for the welfare of labour community. The policy would discourage child labour and help in preparing solid strategy for preventing the factors responsible for child labour.

The child labour module was administered for children age 5-17 years and includes questions on the type of work a child does and the number of hours he or she is engaged in it. Data are collected on both economic activities – paid or unpaid work for someone who is not a member of the household, work 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 collects information on hazardous working conditions[66][67]

Table CP.2 describes 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 economic activity without it being classified as in child labour. A child that performed economic activities during the last week for more than the age-specific number of hours (see below) is classified as in child labour:

    i.   age 5-11: 1 hour or more

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[66] *UNICEF. 2012. How Sensitive Are Estimates of Child Labour to Definitions? MICS Methodological Paper No. 1. UNICEF.*
[67] *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 age 1-17 (See Appendix G: Questionnaires). The Child Labour module was administered if the selected child was age 5-17 and the Child Discipline module if the child was age 1-14 years old. To account for the random selection, the household sample weight is multiplied by the total number of children age 1-17 in each household*

ii.   age 12-14: 14 hours or more
iii.   age 15-17: 43 hours or more

From the results, 8 percent of children age 5-11 are working for at least one hour, 5 percent of children age 12-14 years are engaged in economic activities for at least 14 hours while 2 percent of children age 15-17 worked for 43 hours or more. Child labour across all the three age groups is higher among boys than girls. Similarly child labour is much higher among children who are not attending school, those whose mother have pre-school or no education and those living in poorest households. Child labour for younger children (5-11 and 12-14 years) is almost twice in Bannu and D.I.Khan compared to other divisions.

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, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 5-11 years involved in economic activity for at least one hour	Number of children age 5-11 years	Percentage of children age 12-14 years involved in:		Number of children age 12-14 years	Percentage of children age 15-17 years involved in:		Number of children age 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	8.0	31,969	15.7	5.3	13,485	26.7	2.4	10,198
Area of residence								
Urban	2.6	4,629	8.6	3.8	1,930	15.8	2.8	1,603
Rural	8.9	27,340	16.9	5.5	11,555	28.7	2.3	8,594
Sex								
Male	9.1	16,324	17.3	8.5	6,570	31.0	3.9	5,551
Female	6.8	15,645	14.2	2.2	6,914	21.5	0.6	4,647
School attendance								
Yes	7.5	22,286	13.1	3.7	9,014	21.2	0.6	5,680
No	9.0	9,683	21.0	8.6	4,470	33.6	4.7	4,518
Mother's education								
None/pre-school	9.6	24,345	17.4	5.7	11,365	28.9	2.9	8,119
Primary	3.5	3,001	7.1	4.0	857	14.6	0.5	568
Middle	3.3	1,272	4.2	3.0	421	14.9	2.3	248
Secondary	2.2	1,811	7.4	2.5	514	13.5	0.2	315
Higher	1.1	1,538	7.1	1.0	320	6.1	0.0	224
Cannot be determined [a]	(*)	3	(*)	(*)	7	26.3	0.6	709
Wealth index quintile								
Poorest	14.1	7,698	25.9	8.9	2,911	45.0	3.3	1,947
Second	11.6	6,890	20.2	7.9	2,969	35.4	3.9	2,199
Middle	6.7	5,861	12.8	4.5	2,739	21.6	1.4	2,444
Fourth	3.5	6,207	11.5	2.0	2,647	17.4	2.5	1,851
Richest	1.0	5,313	4.9	2.0	2,219	12.4	0.8	1,757
Division								
Bannu	16.7	2,381	34.1	10.5	954	38.2	1.6	632
D.I. Khan	15.6	2,364	32.5	11.6	998	46.8	6.9	741
Hazara	6.7	5,766	16.8	3.7	2,183	24.4	2.3	1,780
Kohat	9.6	2,121	16.7	2.3	843	31.5	1.1	781
Malakand	6.9	8,111	11.7	4.3	3,426	28.4	2.5	2,492
Mardan	5.8	3,718	12.6	6.5	1,686	16.5	3.4	1,416
Peshawar	5.5	7,508	10.3	4.2	3,395	21.6	1.0	2,355

[a] Children age 15 or higher at the time of the interview whose mothers were not living in the household
(*) Figures that are based on fewer than 25 unweighted cases

Table CP.3 presents children's involvement in household chores. As for economic activity above, the methodology also uses 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 last week for more than the age-specific number of hours is classified as in child labour:

i.   age 5-11 and age 12-14: 28 hours or more
ii. age 15-17: 43 hours or more

Only 1 percent of children age 5-11 are involved in household chores for 28 hours or more, 4 percent of children age 12-14 years are involved in household chores for 28 hours or more while 2 percent of children age 15-17 involved for 43 hours or more. Girls are slightly more likely to perform household chores than boys across all three age groups.

Table CP.4 combines the children working and performing household chores at or above and below the age-specific thresholds as detailed in the previous tables, as well as those children reported working under hazardous conditions, into the total child labour indicator.

Overall, 14 percent of the children 5-17 years are involved in child labour (Table CP.4). Children are more likely to be involved in child labour as they grow older; 25 percent of children age 15-17 are involved in child labour compared to 9 percent among children age 5-11. At divisional level, 28 percent of children in D.I.Khan division are involved in child labour compared to 9 percent in Peshawar division. Child labour is also higher in rural areas (16 percent) than urban areas (7 percent). The survey results also show that boys are more likely to be involved in child labour than girls (17 percent and 12 percent respectively). Gender differential exists with boys more likely to be in economic activities and hazardous work and girls more likely to perform household chores.

As expected child labour is higher among children not currently attending school, those whose mother's education is low and children living in the poorest households.

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, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 5-11 years involved in:			Percentage of children age 12-14 years involved in:			Percentage of children age 15-17 years involved in:		
	Household chores less than 28 hours	Household chores for 28 hours or more	Number of children age 5-11 years	Household chores less than 28 hours	Household chores for 28 hours or more	Number of children age 12-14 years	Household chores less than 43 hours	Household chores for 43 hours or more	Number of children age 15-17 years
KP	47.3	1.0	31,969	71.7	3.7	13,485	80.2	1.5	10,198
Area of residence									
Urban	47.7	0.5	4,629	74.9	1.3	1,930	79.1	0.9	1,603
Rural	47.2	1.1	27,340	71.2	4.1	11,555	80.4	1.6	8,594
Sex									
Male	45.5	0.8	16,324	67.0	1.1	6,570	75.1	1.0	5,551
Female	49.2	1.1	15,645	76.2	6.2	6,914	86.3	2.1	4,647
School attendance									
Yes	49.9	0.8	22,286	69.9	1.0	9,014	78.2	0.9	5,680
No	41.2	1.2	9,683	75.4	9.1	4,470	82.6	2.3	4,518
Mother's education									
None/pre-school	49.2	1.1	24,345	72.6	4.0	11,365	81.8	1.6	8,119
Primary	48.0	0.8	3,001	68.0	3.7	857	68.5	0.0	568
Middle	35.8	0.1	1,272	67.8	1.2	421	83.9	0.0	248
Secondary	36.7	0.8	1,811	67.3	0.0	514	68.5	0.0	315
Higher	37.0	0.2	1,538	64.1	0.6	320	55.8	0.0	224
Cannot be determined[a]	75.9	(*)	3	(*)	(*)	7	82.2	3.0	709
Wealth index quintile									
Poorest	48.3	2.0	7,698	71.0	7.0	2,911	84.4	2.3	1,947
Second	52.7	1.3	6,890	72.3	4.2	2,969	83.2	1.2	2,199
Middle	48.7	.6	5,861	75.0	2.1	27,39	78.9	2.1	2,444
Fourth	44.7	0.5	6,207	70.5	3.3	2,647	74.7	1.2	1,851
Richest	40.3	0.1	5,313	69.2	1.0	2,219	79.2	0.5	1,757
Division									
Bannu	62.8	1.4	2,381	83.4	2.2	954	87.0	1.3	632
D.I. Khan	53.5	3.4	2,364	75.2	6.4	998	78.8	2.6	741
Hazara	43.6	0.6	5,766	68.9	5.2	2,183	82.7	1.3	1,780
Kohat	49.3	0.3	2,121	68.5	3.2	843	85.5	1.1	781
Malakand	44.9	1.0	8,111	68.7	3.2	3,426	80.2	1.7	2,492
Mardan	49.8	1.4	3,718	70.6	5.6	1,686	81.1	2.8	1,416
Peshawar	44.0	0.2	7,508	73.6	1.9	3,395	74.5	0.6	2,355

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

(*) Figures that are based on fewer than 25 unweighted cases

Table CP. 4: Child labour

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	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 age 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			
KP	9.7	6.3	59.2	1.7	12.3	14.4	55,651
Area of residence							
Urban	5.8	2.9	60.3	0.7	5.5	6.9	8,162
Rural	10.4	6.9	59.1	1.9	13.5	15.7	47,489
Sex							
Male	11.0	7.9	56.2	0.9	15.1	16.8	28,445
Female	8.3	4.6	62.4	2.6	9.3	11.8	27,206
Age							
5-11	1.7	8.0	47.3	1.0	7.1	9.0	31,969
12-14	15.7	5.3	71.7	3.7	15.6	18.9	13,485
15-17	26.7	2.4	80.2	1.5	24.2	25.2	10,198
School attendance							
Yes	7.4	5.5	59.1	0.9	9.7	11.3	36,980
No	14.1	7.8	59.4	3.4	17.4	20.4	18,672
Mother's education							
None/pre-school	10.9	7.4	61.3	2.0	14.1	16.5	43,829
Primary	3.8	3.2	54.5	1.2	5.3	6.7	4,425
Middle	3.0	3.1	48.9	0.3	5.0	5.7	1,941
Secondary	4.8	2.0	46.5	0.5	4.1	4.8	2,641
Higher	3.4	1.0	43.2	0.3	2.1	2.5	2,082
Cannot be determined[a]	26.3	0.6	81.8	3.5	22.8	24.7	718
Wealth index quintile							
Poorest	14.1	11.2	59.2	3.2	20.5	23.4	12,556
Second	12.7	9.3	63.1	2.0	17.4	19.9	12,058
Middle	9.1	5.0	61.9	1.3	9.9	12.0	11,044
Fourth	6.6	2.9	56.2	1.3	7.1	8.9	10,705
Richest	4.1	1.2	54.6	0.4	3.4	4.1	9,288
Division							
Bannu	15.2	12.8	71.6	1.6	24.7	27.0	3,966
D.I. Khan	22.1	13.1	63.4	4.0	25.6	28.0	4,103
Hazara	9.1	5.2	56.4	1.8	11.9	13.4	9,729
Kohat	11.2	6.2	61.1	1.1	13.0	15.4	3,745
Malakand	8.6	5.5	57.0	1.7	10.2	12.4	14,030
Mardan	7.5	5.4	61.5	2.8	11.4	13.5	6,820
Peshawar	6.5	4.4	57.0	0.7	7.2	9.3	13,258

[1] MICS indicator 8.2 - Child labour

2 SDG indicator 16.9.1 – Birth registration; 3 SDG indicator 8.7.1- Child labour 4 SDG indicator 16.2.1 – child discipline

[a] Children age 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 behavior 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 behaviors. Studies[68] 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 inhibits positive relationships, provokes low self-esteem, emotional distress and depression; and, at times, it leads to risk taking and self-harm.

In the MICS, 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[69].

Table CP. 5: Child discipline

Percentage of children age 1-14 years by child disciplining methods experienced during the last one month, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 1-14 years who experienced:					Number of children age 1-14 years
	Only non-violent discipline	Psychological aggression	**Physical punishment**		Any violent discipline method[1]	
			Any	Severe		
KP	5.2	77.3	64.3	24.8	81.0	62,104
Area of residence						
Urban	6.8	74.7	58.2	20.0	77.7	9,080
Rural	4.9	77.8	65.3	25.7	81.5	53,024
Sex						
Male	4.6	78.4	66.2	25.4	82.0	31,374
Female	5.8	76.2	62.4	24.3	80.0	30,730
Age						
1-2	5.3	61.0	49.8	16.7	65.6	8,195
3-4	3.8	81.4	73.1	28.5	85.7	8,456
5-9	3.9	83.6	72.6	28.2	87.3	23,401
10-14	7.2	75.2	57.5	22.9	78.1	22,052
Education of household head						
None/pre-school	4.5	78.5	67.4	26.8	82.3	30,270
Primary	3.9	78.6	66.2	28.1	82.3	6,744
Middle	6.0	78.3	64.1	25.0	81.6	6,580
Secondary	7.1	75.3	60.0	22.3	78.4	10,126
Higher	5.9	73.8	56.9	18.1	77.8	8,367
DK/Missing	(*)	(*)	(*)	(*)	(*)	18
Wealth index quintile						

[68] Straus, MA and Paschall MJ. 2009. *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 18(5): 459-83.
Erickson, MF and Egeland, B. 1987. *A Developmental View of the Psychological Consequences of Maltreatment*. School Psychology Review 16: 156-68.
Schneider, MW et al. 2005. *Do Allegations of Emotional Maltreatment Predict Developmental Outcomes Beyond that of Other Forms of Maltreatment? Child Abuse & Neglect 29(5): 513–32.*
[69] *UNICEF. 2013. Every Child's Birth Right: Inequities and trends in birth registration. UNICEF*

Table CP. 5: Child discipline

Percentage of children age 1-14 years by child disciplining methods experienced during the last one month, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 1-14 years who experienced:					Number of children age 1-14 years
	Only non-violent discipline	Psychological aggression	**Physical punishment**		Any violent discipline method[1]	
			Any	Severe		
KP	5.2	77.3	64.3	24.8	81.0	62,104
Poorest	4.1	78.3	69.9	28.4	83.2	14,091
Second	4.7	78.0	68.0	27.2	82.6	13,206
Middle	5.0	79.9	65.6	25.9	83.1	11,904
Fourth	5.8	77.5	61.3	23.0	80.1	11,996
Richest	7.0	72.3	54.4	18.1	74.8	10,907
Division						
Bannu	3.0	89.8	82.8	38.7	92.0	4,434
D.I. Khan	12.1	65.5	70.0	24.9	80.8	4,749
Hazara	5.8	77.2	66.4	21.5	82.0	11,299
Kohat	1.6	72.2	54.3	18.3	74.4	4,150
Malakand	4.0	77.9	63.0	26.6	80.4	15,525
Mardan	8.1	73.9	56.1	27.4	75.7	7,164
Peshawar	4.2	80.0	63.3	21.9	81.9	14,784

[1] **MICS indicator 8.3 - Violent discipline**
(*) Figures that are based on fewer than 25 unweighted cases

It is observed that majority (81 percent) of the children age 1-14 years were subjected to at least one form of psychological or physical punishment by household members during the past month (Table CP.5). It is little lower among very young children 1-2 years (66 percent) and little high in Bannu division (92 percent).

For the most part, households employ a combination of violent disciplinary practices, reflecting caregivers' motivation to control children's behaviour by any means possible. While 77 percent of children experienced psychological aggression, 64 percent of children received physical punishment. The most severe forms of physical punishment (hitting the child on the head, ears or face or hitting the child hard and repeatedly) were given to 25 percent of children. Rural children were subjected to physical discipline more than urban children (65 percent and 58 percent respectively). Figure CP.2 depicts the child discipline methods.

Figure CP. 2:   **Child disciplining methods, children age 1-14 years, KP-MICS, 2016-17**
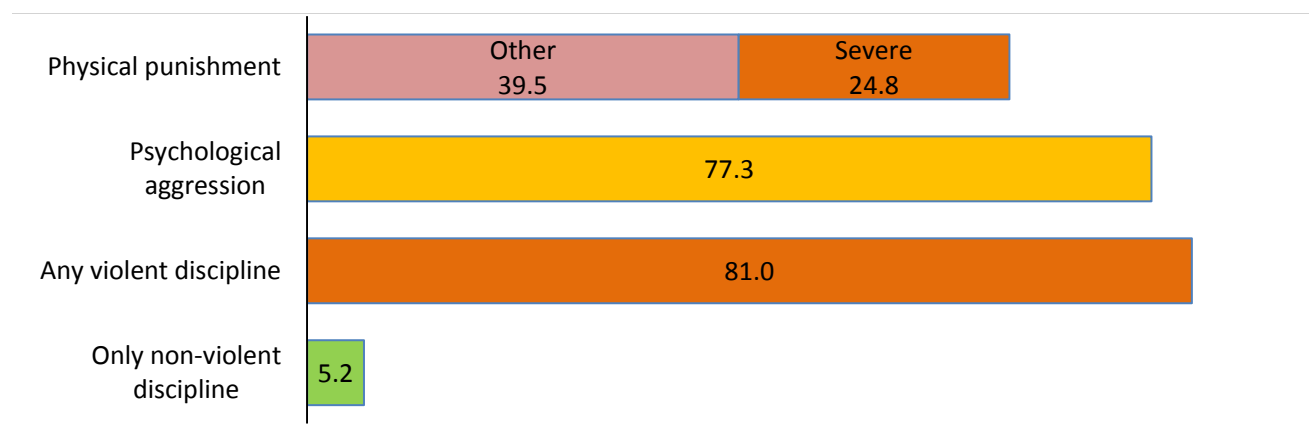
While violent methods are extremely common forms of discipline, Table CP.6 reveals that 45 percent of respondents believe that physical punishment is a necessary part of child-rearing. Regarding physical punishment of a child, there exists inverse relationship for respondents' education as well as household wealth. For instance, 27 percent of respondents with higher education think that a child needs to be physically punished as against 50 percent respondents with no education/only pre-school. Similarly, 53 percent of the respondents who are living in poorest households think that physical punishment is necessary as compared to 32 percent respondents who belong to richest households. At divisional level, highest proportion of respondents are from Bannu division (79 percent) who believe that a child needs to be physically punished while the proportion is lowest (35 percent) in D.I Khan division who are in favour of physical punishment of a child.

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, Khyber Pakhtunkhwa, 2016-17

	Respondent believes that a child needs to be physically punished	Number of respondents to the child discipline module
KP	45.0	15,587
Area of residence		
Urban	34.8	2,568
Rural	47.0	13,019
Sex		
Male	31.4	810
Female	45.7	14,777
Age		
<25	42.0	1,596
25-39	45.6	8,079
40-59	45.2	5,107
60+	42.3	804
Respondent's relationship to selected child		
Mother	46.4	11,186
Father	34.0	522
Other	42.3	3,878
Respondent's education		
None/pre-school	49.7	10,752
Primary	41.0	1,535

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, Khyber Pakhtunkhwa, 2016-17		
	Respondent believes that a child needs to be physically punished	Number of respondents to the child discipline module
Middle	37.8	860
Secondary	31.4	1,196
Higher	26.7	1,244
Wealth index quintile		
Poorest	52.8	3,266
Second	49.2	3,118
Middle	47.2	2,976
Fourth	43.3	3,168
Richest	31.8	3,059
Division		
Bannu	78.9	930
D.I. Khan	34.6	1,022
Hazara	38.8	3,130
Kohat	45.1	1,006
Malakand	47.2	3,758
Mardan	37.8	1,873
Peshawar	45.7	3,867

Child 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 hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty[70] .

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 known to be a leading cause of mortality for both married and unmarried girls between the ages of 15 and 19, particularly among 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.[71]

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[70] *Bajracharya, A ND Amin, S. 2010. Poverty, marriage timing, and transitions to adulthood in Nepal: A longitudinal analysis using the Nepal living standards survey. Poverty, Gender, and Youth Working Paper No. 19. Population Council. Godha, D et al. 2011. The influence of child marriage on fertility, fertility-control, and maternal health care utilization. MEASURE/Evaluation PRH Project Working paper 11-124.*

[71] *Clark, S et al. 2006. Protecting young women from HIV/AIDS: the case against child and adolescent marriage. International Family Planning Perspectives 32(2): 79-88.*
 Raj, A et al. 2009. Prevalence of child marriage and its effect on fertility and fertility-control outcomes of young women in India: a cross-sectional, observational study. The Lancet 373(9678): 1883–9.

Table CP. 7: Child marriage and polygyny

Percentage of women age 15-49 years who first married before their 15th birthday, percentages of women age 20-49 years who first married before their 15th and 18th birthdays, percentage of women age 15-19 years currently married, and the percentage of women who are in a polygynous marriage, Khyber Pakhtunkhwa, 2016-17

	Women age 15-49 years		Women age 20-49 years			Women age 15-19 years		Women age 15-49 years	
	Percentage married before age 15[1]	Number of women age 15-49 years	Percentage married before age 15	Percentage married before age 18[2]	Number of women age 20-49 years	Percentage currently married	Number of women age 15-19 years	Percentage in polygynous marriage[4]	Number of women age 15-49 years currently married
KP	7.7	36,703	8.9	29.6	28,719	18.8	7,984	3.8	24,373
Area of residence									
Urban	7.0	6,282	8.4	26.7	4,937	17.1	1,345	3.3	4,006
Rural	7.8	30,421	9.0	30.2	23,782	19.2	6,639	4.0	20,367
Age									
15-19	3.4	7,984	na	na	na	18.8	7,984	1.4	1,503
20-24	5.3	6,515	5.3	24.3	6,515	na	na	1.9	3,666
25-29	7.9	6,897	7.9	27.6	6,897	na	na	2.4	5,449
30-34	10.9	4,899	10.9	31.8	4,899	na	na	3.7	4,278
35-39	9.8	4,252	9.8	33.0	4,252	na	na	4.6	3,869
40-44	11.7	3,173	11.7	34.2	3,173	na	na	7.4	2,890
45-49	11.5	2,983	11.5	32.8	2,983	na	na	6.2	2,718
Education									
None/pre-school	10.7	21,001	11.5	35.9	18,094	26.2	2,907	4.7	16,124
Primary	6.3	4,496	7.6	29.1	3,155	19.9	1,340	2.7	2,774
Middle	5.2	2,887	6.6	28.3	1,664	16.3	1,223	2.9	1,466
Secondary	2.6	4,019	3.8	17.9	2,404	12.0	1,615	1.2	1,981
Higher	0.8	4,298	1.0	5.9	3,402	9.1	896	1.7	2,029
DK/Missing	(*)	3	(*)	(*)	0	(*)	3	(*)	0
Wealth index quintile									
Poorest	10.6	6,632	12.1	36.2	5,165	19.5	1,467	5.2	4,667
Second	8.1	7,202	9.3	31.7	5,540	16.6	1,662	3.8	4,720
Middle	7.1	7,381	8.4	29.0	5,733	19.8	1,648	3.8	4,856
Fourth	6.7	7,611	7.8	28.2	5,996	20.1	1,614	3.2	5,040
Richest	6.4	7,878	7.4	24.5	6,285	18.1	1,593	3.3	5,090
Division									
Bannu	7.2	2,361	8.5	26.2	1,847	16.2	514	4.6	1,494
D.I. Khan	8.7	2,551	8.9	25.5	2,057	23.2	495	2.8	1,778
Hazara	7.1	6,965	7.9	27.0	5,586	17.0	1,379	3.5	4,808
Kohat	9.2	2,639	10.4	31.5	2,040	16.2	600	4.5	1,691
Malakand	10.6	8,395	12.4	38.0	6,451	24.7	1,944	4.3	5,890
Mardan	6.6	4,633	7.7	30.5	3,619	20.0	1,014	4.4	2,987
Peshawar	5.5	9,158	6.8	25.2	7,119	14.3	2,039	3.4	5,725

[1] MICS indicator 8.4 - Marriage before age 15 ; SDG indicator 5.3.1- Marriage before age 15
[2] MICS indicator 8.5 - Marriage before age 18 ; SDG indicator 5.3.1-Marriage before age 18
3 MICS indicator 8.6 - Young women age 15-19 years currently married or in
[4] MICS indicator 8.7 – Polygyny   *) Figures that are based on fewer than 25 unweighted cases
na Not applicable

The percentage of women married at before ages 15 and 18 years are provided in Table CP.7. Among women age 15-49, 8 percent were married before age 15, and among women age 20-49 years, 30 percent were married before age 18. It may be mentioned that in this survey informal unions were not included in the questionnaire, unlike the standard, so results refer to formal marriages only

Nearly one fifth of young women (19 percent) age 15-19 are currently married. The proportion is found as 19 percent in rural and 17 percent in urban areas. It is strongly related to the level of woman's education – those with low levels of education, or no education, are more likely to be currently married. The percentage of women in a polygynous marriage is also provided in Table CP.7. Among all currently married women age 15-49, 4 percent are in polygynous marriage.

Table CP.8 presents the proportion of women who were first married before age 15 and 18 by area and age groups. Examining the percentages of women married before age 15 and 18 by different age groups allow for trends to be observed in early marriage over time. Data show that the prevalence of the proportion of women married by age 15 and 18 in urban as well as in rural areas has gradually declined over time: 33 percent of women age 45-49 were first married by age 18 compared to 24 percent of women age 20-24. Figure CP.3 illustrates the percentage of women married before 15 and 18 years respectively by age group.

Table CP. 8: Trends in early marriage

Percentage of women who were first married before age 15 and 18, by area and age groups, Khyber Pakhtunkhwa, 2016-17

	Urban				Rural				All			
	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years	Percentage of women married before age 15	Number of women age 15-49 years	Percentage of women married before age 18	Number of women age 20-49 years
KP	7.0	6,282	26.7	4,937	7.8	30,421	30.2	23,782	7.7	36,703	29.6	28,719
Age												
15-19	2.2	1,345	na	na	3.6	6,639	na	na	3.4	7,984	na	na
20-24	4.7	1,100	21.5	1,100	5.4	5,415	24.8	5,415	5.3	6,515	24.3	6,515
25-29	7.1	1,176	23.4	1,176	8.0	5,722	28.5	5,722	7.9	6,897	27.6	6,897
30-34	10.1	848	27.8	848	11.1	4,051	32.7	4,051	10.9	4,899	31.8	4,899
35-39	8.5	730	29.0	730	10.1	3,523	33.8	3,523	9.8	4,252	33.0	4,252
40-44	12.8	582	31.9	582	11.5	2,591	34.7	2,591	11.7	3,173	34.2	3,173
45-49	10.9	502	35.0	502	11.6	2,481	32.4	2,481	11.5	2,983	32.8	2,983
na: not applicable												

Figure CP. 3:   **Early marriage among women, KP-MICS, 2016-17**

na: not applicable
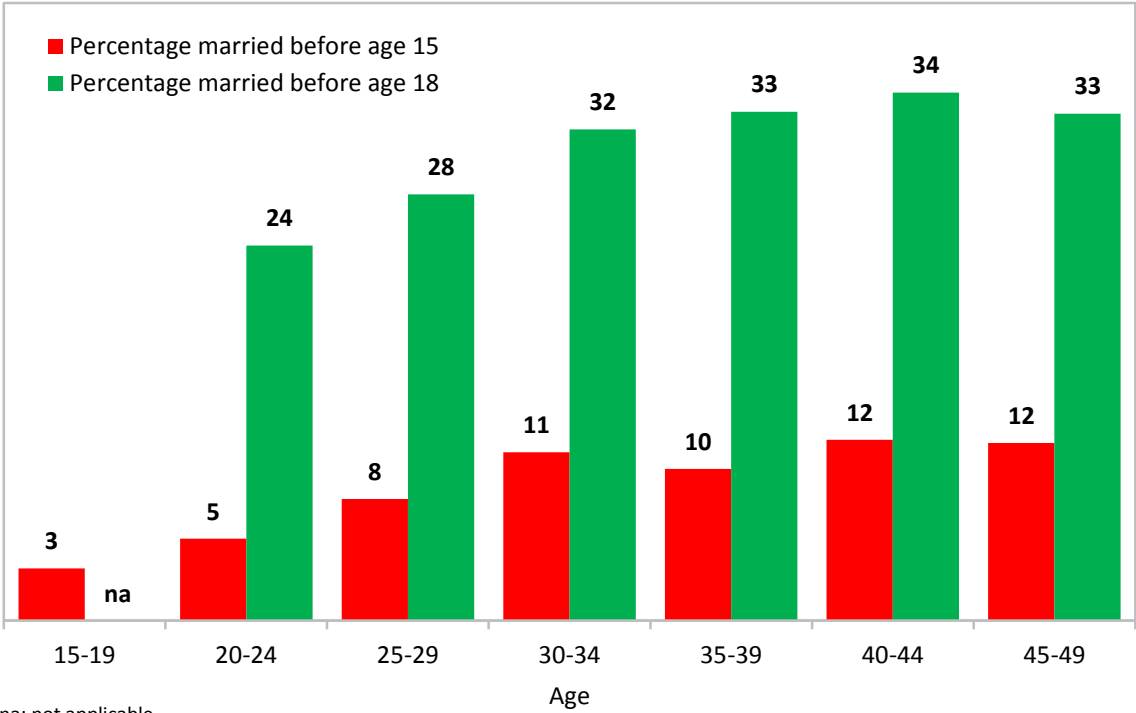
Table CP. 9: Spousal age difference

Percent distribution of women currently married age 15-19 and 20-24 years according to the age difference with their husband, Khyber Pakhtunkhwa, 2016-17

	Percentage of currently married women age 15-19 years whose husband or is:						Number of women age 15-19 years currently married	Percentage of currently married women age 20-24 years whose husband is:						Number of women age 20-24 years currently married
	Younger	0-4 years older	5-9 years older	10+ years older[1]	Husband's age unknown	Total		Younger	0-4 years older	5-9 years older	10+ years older[2]	Husband's age unknown	Total	
KP	3.0	35.4	37.1	22.3	2.2	100.0	1,503	5.2	42.6	34.1	15.8	2.3	100.0	3,666
Area of residence														
Urban	2.7	30.8	38.5	27.3	0.7	100.0	230	4.1	33.5	38.2	23.3	0.9	100.0	548
Rural	3.0	36.2	36.8	21.4	2.5	100.0	1,273	5.4	44.2	33.4	14.5	2.5	100.0	3,118
Age														
15-19	3.0	35.4	37.1	22.3	2.2	100.0	1,503	na	na	na	na	Na	na	na
20-24	Na	na	an	na	na	na	na	5.2	42.6	34.1	15.8	2.3	100.0	3,666
Education														
None/pre-school	3.4	45.9	33.0	14.7	3.0	100.0	761	6.8	47.7	29.2	12.9	3.4	100.0	1,913
Primary	3.6	31.8	37.9	24.8	1.9	100.0	267	4.3	40.2	37.3	16.7	1.6	100.0	567
Middle	0.4	22.0	42.9	32.4	2.3	100.0	199	4.2	39.1	34.8	20.2	1.6	100.0	319
Secondary	3.6	19.8	46.7	29.5	0.4	100.0	194	2.0	32.2	44.9	20.6	0.3	100.0	462
Higher	2.0	17.8	35.6	43.7	0.8	100.0	81	3.5	36.3	40.6	18.9	0.7	100.0	405
Wealth index quintile														
Poorest	3.1	52.7	27.6	11.4	5.1	100.0	287	6.2	52.8	24.8	10.1	6.1	100.0	694
Second	2.4	38.9	37.7	19.3	1.8	100.0	276	6.4	49.1	32.8	10.7	1.1	100.0	666
Middle	4.8	33.5	39.1	21.0	1.6	100.0	327	5.4	43.9	33.3	16.1	1.2	100.0	737
Fourth	2.0	27.6	38.5	29.5	2.4	100.0	325	5.2	36.4	39.7	16.4	2.4	100.0	781
Richest	2.4	25.7	42.1	29.5	0.3	100.0	289	3.2	33.0	38.8	24.2	0.8	100.0	788
Division														
Bannu	9.9	38.9	23.0	23.3	4.9	100.0	84	8.7	45.0	29.3	9.9	7.1	100.0	219
D.I. Khan	0.4	30.4	44.2	23.7	1.3	100.0	115	11.7	44.6	27.7	14.5	1.5	100.0	275
Hazara	2.1	41.4	38.2	10.8	7.5	100.0	235	4.4	48.7	31.5	9.4	5.9	100.0	769
Kohat	4.4	44.6	25.1	22.5	3.4	100.0	97	10.3	37.6	34.3	14.9	3.0	100.0	256
Malakand	3.2	37.8	38.4	19.9	0.7	100.0	480	3.5	42.2	36.8	16.5	1.0	100.0	890
Mardan	0.3	26.1	38.4	33.7	1.4	100.0	202	4.1	33.7	38.5	23.3	0.3	100.0	488
Peshawar	3.7	30.8	38.4	26.9	0.2	100.0	291	3.7	42.8	34.6	18.9	0.0	100.0	768

[1] MICS indicator 8.8a - Spousal age difference (among women age 15-19)
[2] MICS indicator 8.8b - Spousal age difference (among women age 20-24)
(*) Figures that are based on fewer than 25 unweighted cases

Another component is the spousal age difference with the indicator being the percentage of married 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 KP. Among currently married women age 20-24 years, 16 percent are married to a man who is older by ten years or more. For currently married women age 15-19 years, the corresponding figure is about 22 percent.

Attitudes toward Domestic Violence

MICS assessed the attitudes of women age 15-49 years towards wife beating by asking the respondents whether they think that husbands are justified to hit or beat their wives in a variety of situations. The purpose of these questions is 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. Overall, 75 percent of women age 15-49 years believe that a husband is justified in hitting or beating his wife for any one of five reasons that she; (i) goes out without telling him, (ii) neglects the children, (iii) argues with him, (iv) refuses sex with him, and (v) burns the food. Women who justify a husband's violence, in majority cases agree and justify violence in instances when a wife demonstrates her autonomy, exemplified by going out without telling her husband (65 percent) or arguing with him (61 percent) percent, or if she neglects the children (62 percent). Around one third (32 percent) of women believe that wife-beating is justified if the wife refuses to have sex with the husband and 31 percent can justify wife-beating if she burns the food. The wife-beating in any of the five situations is justified by higher proportion of women living in the poorest households, in rural areas and with less education.

Table CP. 13: Attitudes toward domestic violence

Percentage of women age 15-49 years who believe a husband is justified in beating his wife in various circumstances, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-49 years who believe a husband is justified in beating his wife:						
	If she goes out without telling him	If she neglects the children	If she argues with him	If she refuses sex with him	If she burns the food	For any of these five reasons[1]	Number of women age 15-49 years
KP	65.2	62.0	60.9	31.5	30.6	75.1	36,703
Area of residence							
Urban	51.3	50.3	50.5	24.0	21.0	63.3	6,282
Rural	68.0	64.5	63.1	33.1	32.6	77.6	30,421
Age							
15-19	58.2	54.9	53.0	9.2	23.8	70.0	7,984
20-24	63.5	58.7	57.2	25.3	27.1	72.6	6,515
25-29	67.5	65.0	63.5	36.8	31.4	76.9	6,897
30-34	65.9	63.9	62.6	40.1	33.4	76.0	4,899
35-39	68.5	65.7	65.1	43.4	33.4	78.0	4,252
40-44	70.4	67.4	68.5	45.9	37.4	79.9	3,173
45-49	70.7	67.6	67.9	46.3	38.6	79.6	2,983
Marital status							
Currently married	69.7	66.5	66.3	46.0	35.4	79.1	24,373
Formerly married	64.9	61.7	56.2	35.5	27.3	70.9	631
Never married	55.7	52.7	50.1	1.1	20.8	67.2	11,698
DK/MIssing	(*)	(*)	(*)	(*)	(*)	(*)	1
Education							
None/pre-school	73.9	70.0	68.8	40.5	37.4	82.6	21,001
Primary	64.2	61.1	60.8	28.1	29.1	75.8	4,496

Table CP. 13: Attitudes toward domestic violence

Percentage of women age 15-49 years who believe a husband is justified in beating his wife in various circumstances, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-49 years who believe a husband is justified in beating his wife:						Number of women age 15-49 years
	If she goes out without telling him	If she neglects the children	If she argues with him	If she refuses sex with him	If she burns the food	For any of these five reasons[1]	
KP	65.2	62.0	60.9	31.5	30.6	75.1	36,703
Middle	59.5	56.9	55.5	20.7	25.1	71.4	2,887
Secondary	51.2	49.5	48.8	17.0	18.7	63.1	4,019
Higher	40.3	39.3	38.0	12.3	13.7	51.7	4,298
DK/MIssing	(*)	(*)	(*)	(*)	(*)	(*)	3
Wealth index quintile							
Poorest	73.5	68.4	67.7	38.8	39.3	81.9	6,632
Second	70.5	67.1	65.5	34.7	35.5	79.7	7,202
Middle	70.4	66.6	64.6	33.5	32.8	79.8	7,381
Fourth	63.6	61.7	60.2	29.7	29.0	75.0	7,611
Richest	49.8	48.1	48.4	22.4	18.3	61.2	7,878
Division							
Bannu	89.1	89.0	62.7	35.0	39.7	96.3	2,361
D.I. Khan	24.4	23.5	23.6	7.3	8.3	31.5	2,551
Hazara	50.4	48.8	49.9	30.8	29.3	61.9	6,965
Kohat	77.0	67.6	72.2	32.3	30.7	83.5	2,639
Malakand	74.0	69.1	69.1	35.6	35.8	83.5	8,395
Mardan	72.0	70.2	70.4	39.5	31.1	81.8	4,633
Peshawar	66.7	63.8	63.8	29.9	30.3	78.4	9,158

[1] MICS indicator 8.12 - Attitudes towards domestic violence
(*) Figures that are based on fewer than 25 unweighted cases

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 due to the premature death of the parents or their migration for work. In most cases, these children are cared for by members of their extended families, while in others, children may be living in households other than their own, as live-in domestic workers for instance. Understanding the children's living arrangements, including the composition of the households where they live and the relationships with their primary caregivers, is key to design targeted interventions aimed at promoting child's care and wellbeing.

Table CP.14 presents information on the living arrangements and orphan-hood status of children under age 18. Eighty three percent of children age 0-17 years live with both their parents, 14 percent live with mothers only, one percent with fathers only, and one percent with neither of their biological parents. About 12 percent live with mothers only while the biological father is alive. Very few children have lost one or both parents (4 percent).

Table CP . 14: Children's living arrangements and orphanhood

Percent distribution of children age 0-17 years according to living arrangements, percentage of children age 0-17 years not living with a biological parent and percentage of children who have one or both parents dead, Khyber Pakhtunkhwa, 2016-17

| | 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 age 0-17 years |
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead					
KP	83.4	0.1	0.1	0.9	0.1	12.0	2.3	0.1	0.8	0.1	100.0	1.2	3.5	76,016
Area of residence														
Urban	88.4	0.1	0.1	1.1	0.1	7.0	2.2	0.2	0.8	0.1	100.0	1.4	3.2	11,272
Rural	82.5	0.2	0.1	0.8	0.1	12.9	2.3	0.1	0.8	0.1	100.0	1.2	3.5	64,744
Sex														
Male	83.8	0.1	0.0	0.4	0.1	12.0	2.4	0.1	0.9	0.0	100.0	0.7	3.6	38,927
Female	83.0	0.2	0.1	1.4	0.2	12.0	2.2	0.1	0.7	0.1	100.0	1.8	3.4	37,089
Age														
0-4	85.3	0.1	0.0	0.2	0.0	13.5	0.5	0.1	0.2	0.0	100.0	0.3	0.8	21,063
5-9	84.0	0.1	0.0	0.4	0.1	13.2	1.5	0.1	0.5	0.0	100.0	0.7	2.3	23,303
10-14	83.2	0.2	0.1	0.6	0.2	10.9	3.6	0.2	1.1	0.1	100.0	1.1	5.2	21,148
15-17	78.6	0.3	0.2	3.8	0.3	9.0	5.2	0.2	2.1	0.4	100.0	4.6	8.1	10,502
Wealth index quintiles														
Poorest	83.8	0.2	0.1	0.7	0.3	11.8	2.2	0.2	0.7	0.1	100.0	1.2	3.5	16,767
Second	82.7	0.2	0.1	0.9	0.1	12.3	2.7	0.1	0.9	0.1	100.0	1.2	3.9	16,106
Middle	83.4	0.1	0.0	0.9	0.1	12.2	2.3	0.1	0.9	0.0	100.0	1.1	3.4	15,072
Fourth	82.2	0.1	0.0	1.0	0.2	13.3	2.5	0.2	0.7	0.1	100.0	1.3	3.5	14,645
Richest	85.3	0.1	0.1	1.0	0.0	10.4	1.9	0.1	0.9	0.1	100.0	1.2	3.1	13,425
Division														
Bannu	84.2	0.1	0.1	0.5	0.2	10.1	3.2	0.2	1.4	0.1	100.0	0.9	5.0	5,381
D.I. Khan	90.4	0.0	0.1	1.2	0.1	4.0	2.9	0.4	0.7	0.1	100.0	1.4	4.0	5,807
Hazara	81.3	0.3	0.0	0.9	0.3	13.9	1.8	0.2	1.1	0.1	100.0	1.5	3.7	13,722
Kohat	75.1	0.4	0.0	0.7	0.0	20.6	2.5	0.2	0.4	0.0	100.0	1.1	3.4	5,178
Malakand	77.7	0.1	0.0	1.0	0.1	18.5	1.8	0.1	0.5	0.1	100.0	1.2	2.6	18,890
Mardan	84.8	0.1	0.1	1.1	0.0	10.4	2.5	0.1	0.9	0.1	100.0	1.4	3.6	9,018
Peshawar	90.2	0.1	0.0	0.7	0.1	5.3	2.7	0.1	0.8	0.0	100.0	1.0	3.7	18,020

[1] **MICS indicator 8.13 - Children's living arrangements**
[2] **MICS indicator 8.14 - Prevalence of children with one or both parents dead**

As expected, older children are less likely than younger ones to live with both parents and slightly more likely than younger children to have lost one or both of the parents. Table CP.14 also shows that the percentage of children living with both parents ranges from 75 percent in Kohat to 90 percent each in D.I.Khan and Peshawar divisions. Further to that, Kohat division has the highest percentage of children living with their mother only while the father is alive (21 percent). There are some small differences between urban and rural areas in terms of living arrangements; respectively in urban and rural areas 88 and 83 percent living with both parents but 7 and 13 percent living with mother only while father is alive.

The survey included a simple measure of one particular aspect of migration related to what is termed children left behind, i.e. for whom 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 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 the KP-MICS, 2016-17 presented in Table CP15. will greatly help fill the data gap on the topic of migration. About 8 percent of children age 0-17 have one or both parents living abroad. There are notable differences, as the percentage of children with at least one parent living abroad is as low as 3 percent each in Bannu and Peshawar divisions while it is high at 13-14 percent each in Kohat and Malakad divisions.

Table CP . 15: Children with parents living abroad

Percent distribution of children age 0-17 years by residence of parents in Khyber Pakhtunkhwa, 2016-17

| | Percent distribution of children age 0-17 years: | | | | Percentage of children age 0-17 years with at least one parent living abroad[1] | Number of children age 0-17 years |
	Only father abroad	Both mother and father abroad	With neither parent living abroad	Total		
KP	8.0	0.0	91.9	100.0	8.1	76,016
Area of residence						
Urban	5.3	0.0	94.7	100.0	5.3	11,272
Rural	8.5	0.0	91.4	100.0	8.6	64,744
Sex						
Male	8.1	0.0	91.9	100.0	8.1	38,927
Female	8.0	0.0	92.0	100.0	8.0	37,089
Age group						
0-4	8.6	0.0	91.4	100.0	8.6	21,063
5-9	8.9	0.0	91.1	100.0	8.9	23,303
10-14	7.6	0.0	92.4	100.0	7.6	21,148
15-17	6.1	0.1	93.8	100.0	6.2	10,502
Wealth index quintile						
Poorest	6.0	0.0	94.0	100.0	6.0	16,767
Second	8.0	0.0	92.0	100.0	8.0	16,106
Middle	8.2	0.0	91.8	100.0	8.2	15,072
Fourth	10.6	0.0	89.4	100.0	10.6	14,645
Richest	7.7	0.1	92.2	100.0	7.8	13,425
Division						
Bannu	8.3	0.0	91.7	100.0	8.3	5,381
D.I. Khan	2.8	0.0	97.2	100.0	2.8	5,807
Hazara	6.8	0.0	93.2	100.0	6.8	13,722
Kohat	14.2	0.0	85.8	100.0	14.2	5,178
Malakand	13.3	0.1	86.6	100.0	13.4	18,890
Mardan	8.7	0.0	91.2	100.0	8.8	9,018
Peshawar	3.0	0.0	97.0	100.0	3.0	18,020
MICS indicator 8.15 - Children with at least one parent living abroad						

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 for preventing the transmission. Correct information is the first step towards raising awareness and giving adolescents and young people the tools to protect themselves from the infection. Misconceptions about HIV are common and can confuse adolescents and young people and hinder prevention efforts. The UN General Assembly Special Session on HIV/AIDS (UNGASS) called on governments to improve the knowledge and skills of young people to protect themselves from HIV.

The indicators to measure this goal as well as the MDG of reducing HIV infections by half include improving the level of knowledge of HIV and its prevention, and changing behaviours to prevent further spread of the disease. HIV module was administered to ever married women 15-49 years of age. It may be noted that the questions in this module often refer to "the AIDS virus". This terminology is used strictly as a method of data collection to aid respondents, preferred over the correct terminology of "HIV" that is used here in reporting the results, where appropriate.

One indicator which is both an MDG and the Global AIDS Response Progress Reporting (GARPR; formerly UNGASS) is the percentage of young women who have comprehensive and correct knowledge of 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 husband 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 the KP-MICS 2016-17 all ever-married women who have heard of AIDS were asked questions on all three components and the results are detailed in Table HA.1. Due to cultural sensitivities around talking to unmarried women about issues relating to sexual behaviour, the HIV module was only administered to ever-married women.

In KP, 22 percent of the ever married women age 15-49 years have heard of AIDS, higher in urban (40 percent) than in rural areas (18 percent). However, the percentage of women who know of both main ways of preventing HIV transmission – using a condom every time during sexual intercourse and having only one faithful uninfected husband – is only 7 percent. About 12 percent of women know of having one faithful uninfected husband and 11 percent know about using a condom every time as main ways of preventing HIV transmission.

About one third of women have heard of AIDS in Peshawar division (32 percent) compared to Bannu and D.I.Khan divisions (13 percent each). The knowledge about HIV/AIDs greatly depends upon the woman's education and wealth quintile. AIDS awareness is as low as only 3 percent among women living in the poorest households, which increased gradually to 45 percent among women living in the richest households. Similarly, awareness is low among women with pre-school or no education (9 percent) compared to those with higher education (75 percent).

Table HA. 1: Knowledge about HIV transmission, misconceptions about HIV, and comprehensive knowledge about HIV transmission

Percentage of women ever married age 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, Khyber Pakhtunkhwa, 2016-17

| | 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 ever married age 15-49 |
		Having only one faithful uninfected sex husband	Using a condom every time	Both		Mosquito bites	Supernatural means	Sharing food with someone with HIV			
KP	21.7	12.1	10.5	7.3	12.8	10.3	14.8	10.9	3.8	1.9	25,004
Area of residence											
Urban	39.9	24.1	19.9	15.1	23.1	21.3	27.9	21.6	7.8	3.5	4,131
Rural	18.1	9.8	8.6	5.8	10.8	8.2	12.2	8.8	3.0	1.6	20,873
Age											
15-24	19.6	10.7	9.5	5.9	12.1	9.6	13.6	10.1	3.5	1.7	5,222
15-19	16.2	7.9	6.9	4.2	9.3	7.6	11.5	7.7	2.3	0.9	1,518
20-24	21.0	11.9	10.5	6.6	13.2	10.5	14.5	11.1	4.0	2.0	3,704
25-29	23.1	12.3	11.1	7.3	13.8	11.1	15.7	10.7	3.9	1.5	5,521
30-39	25.6	14.8	12.9	9.4	14.9	12.2	17.6	13.4	4.7	2.5	8,332
40-49	16.9	9.5	7.5	5.9	9.6	7.6	11.0	8.3	2.7	1.5	5,928
Respondent's Education											
None/pre-school	9.1	4.0	3.6	2.1	4.6	2.8	5.1	3.6	0.6	0.3	16,595
Primary	24.3	12.1	10.4	6.8	14.4	10.3	15.3	11.4	4.2	1.6	2,843
Middle	39.7	22.0	20.3	13.6	23.0	20.1	27.2	18.8	6.6	2.6	1,487
Secondary	54.8	32.9	27.7	20.1	31.4	28.7	39.8	29.0	10.4	5.6	2,012
Higher	74.5	50.2	41.7	33.2	50.9	46.2	59.1	45.7	19.9	11.1	2,068
Wealth index quintiles											
Poorest	2.8	1.1	1.3	0.7	1.2	1.2	1.6	0.9	0.1	0.1	4,771
Second	10.8	4.9	4.4	2.3	5.4	4.0	6.3	4.4	1.1	0.3	4,863
Middle	19.4	9.4	8.3	5.5	11.2	7.0	12.1	8.6	2.2	1.3	4,964
Fourth	28.4	15.4	13.7	9.4	16.4	13.0	19.9	14.2	4.7	2.4	5,190
Richest	44.8	28.2	23.4	17.9	28.3	25.1	32.4	25.0	10.3	5.1	5,216
Division											
Bannu	13.2	11.3	9.6	8.9	10.0	6.9	11.4	8.0	3.5	2.6	1,552
D.I. Khan	12.8	4.7	5.4	3.0	7.7	5.3	9.1	6.7	2.1	0.6	1,843
Hazara	21.5	13.8	11.9	9.6	13.3	12.6	14.7	10.8	5.1	3.3	4,932
Kohat	21.2	13.4	12.6	8.7	13.2	10.3	16.0	8.8	3.5	2.3	1,744
Malakand	13.7	7.2	6.1	3.9	8.0	7.0	9.6	7.3	2.7	1.1	5,987
Mardan	27.3	17.0	13.4	10.0	14.4	12.0	17.7	13.6	3.5	1.8	3,070
Peshawar	32.3	15.5	13.4	8.2	18.7	13.5	21.1	16.1	4.7	1.6	5,876

[1]MICS indicator 9.S1[72]; MDG indicator 6.3 - Knowledge about HIV prevention among young women

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[72] *In chapter 12 and in the Summary Table of Findings of earlier Pakistan surveys, 'S' is used as part of the indicator because of the module administered to 'ever-married women' only unlike all women in MICS standard definition*

Table HA.1 also provides the percentage of women who can correctly identify misconceptions concerning HIV. The indicator is based on the two most common and relevant misconceptions in KP, that HIV can be transmitted by supernatural means and by mosquito bites. The table also provides information on whether the women know that HIV cannot be transmitted by sharing food with someone with AIDS. Overall, only 4 percent of women reject the two most common misconceptions, and know that a healthy-looking person can be HIV-positive. About 15 percent of the women know that supernatural means, and 10 percent of women know that mosquito bites cannot spread HIV, while 13 percent of women know that a healthy-looking person can be HIV-positive. More women are able to correctly identify ways of HIV transmission and misconceptions concerning HIV in urban areas, with higher education and from richest households. For example, only 5 percent of women with pre-school or no education know that a healthy looking person can be HIV-positive compared to 51 percent of women with higher education

People who have comprehensive knowledge about HIV prevention include those who know of the two main ways of HIV prevention (having only one faithful uninfected husband and using a condom every time), who know that a healthy looking person can be HIV-positive, and who reject the two most common misconceptions. The comprehensive knowledge of HIV prevention methods and transmission is quite low but with clear differences by education and wealth. Overall, only 2 percent of women were found to have comprehensive knowledge. The percentage of the women with comprehensive knowledge increases with their education level; a meagre proportion (0.3 percent) for women with only pre-school or no education compared to 11 percent among women with higher education. The proportion is higher among women in richest households compared to their poorer counterparts. Figure HA.1 summarises the information on comprehensive knowledge of HIV transmission by area.

Figure HA. 1: **Women with comprehensive knowledge of HIV transmission, KP-MICS, 2016-17**
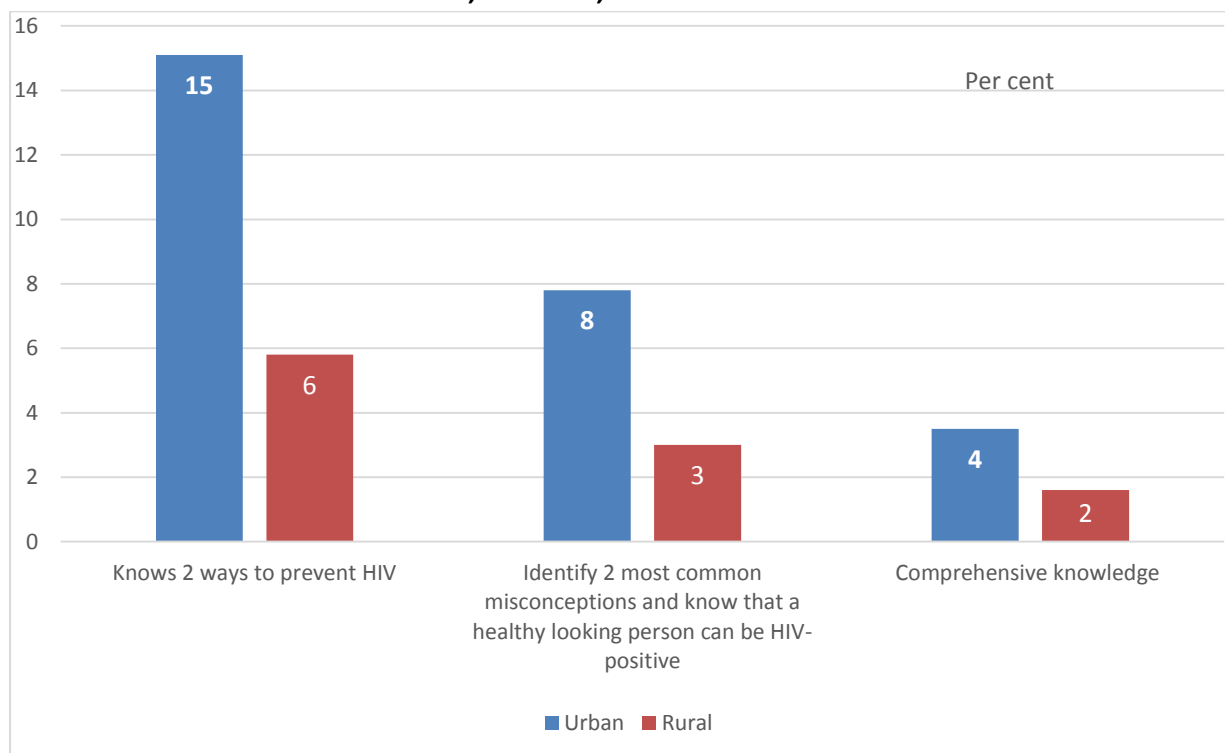
Table HA. 2: Knowledge of mother-to-child HIV transmission

Percentage of women ever married age 15-49 years who correctly identify means of HIV transmission from mother to child, Khyber Pakhtunkhwa, 2016-17

	Percentage of women ever married age 15-49 who have heard of AIDS and:						Number of women ever married age 15-49
	Know HIV can be transmitted from mother to child:					Do not know any of the specific means of HIV transmission from mother to child	
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1]		
KP	13.0	11.4	12.6	15.8	9.0	5.9	25,004
Area of residence							
Urban	24.7	22.4	22.7	28.9	17.6	10.9	4,131
Rural	10.7	9.3	10.6	13.2	7.3	4.9	20,873
Age group							
15-24							
15-19	9.7	8.0	9.6	11.5	6.6	4.7	1,518
20-24	13.1	10.5	13.0	16.2	8.7	4.9	3,704
25-29	13.0	10.9	12.9	16.3	8.5	6.8	5,521
30-39	15.5	14.3	14.8	18.7	11.0	6.9	8,332
40-49	10.4	9.3	9.8	12.2	7.3	4.7	5,928
Respondent's Education							
None/pre-school	5.3	5.0	5.5	6.7	3.9	2.4	16,595
Primary	13.9	12.3	14.5	17.3	9.8	7.1	2,843
Middle	23.1	21.0	21.5	28.2	16.3	11.5	1,487
Secondary	34.0	28.1	31.3	39.7	22.5	15.1	2,012
Higher	46.0	38.9	42.5	55.2	30.1	19.4	2,068
Wealth index quintiles							
Poorest	1.6	1.5	1.6	2.1	1.0	0.7	4,771
Second	6.6	5.8	6.7	7.8	4.9	3.0	4,863
Middle	11.7	10.3	11.9	14.4	8.4	5.0	4,964
Fourth	17.0	14.5	16.5	20.9	11.1	7.5	5,190
Richest	26.7	23.8	25.1	32.2	18.5	12.6	5,216
Division							
Bannu	7.4	5.1	7.4	8.9	4.5	4.2	1,552
D.I. Khan	7.9	7.5	7.8	8.5	6.8	4.3	1,843
Hazara	12.8	10.7	10.3	14.7	8.1	6.9	4,932
Kohat	15.8	14.4	15.8	18.2	12.6	3.0	1,744
Malakand	8.0	7.1	8.4	10.7	4.8	3.0	5,987
Mardan	17.1	14.8	15.5	19.3	12.1	8.0	3,070
Peshawar	18.4	16.7	19.3	23.6	13.2	8.7	5,876

[1] **MICS indicator 9.S2 - 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 in the baby. Women should know that HIV can be transmitted during pregnancy, during delivery, and through breastfeeding. The level of knowledge among women age 15-49 years concerning mother-to-child transmission is presented in Tables HA.2. Overall, 16 percent of ever married women know that HIV can be transmitted from mother to child by at least one of the three means of pregnancy, delivery and breastfeeding. The percentage of the women who know all three ways of mother-to-child transmission is 9 percent, while 6 percent did not know of any specific way. The proportion of women with knowledge of all the three ways of mother-to-child transmission is lowest in Bannu and Malakand divisions (5 percent each) and highest in Peshawar and Kohat divisions (13 percent each). In urban areas, the proportion of women with knowledge of all the three ways is more (18 percent) as compared to rural areas (7 percent).

Accepting Attitudes toward People Living with HIV

The indicators on attitudes toward people living with HIV measure stigma and discrimination in the community. Stigma and discrimination are considered low if respondents report an accepting attitude on the following four questions: 1) would care for a family member with AIDS in own home; 2) would buy fresh vegetables from a vendor who is HIV-positive; 3) thinks that a female teacher who is HIV-positive should be allowed to teach in school; and 4) would not want to keep it a secret if a family member is HIV-positive.

Table HA. 3: Accepting attitudes toward people living with HIV

Percentage of women ever married age 15-49 years who have heard of AIDS who express an accepting attitude towards people living with HIV, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:						Number of women ever married age 15-49 who have heard of AIDS
	Are willing to care for a family member with AIDS in own home	Would buy fresh vegetables from a shopkeeper or vendor who is HIV-positive	Believe that a female teacher who is HIV-positive and is not sick should be allowed to continue teaching	Would not want to keep secret that a family member is HIV-positive	Agree with at least one accepting attitude	Express accepting attitudes on all four indicators[1]	
KP	73.2	56.4	57.9	53.8	93.8	20.2	5,432
Area of residence							
Urban	67.8	60.3	61.5	53.2	94.8	18.3	1,648
Rural	75.6	54.7	56.4	54.0	93.4	21.1	3,784
Age							
15-24	73.8	59.0	60.2	54.3	94.2	21.7	1,026
15-19	79.2	61.2	64.1	58.9	94.0	29.0	246
20-24	72.1	58.4	58.9	52.9	94.2	19.4	779
25-29	73.4	56.6	57.4	52.3	93.5	19.5	1273
30-39	72.8	55.6	58.0	53.6	93.6	19.7	2132
40-49	73.3	55.3	56.1	55.5	94.4	20.8	1002
Respondent's Education							
None/pre-school	71.4	49.8	50.5	50.8	91.2	15.8	1,506
Primary	71.4	54.2	53.1	54.2	93.7	20.2	691
Middle	68.1	53.9	54.2	52.6	89.3	19.7	591
Secondary	75.6	59.1	60.4	55.1	95.8	21.4	1,103
Higher	76.1	62.9	67.1	56.0	96.8	24.0	1,541
Wealth index quintiles							
Poorest	60.0	36.3	43.9	40.8	82.8	9.1	134
Second	72.2	43.5	48.6	50.3	90.2	15.0	525
Middle	75.2	48.6	49.8	51.5	93.5	16.6	962
Fourth	74.6	58.6	57.5	55.4	93.3	22.0	1,476
Richest	72.6	62.3	64.5	55.2	95.8	22.5	2,336
Division							
Bannu	93.7	69.6	76.6	35.2	98.4	15.2	204
D.I. Khan	67.0	44.8	49.7	25.3	81.0	7.2	236
Hazara	79.2	50.1	56.6	52.4	95.9	18.2	1,062
Kohat	49.5	40.1	46.1	53.3	90.3	8.2	370
Malakand	78.5	56.1	56.8	52.6	92.4	22.7	822
Mardan	68.7	58.3	56.9	55.5	93.5	21.7	839
Peshawar	72.8	62.5	61.0	59.9	95.3	24.2	1,899

[1] MICS indicator 9.S3 - Accepting attitudes towards people living with HIV

Table HA.3 provides data on the attitudes of women towards people living with HIV. In KP, 94 percent of women who have heard of AIDS agree with at least one accepting statement. The most common accepting attitude is willing to care for a family member with the AIDS virus in own home (73 percent) followed by the women who would not want to keep secret that a family member got infected with the AIDS virus (54 percent).

Overall, one fifth of the women (20 percent) express accepting attitude on all four indicators. More educated women and those living in the richest households have more accepting attitudes than women with lower education and living in the poorest households. Information on women's accepting attitudes toward people living with HIV/AIDS by age is depicted in Figure HA.2.

Figure HA. 2: **Accepting attitudes toward people living with HIV/AIDS, KP-MICS, 2016-17**
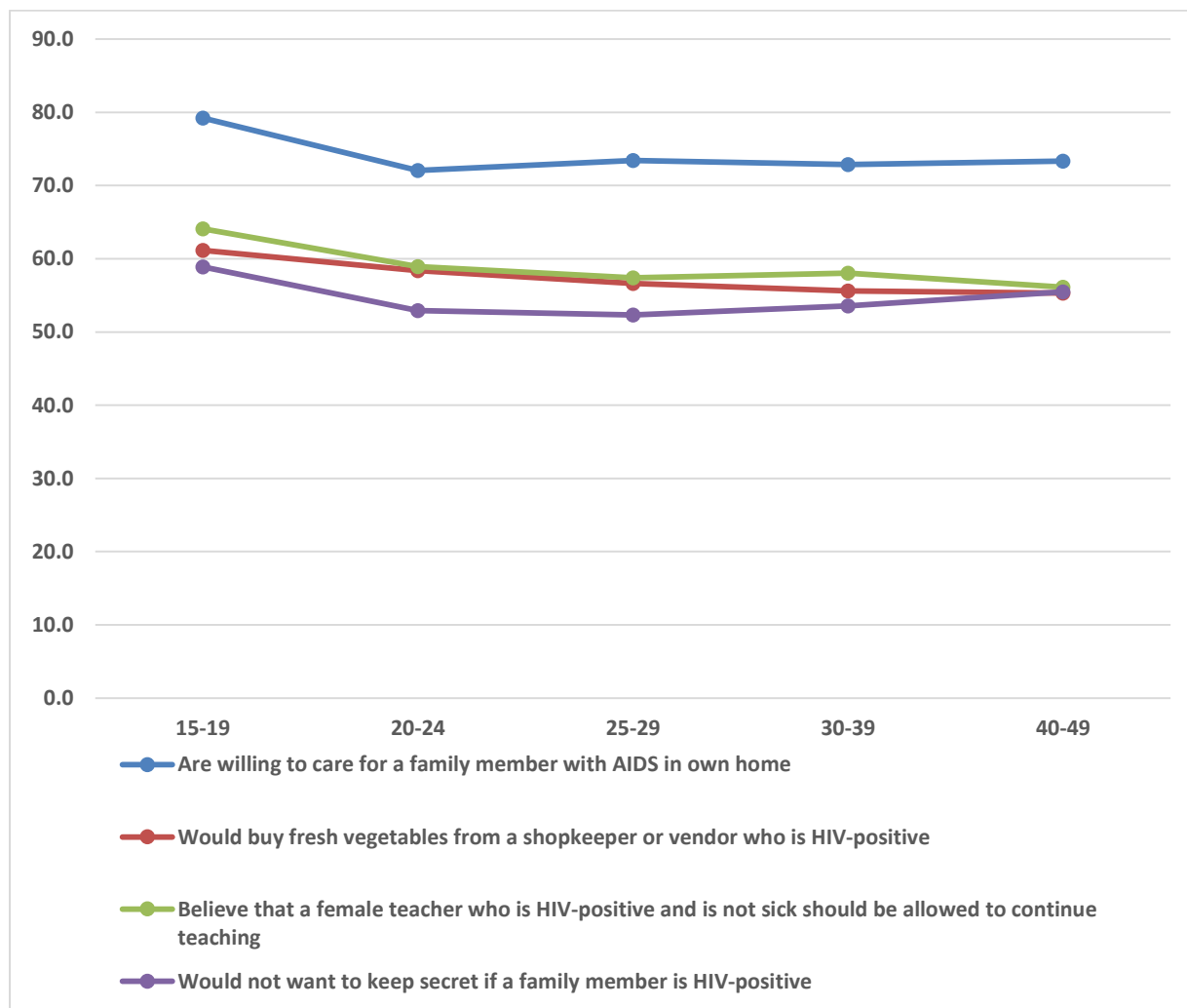
Knowledge of a Place for HIV Testing, Counselling and Testing during Antenatal Care

Another important indicator is the knowledge of where to be tested for HIV and use of such services. In order to protect themselves and to 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 treatment.

Table HA. 4: Knowledge of a place for HIV testing

Percentage of women ever married age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:					Number of women ever married age 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, 3]	
KP	3.8	0.8	0.7	0.3	0.3	25,004
Area of residence						
Urban	7.9	1.7	1.3	0.6	0.6	4,131
Rural	3.0	0.6	0.5	0.2	0.2	20,873
Age						
15-24	3.1	0.6	0.5	0.3	0.3	5,222
15-19	2.3	0.3	0.3	0.0	0.0	1,518
20-24	3.4	0.7	0.6	0.4	0.4	3704
25-29	3.5	0.6	0.5	0.3	0.3	5,521
30-39	4.7	1.0	0.9	0.3	0.3	8,332
40-49	3.3	0.7	0.6	0.2	0.2	5,928
Respondent's Education						
None/pre-school	1.1	0.2	0.2	0.1	0.1	16,595
Primary	3.4	0.9	0.8	0.5	0.4	2,843
Middle	6.2	1.4	1.4	0.6	0.6	1,487
Secondary	11.0	2.3	2.2	0.6	0.6	2,012
Higher	17.1	2.9	2.3	0.9	0.8	2,068
Wealth index quintiles						
Poorest	0.1	0.0	0.0	0.0	0.0	4,771
Second	1.5	0.3	0.3	0.2	0.2	4,863
Middle	2.3	0.6	0.6	0.2	0.2	4,964
Fourth	5.1	1.0	1.0	0.3	0.3	5,190
Richest	9.2	1.7	1.4	0.7	0.6	5,216
Division						
Bannu	3.2	0.6	0.6	0.3	0.2	1,552
D.I. Khan	0.5	0.1	0.1	0.1	0.1	1,843
Hazara	3.3	0.5	0.4	0.2	0.2	4,932
Kohat	4.7	1.1	0.9	0.4	0.4	1,744
Malakand	2.4	0.5	0.4	0.2	0.2	5,987
Mardan	4.2	0.7	0.6	0.4	0.3	3,070
Peshawar	6.3	1.5	1.2	0.5	0.4	5,876

[1] MICS indicator 9.S4 - Women who know where to be tested for HIV

[2] MICS indicator 9.S5 - Women who have been tested for HIV and know the results

[3] MICS indicator 9.S6 - Sexually active young women who have been tested for HIV and know the results

Questions related to knowledge of a facility for HIV testing and whether a person has ever been tested are presented in Table HA.4. About 4 percent of ever married women knew where to be tested for HIV, while less than one percent (0.7) women have actually been tested and about the same proportion of women know the result of their most recent test. A smaller proportion (less than 1 percent) has been tested within the last 12 months and know the result.

Knowledge about the place to get tested for HIV is strongly associated with education of the women and wealth. Seventeen percent women with higher education, know a place to get tested compared on to only one percent of women with pre-school or no education. Similarly, only a negligible

proportion of women living in the poorest households know a place for HIV testing compared to 9 percent of women living in the richest households.

Table HA. 5: HIV counselling and testing during antenatal care

Percentage of women ever married age 15-49 with a live birth in the last 2 years who received antenatal care from a health professional during the last pregnancy, percentage who received HIV counselling, percentage who were offered and tested for HIV, percentage who were offered, tested and received the results of the HIV test, and percentage who received counselling and were offered, accepted and received the results of the HIV test, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:					Number of women ever married age 15-49 with a live birth in the last 2 years
	Received antenatal care from a health care professional for last pregnancy	Received HIV counselling 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 counselling, were offered an HIV test, accepted and received the results	
KP	74.3	0.4	0.3	0.3	0.1	8,365
Area of residence						
Urban	88.3	1.2	1.0	0.8	0.3	1,334
Rural	71.7	0.2	0.2	0.2	0.0	7,032
Age						
15-24	78.3	0.2	0.3	0.3	0.1	2,502
15-19	76.4	0.3	0.0	0.0	0.0	535
20-24	78.8	0.2	0.4	0.4	0.1	1,967
25-29	75.5	0.4	0.3	0.2	0.0	2,696
30-39	72.3	0.5	0.3	0.3	0.1	2,731
40-49	57.0	0.2	0.2	0.2	0.2	436
Marital status						
Currently married	74.4	0.4	0.3	0.3	0.1	8,332
Formerly married	(68.3)	(0.0)	(0.0)	(0.0)	(0.0)	33
Respondent's Education						
None/pre-school	66.3	0.0	0.0	0.0	0.0	5,065
Primary	83.1	0.2	0.4	0.4	0.0	1,105
Middle	84.1	0.7	0.7	0.7	0.1	613
Secondary	88.2	0.5	0.7	0.7	0.1	788
Higher	92.1	2.3	1.1	0.8	0.4	794
Wealth index quintiles						
Poorest	49.1	0.0	0.0	0.0	0.0	1,682
Second	69.6	0.1	0.1	0.1	0.0	1,655
Middle	77.1	0.3	0.2	0.2	0.0	1,632
Fourth	84.9	0.3	0.3	0.3	0.1	1,763
Richest	90.9	1.1	0.8	0.7	0.2	1,633
Division						
Bannu	63.0	0.1	0.1	0.1	0.1	602
D.I. Khan	62.9	0.0	0.2	0.2	0.0	684
Hazara	66.6	0.2	0.0	0.0	0.0	1,507
Kohat	77.5	1.0	0.4	0.3	0.2	592
Malakand	74.2	0.3	0.3	0.3	0.0	1,996
Mardan	82.8	0.2	0.3	0.3	0.1	1,015
Peshawar	82.5	0.7	0.5	0.4	0.1	1,968

[1] MICS indicator 9.S7 - HIV counselling during antenatal care
[2] MICS indicator 9.S8 - HIV testing during antenatal care
( ) Figures that are based on 25-49 unweighted cases

Among women 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. About 74 percent of these women received antenatal care, but very few received HIV counselling during antenatal care (0.4 percent). About the same percentage of women were offered an HIV test, got tested during antenatal care and received results.

HIV Indicator for Young Women

In many countries, over half of new adult HIV infections are among young people age 15-24 years thus a change in behaviour among members of this age group is especially important to reduce new infections. The next tables present specific information on this age group.

Table HA.6 summarizes information on key HIV indicators for ever married young women of age group 15-24 years. Results with respect to comprehensive knowledge about HIV prevention (2 percent), knowledge of mother to child transmission (8 percent), and knowledge of a place to get tested (3 percent) are almost the same compared to the ever married women population age 15-49 years as a whole (discussed in Table HA.3). Overall, only a meagre proportion of the ever married young women, have been tested for HIV in the last 12 months and know the result.

Table HA. 6: Key HIV and AIDS indicators

Percentage of women ever married age 15-24 years by key HIV and AIDS indicators, Khyber Pakhtunkhwa, 2016-17

	Percentage of women ever married age 15-24 years who:							
	Have comprehensive knowledge[1]	Know all three means of HIV transmission from mother to child	Know a place to get tested for HIV	Have ever been tested and know the result of the most recent test	Have been tested for HIV in the last 12 months and know the result	Number of women ever married age 15-24 years	Percentage who express accepting attitudes towards people living with HIV on all four indicators[a]	Number of women ever married age 15-24 years who have heard of AIDS
KP	1.7	8.1	3.1	0.5	0.3	5,222	21.7	1,026
Area of residence								
Urban	2.3	14.7	5.8	1.2	0.8	785	16.0	240
Rural	1.6	6.9	2.6	0.4	0.2	4,438	23.4	786
Age								
15-19	0.9	6.6	2.3	0.3	0.0	1,518	29.0	246
15-17	0.7	5.1	0.9	0.0	0.0	409	(11.0)	50
18-19	0.9	7.2	2.8	0.4	0.0	1,109	33.5	196
20-24	2.0	8.7	3.4	0.6	0.4	3,704	19.4	779
20-22	1.8	8.3	3.1	0.4	0.3	2,174	21.2	412
23-24	2.3	9.2	3.9	0.9	0.5	1,530	17.3	368
Marital status								
Currently married	1.6	8.1	3.1	0.5	0.3	5,169	21.5	1,015
Formerly married	4.8	5.9	0.0	0.0	0.0	53	(*)	10
Respondent's Education								
None/pre-school	0.1	2.3	0.5	0.0	0.0	2,699	17.3	158
Primary	1.1	6.7	2.0	0.7	0.6	845	22.8	135
Middle	1.6	13.6	1.7	0.0	0.0	523	21.4	140
Secondary	3.4	17.6	8.8	2.2	0.7	663	27.0	284
Higher	9.0	23.5	12.8	1.3	0.7	493	18.7	309
Wealth index quintiles								
Poorest	0.3	1.1	0.2	0.0	0.0	988	(16.8)	35
Second	0.5	4.5	1.1	0.2	0.2	955	26.8	102
Middle	0.8	7.4	2.7	0.7	0.1	1075	14.2	194
Fourth	2.6	10.9	4.2	0.8	0.5	1,119	25.2	295
Richest	4.0	15.4	6.7	0.8	0.5	1,085	21.8	401

[1] MICS indicator 9.S1; MDG indicator 6.3 - Knowledge about HIV prevention among young women
[2] MICS indicator 9.S6 - Sexually active young women who have been tested for HIV and know the results
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Orphans

While the number of children orphaned due to AIDS has stabilized globally since 2009, efforts to mitigate impact of AIDS on households, communities, and children continues to be intensified by national programs and global partners. 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. The detailed information on living conditions of children and overall prevalence of orphan-hood is available in Table CP 14 in Child Protection Chapter.

Table HA 9 1 provides information on the orphan-hood status of children age 10-14 years, and their school attendance. About 0.2 percent of children age 10-14 years in KP are orphans. The orphans to non-orphans school attendance ratio is 0.52, which suggests that orphans are disadvantaged in relation to non-orphans in this regard.

Table HA. 9 1: School attendance of orphans and non-orphans							
School attendance of children age 10-14 years by orphanhood, Khyber Pakhtunkhwa, 2016-17							
	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 age 10-14 years	Percentage of children whose mother and father have died (orphans) and are attending school	Total number of orphan children age 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 age 10-14 years	Orphans to non-orphans school attendance ratio[1]
KP	0.2	94.3	21,148	(38.6)	52	73.7	19,932	0.52
Sex								
Male	0.2	94.1	10,737	(*)	23	86.9	10,108	0.59
Female	0.3	94.4	10,411	(28.7)	29	60.1	9,824	0.48
Area of residence								
Urban	0.2	94.3	3,030	(*)	7	85.8	2,856	0.79
Rural	0.3	94.3	18,117	(34.5)	46	71.6	17,076	0.48
[1] **MICS indicator 9.S16; MDG indicator 6.4 - Ratio of school attendance of orphans to school attendance of non-orphans** ( ) Figures that are based on 25-49 unweighted cases (*) Figures that are based on fewer than 25 unweighted cases								

XIII. Access to Mass Media and Use of Information/ Communication Technology

KP-MICS, 2016-17 collected information on exposure to mass media and the use of computers and the internet. The information was collected on exposure to newspapers, magazines, radio and television among women age 15-49 years, while the questions on the use of computers and the internet were asked to the age group of 15-24 years only

Access to Mass Media

The proportion of women age 15-49 years who read a newspaper or magazine, listen to the radio and watch television at least once a week is shown in table MT.1. According to the data in the table, 9 percent of women in KP read a newspaper or magazine, 6 percent listen to the radio, and 30 percent watch television at least once a week. Overall, 64 percent do not have regular exposure to any of the three types of media, while 36 percent are exposed to at least one and less than one percent to all the three on a weekly basis

Table MT. 1: Exposure to mass media

Percentage of women ever married age 15-49 years who are exposed to specific mass media on a weekly basis, Khyber Pakhtunkhwa, 2016-17

| | Percentage of women age 15-49 years who: | | | | | None of the | |
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week	All three media at least once a week[1]	Any media at least once a week	media at least once a week	Number of women ever married age 15-49 years
KP	8.7	5.8	29.9	0.7	36.0	63.9	36,703
Area of residence							
Urban	17.5	5.9	56.6	1.3	62.9	37.0	6,282
Rural	6.8	5.8	24.4	0.6	30.4	69.4	30,421
Age							
15-19	13.0	8.8	33.7	1.4	43.2	56.6	7,984
20-24	11.0	6.6	31.3	0.7	39.1	60.7	6,515
25-29	8.0	5.4	29.7	0.6	35.0	64.7	6,897
30-34	7.5	4.5	30.8	0.5	35.3	64.6	4,899
35-39	6.3	4.0	27.8	0.6	31.9	68.0	4,252
40-44	4.7	4.4	25.6	0.4	29.3	70.6	3,173
45-49	3.0	3.1	23.3	0.2	26.2	73.8	2,983
Respondent's Education							
None/pre-school	0.2	4.2	16.2	0.0	19.1	80.8	21,001
Primary	7.0	6.5	31.6	0.5	39.5	60.2	4,496
Middle	12.9	8.2	42.7	1.2	52.2	47.4	2,887
Secondary	21.9	8.1	54.1	2.0	64.4	35.5	4,019
Higher	36.5	8.9	64.3	2.9	77.1	22.7	4,298
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	3
Wealth index quintile							
Poorest	1.2	3.5	6.1	0.1	9.6	90.1	6,632
Second	3.3	5.1	14.8	0.3	20.3	79.4	7,202
Middle	5.6	6.6	24.2	.5	31.4	68.5	7,381
Fourth	10.7	6.3	36.9	1.0	44.2	55.7	7,611
Richest	20.6	7.1	62.4	1.6	68.8	31.1	7,878

Table MT. 1: Exposure to mass media

Percentage of women ever married age 15-49 years who are exposed to specific mass media on a weekly basis, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-49 years who:					None of the media at least once a week	
	Read a newspaper at least once a week	Listen to the radio at least once a week	Watch television at least once a week	All three media at least once a week[1]	Any media at least once a week		Number of women ever married age 15-49 years
KP	8.7	5.8	29.9	0.7	36.0	63.9	36,703
Division							
Bannu	6.3	4.8	16.0	0.5	22.3	77.5	2,361
D. I. Khan	4.4	2.9	30.2	0.5	33.4	66.6	2,083
Hazara	9.0	3.7	38.6	0.8	42.6	57.2	6,965
Kohat	7.7	3.7	31.7	0.6	36.0	63.8	2,639
Malakand	7.6	6.1	19.5	0.5	26.7	73.1	8,395
Mardan	7.8	7.8	31.9	0.7	38.7	61.2	4,633
Peshawar	11.9	7.7	35.4	1.0	42.8	57.1	9,158

[1] **MICS indicator 10.1 - Exposure to mass media**
(*) Figures that are based on fewer than 25 unweighted cases

Among divisions, exposure to any media was highest in Peshawar and Hazara (43 percent each) followed by Mardan division (39 percent) and lowest in Bannu (22 percent). Women with higher education are almost four times likely to have been exposed to all the three media than women with none or pre-school. Similarly, 69 percent of women in richest households have been exposed to all three media forms while corresponding proportion of in the poorest households is only 10 percent. Strong differentials by area of residence and women's education are also observed for exposure to any media at least once a week. Sixty three percent of urban women are exposed to any media compared to 30 percent of rural women.

Use of Information/Communication Technology

The questions on computer and internet use were asked only to women age 15-24. As shown in Table MT.2, 13 percent of women in this age group have ever used a computer, 9 percent during the last year and 6 percent at least once a week during the last month. Overall, 9 percent of the women have ever used the internet, while 8 percent used internet during the last year. The proportion of young women who used the internet "more frequently", or "at least once a week" during the last month, is smaller, at about 7 percent.

At division level, proportion of women using a computer during the last year being lowest (4 percent) in Bannu division and highest (13 percent) in Mardan division. Use of a computer and the internet is also strongly associated with area of residence, women's education and wealth status of the household.

Less than one percent of women of age group 15-24 with primary education reported using a computer during the last year, while about one third (31 percent) of the women with higher education during the same period used a computer. Similarly, higher utilization of the internet is observed among the women in urban areas (22 percent) compared to women in rural areas (6 percent) during last year. The proportion is higher (27 percent) for women living in richest households compared to less than one percent of women living in the poorest households.

Table MT. 2: Use of computers and internet

Percentage of young women age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-24 years who have:						
	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	Number of women age 15-24 years
KP	12.5	9.3	6.4	9.3	8.4	6.7	14,499
Area of residence							
Urban	27.6	22.3	17.0	24.1	22.2	19.2	2,445
Rural	9.4	6.7	4.2	6.3	5.6	4.1	12,054
Age							
15-19	12.1	9.3	6.2	8.1	7.4	5.6	7,984
20-24	12.9	9.3	6.6	10.7	9.7	7.9	6,515
Respondent's Education							
None/pre-school	1.3	0.9	0.6	0.7	0.6	0.4	5,807
Primary	5.7	3.7	2.4	3.0	2.7	1.5	2,280
Middle	11.7	7.4	5.6	6.0	5.4	4.3	1,779
Secondary	21.8	16.4	9.7	16.2	14.3	10.6	2,477
Higher	39.7	31.4	22.8	33.9	31.4	26.3	2,154
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	3
Wealth index quintile							
Poorest	1.3	0.5	0.3	0.7	0.6	0.3	2,555
Second	3.8	2.4	1.6	1.3	0.9	0.5	2,881
Middle	7.4	4.7	2.2	3.8	3.2	2.0	2,971
Fourth	14.0	10.6	5.7	8.4	7.8	5.2	2,969
Richest	33.1	26.1	20.2	29.7	27.3	23.4	3,123
Division							
Bannu	6.5	4.3	3.2	4.2	4.1	3.2	929
D. I. Khan	6.0	5.4	4.0	3.2	2.7	2.2	940
Hazara	15.3	12.0	6.9	12.0	11.4	8.4	2,726
Kohat	13.5	9.0	6.1	8.9	8.0	6.3	1,086
Malakand	9.1	6.2	4.0	6.3	5.5	4.2	3,347
Mardan	16.6	13.1	9.5	11.1	9.5	7.5	1,889
Peshawar	14.4	10.7	8.1	12.1	11.1	9.4	3,581

[1] MICS indicator 10.2 - Use of computers
[2] MICS indicator 10.3 - Use of internet
[3] SDG indicator 5.b.1 - Use of internet
(*) Figures that are based on fewer than 25 unweighted cases

XIV. Subjective well-being

Subjective perceptions of individuals of their incomes, health, living environments and the like, play a significant role in their lives and can impact their perception of well-being, irrespective of objective conditions such as actual income and physical health status[73] In KP-MICS, 2016-17 a set of questions were asked to women age 15-24 years to understand how satisfied this group of young people is in different areas of their lives, such as their family life, friendships, school, current job, health, where they live, how they are treated by others, how they look, and their current income.

Life satisfaction is a measure of an individual's perceived level of well-being. Understanding young women's satisfaction in different areas of their lives can help to gain a comprehensive picture of young people's life situations. A distinction can also be made between life satisfaction and happiness. Happiness is a fleeting emotion that can be affected by numerous factors, including day-to-day factors such as the weather, or a recent death in the family. It is possible for a person to be satisfied with job, income, family life, friends, and other aspects of life, but still be unhappy, or vice versa. In addition to the set of questions on life satisfaction, the survey also asked questions about happiness and the respondents' perceptions of a better life.

To assist respondents in answering the set of questions on happiness and life satisfaction they were shown a card with smiling faces (and not so smiling faces) that corresponded to the response categories (see 'Questionnaires for individual women' in Appendix–G) 'very satisfied', 'somewhat satisfied', 'neither satisfied nor unsatisfied', 'somewhat unsatisfied' and 'very unsatisfied'. For the question on happiness, the same scale was used, this time ranging from 'very happy' to 'very unhappy', in the same fashion.

Table SW.1 shows the proportion of young women age 15-24, who are very or somewhat satisfied in selected domains. Note that for three domains, satisfaction with school, job and income, the denominators are confined to those who are currently attending school, have a job, and have an income. Of the different domains, young women are very or somewhat satisfied with their family life (93 percent), health (89 percent), and the way they are treated by others (91 percent). Overall, 91 percent of young women do not have an income at all and out of those who have income, 82 percent are very or somewhat satisfied with their current income.

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[73] *OECD. 2013. OECD Guidelines on Measuring Subjective Well Being. OECD. http://dx.doi.org/10.1787/9789264191655-en*

Table SW. 1: Domains of life satisfaction

Percentage of women age 15-24 years who are very or somewhat satisfied in selected domains of satisfaction, Khyber Pakhtunkhwa, 2016-17

| | Percentage of women age 15-24 years who are very or somewhat satisfied in selected domains: | | | | | | Percentage of women age 15-24 years who: | | | Number of women age 15-24 years | Percentage of women age 15-24 years who are very or somewhat satisfied with school | Number of women age 15-24 years attending school | Percentage of women age 15-24 years who are very or somewhat satisfied with their job | Number of women age 15-24 years who have a job | Percentage of women age 15-24 years who are very or somewhat satisfied with their income | Number of women age 15-24 years who have an income |
	Family life	Friendships	Health	Living environment	Treatment by others	The way they look	Are attending school	Have a job	Have an income							
KP	93.3	88.4	89.3	88.7	90.6	92.6	20.2	3.2	8.9	14,499	94.0	2,927	71.4	459	82.0	1,297
Area of residence																
Urban	95.3	91.2	91.7	88.5	91.1	94.2	34.4	4.9	12.8	2,445	95.2	841	82.9	119	86.0	314
Rural	92.9	87.8	88.8	88.8	90.6	92.3	17.3	2.8	8.2	12,054	93.5	2,086	67.4	340	80.7	983
Age																
15-19	93.9	89.9	91.1	88.9	91.2	93.3	29.8	2.5	8.1	7,984	93.8	2,379	69.8	198	80.5	644
20-24	92.5	86.5	87.0	88.5	89.9	91.7	8.4	4.0	10.0	6,515	94.6	548	72.6	261	83.4	653
Respondent's Education																
None/pre-school	91.8	84.2	88.1	88.1	89.3	90.4	0.3	2.5	8.7	5,807	63.6	16	59.6	145	76.8	507
Primary	93.6	86.7	89.2	87.6	91.0	93.9	6.0	2.8	6.8	2,280	91.2	136	73.8	64	84.0	154
Middle	93.6	90.0	90.2	89.2	91.4	93.1	28.7	0.9	7.5	1,779	92.7	510	90.2	17	86.2	133
Secondary	94.8	93.2	91.0	91.1	92.2	94.5	42.8	3.1	8.7	2,477	93.2	1,060	61.8	77	85.1	215
Higher	95.0	94.3	89.7	88.6	91.3	94.6	55.9	7.3	13.4	2,154	95.9	1,205	84.0	157	85.7	288
DK/Missing	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	3	(*)	0	(*)	0	(*)	0
Wealth index quintile																
Poorest	90.2	83.3	86.4	87.0	89.7	91.4	7.6	2.8	6.5	2,555	88.4	193	54.2	71	68.6	166
Second	91.8	86.6	87.8	88.3	89.9	91.2	13.5	2.7	7.6	2,881	91.2	388	64.2	77	80.2	220
Middle	93.6	90.0	90.2	89.2	91.4	93.1	28.7	0.9	7.5	1,779	92.7	510	90.2	17	86.2	133
Fourth	94.6	91.5	89.9	89.9	91.7	92.8	22.6	3.2	9.0	2,969	95.2	671	69.9	95	85.1	267
Richest	96.1	92.3	92.8	89.6	92.2	95.0	37.3	4.7	12.1	3,123	96.0	1,165	90.3	146	88.7	377
Division																
Bannu	91.2	87.2	91.2	85.6	84.9	89.8	16.9	3.2	4.5	929	93.4	157	47.9	30	76.2	42
D.I. Khan	98.0	82.5	92.4	92.4	96.5	97.3	11.9	1.0	5.7	940	97.6	112	79.8	9	82.2	54
Hazara	91.7	84.2	83.4	86.5	88.4	92.4	21.7	4.9	6.8	2,726	87.7	591	45.1	135	71.1	185
Kohat	85.9	81.6	82.8	77.4	80.1	86.2	17.0	2.6	8.2	1,086	93.5	185	49.8	28	59.9	89
Malakand	94.6	92.1	91.2	91.6	94.1	93.2	20.5	2.0	10.2	3,347	96.7	685	83.5	66	83.2	340
Mardan	92.4	90.2	89.7	88.0	87.4	91.4	22.8	2.9	6.9	1,889	93.9	431	90.0	55	85.7	130
Peshawar	95.3	91.0	92.3	91.4	94.0	94.2	21.4	3.8	12.8	3,581	96.0	766	93.0	136	89.2	458

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table SW. 2: Overall life satisfaction and happiness

Percentage of women age 15-24 years who are very or somewhat satisfied with their life overall, the average overall life satisfaction score, and percentage of women age 15-24 years who are very or somewhat happy, Khyber Pakhtunkhwa, 2016-17

	Percentage of women with overall life satisfaction[1]	Average life satisfaction score	Percentage of women who are very or somewhat happy [2]	Number of women age 15-24 years
KP	93.0	1.4	93.2	14,499
Area of residence				
Urban	94.7	1.4	94.9	2,445
Rural	92.7	1.4	92.9	12,054
Age				
15-19	93.3	1.4	94.1	7,984
20-24	92.7	1.4	92.1	6,515
Respondent's Education				
None/pre-school	91.7	1.5	92.4	5,807
Primary	93.1	1.4	93.6	2,280
Middle	92.9	1.4	93.6	1,779
Secondary	94.6	1.3	94.6	2,477
Higher	94.8	1.4	93.2	2,154
DK/Missing	(*)	(*)	(*)	3
Wealth index quintile				
Poorest	91.4	1.6	90.8	2,555
Second	91.4	1.5	92.3	2,881
Middle	91.7	1.5	92.7	2,971
Fourth	94.1	1.4	93.7	2,969
Richest	96.2	1.3	96.1	3,123
Division				
Bannu	90.5	1.5	93.9	929
D.I. Khan	97.5	1.3	97.1	940
Hazara	89.7	1.5	92.0	2,726
Kohat	88.7	1.7	84.5	1,086
Malakand	94.6	1.4	95.3	3,347
Mardan	92.7	1.4	91.4	1,889
Peshawar	95.1	1.3	94.6	3,581

(*) Figures that are based on fewer than 25 unweighted cases

In Table SW.2, proportions of women age 15-24 years with overall life satisfaction are shown. The term "life satisfaction" is defined as those who are very or somewhat satisfied with their life overall, and is based on a single question which was asked after the life satisfaction questions on all of the previously mentioned domains, with the exception of the question on satisfaction with income, which was asked later. About 93 percent of women age 15-24 are satisfied with their life overall. There is a positive relationship between wealth and life satisfaction. The proportion of women who are satisfied ranges from 91 percent of women living in the households in the lowest quintile to 96 percent in the highest quintile.

As a summary measure, the average life satisfaction score is also calculated and included in Table SW.2. The score is calculated simply by averaging the responses to the question on overall life satisfaction, ranging from very satisfied (1) to very unsatisfied (5). Therefore, the lower the average score, the higher the life satisfaction levels. The table indicates very clearly that there is inverse relation between the average life satisfaction score and the socioeconomic status of young women.

The information in the table suggests that 93 percent of women age 15-24 years are very or somewhat happy. Differences by wealth quintiles can also be observed for this indicator.

Table SW. 3: Perception of a better life

Percentage of women age 15-24 years who think that their lives improved during the last one year and those who expect that their lives will get better after one year, Khyber Pakhtunkhwa, 2016-17

| | Percentage of women who think that their life | | | |
	Improved during the last one year	Will get better after one year	Both[1]	Number of women age 15-24 years
KP	61.9	86.9	59.3	14,499
Area of residence				
Urban	70.2	91.0	68.3	2,445
Rural	60.2	86.1	57.5	12,054
Age				
15-19	60.8	87.1	58.1	7,984
20-24	63.2	86.6	60.9	6,515
Respondent's Education				
None/pre-school	56.4	82.0	53.4	5,807
Primary	59.8	88.1	57.0	2,280
Middle	64.5	88.6	61.8	1,779
Secondary	67.8	90.7	65.8	2,477
Higher	69.9	93.1	68.2	2,154
DK/Missing	(*)	(*)	(*)	3
Wealth index quintile				
Poorest	51.1	79.9	47.6	2,555
Second	55.3	84.1	52.4	2,881
Middle	60.6	86.7	58.2	2,971
Fourth	65.9	89.8	63.9	2,969
Richest	74.2	92.5	72.0	3,123
Division				
Bannu	57.7	83.9	52.7	929
D.I. Khan	46.9	86.5	45.2	940
Hazara	62.2	85.9	59.4	2,726
Kohat	56.5	88.5	54.4	1,086
Malakand	62.7	89.6	60.9	3,347
Mardan	63.5	80.3	59.5	1,889
Peshawar	66.8	88.9	64.6	3,581
(*) Figures that are based on fewer than 25 unweighted cases				

In addition to the series of questions on life satisfaction and happiness, respondents were also asked two simple questions on whether they think their life improved during the last one year, and whether they think their life will be better in one year's time. Such information may contribute to our understanding of desperation that may exist among young people, as well as hopelessness and hopes for the future. Specific combinations of the perceptions during the last one year and expectations for the next one year may be valuable information to understand the general sense of well-being among young people.

In Table SW.3, women's perceptions of a better life are presented. The proportion of women age 15-24 years who think that their lives improved during the last one year and who expect that their lives will get better after one year, is 59 percent. Differences in the perception of a better life can be observed by wealth; 48 percent of the women living in the households in the poorest quintile think that their lives improved during the last one year and expect that it will get better after one year, while the corresponding proportion of women living in the households in the richest quintile is 72 percent.

Differences for perception of a better life also exist by area of residence, lower in rural areas (58 percent) compared to urban areas (68 percent).

XV. Multi-dimensional Poverty Index (MPI)

Poverty is a complex and multidimensional phenomenon. There are various facets of deprivation that can affect well-being, such as the inability to attain a good education, a lack of access to healthcare facilities, poor housing and an unsafe environment in which to live. Although an income-based measure continues to be among the most widely used measures of poverty, a unidimensional measure based on income alone is insufficient to reflect the true extent and depth of poverty.

The Multidimensional Poverty Index (MPI)[74], developed by Oxford Poverty & Human Development Initiative (OPHI) and the Human Development Report Office of the United Nations Development Programme (UNDP) is a relatively new measure to compute multidimensional poverty. The MPI complements consumption-based poverty measures by reflecting deprivations that individuals face in other dimensions such as education, health and standard of living.

The MPI provides disaggregated statistics on the main contributors to poverty in all its dimensions; education, health and standard of living. Thus, the MPI provides strong evidence for policy makers, with which to identify the root causes of poverty and deprivation. The biggest utility of having multidimensional poverty is its disaggregation according to different vulnerabilities and geographies thus enabling policy makers to develop context specific development plans.

The MPI captures the severe deprivations that each person experiences with respect to education, health and standard of living. MPI is the product of two components:

Incidence of poverty (H): the percentage of people who are identified as multi-dimensionally poor, or the poverty headcount.

Intensity of poverty (A): the average percentage of dimensions in which poor people are deprived. In simple terms it means how intense, how bad the multidimensional poverty is, on average, for those who are poor.

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[74] *The website of OPHI provides an extensive description of the methodology and computations, and additionally provides Country Briefings, presenting results for around 100 countries:* ***http://www.ophi.org.uk/multidimensional-poverty-index/***
The latest Country Briefing for Pakistan (based on the 2012/13 DHS) is available here:
http://www.dataforall.org/dashboard/ophi/index.php/mpi/download_brief_files/PAK
It is important to note, as described in this chapter, that the estimates included in the briefing are not entirely comparable to those presented in this chapter.

Dimensions, indicators, cut-offs and weights of MPI

Dimension	Indicators	Deprivation cut-off	Relative weight
Health	Nutrition	Any child is malnourished	1/6=16.7%
	Child mortality	Any child has died in the family	1/6=16.7%
Education	Years of Schooling	No household member has completed five years of schooling	1/6=16.7%
	Child School Attendance	Any school-aged child is not attending school in years 1 to 8	1/6=16.7%
Standard of living	Electricity	The household has no electricity	1/18=5.6%
	Sanitation	The household´s sanitation facility is not improved or shared	1/18=5.6%
	Drinking Water	The household's main drinking water source is not improved or is more than 30 minutes walking from home	1/18=5.6%
	Floor	The household has dirt, sand or dung floor	1/18=5.6%
	Cooking fuel	The household cooks with dung, wood or charcoal	1/18=5.6%
	Assets	The household does not own more than one of: radio, TV, telephone, bike, motorbike or refrigerator, and does not own a car or truck	1/18=5.6%

Khyber-Pakhtunkhwa's MPI constitutes three dimensions; health, education and standard of living. The MPI has ten indicators: two each for health and education, and six for living standard. The ten indicators are measured at household level, so that each member of a household is poor if the household is poor. While each dimension carries an equal weight of 1/3, the weights of component indicators differ.

It is important to mention that the MPI indicator cut-offs used in this report are set according to the previous standard of the global MPI definitions. The KP-MICS did not include a woman's full birth history, which is now a prerequisite to compute the global MPI according to the latest standard. This inherently leads to an overestimate in the KP-MICS on the indicator of child mortality, as the latest cut-off narrows the period of measurement to "any child under age five died in the family during last five years)". Nevertheless, the results presented here conforms to the previous definition of the global MPI and should be interpreted in that context of international and national comparison.

Table MPI.1 shows that the headcount ratio (H) of multidimensional poverty (the percentage of poor people) in KP is 34.5 percent. The average intensity of deprivation among the poor people (A), which reflects the share of deprivations each poor person experiences on average, is 48 percent. That is, each poor person is, on average, deprived in about half of the weighted indicators. Since the MPI is the product of H and A, it yields a value of 0.166. This means that multi-dimensionally poor people in KP experience 16.6 percent of the total deprivations that would be experienced if all people were deprived in all indicators.

As expected, estimates for the MPI, H and A suggests that in KP, multidimensional poverty is considerably higher among households who are poor and where head of households has no education in contrast to richest households and head of households having higher level of education (poorest-77.4 percent vs richest 9.0 percent; no education 48.9 percent vs higher level of education 13.0 percent respectively).

The proportion of people identified as multi-dimensionally poor in urban areas is considerably lower than in rural areas – 15.2 percent and 38.3 percent, respectively. Amongst divisions, D.I Khan appears

to be experiencing the highest levels of multidimensional poverty in terms of index value and incidence (0.272), followed by Malakand (0.216) and Banu (0.203) and lowest in Peshawar (0.103).

Table MPI.2 is calculated on a denominator of only poor household members. Each indicator column now presents the percentage of poor people facing deprivation in each of these. These are also referred to as censored headcount ratios. The general method of interpreting results is similar to that of Table MPI.01, but allows for comparison to Table MPI.01 in the sense that there are less clear patterns between the less educated and higher educated, the wealthier and the less wealthy on some indicators. This points to these deprivations relating to being MPI poor in totality, rather than individual indicator contributions.

Table MPI. 1: The Multidimensional Poverty Index (MPI) - Total Population

Distribution of households member by dimensions and indicators of poverty, poverty headcount ratio, intensity of poverty, and the MPI, Khyber Pakhtunkhwa, 2016-17

	Percentage of the Population who are MPI poor and deprived in each indicator										H - The headcount ratio (the proportion of the population who are multidimensional poor; c > 1/3)	A - The intensity of poverty (the proportion of the weighted component indicators of which the poor, on average, are deprived)	The Multidimensional Poverty Index (MPI) (H x A)	Percentage of Population Vulnerable to Poverty (c>1/5 and c<1/3)	Percentage of Population in Severe Poverty (c>1/2)	Number of household members
	Education		Health		Living Standards											
	Years of Schooling	School Attendance	Child Mortality	Nutrition	Electricity	Sanitation	Drinking Water	Floor	Cooking fuel	Assets						
KP	15.6	31.3	22.2	20.9	5.6	22.5	13.5	56.9	60.9	23.8	34.5	48.0	.166	19.9	15.0	145,811
Area of residence																
Urban	8.5	17.2	19.3	13.9	.6	9.4	3.8	17.7	14.7	6.6	15.2	41.2	.063	9.4	3.8	23,596
Rural	16.9	34.1	22.7	22.3	6.6	25.0	15.4	64.4	69.8	27.2	38.3	48.6	.186	22.0	17.1	122,215
Education of head of household																
None/pre-school	29.8	41.3	24.2	23.6	8.3	28.4	16.9	68.5	69.3	33.4	48.9	50.0	.244	19.7	24.4	70,495
Primary	10.9	30.3	26.9	21.7	4.5	26.0	15.8	54.7	65.0	23.5	36.1	44.9	.162	21.1	11.7	15,079
Middle	0.0	25.3	23.4	19.7	3.8	21.4	12.6	52.2	56.5	19.7	24.0	44.2	.106	23.3	7.2	15,521
Secondary	0.0	20.1	16.7	17.6	2.5	14.2	9.3	44.4	53.3	13.0	16.8	42.0	.071	20.1	3.8	24,367
Higher	0.0	15.6	17.4	15.9	2.1	10.3	6.0	36.8	41.4	7.2	13.0	43.6	.057	17.1	3.8	20,303
DK/Missing	29.6	37.1	10.1	25.0	0.0	50.0	0.0	62.1	62.1	0.0	29.6	47.4	.140	37.1	25.0	46
Wealth index quintile																
Poorest	37.6	56.4	26.0	30.5	21.8	52.7	38.9	93.6	90.5	66.5	77.4	52.7	.408	11.6	46.1	28,747
Second	18.4	38.9	25.4	23.8	4.6	26.7	17.1	82.8	77.9	32.0	46.3	45.9	.213	23.7	17.5	29,591
Middle	11.7	27.6	22.9	20.0	1.4	17.3	7.9	67.2	70.8	14.9	25.4	45.1	.114	30.6	7.4	29,382
Fourth	7.1	20.6	19.9	17.2	.5	11.3	3.0	35.9	52.7	5.7	15.0	41.9	.063	27.3	2.6	29,185
Richest	3.2	13.3	16.5	13.2	.1	4.8	1.2	4.5	12.3	.4	9.0	37.6	.034	6.1	1.5	28,906
Division,																
Bannu	12.1	45.4	31.0	26.2	2.1	20.5	12.2	88.1	44.8	22.7	43.8	46.4	.203	25.8	17.1	9,276
D.I. Khan	24.7	51.1	28.8	32.8	3.2	24.4	15.8	82.0	89.7	10.4	54.5	50.0	.272	22.2	26.9	10,688
Hazara	14.8	26.3	23.0	20.8	6.5	25.9	27.5	39.2	80.1	34.2	35.4	51.2	.181	17.3	18.1	26,947
Kohat	8.8	24.8	23.6	15.7	6.0	30.9	21.9	61.4	57.3	17.9	28.2	46.2	.130	23.1	11.0	10,235
Mardan	9.7	20.5	23.8	16.7	1.8	25.3	3.1	57.8	58.4	13.5	23.4	44.0	.103	23.5	7.8	18,082
Peshawar	15.1	26.0	18.4	18.1	2.8	13.1	2.6	54.2	29.2	12.9	24.8	44.4	.110	17.4	8.2	36,830
Malakand	19.9	38.8	19.8	22.8	11.7	26.0	17.0	55.6	77.9	39.3	43.6	49.4	.216	19.6	20.5	33,752

1 SDG indicator 1.2.2 – Multidimensional Poverty

Table MPI.2: The Multidimensional Poverty Index (MPI) - Poor Population

Percentage of the population who are MPI poor and deprived in each indicator, by selected characteristics, Khyber Pakhtunkhwa, 2016-17

| | Percentage of the Population who are MPI poor and deprived in each indicator | | | | | | | | | | H - The headcount ratio (the proportion of the population who are multidimensionally poor; c > 1/3) | Number of household members |
| | Education | | Health | | Living Standards | | | | | | | |
	Years of Schooling	School Attendance	Child Mortality	Nutrition	Electricity	Sanitation	Drinking Water	Floor	Cooking fuel	Assets		
KP	38.4	69.2	42.6	43.2	12.4	41.9	24.4	80.3	78.0	47.4	100.0	50,374
Area of residence												
Urban	38.7	66.9	57.6	48.0	2.2	19.0	6.0	33.8	28.0	19.3	100.0	3,597
Rural	38.4	69.3	41.5	42.8	13.2	43.7	25.8	83.9	81.9	49.5	100.0	46778
Education of head of household												
None/pre-school	52.3	70.0	38.1	39.8	14.5	43.8	25.8	83.3	79.9	51.9	100.0	34,459
Primary	23.8	62.8	49.5	43.4	9.4	42.6	24.8	74.6	75.9	43.3	100.0	5,446
Middle	0.0	75.2	53.1	49.8	7.9	39.4	23.1	76.7	72.7	41.1	100.0	3,723
Secondary	0.0	65.2	50.1	56.4	6.7	33.8	18.4	70.3	77.7	33.4	100.0	4,099
Higher	0.0	69.2	60.5	57.4	6.5	31.7	16.6	74.7	66.3	27.4	100.0	2,634
DK/Missing	100.0	0.0	15.5	84.5	0.0	84.5	0.0	84.5	84.5	0.0	100.0	14
Wealth index quintile												
Poorest	47.5	70.5	32.3	38.3	23.9	58.9	41.3	95.1	91.4	72.8	100.0	22,240
Second	33.3	66.7	43.4	42.3	5.5	37.0	18.1	86.4	80.7	41.4	100.0	13,715
Middle	32.3	67.2	54.9	48.3	1.7	30.3	7.3	73.2	70.7	21.0	100.0	7,453
Fourth	28.1	70.7	58.9	53.5	.9	12.7	1.5	43.0	52.9	9.6	100.0	4,378
Richest	22.1	73.8	63.8	57.3	.2	5.9	.3	5.1	12.6	1.2	100.0	2,588
Division												
Bannu	24.1	79.6	51.6	45.5	3.8	30.6	17.7	96.9	47.7	36.1	100.0	4,065
D.I. Khan	41.8	75.2	42.9	50.7	5.3	38.9	22.1	93.0	93.2	16.3	100.0	5,822
Hazara	37.7	64.9	41.5	46.2	16.4	50.8	41.2	73.9	97.0	71.6	100.0	9,535
Kohat	25.4	58.8	54.9	38.1	15.1	54.3	34.6	81.1	79.5	34.7	100.0	2,884
Mardan	31.3	61.3	53.3	35.8	4.2	50.2	7.8	81.2	70.2	33.5	100.0	4,223
Peshawar	45.3	69.3	46.7	42.7	6.0	25.2	6.8	75.4	44.9	28.2	100.0	9,126
Malakand	41.7	70.8	32.7	41.0	20.8	46.2	29.9	77.6	90.6	65.5	100.0	14,720

XVI.   Appendix A: District Tables

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

Number of households, women and children under-5 by results of the household, women's and under-5's interviews, and household, women's and under-5's district wise response rates, Khyber Pakhtunkhwa,2016-17

		Abbottabad	Bannu	Batagram	Buner	Charsadda	Chitral	D. I. Khan	Hangu	Haripur	Karak	Kohat	Kohistan	Lakki Marwat
Households	Sampled	1,040	860	660	680	980	800	900	720	920	620	920	840	780
	Occupied	990	827	647	658	959	752	865	679	896	607	885	798	735
	Interviewed	984	813	642	655	954	748	840	657	890	591	872	757	722
	Household response rate	99.4	98.3	99.2	99.5	99.5	99.5	97.1	96.8	99.3	97.4	98.5	94.9	98.2
Women	Eligible	1,560	1,760	1,167	1,149	1,646	1,188	1,610	1,631	1,492	1,080	1,515	1,364	1,240
	Interviewed	1,526	1,711	1,151	1,139	1,588	1,166	1,548	1,611	1,435	1,067	1,493	1,284	1,223
	Women's response rate	97.8	97.2	98.6	99.1	96.5	98.1	96.1	98.8	96.2	98.8	98.5	94.1	98.6
	Women's overall response rate	97.2	95.6	97.9	98.7	96.0	97.6	93.4	95.6	95.5	96.2	97.1	89.3	96.9
Children under 5	Eligible	733	1,097	777	682	833	521	1,051	974	665	666	759	1,132	687
	Mothers/caretakers interviewed	720	1,056	774	682	812	520	1,023	969	642	666	756	1,068	684
	Under-5's response rate	98.2	96.3	99.6	100.0	97.5	99.8	97.3	99.5	96.5	100.0	99.6	94.3	99.6
	Under-5's overall response rate	97.6	94.6	98.8	99.5	97.0	99.3	94.5	96.3	95.9	97.4	98.1	89.5	97.8

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

Number of households, women and children under-5 by results of the household, women's and under-5's interviews, and household, women's and under-5's district wise response rates, Khyber Pakhtunkhwa,2016-17

		Lower Dir	Malakand Protected Area	Mansehra	Mardan	Nowshera	Peshawar	Shangla	Swabi	Swat	Tank	Tor Ghar	Upper Dir
Households	Sampled	900	760	960	1,060	980	2,000	640	940	1,020	680	620	860
	Occupied	870	728	925	1,042	946	1,936	627	922	970	659	559	835
	Interviewed	865	718	921	1,038	942	1,915	609	920	962	640	509	831
	Household response rate	99.4	98.6	99.6	99.6	99.6	98.9	97.1	99.8	99.2	97.1	91.1	99.5
Women	Eligible	1,622	1,445	1,439	1,937	1,560	3,340	847	1,568	1,796	1,233	859	1,621
	Interviewed	1,552	1,402	1,401	1,890	1,516	3,300	835	1,503	1,720	1,208	837	1,597
	Women's response rate	95.7	97.0	97.4	97.6	97.2	98.8	98.6	95.9	95.8	98.0	97.4	98.5
	Women's overall response rate	95.1	95.7	96.9	97.2	96.8	97.7	95.8	95.6	95.0	95.1	88.7	98.0
Children under 5	Eligible	884	856	762	1,102	793	1,654	553	734	1,054	834	570	986
	Mothers/caretakers interviewed	843	841	751	1,080	772	1,643	544	710	996	829	561	984
	Under-5's response rate	95.4	98.2	98.6	98.0	97.4	99.3	98.4	96.7	94.5	99.4	98.4	99.8
	Under-5's overall response rate	94.8	96.9	98.1	97.6	96.9	98.3	95.5	96.5	93.7	96.5	89.6	99.3

Table D. HH.3: Household composition

Percent and frequency distribution of households by selected characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of households	
		Weighted	Unweighted
KP	100.0	20,995	20,995
District			
Abbottabad	5.8	1,216	984
Bannu	3.4	719	813
Batagram	1.7	361	642
Buner	2.6	542	655
Charsadda	5.8	1221	954
Chitral	1.8	386	748
D.I. Khan	5.2	1097	840
Hangu	1.2	256	657
Haripur	4.3	905	890
Karak	1.9	402	591
Kohat	3.6	753	872
Kohistan	2.1	447	757
Lakki Marwat	2.3	476	722
Lower Dir	4.1	862	865
Malakand Protected Area	2.3	473	718
Mansehra	5.9	1246	921
Mardan	6.9	1452	1038
Nowshera	4.9	1039	942
Peshawar	14.3	2997	1915
Shangla	2.2	465	609
Swabi	5.7	1,194	920
Swat	6.7	1,409	962
Tank	1.2	255	640
Tor Ghar	0.8	161	509
Upper Dir	3.2	662	831

Table D. HH.4: Women's background characteristics

Percent and frequency distribution of women age 15-49 years by selected background characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of women	
		Weighted	Unweighted
KP	100.0	36,703	36,703
District			
Abbottabad	5.1	1,875	1,526
Bannu	4.1	1513	1711
Batagram	1.8	662	1151
Buner	2.6	952	1139
Charsadda	5.7	2087	1588
Chitral	1.7	607	1166
D.I. Khan	5.7	2083	1548
Hangu	1.7	629	1611
Haripur	4.0	1468	1435
Karak	1.9	700	1067
Kohat	3.6	1311	1493
Kohistan	2.2	798	1284
Lakki Marwat	2.3	849	1223
Lower Dir	4.1	1514	1552
Malakand Protected Area	2.5	928	1402
Mansehra	5.2	1898	1401
Mardan	7.3	2681	1890
Nowshera	4.7	1714	1516
Peshawar	14.6	5357	3300
Shangla	1.7	630	835
Swabi	5.3	1,952	1,503
Swat	6.9	2,529	1,720
Tank	1.3	469	1,208
Tor Ghar	0.7	263	837
Upper Dir	3.4	1,236	1,597

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

Percent and frequency distribution of children under five years of age by selected characteristics, Khyber Pakhtunkhwa, 2016-17

	Weighted percent	Number of under-5 children	
		Weighted	Unweighted
KP	100.0	20,926	20,926
District			
Abbottabad	4.2	882	720
Bannu	4.8	1,009	1,056
Batagram	2.1	442	774
Buner	2.7	570	682
Charsadda	5.2	1,081	812
Chitral	1.3	269	520
D.I. Khan	7.1	1,495	1,023
Hangu	1.8	380	969
Haripur	3.2	678	642
Karak	2.1	436	666
Kohat	3.2	676	756
Kohistan	3.2	669	1,068
Lakki Marwat	2.4	495	684
Lower Dir	3.9	816	843
Malakand Protected Area	2.5	525	841
Mansehra	5.1	1,071	751
Mardan	7.4	1,551	1,080
Nowshera	4.5	939	772
Peshawar	13.5	2,829	1,643
Shangla	2.0	417	544
Swabi	4.5	935	710
Swat	7.0	1,474	996
Tank	1.6	333	829
Tor Ghar	0.9	179	561
Upper Dir	3.7	774	984

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 is living elsewhere.

Table D. HH.8: Wealth quintiles

Percent distribution of the household population by wealth index quintiles, according to districts, Khyber Pakhtunkhwa,2016-17

	Wealth index quintiles						Number of household members
	Poorest	Second	Middle	Fourth	Richest	Total	
KP	20.0	20.0	20.0	20.0	20.0	100.0	158,564
District							
Abbottabad	14.5	22.3	23.8	16.6	22.8	100.0	7,545
Bannu	7.2	28.9	32.9	21.6	9.4	100.0	6,742
Batagram	39.6	22.9	16.2	15.6	5.7	100.0	2,880
Buner	32.0	17.7	17.6	18.8	13.9	100.0	4,276
Charsadda	8.3	24.2	29.7	21.3	16.4	100.0	9,290
Chitral	60.6	22.5	12.0	4.3	.6	100.0	2,483
D.I. Khan	24.7	30.3	20.0	14.7	10.3	100.0	9,672
Hangu	14.5	28.3	23.3	22.7	11.3	100.0	2,500
Haripur	12.7	15.6	23.2	24.4	24.1	100.0	5,900
Karak	16.1	36.1	32.3	14.5	.9	100.0	3,024
Kohat	11.4	24.2	20.4	20.8	23.2	100.0	5,313
Kohistan	84.3	11.8	3.3	.5	.1	100.0	4,435
Lakki Marwat	37.6	40.1	14.2	6.6	1.5	100.0	3,823
Lower Dir	21.6	22.6	23.0	22.5	10.3	100.0	6,468
Malakand Protected Area	13.1	18.4	17.1	30.0	21.3	100.0	4,042
Mansehra	26.1	15.9	17.8	23.0	17.2	100.0	8,247
Mardan	7.8	17.0	26.2	23.1	25.9	100.0	11,329
Nowshera	3.5	15.8	19.2	28.7	32.8	100.0	7,127
Peshawar	4.5	13.0	16.7	21.7	44.1	100.0	22,199
Shangla	57.0	20.1	11.3	9.5	2.0	100.0	3,091
Swabi	5.9	16.1	25.9	31.7	20.3	100.0	8,096
Swat	23.0	13.0	11.7	24.0	28.2	100.0	11,075
Tank	16.7	36.4	26.5	14.0	6.5	100.0	2,094
Tor Ghar	86.7	8.7	4.3	0.4	0.0	100.0	1,202
Upper Dir	55.7	20.6	13.1	9.5	1.2	100.0	5,710

Table D. CM.3: Infant and under-5 mortality rates by background characteristics

Indirect estimates of infant and under-five mortality rates by selected background characteristics, time since first birth version, TSB Model, Khyber Pakhtunkhwa, 2016-17

	Infant mortality rate[1]	Under-five mortality rate[2]
KP	60	74
District		
Abbotabad	33	38
Bannu	81	103
Batagram	111	146
Buner	91	118
Charsadda	48	57
Chitral	37	43
D.I. Khan	76	95
Hangu	68	85
Haripur	68	84
Karak	53	63
Kohat	47	56
Kohistan	107	141
Lakki Marwat	75	94
Lower Dir	38	44
Malakand Protected Area	60	74
Mansehra	64	79
Mardan	65	81
Nowshera	45	53
Peshawar	45	53
Shangla	66	81
Swabi	47	57
Swat	75	94
Tank	58	70
Tor Ghar	67	82
Upper Dir	46	54

[1] MICS indicator 1.2; MDG indicator 4.2 - Infant mortality rate

[2] MICS indicator 1.5; MDG indicator 4.1 - Under-five mortality rate

Rates refer to January, 2015.The East Model was assumed to approximate the age pattern of mortality in Pakistan and calculations are based on Time Since First Birth (TSFB) version of the indirect children ever born/children surviving method.

Table D. NU.1: Low birth weight infants

Percentage of last live-born children in the last two years that are estimated to have weighed below 2,500 grams at birth and percentage of live births weighed at birth,
Khyber Pakhtunkhwa, 2016-17

	Percent 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 2,500 grams[1]	Weighed at birth[2]	
KP	4.9	15.3	67.3	8.6	3.9	100.0	32.4	15.6	8,365
District									
Abbottabad	3.8	18.8	65.6	7.9	3.9	100.0	34.1	38.3	364
Bannu	4.7	19.2	70.4	4.7	1.0	100.0	33.3	6.3	413
Batagram	4.8	13.0	74.1	5.7	2.4	100.0	30.5	6.9	183
Buner	4.0	16.5	69.8	4.5	5.2	100.0	33.5	12.2	243
Charsadda	6.0	12.6	75.2	4.2	2.0	100.0	31.4	15.8	454
Chitral	8.0	21.5	64.2	5.7	.6	100.0	36.4	23.0	127
D.I. Khan	3.6	20.0	58.0	5.3	13.1	100.0	39.6	7.3	559
Hangu	2.6	17.9	69.3	7.5	2.7	100.0	31.2	9.6	149
Haripur	4.0	15.4	69.6	9.3	1.7	100.0	30.5	34.4	256
Karak	4.5	12.7	72.6	10.1	.2	100.0	29.7	5.9	168
Kohat	6.2	16.1	69.6	6.8	1.3	100.0	32.4	17.1	275
Kohistan	4.4	15.1	57.7	4.9	17.9	100.0	39.1	2.7	179
Lakki Marwat	2.2	16.3	72.5	8.2	.8	100.0	29.9	3.8	190
Lower Dir	6.1	15.2	55.8	20.0	2.9	100.0	30.8	1.7	336
Malakand Protected Area	3.0	14.1	75.7	6.9	.4	100.0	29.4	13.9	213
Mansehra	3.1	13.9	71.1	6.2	5.7	100.0	31.6	16.6	453
Mardan	4.0	17.2	67.2	9.8	1.8	100.0	31.7	17.7	627
Nowshera	9.4	17.1	64.1	7.4	2.0	100.0	35.0	11.0	384
Peshawar	4.1	10.1	70.8	12.1	3.0	100.0	28.5	28.6	1,130
Shangla	1.4	18.8	61.5	12.7	5.6	100.0	32.5	3.8	150
Swabi	8.3	12.7	68.6	7.3	3.1	100.0	32.8	12.4	389
Swat	5.7	15.6	65.1	11.6	2.0	100.0	31.6	16.4	614
Tank	0.8	14.6	70.9	2.8	10.9	100.0	34.3	6.8	125
Tor Ghar	9.3	16.6	47.6	1.9	24.6	100.0	47.2	3.6	71
Upper Dir	7.6	13.8	62.2	13.8	2.6	100.0	31.2	10.3	314

[1] MICS indicator 2.20 - Low-birthweight infants

[2] MICS indicator 2.21 - Infants weighed at birth

Table NU.2: Nutritional status of children

Percentage of children under age 5 by nutritional status according to three anthropometric indices: weight for age, height for age, and weight for height, Khyber Pakhtunkhwa , 2016-17

	Weight for age				Height for age				Weight for height				
	Underweight				Stunted				Wasted		Overweight		
	Percent below				Percent below				Percent below		Percent above		Number of children under age 5
	- 2 SD[1]	- 3 SD[2]	Mean Z-Score (SD)	Number of children under age 5	- 2 SD[3]	- 3 SD[4]	Mean Z-Score (SD)	Number of children under age 5	- 2 SD[5]	- 3 SD[6]	+ 2 SD[7]	Mean Z-Score (SD)	
KP	20.8	7.5	-1.1	20,079	41.4	20.7	-1.6	19,527	8.0	3.0	6.8	-0.1	19,608
District													
Abbottabad	9.2	2.7	-0.6	874	39.6	15.9	-1.5	872	6.1	2.7	12.3	0.4	863
Bannu	20.4	4.4	-1.0	883	40.1	16.5	-1.6	875	2.6	.7	2.4	-.1	874
Batagram	35.4	17.2	-1.7	408	51.8	31.5	-2.0	394	16.0	6.5	4.3	-.6	386
Buner	16.1	3.7	-.9	551	43.6	21.7	-1.8	539	2.6	.2	7.0	.2	538
Charsadda	16.6	5.2	-1.0	1,065	42.7	23.4	-1.7	1,043	4.4	.4	5.5	.1	1,048
Chitral	11.0	3.5	-.8	265	46.8	20.8	-1.9	260	2.5	.8	12.7	.5	262
D.I. Khan	28.4	12.4	-1.2	1,463	45.8	25.7	-1.8	1,439	10.8	3.8	7.5	-.3	1,434
Hangu	19.3	7.4	-1.0	376	37.2	22.5	-1.4	353	6.2	2.5	7.8	.1	362
Haripur	11.9	3.0	-.6	624	24.1	7.8	-.7	615	10.0	2.7	4.7	-.3	610
Karak	7.9	2.1	-.5	423	35.9	12.9	-1.3	423	4.8	.7	11.2	.4	431
Kohat	14.3	3.9	-.8	661	35.6	18.6	-1.4	646	6.4	2.0	9.0	.0	653
Kohistan	44.4	20.3	-2.1	496	59.4	37.2	-2.4	441	17.2	7.9	8.6	-.4	550
Lakki Marwat	19.0	6.5	-1.0	481	36.1	14.7	-1.3	474	6.3	2.0	1.7	-.2	476
Lower Dir	20.2	4.7	-1.0	788	51.6	26.1	-1.9	725	5.1	2.2	9.9	.3	734
Malakand Protected Area	14.2	3.9	-.8	524	45.7	23.6	-1.8	514	3.6	1.4	12.5	.4	514
Mansehra	22.3	7.0	-1.1	1,001	41.8	23.6	-1.6	970	6.1	1.2	7.1	-.1	964
Mardan	14.7	4.1	-1.0	1,538	34.3	11.6	-1.5	1,515	4.3	1.2	3.4	-.2	1,509
Nowshera	18.0	6.3	-1.0	916	45.3	20.7	-1.7	897	7.1	2.7	8.6	.1	898
Peshawar	22.6	9.5	-1.1	2,787	34.7	15.4	-1.4	2,727	13.2	5.6	4.4	-.4	2,669
Shangla	50.4	20.2	-2.0	391	78.7	54.9	-3.0	358	8.0	2.6	7.6	0.0	392
Swabi	20.2	6.0	-1.0	907	42.7	23.2	-1.7	896	7.3	2.4	6.9	-0.1	893
Swat	19.2	6.1	-0.9	1,417	36.9	18.8	-1.3	1,364	8.4	3.7	6.7	-0.1	1,364
Tank	11.6	3.0	-0.7	323	36.2	20.5	-1.5	314	7.6	2.7	12.1	0.2	312
Tor Ghar	35.1	15.0	-1.5	166	52.1	33.8	-1.9	156	11.9	5.9	9.9	-0.1	155
Upper Dir	34.4	16.2	-1.6	753	52.7	31.1	-2.1	719	13.5	7.6	7.9	-0.3	717

[1] MICS indicator 2.1a and MDG indicator 1.8 - Underweight prevalence (moderate and severe)
[2] MICS indicator 2.1b - Underweight prevalence (severe)
[3] MICS indicator 2.2a - Stunting prevalence (moderate and severe)
[4] MICS indicator 2.2b - Stunting prevalence (severe)
[5] MICS indicator 2.3a - Wasting prevalence (moderate and severe)
[6] MICS indicator 2.3b - Wasting prevalence (severe)
[7] MICS indicator 2.4 - Overweight prevalence

Table D. 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, and within one day of birth, and percentage who received a prelacteal feed, Khyber Pakhtunkhwa, 2016-17

	Percentage who were ever breastfed1	Percentage who were first breastfed:		Percentage who received a prelacteal feed	Number of last live-born children in the last two years
		Within one hour of birth2	Within one day of birth		
KP	94.5	19.7	70.7	57.7	8,365
District					
Abbottabad	93.6	11.3	70.6	43.2	364
Bannu	95.0	4.3	32.6	81.7	413
Batagram	92.4	17.8	60.1	56.3	183
Buner	95.6	6.1	79.2	62.3	243
Charsadda	97.0	6.3	85.1	34.2	454
Chitral	96.6	64.2	93.8	19.9	127
D.I. Khan	93.4	6.1	62.0	72.3	559
Hangu	92.8	11.7	69.8	70.9	149
Haripur	92.6	16.5	68.6	48.0	256
Karak	91.6	3.5	29.2	66.8	168
Kohat	93.2	11.0	66.7	64.0	275
Kohistan	93.4	54.6	87.4	51.0	179
Lakki Marwat	91.0	11.6	28.3	72.3	190
Lower Dir	94.8	40.0	70.1	53.9	336
Malakand Protected Area	96.7	2.2	77.0	56.7	213
Mansehra	92.6	24.6	76.0	61.9	453
Mardan	95.3	19.1	66.7	63.3	627
Nowshera	95.6	20.6	69.7	69.2	384
Peshawar	95.4	29.6	86.6	41.6	1130
Shangla	94.9	37.8	83.3	46.9	150
Swabi	95.3	9.9	71.8	80.8	389
Swat	94.7	28.2	71.5	53.5	614
Tank	98.6	13.5	66.1	81.3	125
Tor Ghar	94.8	45.8	86.6	39.5	71
Upper Dir	93.5	25.1	78.5	61.6	314

1 MICS indicator 2.5 - Children ever breastfed

2 MICS indicator 2.6 - Early initiation of breastfeeding

Table D. NU.4: Breastfeeding

Percentage of living children according to breastfeeding status at selected age groups, Khyber Pakhtunkhwa, 2016-17

	Children age 0-5 months				Children age 12-15 months		Children age 20-23 months	
	Percent ever breastfed	Percent exclusively breastfed [1]	Percent predominantly breastfed [2]	Number of children	Percent breastfed (Continued breastfeeding at 1 year) [3]	Number of children	Percent breastfed (Continued breastfeeding at 2 years) [4]	Number of children
KP	97.33	57.17	66.29	2,205	76.71	1,461	59.43	1,290
District								
Abbottabad	97.09	37.68	48.58	93	(78.21)	45	(50.53)	57
Bannu	98.0	31.3	51.8	146	50.3	61	46.1	61
Batagram	93.3	64.1	71.7	49	81.8	37	76.5	22
Buner	96.3	85.7	91.1	70	81.0	39	64.8	36
Charsadda	99.3	47.5	50.8	144	76.1	59	66.0	76
Chitral	100.0	71.9	80.6	27	92.2	23	69.9	24
D.I. Khan	96.4	32.1	50.7	149	66.9	78	67.0	94
Hangu	97.4	30.4	54.6	35	68.0	24	57.6	23
Haripur	98.3	57.8	60.1	69	77.9	33	51.9	24
Karak	95.3	51.0	64.2	52	35.0	28	31.0	30
Kohat	98.1	42.6	68.6	60	71.7	54	64.8	40
Kohistan	100.0	73.1	81.4	47	93.8	28	83.9	36
Lakki Marwat	95.7	45.7	64.5	60	78.8	46	59.6	23
Lower Dir	98.2	62.0	66.6	84	84.9	73	56.9	55
Malakand Protected Area	97.0	47.5	56.3	47	76.8	34	58.6	32
Mansehra	97.9	49.5	53.4	101	75.9	58	65.4	98
Mardan	96.6	77.4	80.2	153	81.0	122	48.5	106
Nowshera	100.0	70.0	74.8	107	72.5	83	38.0	45
Peshawar	96.9	64.3	69.7	267	71.1	215	60.5	198
Shangla	(96.82)	(83.28)	(89.95)	32	91.70	50	(*)	16
Swabi	96.79	58.65	68.30	92	90.32	65	(72.98)	50
Swat	95.96	69.21	73.57	170	82.09	123	60.24	72
Tank	100.00	47.09	75.19	40	90.80	22	59.44	23
Tor Ghar	97.06	71.53	76.51	18	(90.76)	13	(*)	7
Upper Dir	96.88	74.78	79.82	90	84.04	50	47.94	46

[1] MICS indicator 2.7 - Exclusive breastfeeding under 6 months

[2] MICS indicator 2.8 - Predominant breastfeeding under 6 months

[3] MICS indicator 2.9 - Continued breastfeeding at 1 year

[4] MICS indicator 2.10 - Continued breastfeeding at 2 years

( ) Figures that are based on 25-49 unweighted cases

(*) Figures that are based on fewer than 25 unweighted cases

Table D. NU.5: Duration of breastfeeding

Median duration of any breastfeeding, exclusive breastfeeding, and predominant breastfeeding among children age 0-35 months, Khyber Pakhtunkhwa, 2016-17

	Median duration (in months) of:			
	Any breastfeeding[1]	Exclusive breastfeeding	Predominant breastfeeding	Number of children age 0-35 months
Median (KP)	22.4	3.5	4.9	12,406
istrict				
Abbottabad	21.1	2.0	2.4	544
Bannu	20.2	1.6	2.8	608
Batagram	25.1	4.5	6.3	253
Buner	23.8	8.6	9.7	350
Charsadda	23.4	.7	1.7	655
Chitral	23.1	3.8	5.1	169
D.I. Khan	23.5	1.1	2.6	877
Hangu	21.2	.7	3.2	228
Haripur	21.0	3.3	3.6	415
Karak	12.0	2.6	4.2	256
Kohat	22.1	1.7	4.3	392
Kohistan	24.0	5.5	7.2	340
Lakki Marwat	21.4	1.8	5.5	281
Lower Dir	24.0	4.2	4.7	491
Malakand Protected Area	21.8	2.1	3.8	325
Mansehra	23.8	.6	3.2	653
Mardan	21.0	4.9	5.6	948
Nowshera	19.8	5.0	5.8	552
Peshawar	22.6	4.3	5.3	1,613
Shangla	24.4	9.4	11.6	230
Swabi	23.7	3.4	4.5	556
Swat	22.0	4.7	5.2	890
Tank	21.7	2.3	6.4	197
Tor Ghar	24.2	5.7	7.7	108
Upper Dir	21.1	5.3	6.6	475

[1] MICS indicator 2.11 - Duration of breastfeeding

Table D. NU.6: Age-appropriate breastfeeding

Percentage of children age 0-23 months who were appropriately breastfed during the previous day, Khyber Pakhtunkhwa, 2016-17

	Children age 0-5 months		Children age 6-23 months		Children age 0-23 months	
	Percent exclusively breastfed[1]	Number of children	Percent currently breastfeeding and receiving solid, semi-solid or soft foods	Number of children	Percent appropriately breastfed[2]	Number of children
KP	57.2	2,205	55.4	6,275	55.9	8,480
District						
Abbottabad	37.7	93	55.3	275	50.8	368
Bannu	31.3	146	58.7	280	49.3	425
Batagram	64.1	49	63.3	129	63.5	179
Buner	85.7	70	36.6	170	50.9	240
Charsadda	47.5	144	58.6	325	55.2	469
Chitral	71.9	27	72.0	98	72.0	125
D.I. Khan	32.1	149	48.2	425	44.0	575
Hangu	30.4	35	49.9	118	45.4	153
Haripur	57.8	69	57.4	195	57.5	264
Karak	51.0	52	36.3	125	40.6	177
Kohat	42.6	60	59.6	204	55.8	264
Kohistan	73.1	47	72.9	137	72.9	184
Lakki Marwat	45.7	60	36.9	133	39.6	193
Lower Dir	62.0	84	62.6	263	62.4	347
Malakand Protected Area	47.5	47	54.2	170	52.8	217
Mansehra	49.5	101	57.2	346	55.5	448
Mardan	77.4	153	59.6	505	63.7	658
Nowshera	70.0	107	55.4	285	59.4	392
Peshawar	64.3	267	54.9	880	57.1	1,147
Shangla	83.3	32	41.6	105	51.5	137
Swabi	58.7	92	54.7	295	55.7	387
Swat	69.2	170	59.9	445	62.5	616
Tank	47.1	40	64.3	90	59.0	130
Tor Ghar	71.5	18	46.2	51	52.9	69
Upper Dir	74.8	90	50.2	225	57.2	316

[1] MICS indicator 2.7 - Exclusive breastfeeding under 6 months

[2] MICS indicator 2.12 - Age-appropriate breastfeeding

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

Percentage of infants age 6-8 months who received solid, semi-solid, or soft foods during the previous day, Khyber Pakhtunkhwa, 2016-17

	Currently breastfeeding		Currently not breastfeeding		All	
	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods	Number of children age 6-8 months	Percent receiving solid, semi-solid or soft foods1	Number of children age 6-8 months
KP	53.0	1,079	63.2	136	54.1	1,215
District						
Abbottabad	(67.8)	22	(*)	11	(70.2)	33
Bannu	79.8	54	76.3	9	79.3	63
Batagram	33.6	22	100.0	1	35.7	23
Buner	23.1	38	0.0	1	22.5	39
Charsadda	55.6	75	100.0	3	57.4	79
Chitral	45.2	15	46.3	1	45.3	16
D.I. Khan	46.8	86	54.3	7	47.3	93
Hangu	54.8	17	31.2	7	47.9	23
Haripur	48.9	35	47.6	10	48.6	45
Karak	64.0	19	64.1	4	64.0	23
Kohat	77.4	36	100.0	5	80.2	41
Kohistan	27.4	18		0	27.4	18
Lakki Marwat	49.6	21	21.7	3	45.8	24
Lower Dir	42.4	31	42.0	3	42.3	35
Malakand Protected Area	48.6	33	69.4	2	49.6	35
Mansehra	56.5	67	41.8	15	53.8	82
Mardan	57.1	73	67.0	8	58.0	81
Nowshera	54.0	56	64.9	3	54.5	59
Peshawar	53.0	139	84.0	23	57.5	162
Shangla	(*)	16	(*)	-	(*)	16
Swabi	(46.6)	60	(*)	9	50.6	69
Swat	72.6	85	(*)	9	70.0	94
Tank	(56.1)	13	(*)	0	(56.9)	13
Tor Ghar	(35.3)	12	(*)	-	(35.3)	12
Upper Dir	(27.3)	34	(*)	2	(27.5)	36

[1] MICS indicator 2.13 - Introduction of solid, semi-solid or soft foods
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table D. NU.8: Infant and young child feeding (IYCF) practices

Percentage of children age 6-23 months who received appropriate liquids and solid, semi-solid, or soft foods the minimum number of times or more during the previous day, by breastfeeding status, Khyber Pakhtunkhwa, 2016-17

| | Currently breastfeeding | | | | Currently not breastfeeding | | | | | All | | | |
| | Percent of children who received: | | | | Percent of children who received: | | | | | Percent of children who received: | | | |
	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[1,c]	Number of children age 6-23 months	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2,c]	At least 2 milk feeds[3]	Number of children age 6-23 months	Minimum dietary diversity[4,a]	Minimum meal frequency[5,b]	Minimum acceptable diet[c]	Number of children age 6-23 months
KP	13.8	44.8	11.3	4,711	32.5	74.8	11.0	66.7	1,294	18.4	51.3	11.3	6,275
District													
Abbottabad	24.5	62.7	21.6	181	35.3	84.6	5.9	80.7	77	28.3	69.3	16.9	275
Bannu	16.1	45.6	11.1	182	28.1	75.3	9.4	74.0	87	20.0	55.2	10.6	280
Batagram	9.2	43.9	8.0	111	20.8	70.6	10.7	52.0	14	10.1	47.0	8.3	129
Buner	2.6	31.3	2.6	141	25.4	79.6	0.0	43.8	25	5.9	38.6	2.2	170
Charsadda	11.5	61.4	11.1	256	30.2	78.6	1.7	50.3	57	16.2	64.6	9.4	325
Chitral	15.4	41.8	10.7	85	32.4	72.6	6.0	18.6	9	16.5	44.9	10.2	98
D.I. Khan	4.8	33.6	4.5	332	18.6	57.6	5.0	68.7	77	7.6	38.1	4.6	425
Hangu	14.1	51.9	12.3	77	36.9	85.2	15.9	78.7	32	21.6	61.6	13.3	118
Haripur	19.0	48.4	12.4	141	30.3	84.4	12.5	91.7	34	23.3	55.3	12.4	195
Karak	16.7	51.5	14.8	63	34.9	63.6	12.0	56.9	48	24.8	56.7	13.6	125
Kohat	19.3	63.3	18.0	152	27.4	83.0	14.3	81.6	42	21.6	67.6	17.2	204
Kohistan	3.1	50.4	1.5	127	18.4	76.9	10.7	48.3	9	4.0	52.2	2.1	137
Lakki Marwat	.2	16.7	.2	98	8.5	51.5	3.4	65.3	27	3.6	24.2	.9	133
Lower Dir	18.0	51.5	16.1	202	48.1	78.4	4.9	59.6	52	23.4	57.0	13.8	263
Malakand Protected Area	10.7	49.9	7.2	138	27.2	73.1	11.6	62.4	24	14.6	53.4	7.8	170
Mansehra	8.2	40.8	7.4	256	29.2	84.4	17.4	77.4	77	14.1	51.0	9.7	346
Mardan	18.3	51.6	14.5	373	29.7	74.0	8.9	56.3	106	21.6	56.6	13.3	505
Nowshera	17.8	45.8	14.5	207	38.8	76.8	21.1	70.7	74	23.1	53.9	16.2	285
Peshawar	20.1	42.1	16.9	614	41.1	76.3	16.4	70.9	241	26.5	51.7	16.8	880
Shangla	6.3	27.6	5.0	95	(*)	(*)	(*)	(*)	7	6.6	30.8	4.7	105
Swabi	7.2	33.7	5.4	235	(11.0)	(72.3)	(1.7)	(70.5)	43	8.3	39.7	4.8	295
Swat	24.0	50.9	19.2	350	50.5	67.7	19.2	59.3	75	29.5	53.9	19.2	445
Tank	4.1	41.5	2.2	74	(13.4)	(74.7)	(5.9)	(69.0)	14	5.5	46.9	2.8	90
Tor Ghar	3.3	23.8	0.6	47	(*)	(*)	(*)	(*)	3	5.2	26.4	0.5	51
Upper Dir	4.9	30.1	4.1	173	28.8	69.2	-	39.8	38	10.4	37.1	3.3	225

[1] **MICS indicator 2.17a - Minimum acceptable diet (breastfed)**
[2] **MICS indicator 2.17b - Minimum acceptable diet (non-breastfed)**
[3] **MICS 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**
( ) **Figures that are based on 25-49 unweighted cases**
(*) **Figures that are based on fewer than 25 unweighted cases**
[a] Minimum dietary diversity is defined as receiving foods from at least 4 of 7 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 2 times or more daily for children age 6-8 months and 3 times or more daily for children age 9-23 months. For non-breastfeeding children age 6-23 months it is defined as receiving solid, semi-solid or soft foods, or milk feeds, at least 4 times.

Table D. NU.8: Infant and young child feeding (IYCF) practices

Percentage of children age 6-23 months who received appropriate liquids and solid, semi-solid, or soft foods the minimum number of times or more during the previous day, by breastfeeding status, Khyber Pakhtunkhwa, 2016-17

	Currently breastfeeding				Currently not breastfeeding					All			
	Percent of children who received:			Number of children age 6-23 months	Percent of children who received:				Number of children age 6-23 months	Percent of children who received:			Number of children age 6-23 months
	Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet [1,c]		Minimum dietary diversity[a]	Minimum meal frequency[b]	Minimum acceptable diet[2,c]	At least 2 milk feeds[3]		Minimum dietary diversity[4,a]	Minimum meal frequency[5,b]	Minimum acceptable diet[c]	

[c] The minimum acceptable diet for breastfed children age 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 2 milk feedings and that the minimum dietary diversity is achieved without counting milk feeds.

Table D. NU.9: Bottle feeding

Percentage of children age 0-23 months who were fed with a bottle with a nipple during the previous day, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 0-23 months fed with a bottle with a nipple[1]	Number of children age 0-23 months
KP	28.8	8,480
District		
Abbottabad	46.0	368
Bannu	38.9	425
Batagram	19.8	179
Buner	14.1	240
Charsadda	20.1	469
Chitral	12.6	125
D.I. Khan	32.2	575
Hangu	42.8	153
Haripur	50.6	264
Karak	33.0	177
Kohat	34.9	264
Kohistan	7.8	184
Lakki Marwat	34.0	193
Lower Dir	17.8	347
Malakand Protected Area	23.2	217
Mansehra	38.2	448
Mardan	21.7	658
Nowshera	26.8	392
Peshawar	34.3	1,147
Shangla	8.5	137
Swabi	32.8	387
Swat	24.8	616
Tank	23.0	130
Tor Ghar	10.1	69
Upper Dir	18.4	316

[1] MICS indicator 2.18 - Bottle feeding

Table D. NU.10: Iodized salt consumption

Percent distribution of households by consumption of iodized salt, Khyber Pakhtunkhwa, 2016-17

| | Percentage of households in which salt was tested | Number of households | Percent of households with: | | | | | Number of households in which salt was tested or with no salt |
| | | | | Salt test result | | | | |
			No salt	Not iodized 0 PPM	>0 and <15 PPM	15+ PPM1	Total	
KP	99.5	20,995	0.2	34.2	36.2	29.3	100.0	20,940
District								
Abbottabad	99.6	1,216	0.1	13.6	53.2	33.2	100.0	1,212
Bannu	99.1	719	.5	48.9	29.7	20.9	100.0	716
Batagram	99.7	361	.3	19.7	60.9	19.2	100.0	361
Buner	99.5	542	.2	40.1	39.5	20.2	100.0	540
Charsadda	99.8	1,221	.0	47.6	35.7	16.7	100.0	1,219
Chitral	99.5	386	.1	17.9	19.6	62.3	100.0	385
D.I. Khan	99.8	1,097	0.0	21.8	30.7	47.4	100.0	1,095
Hangu	100.0	256	0.0	47.9	36.7	15.4	100.0	256
Haripur	99.2	905	.3	16.7	57.2	25.8	100.0	901
Karak	100.0	402	0.0	59.2	11.0	29.8	100.0	402
Kohat	99.7	753	.2	43.4	30.0	26.3	100.0	752
Kohistan	99.4	447	.4	34.9	40.6	24.1	100.0	446
Lakki Marwat	99.2	476	.6	51.1	32.4	15.9	100.0	475
Lower Dir	99.7	862	.3	38.3	39.2	22.2	100.0	862
Malakand Protected Area	100.0	473	0.0	27.9	33.5	38.6	100.0	473
Mansehra	98.9	1,246	.7	16.0	40.3	43.0	100.0	1,241
Mardan	99.6	1,452	.1	32.1	35.6	32.2	100.0	1,448
Nowshera	99.1	1,039	.8	37.2	27.9	34.2	100.0	1,038
Peshawar	99.1	2,997	.3	42.7	31.2	25.8	100.0	2,979
Shangla	99.7	465	0.2	46.0	33.7	20.1	100.0	465
Swabi	99.9	1,194	0.1	38.1	31.0	30.8	100.0	1,194
Swat	99.7	1,409	-	30.7	35.8	33.5	100.0	1,404
Tank	99.5	255	-	26.6	41.3	32.0	100.0	253
Tor Ghar	99.5	161	0.5	55.6	31.2	12.7	100.0	161
Upper Dir	99.7	662	0.1	30.1	48.4	21.4	100.0	661

1 MICS indicator 2.19 - Iodized salt consumption

Table D. NU.11: Children's vitamin A supplementation

Percent distribution of children age 6-59 months by receipt of a high dose vitamin A supplement in the last 6 months, Khyber Pakhtunkhwa, 2016-17.

	Percentage of children who received Vitamin A during the last 6 months[1]	Number of children age 6-59 months
KP	66.8	18,354
District		
Abbottabad	59.5	776
Bannu	75.6	837
Batagram	27.3	379
Buner	42.2	498
Charsadda	83.2	922
Chitral	62.1	240
D.I. Khan	80.7	1,318
Hangu	48.4	334
Haripur	81.1	600
Karak	45.0	375
Kohat	58.4	602
Kohistan	14.4	598
Lakki Marwat	78.1	423
Lower Dir	45.5	724
Malakand Protected Area	91.0	469
Mansehra	78.3	952
Mardan	85.7	1,366
Nowshera	55.5	813
Peshawar	74.1	2,526
Shangla	8.0	371
Swabi	79.6	830
Swat	71.0	1,290
Tank	78.2	285
Tor Ghar	26.9	158
Upper Dir	62.4	668

[1] MICS indicator 2.21 - Vitamin A supplementation

Table D.CH.2: Vaccinations by background characteristics

Percentage of children age 12-23 months currently vaccinated against vaccine preventable childhood diseases, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 12-23 months who received:											Percentage with vaccination card seen	Number of children age 12-23 months	Percentage of children age 24-35 months who received:			Percentage with vaccination card seen	Number of children age 24-35 months
	BCG	Polio 0	Polio 1	Polio 2	Polio 3	Penta 1	Penta 2	Penta 3	Measles 1	Full [a]	None			Measles 2	Full [a]	None		
KP	72.3	76.7	69.5	60.4	55.4	66.8	59.3	51.7	54.5	39.7	18.9	48.7	4,049	20.9	31.4	25.2	28.6	3,926
District																		
Abbottabad	92.1	89.8	86.1	81.7	72.6	86.3	83.9	78.5	83.0	62.2	6.0	45.9	195	17.0	59.2	4.3	22.1	176
Bannu	33.1	39.5	37.4	27.5	24.9	33.4	21.1	11.8	20.5	9.0	55.4	24.5	163	6.3	6.7	59.8	14.7	183
Batagram	55.1	62.3	79.1	69.7	68.7	51.1	38.5	33.9	44.1	31.2	12.5	34.8	87	15.5	15.5	18.3	19.5	75
Buner	66.5	67.3	63.2	55.1	52.3	63.2	55.4	51.8	45.0	40.0	31.4	58.1	107	23.1	28.7	37.5	34.6	110
Charsadda	83.7	79.7	58.5	51.4	48.7	73.8	69.9	52.0	64.4	40.6	16.0	45.2	195	13.4	24.3	22.4	19.9	186
Chitral	90.9	92.1	88.9	84.3	78.5	89.1	86.0	81.4	87.5	69.3	6.4	73.6	65	40.0	54.1	8.1	49.6	43
D.I. Khan	44.5	51.4	29.1	22.6	16.1	37.8	29.9	19.1	25.9	10.8	46.8	19.0	269	8.6	8.7	47.5	10.9	302
Hangu	65.2	83.7	65.6	45.2	41.2	54.3	49.5	41.5	51.6	31.5	15.1	34.6	75	16.7	23.0	18.0	22.7	75
Haripur	90.1	88.7	91.2	90.1	81.3	87.6	82.5	75.1	77.5	65.8	6.1	65.3	107	55.9	83.6	5.8	58.8	151
Karak	40.1	51.9	49.7	33.3	25.0	25.4	20.5	14.2	31.1	10.1	43.8	19.9	87	2.1	4.3	52.3	9.6	79
Kohat	67.0	81.7	71.9	56.6	51.6	63.1	57.1	48.7	49.8	34.6	11.3	44.4	137	26.1	29.7	13.7	29.2	128
Kohistan	9.6	39.3	51.4	45.7	37.6	5.2	5.0	4.6	5.2	1.7	42.6	.5	98	0.0	5.6	35.4	0.0	156
Lakki Marwat	27.5	52.2	65.3	58.6	55.0	24.6	12.3	5.9	13.8	2.1	30.7	12.5	90	1.8	2.9	38.3	5.7	87
Lower Dir	80.0	81.1	79.0	71.7	64.4	71.7	61.0	55.5	55.3	42.4	17.5	56.6	189	14.7	33.1	27.4	36.3	144
Malakand Protected Area	79.3	77.1	65.7	58.7	54.3	70.3	65.5	53.9	59.5	45.9	18.4	51.5	99	38.5	43.4	14.5	42.9	108
Mansehra	78.1	86.2	86.0	82.4	75.2	74.3	66.1	60.2	56.4	46.7	8.5	54.2	221	39.1	52.7	22.1	47.5	206
Mardan	93.3	92.8	84.2	75.0	71.1	88.4	81.2	74.8	71.1	58.8	6.5	65.3	334	36.3	51.6	10.6	49.0	290
Nowshera	88.4	87.7	80.1	74.4	72.4	83.7	77.2	70.7	68.6	57.5	8.4	69.6	177	28.6	50.3	18.3	47.7	160
Peshawar	82.7	82.7	69.3	56.7	53.2	74.7	63.2	56.8	58.4	40.4	15.4	58.8	581	14.4	23.6	27.5	21.3	466
Shangla	33.5	61.7	62.9	36.6	30.4	18.2	8.7	4.8	15.4	2.7	24.8	10.1	77	1.6	2.1	31.6	3.8	93
Swabi	89.8	88.3	83.4	67.6	65.2	88.1	81.7	66.4	74.5	56.1	8.1	62.2	189	39.3	45.6	10.5	42.4	169
Swat	91.0	91.2	82.8	76.9	72.3	88.1	85.7	80.4	75.1	63.6	7.1	77.2	281	33.3	41.5	14.9	46.5	274
Tank	41.0	46.4	23.8	18.1	16.3	32.5	26.6	15.1	23.3	7.4	52.2	14.7	66	0.9	1.3	46.7	7.3	67
Tor Ghar	7.7	40.2	55.2	45.5	35.3	8.8	5.2	3.9	5.2	-	35.8	2.9	29	0.7	2.8	22.6	3.1	38
Upper Dir	72.6	82.0	76.4	64.6	55.0	67.3	53.8	44.7	48.9	31.6	15.7	48.8	129	11.9	27.6	26.7	21.9	159

[a] Includes: *BCG, Polio3, DPT3, HepB3, Hib3, and Measles (MCV1)* as per the vaccination schedule in Khyber Pakhtunkhwa

Table D. CH.3: Neonatal tetanus protection

Percentage of women age 15-49 years with a live birth in the last 2 years protected against neonatal tetanus, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who received at least 2 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 2 years
		2 doses, the last within prior 3 years	3 doses, the last within prior 5 years	4 doses, the last within prior 10 years	5 or more doses during lifetime		
KP	51.8	2.6	0.7	0.5	0.1	55.7	8,365
District							
Abbottabad	69.6	1.5	0.0	0.0	0.0	71.1	364
Bannu	34.7	2.4	1.0	0.0	0.0	38.0	413
Batagram	32.1	2.8	0.0	.5	0.0	35.4	183
Buner	61.5	1.8	0.0	.8	.2	64.2	243
Charsadda	70.0	5.3	.7	1.6	0.0	77.6	454
Chitral	40.9	.6	0.0	0.0	0.0	41.5	127
D.I. Khan	39.3	2.4	.3	.3	.3	42.6	559
Hangu	59.2	1.5	0.0	.3	0.0	61.0	149
Haripur	65.5	6.9	.9	0.0	0.0	73.3	256
Karak	28.8	1.5	0.0	0.0	0.0	30.3	168
Kohat	48.1	4.5	.2	.6	0.0	53.4	275
Kohistan	2.3	.2	0.0	0.0	0.0	2.4	179
Lakki Marwat	23.4	1.9	1.2	.5	0.0	27.0	190
Lower Dir	42.0	1.8	.5	.5	.1	45.0	336
Malakand Protected Area	76.5	3.0	0.0	.6	.4	80.5	213
Mansehra	59.7	2.2	.2	.2	0.0	62.3	453
Mardan	67.7	2.6	.3	.7	0.0	71.3	627
Nowshera	45.9	7.0	4.3	0.0	1.4	58.6	384
Peshawar	54.9	2.3	.8	1.0	.1	59.2	1,130
Shangla	9.1	2.1	0.0	0.0	0.0	11.1	150
Swabi	62.6	1.4	0.4	0.6	0.0	64.9	389
Swat	68.6	1.4	1.0	0.3	0.0	71.3	614
Tank	41.5	2.0	2.4	0.0	0.3	46.2	125
Tor Ghar	5.7	0.0	0.0	0.0	0.0	5.7	71
Upper Dir	40.6	1.4	0.4	0.0	0.0	42.4	314

[1] **MICS indicator 3.9 - Neonatal tetanus protection**

Table D. CH.4: Reported disease episodes

Percentage of children age 0-59 months for whom the mother/caretaker reported an episode of diarrhoea, symptoms of acute respiratory infection (ARI), and/or fever in the last two weeks, Khyber Pakhtunkhwa, 2016-17

| | Percentage of children who in the last two weeks had: | | | |
	An episode of diarrhoea	Symptoms of ARI	An episode of fever	Number of children age 0-59 months
KP	21.4	20.2	34.7	20,926
District				
Abbottabad	20.8	8.5	44.9	882
Bannu	29.5	18.9	36.9	1,009
Batagram	28.9	29.6	48.7	442
Buner	12.8	12.9	26.5	570
Charsadda	15.6	12.3	30.1	1,081
Chitral	14.5	12.4	28.0	269
D.I. Khan	19.6	11.5	29.8	1,495
Hangu	21.3	21.8	39.7	380
Haripur	14.2	11.5	32.3	678
Karak	21.5	31.9	38.4	436
Kohat	20.3	23.2	38.2	676
Kohistan	22.5	13.7	18.1	669
Lakki Marwat	26.2	13.9	26.7	495
Lower Dir	17.1	26.2	30.4	816
Malakand Protected Area	17.1	30.9	42.4	525
Mansehra	22.9	21.3	48.5	1,071
Mardan	24.7	30.1	36.1	1,551
Nowshera	29.2	29.1	44.4	939
Peshawar	21.7	22.8	37.0	2,829
Shangla	5.6	3.6	15.6	417
Swabi	21.9	17.2	25.3	935
Swat	24.6	29.4	37.5	1,474
Tank	17.3	8.1	19.8	333
Tor Ghar	19.6	12.4	26.2	179
Upper Dir	22.0	20.4	32.5	774

Table D. CH.5: Care-seeking during diarrhea

Percentage of children age 0-59 months with diarrhoea in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Khyber Pakhtunkhwa , 2016-17

	An episode of diarrhoea	Number of children age 0-59 months	Percentage of children with diarrhoea for whom:						Number of children age 0-59 months with diarrhoea in the last two weeks
			Advice or treatment was sought from:						
			Health facilities or providers				A health facility or provider[1, b]	No advice or treatment sought	
			Public	Private	Community health provider[a]	Other source			
KP	21.4	20,926	15.1	41.8	0.2	9.6	51.1	34.3	4,469
District									
Abbottabad	20.8	882	22.1	32.8	0.7	10.7	54.9	36.2	184
Bannu	29.5	1,009	12.5	44.0	0.0	14.2	56.4	29.4	298
Batagram	28.9	442	11.1	52.5	0.0	13.8	49.0	22.9	128
Buner	12.8	570	12.7	52.9	0.0	5.5	57.9	28.9	73
Charsadda	15.6	1,081	14.5	42.8	0.0	1.9	49.2	40.7	169
Chitral	14.5	269	13.5	18.0	0.0	2.1	23.5	66.5	39
D.I. Khan	19.6	1,495	13.0	55.0	1.1	10.9	61.5	23.0	293
Hangu	21.3	380	11.9	55.9	0.0	7.6	63.6	25.6	81
Haripur	14.2	678	24.8	24.2	2.8	6.3	48.6	45.1	96
Karak	21.5	436	11.9	52.3	.1	19.3	47.3	16.5	94
Kohat	20.3	676	14.0	57.4	0.0	.8	61.6	27.8	137
Kohistan	22.5	669	15.8	14.0	0.0	5.4	27.5	64.7	151
Lakki Marwat	26.2	495	18.7	36.0	1.7	18.2	50.7	28.7	130
Lower Dir	17.1	816	1.0	39.5	0.0	23.4	31.1	36.1	140
Malakand Protected Area	17.1	525	22.1	30.1	.7	11.4	48.5	37.3	90
Mansehra	22.9	1,071	12.5	39.0	.2	10.8	45.6	38.2	245
Mardan	24.7	1,551	9.8	48.5	0.0	5.7	52.6	36.5	384
Nowshera	29.2	939	22.2	38.5	0.0	9.4	55.8	29.9	274
Peshawar	21.7	2,829	18.7	47.2	0.0	3.9	60.3	30.6	613
Shangla	5.6	417	(7.7)	(52.4)	(0.0)	(20.9)	(52.5)	(25.3)	23
Swabi	21.9	935	12.5	37.0	0.0	18.8	47.2	34.3	204
Swat	24.6	1,474	14.4	37.3	0.0	8.3	42.4	41.8	362
Tank	17.3	333	21.0	34.5	0.0	22.9	49.1	22.9	57
Tor Ghar	19.6	179	17.2	28.3	0.0	5.3	44.4	49.1	35
Upper Dir	22.0	774	17.5	32.4	0.0	10.5	44.4	41.0	170

[1] **MICS indicator 3.10 - Care-seeking for diarrhea**
( ) Figures that are based on 25-49 unweighted cases

[a] **Community health providers includes 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 private pharmacy**

Table D. CH.6: Feeding practices during diarrhea

Percent distribution of children age 0-59 months with diarrhoea in the last two weeks by amount of liquids and food given during episode of diarrhoea, Khyber Pakhtunkhwa , 2016-17

	Had diarrhoea in last two weeks	Number of children age 0-59 months	Drinking practices during diarrhoea:							Eating practices during diarrhoea:							Number of children aged 0-59 months with diarrhoea
			Child was given to drink: Much less	Child was given to drink: Somewhat less	Child was given to drink: About the same	Child was given to drink: More	Child was given to drink: Nothing	DK/ Missing	Total	Child was given to eat: Much less	Child was given to eat: Somewhat less	Child was given to eat: About the same	Child was given to eat: More	Child was given to eat: Nothing	Missing /DK	Total	
KP	21.4	20,926	9.3	33.6	45.6	5.6	4.5	1.4	100.0	10.4	36.6	41.3	2.5	8.2	0.9	100.0	4,469
District																	
Abbottabad	20.8	882	8.2	46.4	31.1	9.2	4.5	0.7	100.0	9.1	51.1	28.7	0.0	9.7	1.4	100.0	184
Bannu	29.5	1,009	2.6	33.8	59.7	1.1	1.1	1.7	100.0	1.8	53.2	38.4	0.0	4.7	1.9	100.0	298
Batagram	28.9	442	4.6	27.7	31.7	29.9	6.1	0.0	100.0	7.3	27.3	45.2	10.2	9.9	0.0	100.0	128
Buner	12.8	570	8.0	30.5	56.2	3.1	1.2	1.1	100.0	2.2	30.6	57.1	6.0	4.2	0.0	100.0	73
Charsadda	15.6	1,081	1.4	48.4	43.5	2.4	4.3	0.0	100.0	6.2	47.5	38.4	1.9	6.1	0.0	100.0	169
Chitral	14.5	269	10.3	14.8	61.4	5.4	8.1	0.0	100.0	9.9	11.8	52.2	1.7	16.4	8.0	100.0	39
D.I. Khan	19.6	1,495	5.5	40.1	47.8	5.1	.8	.8	100.0	9.0	41.9	37.2	2.9	9.0	0.0	100.0	293
Hangu	21.3	380	9.7	55.5	31.8	2.4	.6	0.0	100.0	12.1	53.3	29.8	1.6	2.7	.6	100.0	81
Haripur	14.2	678	6.3	27.8	53.3	9.8	2.7	0.0	100.0	13.8	22.9	45.6	1.3	16.4	0.0	100.0	96
Karak	21.5	436	14.8	26.8	51.0	4.6	2.7	.1	100.0	19.7	23.1	53.8	.7	2.6	.1	100.0	94
Kohat	20.3	676	2.1	37.6	48.6	7.7	4.0	0.0	100.0	5.0	36.2	46.1	8.9	3.8	0.0	100.0	137
Kohistan	22.5	669	8.9	42.1	38.0	8.4	.7	1.9	100.0	15.7	46.9	28.7	2.2	6.4	.1	100.0	151
Lakki Marwat	26.2	495	26.8	20.0	51.6	1.6	0.0	0.0	100.0	25.8	28.3	32.6	.7	12.6	0.0	100.0	130
Lower Dir	17.1	816	6.3	35.6	39.7	.1	18.2	0.0	100.0	8.2	34.5	42.1	0.0	15.1	0.0	100.0	140
Malakand Protected Area	17.1	525	8.6	38.5	39.6	6.7	6.6	0.0	100.0	7.1	45.5	37.8	4.1	5.2	.2	100.0	90
Mansehra	22.9	1,071	10.0	43.2	43.5	3.3	0.0	0.0	100.0	10.0	46.0	39.9	2.8	1.4	0.0	100.0	245
Mardan	24.7	1,551	19.8	25.6	41.6	4.4	3.2	5.4	100.0	17.7	23.0	41.1	3.4	14.4	.4	100.0	384
Nowshera	29.2	939	4.6	20.8	56.3	5.5	12.3	.5	100.0	6.8	30.7	46.2	2.8	13.5	0.0	100.0	274
Peshawar	21.7	2,829	10.1	31.4	46.8	3.0	7.1	1.7	100.0	9.9	34.3	43.6	2.6	8.0	1.6	100.0	613
Shangla	5.6	417	22.2	36.1	22.9	14.2	0.0	4.6	100	(30.4)	(35.9)	(28.9)	(0.0)	(4.7)	(0.0)	(100)	23
Swabi	21.9	935	25.1	38.7	31.1	4.7	0.3	0.0	100	26.5	39.8	27.8	1.8	4.1	0.0	100	204
Swat	24.6	1,474	3.4	22.0	52.8	10.1	7.1	4.6	100	2.7	23.9	59.9	2.2	6.5	4.8	100	362
Tank	17.3	333	3.3	50.7	43.2	2.3	0.2	0.2	100	2.9	64.9	29.1	1.5	1.6	0.0	100	57
Tor Ghar	19.6	179	4.1	44.4	31.0	17.7	2.8	0.0	100	9.3	44.3	33.4	6.5	6.4	0.0	100	35
Upper Dir	22.0	774	10.8	37.8	43.9	3.7	3.7	0.0	100	11.6	37.1	40.1	0.0	11.1	0.0	100	170

( ) Figures that are based on 25-49 unweighted cases

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

Percentage of children age 0-59 months with diarrhoea in the last two weeks, and treatment with oral rehydration salts (ORS), recommended homemade fluids, and zinc, Khyber Pakhtunkhwa , 2016-17

	Percentage of children with diarrhoea who received:											
	Oral rehydration salts (ORS)			Recommended homemade fluids				Zinc				
	Fluid from packet	Pre-packaged fluid	Any ORS	Homemade fluid (Boiled water, sugar & salt)	Others	Any recommended homemade fluid	ORS or any recommended homemade fluid	Tablet	Syrup	Any zinc	ORS and zinc [1]	Number of children aged 0-59 months with diarrhoea
KP	25.7	12.4	32.1	10.2	7.8	15.4	38.0	2.1	15.9	16.4	6.9	4,469
District												
Abbottabad	49.3	4.9	49.3	26.2	8.2	33.1	62.4	-	4.4	4.4	2.9	184
Bannu	26.5	12.8	32.9	5.6	3.6	9.2	37.1	.6	3.7	3.7	2.4	298
Batagram	28.7	12.6	36.5	16.0	9.3	20.5	43.9	.5	10.6	11.1	4.3	128
Buner	35.5	16.7	39.5	9.0	21.3	26.6	43.1	0.0	13.0	13.0	5.6	73
Charsadda	32.3	2.5	34.4	9.8	4.0	11.4	40.6	0.0	9.1	9.1	5.2	169
Chitral	24.1	6.9	24.8	6.9	6.4	13.3	30.3	0.0	1.1	1.1	.6	39
D.I. Khan	20.9	3.5	22.3	5.5	22.1	26.8	32.6	2.6	14.4	14.4	7.1	293
Hangu	24.7	25.4	34.7	14.8	9.5	19.6	42.1	2.9	17.2	18.9	7.5	81
Haripur	39.5	7.6	44.1	20.0	17.6	31.2	62.3	6.7	37.0	38.0	21.0	96
Karak	28.0	11.6	33.9	6.8	6.9	10.3	34.9	2.8	25.7	25.7	14.2	94
Kohat	22.3	13.7	28.2	6.4	6.5	9.7	32.9	.9	8.6	9.4	3.4	137
Kohistan	26.2	8.4	28.4	16.2	10.6	16.8	36.7	1.5	9.9	9.9	6.6	151
Lakki Marwat	22.5	4.0	24.1	2.3	3.9	6.2	24.8	1.2	25.4	26.1	7.4	130
Lower Dir	16.2	17.1	31.3	7.4	1.8	7.4	37.1	2.0	17.1	19.0	6.6	140
Malakand Protected Area	19.5	16.5	34.5	11.7	7.1	18.5	38.8	1.9	25.0	26.1	11.4	90
Mansehra	29.2	12.4	34.6	22.4	3.9	22.7	51.2	2.1	2.1	2.3	2.1	245
Mardan	22.2	11.2	29.5	3.7	3.1	6.8	31.5	5.2	24.5	25.6	10.9	384
Nowshera	19.2	9.7	24.1	2.5	4.8	6.4	28.7	1.2	14.4	14.4	4.9	274
Peshawar	25.2	17.2	31.2	13.0	8.5	15.4	34.3	2.8	19.6	20.8	6.9	613
Shangla	(35.8)	(5.8)	(38.9)	(8.8)	(22.0)	(28.9)	(44.4)	(0.0)	(17.0)	(17.0)	(17.0)	23
Swabi	17.8	20.5	37.2	7.7	4.7	10.0	41.8	1.3	11.1	11.5	8.1	204
Swat	30.1	18.1	39.3	11.7	5.8	16.7	41.0	3.2	34.3	34.7	11.7	362
Tank	9.2	0.8	9.9	4.0	19.8	20.2	24.0	1.4	9.2	9.2	1.8	57
Tor Ghar	28.0	5.7	28.0	20.7	2.9	23.0	46.6	1.2	3.1	4.2	1.8	35
Upper Dir	20.6	17.2	28.5	6.0	9.3	13.3	32.1	0.1	8.3	8.3	3.3	170

[1] MICS indicator 3.11 - Diarrhoea treatment with oral rehydration salts (ORS) and zinc

( ) Figures that are based on 25-49 unweighted cases

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

Percentage of children age 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, Khyber Pakhtunkhwa , 2016-17

					Children with diarrhoea who were given:											Number of children age 0-59 months with diarrhoea in the last two weeks
			ORT (ORS or recommended homemade fluids or increased fluids)						Other treatment:							
	Zinc	ORS or increased fluids		ORT with continued feeding [1]	Pill or syrup: Antibiotic	Pill or syrup: Antimotility	Pill or syrup: Other	Pill or syrup: Unknown	Injection: Antibiotic	Injection: Non-antibiotic	Injection: Unknown	Intravenous	Home remedy, herbal medicine	Other	Not given any treatment or drug	
KP	16.4	34.8	40.0	32.9	6.1	27.1	0.9	5.7	3.1	0.1	3.0	0.9	6.9	17.6	16.0	4,469
District																
Abbottabad	4.4	50.6	62.8	53.7	5.2	11.9	0.0	1.5	0.9	0.0	1.1	0.4	24.1	18.4	13.7	184
Bannu	3.7	32.9	37.1	32.1	0.0	41.3	0.0	4.9	.5	0.0	.9	0.0	4.2	31.8	10.4	298
Batagram	11.1	52.2	55.5	47.4	1.1	35.7	2.8	9.8	1.2	0.0	5.0	1.5	3.9	5.7	15.2	128
Buner	13.0	41.8	45.3	43.9	15.2	25.3	1.7	0.0	15.0	0.0	3.6	0.0	5.0	11.5	12.8	73
Charsadda	9.1	36.8	43.0	37.1	1.5	25.9	0.0	2.6	.7	.4	1.2	0.0	2.4	8.0	32.9	169
Chitral	1.1	26.5	32.1	27.5	2.3	14.2	0.0	5.5	1.1	0.0	1.2	0.0	1.2	8.2	40.9	39
D.I. Khan	14.4	25.5	35.0	29.7	5.7	19.6	0.0	13.8	2.2	0.0	1.1	0.0	9.8	27.9	15.1	293
Hangu	18.9	35.7	42.5	34.8	5.4	42.2	1.3	4.6	2.3	0.0	5.9	.5	.5	13.9	15.5	81
Haripur	38.0	53.4	66.6	48.1	9.4	16.0	1.0	.9	1.0	0.0	.5	1.4	7.1	14.2	9.2	96
Karak	25.7	35.7	36.7	27.7	0.0	3.2	1.2	0.0	1.1	0.0	6.0	2.2	0.0	39.4	26.6	94
Kohat	9.4	32.6	35.9	30.9	2.0	47.6	0.0	0.0	.7	0.0	8.2	1.4	2.5	20.8	11.3	137
Kohistan	9.9	29.6	37.2	26.5	.8	19.4	0.0	11.7	2.4	2.0	1.2	2.0	17.9	12.2	24.1	151
Lakki Marwat	26.1	25.4	26.1	16.4	1.6	23.5	.6	4.2	2.4	0.0	7.7	1.2	3.0	22.2	17.7	130
Lower Dir	19.0	31.3	37.1	27.5	.7	25.6	8.1	6.1	3.7	0.0	3.1	1.5	2.2	10.5	12.0	140
Malakand Protected Area	26.1	34.7	39.0	34.0	5.0	36.9	1.6	1.0	2.6	0.0	.4	.5	1.8	9.8	27.8	90
Mansehra	2.3	35.5	51.2	44.8	5.9	30.1	0.0	8.8	1.5	0.0	1.1	.5	11.7	11.6	14.6	245
Mardan	25.6	33.3	34.6	24.8	15.0	29.4	.2	7.4	5.8	0.0	2.6	2.2	1.0	16.0	20.1	384
Nowshera	14.4	28.3	32.0	28.7	19.5	27.8	.6	2.6	8.1	.5	1.7	.9	1.6	14.6	17.7	274
Peshawar	20.8	33.3	35.5	30.3	8.3	29.1	.4	6.5	2.2	0.0	3.7	.7	11.5	14.8	10.0	613
Shangla	(17.0)	(41.9)	(47.4)	(30.1)	(0.0)	(12.1)	(3.1)	(7.7)	(8.0)	(0.0)	(13.5)	(3.1)	(0.0)	(25.8)	(5.7)	23
Swabi	11.5	41.2	45.1	28.9	0.0	7.6	1.2	1.3	4.0	0.5	6.6	2.4	8.0	40.9	15.0	204
Swat	34.7	40.9	42.6	39.0	3.6	31.6	2.3	5.3	3.1	0.0	1.4	0.9	6.2	7.8	10.3	362
Tank	9.2	10.1	24.2	22.9	1.1	45.1	1.1	16.9	13.8	0.0	1.2	0.0	7.6	17.7	6.5	57
Tor Ghar	4.2	35.0	53.5	39.5	-	12.5	0.8	1.8	2.1	0.0	0.0	0.0	10.8	15.1	27.4	35
Upper Dir	8.3	30.5	34.1	26.5	8.3	27.6	0.0	6.0	1.9	0.0	7.3	0.0	5.0	17.6	26.0	170

[1] MICS indicator 3.12 - Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding   ( ) Figures that are based on 25-49 unweighted cases

Percentage of children age 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, Khyber Pakhtunkhwa , 2016-17

| | Percentage of children who were given as treatment for diarrhoea: | | Number of children age 0-59 months with diarrhoea in the last two weeks | Percentage of children for whom the source of ORS was: | | | | | | Number of children age 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 age 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	Community health provider[a]	Other source	DK/ Missing	A health facility or provider[b]		Public	Private	Community health provider[a]	Other source	A health facility or provider[b]	
KP	32.1	16.4	4,469	17.5	59.7	1.2	22.1	0.6	77.3	1,433	10.9	56.3	1.0	32.8	67.2	733
District																
Abbottabad	49.3	4.4	184	27.0	49.4	2.7	23.6	0.0	76.4	91	(*)	(*)	(*)	(*)	(*)	8
Bannu	32.9	3.7	298	11.0	54.5	0.0	30.6	4.0	65.5	98	2.3	44.7	0.0	53.0	47.0	11
Batagram	36.5	11.1	128	6.8	81.9	0.0	10.6	.7	88.7	47	7.1	72.2	0.0	20.7	79.3	14
Buner	39.5	13.0	73	6.0	94.0	0.0	0.0	0.0	100.0	29	8.9	83.3	0.0	7.8	92.2	10
Charsadda	34.4	9.1	169	12.0	65.4	1.0	22.6	0.0	77.4	58	4.0	55.1	4.0	40.9	59.1	15
Chitral	24.8	1.1	39	0.0	81.7	0.0	18.3	0.0	81.7	10	0.0	100.0	0.0	0.0	100.0	
D.I. Khan	22.3	14.4	293	14.1	61.9	0.0	24.0	0.0	76.0	65	27.2	41.9	8.6	30.9	69.1	42
Hangu	34.7	18.9	81	18.8	66.8	0.0	13.6	.8	85.5	28	6.0	87.9	0.0	6.0	94.0	15
Haripur	44.1	38.0	96	45.5	48.5	7.4	6.1	0.0	93.9	42	37.5	49.6	1.4	12.9	87.1	36
Karak	33.9	25.7	94	11.4	83.6	.3	5.0	0.0	95.0	32	3.5	96.5	0.0	0.0	100.0	24
Kohat	28.2	9.4	137	23.2	73.4	4.0	3.4	0.0	96.6	39	9.8	81.3	0.0	8.9	91.1	13
Kohistan	28.4	9.9	151	27.2	44.8	0.0	28.0	0.0	72.0	43	6.3	52.1	0.0	41.5	58.5	15
Lakki Marwat	24.1	26.1	130	18.9	43.0	5.5	38.0	0.0	62.0	31	14.2	33.2	6.5	52.5	47.5	34
Lower Dir	31.3	19.0	140	0.0	76.5	0.0	23.5	0.0	76.5	44	.8	63.9	0.0	35.3	64.7	27
Malakand Protected Area	34.5	26.1	90	11.2	47.3	1.8	41.5	0.0	58.5	31	7.6	28.4	0.0	64.0	36.0	23
Mansehra	34.6	2.3	245	7.5	55.8	0.0	36.2	.5	63.3	85	0.0	18.2	0.0	81.8	18.2	6
Mardan	29.5	25.6	384	7.4	64.0	0.0	25.7	2.9	71.4	113	5.0	78.5	0.0	16.5	83.5	98
Nowshera	24.1	14.4	274	24.7	48.5	6.1	26.9	0.0	73.1	66	11.2	63.5	0.0	25.3	74.7	39
Peshawar	31.2	20.8	613	27.0	58.7	0.0	14.3	0.0	85.7	192	8.3	52.6	0.0	39.2	60.8	128
Shangla	(38.9)	(17.0)	23	(*)	(*)	(*)	(*)	(*)	(*)	9	(*)	(*)	(*)	(*)	(*)	4
Swabi	37.2	11.5	204	18.4	54.8	3.6	25.6	1.3	73.2	76	(*)	(*)	(*)	(*)	(*)	24
Swat	39.3	34.7	362	17.2	62.4	-	20.4	0.0	79.6	142	10.2	41.9	0.0	47.9	52.1	125
Tank	9.9	9.2	57	(*)	(*)	(*)	(*)	(*)	(*)	6	(*)	(*)	(*)	(*)	(*)	5

Table D. CH.9: Source of ORS and zinc

Percentage of children age 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, Khyber Pakhtunkhwa , 2016-17

| | Percentage of children who were given as treatment for diarrhoea: | | Number of children age 0-59 months with diarrhoea in the last two weeks | Percentage of children for whom the source of ORS was: | | | | | | Number of children age 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 age 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	Community health provider [a]	Other source	DK/ Missing	A health facility or provider [b]		Public	Private	Community health provider[a]	Other source	A health facility or provider [b]	
KP	32.1	16.4	4,469	17.5	59.7	1.2	22.1	0.6	77.3	1,433	10.9	56.3	1.0	32.8	67.2	733
Tor Ghar	28.0	4.2	35	(46.5)	(48.2)	(0.0)	(5.3)	(0.0)	(94.7)	10	(*)	(*)	(*)	(*)	(*)	1
Upper Dir	28.5	8.3	170	19.2	51.1	1.4	29.5	0.1	70.4	48	(*)	(*)	(*)	(*)	(*)	14

[a] Community health provider includes 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
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

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

Percentage of children age 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, Khyber Pakhtunkhwa , 2016-17

	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 age 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:				A health facility or provider[1, b]	No advice or treatment sought			Health facilities or providers				A health facility or provider[c]	
	Health facilities or providers													
	Public	Private	Community health provider[a]	Other source					Public	Private	Community health provider[a]	Other source		
KP	15.9	51.2	0.4	9.7	59.4	24.0	39.9	4,230	8.3	65.3	0.3	25.9	73.6	1,687
District														
Abbottabad	42.3	25.3	0.0	7.0	67.6	25.4	56.0	75	(32.4)	(67.6)	(0.0)	(0.0)	(100.0)	42
Bannu	7.4	62.2	0.0	9.6	69.5	20.9	6.5	190	9.0	66.6	0.0	24.4	75.6	12
Batagram	11.6	52.4	.2	13.3	53.8	23.1	48.1	131	14.2	73.0	0.0	12.3	87.2	63
Buner	18.0	71.7	0.0	4.2	85.7	7.1	78.6	74	1.5	87.1	0.0	8.8	88.7	58
Charsadda	18.1	50.3	0.0	5.6	59.6	27.4	46.3	133	13.8	62.9	2.0	23.3	76.7	61
Chitral	26.2	25.6	.4	0.0	47.2	48.2	49.4	34	.7	78.7	.7	20.5	79.5	17
D.I. Khan	19.4	47.9	.7	17.4	65.6	16.7	16.2	171	21.3	59.9	0.0	18.8	81.2	28
Hangu	10.1	67.6	0.0	5.2	71.7	19.1	47.9	83	7.0	61.8	0.0	31.2	68.8	40
Haripur	19.0	47.2	.6	4.7	65.5	32.8	45.7	78	11.9	88.1	0.0	0.0	100.0	36
Karak	11.0	57.1	0.0	22.4	52.2	10.2	5.0	139	8.9	68.7	0.0	11.2	77.6	7
Kohat	21.6	55.6	0.0	3.8	70.1	19.3	43.9	157	14.2	64.0	0.0	21.8	78.2	69
Kohistan	19.6	21.1	0.0	6.8	35.6	52.5	13.1	91	13.3	86.7	0.0	0.0	100.0	12
Lakki Marwat	27.6	32.0	1.2	8.5	51.9	32.7	40.5	69	11.8	53.6	0.0	34.6	65.4	28
Lower Dir	5.2	52.6	.8	14.4	45.3	27.9	34.9	214	0.0	82.1	0.0	17.9	82.1	75
Malakand Protected Area	28.5	35.1	.3	7.4	59.5	29.3	56.6	162	8.4	47.4	.2	43.6	55.8	92
Mansehra	19.8	54.1	.3	5.3	63.2	20.8	48.2	228	4.9	49.1	.2	46.0	54.0	110
Mardan	8.2	55.0	.2	11.4	53.3	26.5	62.1	467	3.1	62.4	0.0	33.6	65.5	290
Nowshera	18.2	49.1	0.0	14.2	60.5	18.5	54.7	273	8.3	61.9	0.0	28.8	70.2	150
Peshawar	14.3	55.7	.4	4.9	62.3	26.1	41.6	646	6.8	72.1	0.0	20.8	78.9	269
Shangla	(*)	(*)	(*)	(*)	(*)	(*)	(*)	15	(*)	(*)	(*)	(*)	(*)	6
Swabi	18.8	49.8	2.0	14.1	66.9	18.4	21.9	160	(*)	(*)	(*)	(*)	(*)	35
Swat	16.8	52.3	0.0	9.8	57.5	21.8	28.2	433	10.5	61.4	2.7	28.2	71.8	122
Tank	14.0	38.5	0.0	41.1	50.1	15.3	25.0	27	(*)	(*)	(*)	(*)	(*)	7
Tor Ghar	7.8	42.0	0.0	9.1	48.4	41.1	30.9	22	(*)	(*)	(*)	(*)	(*)	7
Upper Dir	18.2	44.3	1.3	9.0	51.8	29.9	34.9	158	11.3	55.5	0.0	33.2	66.8	55

[1] MICS indicator 3.13 - Care-seeking for children with acute respiratory infection (ARI) symptoms
[2] MICS indicator 3.14 - Antibiotic treatment for children with ARI symptoms
[a] Community health providers includes 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 private pharmacy
[c] Includes all public and private health facilities and providers   ( ) Figures that are based on 25-49 unweighted cases   (*) Figures that are based on fewer than 25 unweighted cases

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

Percentage of women age 15-49 years who are mothers or caretakers of children under age 5 by symptoms that would cause them to take a child under age 5 immediately to a health facility, and percentage of mothers who recognize fast or difficult breathing as signs for seeking care immediately, Khyber Pakhtunkhwa , 2016-17

	Percentage of mothers / caretakers 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 mothers / caretakers of children age 0-59 months
	Is not able to drink or breastfeed	Becomes sicker	Develops a fever	Has fast breathing	Has difficulty breathing	Has blood in stool	Is drinking poorly	Suffered from lose motion	Has other symptoms		
KP	19.2	72.4	75.6	36.9	37.1	19.9	11.6	41.1	17.3	54.5	14,153
District											
Abbottabad	27.2	63.5	68.0	39.0	40.8	27.5	19.2	34.4	32.2	50.4	630
Bannu	21.5	85.7	69.6	32.7	31.0	19.5	4.8	67.4	20.7	50.0	645
Batagram	21.0	87.8	71.8	44.0	44.1	38.0	17.1	59.5	12.4	65.7	315
Buner	16.2	78.5	70.4	37.7	43.2	31.5	15.2	22.4	3.4	61.6	407
Charsadda	14.4	68.8	82.7	49.4	46.6	9.9	5.2	52.5	6.1	71.7	737
Chitral	33.0	94.6	61.9	38.3	27.5	28.6	12.7	32.8	7.3	42.0	216
D.I. Khan	8.3	72.4	57.8	11.3	21.1	16.2	2.6	60.4	10.0	30.4	937
Hangu	15.8	67.0	81.3	22.4	25.7	13.7	16.4	40.7	32.8	40.9	249
Haripur	9.7	62.4	75.2	20.6	38.9	16.3	7.2	51.9	42.8	44.6	493
Karak	20.3	84.1	92.9	77.2	51.8	30.3	27.1	42.2	2.2	85.1	276
Kohat	23.6	87.9	85.1	42.5	44.2	35.7	17.8	46.3	37.3	62.1	475
Kohistan	14.3	89.8	58.4	26.2	16.1	13.7	5.4	17.1	5.9	35.4	426
Lakki Marwat	15.5	79.1	71.0	17.0	12.2	13.4	7.3	28.3	16.4	24.9	303
Lower Dir	33.0	55.3	86.7	44.7	36.8	9.7	7.1	30.8	20.6	56.8	587
Malakand Protected Area	6.3	62.5	84.9	40.7	45.0	7.4	3.6	49.6	15.3	66.3	377
Mansehra	40.0	88.1	77.6	40.8	53.2	34.1	19.9	54.2	32.5	60.2	717
Mardan	10.9	62.7	79.9	36.1	34.8	12.3	10.7	46.5	20.7	50.7	1,028
Nowshera	5.4	45.5	86.8	31.8	23.3	9.0	6.9	38.3	34.7	41.8	617
Peshawar	28.6	79.0	80.3	46.1	42.0	25.4	16.9	31.9	7.2	64.0	1,876
Shangla	21.0	81.6	53.9	23.6	31.7	26.9	16.0	32.1	7.4	40.7	293
Swabi	10.0	62.9	87.3	46.9	46.6	21.1	13.8	34.5	15.4	66.4	636
Swat	11.8	63.4	70.8	36.4	35.3	13.7	8.5	24.6	17.2	57.4	1,055
Tank	6.5	81.0	61.2	10.8	19.8	8.5	4.2	52.1	9.1	29.3	206
Tor Ghar	46.0	79.4	76.5	61.3	64.8	58.3	44.0	53.9	6.2	81.6	127
Upper Dir	29.1	75.0	74.1	35.8	42.2	14.5	9.7	35.9	8.9	62.3	523

Table D. CH.12: Solid fuel use

Percent 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, Khyber Pakhtunkhwa , 2016-17

					Percentage of household members in households mainly using:										Solid fuels for cooking [1]	Number of household members
	Electricity	Liquefied Petroleum Gas (LPG)	Natural gas	Biogas	Solid fuels: Coal / Lignite	Solid fuels: Charcoal	Solid fuels: Wood	Solid fuels: Straw / Shrubs / Grass	Solid fuels: Animal dung	Solid fuels: Agricultural crop residue	No food cooked in household	Other	Missing	Total		
KP	0.1	5.0	25.8	0.1	0.0	0.2	57.0	7.4	4.1	0.3	0.0	0.1	0.0	100.0	68.9	158,564
District																
Abbottabad	0.4	2.0	31.1	0.8	0.0	0.1	65.6	0.0	0.0	0.0	0.0	0.0	0.0	100.0	65.7	7,545
Bannu	0.0	3.7	2.6	0.0	0.0	0.0	34.1	50.8	4.7	3.4	0.0	0.7	0.0	100.0	93.0	6,742
Batagram	0.0	5.4	0.0	0.0	0.0	0.7	93.8	0.1	0.0	0.0	0.0	0.0	0.0	100.0	94.6	2,880
Buner	0.0	6.3	0.0	0.0	0.0	0.3	90.7	2.0	0.6	0.1	0.0	0.0	0.0	100.0	93.7	4,276
Charsadda	0.0	4.0	32.0	0.2	0.0	0.1	43.7	14.0	5.4	0.5	0.0	0.0	0.0	100.0	63.8	9,290
Chitral	0.0	0.4	0.0	0.1	0.0	0.0	99.5	0.0	0.0	0.0	0.0	0.0	0.0	100.0	99.5	2,483
D.I. Khan	0.2	1.8	6.3	0.1	0.0	0.0	66.7	3.5	21.5	0.0	0.0	0.0	0.0	100.0	91.7	9,672
Hangu	0.1	9.0	17.2	0.6	0.1	0.0	72.4	0.4	0.3	0.0	0.0	0.0	0.0	100.0	73.2	2,500
Haripur	0.7	3.1	26.8	0.0	0.0	0.1	69.0	0.0	0.1	0.0	0.0	0.0	0.0	100.0	69.3	5,900
Karak	0.0	1.7	37.4	0.0	0.0	0.0	42.3	14.8	3.8	0.0	0.0	0.0	0.0	100.0	61.0	3,024
Kohat	0.0	6.4	36.8	0.0	0.0	0.0	55.4	0.6	0.9	0.0	0.0	0.0	0.0	100.0	56.9	5,313
Kohistan	0.1	0.1	0.0	0.0	0.0	0.5	98.8	0.3	0.1	0.0	0.0	0.0	0.0	100.0	99.8	4,435
Lakki Marwat	0.0	1.0	5.3	0.0	0.0	0.0	43.6	32.5	15.5	2.2	0.0	0.0	0.0	100.0	93.8	3,823
Lower Dir	0.0	15.8	1.6	0.0	0.1	0.1	48.3	10.7	23.4	0.1	0.0	0.0	0.0	100.0	82.6	6,468
Malakand Protected Area	0.0	8.3	28.8	0.1	0.0	0.3	38.5	22.5	1.4	0.0	0.0	0.0	0.0	100.0	62.8	4,042
Mansehra	0.0	5.7	10.4	0.0	0.0	0.1	83.7	0.2	0.0	0.0	0.0	0.0	0.0	100.0	83.9	8,247
Mardan	0.0	4.4	31.3	0.0	0.0	0.6	50.0	12.0	1.3	0.3	0.0	0.0	0.0	100.0	64.3	11,329
Nowshera	0.3	3.0	55.6	0.1	0.0	0.0	27.2	7.1	6.6	0.0	0.0	0.0	0.0	100.0	40.9	7,127
Peshawar	0.4	3.1	74.3	0.1	0.0	0.1	17.8	2.1	1.5	0.3	0.0	0.3	0.0	100.0	21.8	22,199
Shangla	0.0	1.3	0.0	0.1	0.0	0.0	98.2	0.4	0.0	0.0	0.0	0.0	0.0	100.0	98.6	3,091
Swabi	0.1	6.6	16.9	0.2	0.0	0.3	67.6	7.6	0.5	0.1	0.0	0.0	0.0	100.0	76.2	8,096
Swat	0.0	12.4	16.6	0.4	0.0	0.5	68.9	1.0	0.1	0.0	0.0	0.0	0.0	100.0	70.5	11,075
Tank	0.2	0.9	5.3	0.1	0.1	0.1	84.2	1.6	7.4	0.0	0.0	0.0	0.1	100.0	93.4	2,094
Tor Ghar	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	100.0	1,202
Upper Dir	0.0	8.9	0.1	0.0	0.0	0.4	89.4	0.9	0.3	0.0	0.0	0.0	0.0	100.0	91.0	5,710

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

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

Percent distribution of household members in households using solid fuels by place of cooking, Khyber Pakhtunkhwa , 2016-17

	Place of cooking:							Number of household
	In the house							members in households using
	In a separate room used as kitchen	Elsewhere in the house	In a separate building	Outdoors	Other place	Missing/DK	Total	solid fuels for cooking
KP	62.0	37.4	0.2	0.2	0.0	0.1	100.0	109,251
District								
Abbottabad	70.1	28.5	0.0	1.2	0.0	0.2	100.0	4,958
Bannu	56.7	43.0	0.2	0.0	0.0	0.0	100.0	6,268
Batagram	75.8	23.5	0.3	0.4	0.0	0.0	100.0	2,725
Buner	77.5	22.5	0.0	0.0	0.0	0.0	100.0	4,007
Charsadda	71.2	28.7	0.0	0.0	0.0	0.1	100.0	5,928
Chitral	54.7	44.7	0.4	0.2	0.0	0.0	100.0	2,470
D.I. Khan	42.0	57.0	0.7	0.2	0.0	0.1	100.0	8,864
Hangu	64.3	35.6	0.1	0.0	0.0	0.0	100.0	1,831
Haripur	67.2	31.8	0.2	0.1	0.0	0.7	100.0	4,090
Karak	63.7	36.1	0.2	0.0	0.0	0.0	100.0	1,843
Kohat	57.7	42.3	0.0	0.0	0.0	0.0	100.0	3,022
Kohistan	40.7	58.8	0.4	0.0	0.0	0.0	100.0	4,425
Lakki Marwat	48.3	51.6	0.1	0.0	0.0	0.0	100.0	3,585
Lower Dir	61.5	38.0	0.4	0.2	0.0	0.0	100.0	5,343
Malakand Protected Area	61.1	38.7	0.1	0.0	0.0	0.0	100.0	2,537
Mansehra	84.8	15.1	0.1	0.0	0.0	0.0	100.0	6,922
Mardan	51.3	48.2	0.3	0.0	0.0	0.2	100.0	7,286
Nowshera	58.0	40.6	0.0	0.0	0.0	1.4	100.0	2,916
Peshawar	72.5	26.7	0.6	0.2	0.0	0.0	100.0	4,849
Shangla	61.7	36.3	0.1	1.6	0.2	0.1	100.0	3,049
Swabi	85.8	14.1	0.0	0.0	0.0	0.1	100.0	6,166
Swat	71.5	27.6	0.2	0.7	0.0	0.0	100.0	7,812
Tank	33.8	66.0	0.0	0.0	0.0	0.3	100.0	1,956
Tor Ghar	41.3	57.8	0.3	0.7	0.0	0.0	100.0	1,202
Upper Dir	44.1	54.6	0.8	0.4	0.0	0.2	100.0	5,198

Table D. CH.20: Care-seeking during fever

Percentage of children age 0-59 months with fever in the last two weeks for whom advice or treatment was sought, by source of advice or treatment, Khyber Pakhtunkhwa , 2016-17

	Percentage of children for whom:						Number of children with fever in last two weeks
	Advice or treatment was sought from:				A health facility or provider[1, b]	No advice or treatment sought	
	Health facilities or providers			Other source			
	Public	Private	Community health provider[a]				
KP	16.5	49.0	0.3	9.0	69.5	26.0	7,263
District							
Abbottabad	30.3	33.5	0.7	6.2	64.4	31.5	395
Bannu	9.7	50.8	.3	14.7	72.5	25.0	373
Batagram	11.4	50.5	.1	13.8	67.9	24.5	216
Buner	15.2	61.1	0.0	4.5	80.3	19.7	151
Charsadda	20.3	44.2	0.0	5.2	67.6	31.7	326
Chitral	19.9	25.3	1.1	4.4	46.2	52.0	75
D.I.Khan	13.8	51.3	1.3	14.7	68.4	20.6	445
Hangu	10.4	61.1	0.0	7.9	72.1	22.0	151
Haripur	16.9	47.7	.2	6.3	63.5	31.2	219
Karak	11.0	66.2	0.0	16.4	86.7	6.3	168
Kohat	17.8	61.5	0.0	1.9	78.6	19.0	258
Kohistan	22.2	20.7	0.0	9.4	50.9	47.6	121
Lakki Marwat	22.4	35.7	.6	18.8	70.9	24.7	132
Lower Dir	5.0	43.5	.7	21.5	49.5	30.1	248
Malakand	28.8	34.6	.2	6.1	68.3	31.4	223
Mansehra	16.6	48.1	.3	5.2	66.6	30.7	520
Mardan	10.7	55.3	.1	8.9	72.7	24.2	560
Nowshera	16.9	54.9	0.0	12.0	72.6	16.3	417
Peshawar	18.4	54.6	.2	3.3	74.6	24.4	1,046
Shangla	9.9	33.2	0.0	8.0	46.6	49.6	65
Swabi	13.7	50.5	1.4	13.8	71.8	23.7	237
Swat	19.2	50.8	0.2	8.5	75.0	21.6	553
Tank	12.0	43.1	0.0	23.9	64.4	25.7	66
Tor Ghar	(11.4)	(36.3)	(0.6)	(6.5)	(48.3)	(45.2)	47
Upper Dir	13.9	38.6	0.0	10.4	60.4	37.4	251

[1] MICS indicator 3.20 - Care-seeking for fever

[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 as well as shops

Table D. CH.21: Treatment of children with fever

Percentage of children age 0-59 months who had a fever in the last two weeks, by type of medicine given for the illness, Khyber Pakhtunkhwa , 2016-17

| | Children with a fever in the last two weeks who were given: | | | | | | | | | | | | | Number of children with fever in last two weeks |
| | Anti-malarials | | | | | | Other medications | | | | | | | |
	SP/ Fansidar	Chloroquine	Amodia-quine	Quinine	Artemisinin-based Combination Therapy (ACT)	Other anti-malarial	Antibiotic pill or syrup	Antibiotic injection	Paracetamol/ Panadol/ Acetaminophen	Aspirin	Ibuprofen	Other	Missing/DK	
KP	0.8	0.2	0.0	0.0	0.1	0.3	26.8	9.9	52.9	2.1	36.8	20.4	3.0	7,263
District														
Abbottabad	1.9	1.3	0.0	0.0	0.0	0.0	38.1	11.9	59.4	0.8	20.2	21.7	0.0	395
Bannu	0.0	0.0	0.0	0.0	0.0	0.0	3.2	3.0	38.9	0.3	63.8	41.7	5.9	373
Batagram	6.4	0.3	0.2	0.0	0.8	0.2	36.0	6.8	58.0	1.0	23.3	9.4	1.2	216
Buner	0.0	0.0	0.0	0.0	0.0	0.0	53.8	5.5	81.1	0.0	20.0	2.0	0.0	151
Charsadda	0.0	0.0	0.0	0.0	0.0	0.0	33.1	4.6	55.0	0.4	41.3	17.6	0.0	326
Chitral	0.0	0.0	0.0	0.0	0.0	0.7	38.9	7.6	59.0	8.2	6.8	8.2	0.0	75
D.I. Khan	0.4	0.2	0.0	0.0	0.0	0.4	5.7	5.8	52.7	0.4	13.5	20.3	13.3	445
Hangu	0.3	0.0	0.0	0.0	0.0	2.8	30.1	9.2	42.6	1.9	53.3	34.4	0.2	151
Haripur	1.0	0.0	0.0	0.0	0.0	0.0	36.9	6.1	77.3	0.0	14.4	9.2	0.5	219
Karak	0.0	0.0	0.0	0.0	3.1	0.0	2.4	2.3	26.7	2.3	55.6	50.3	2.7	168
Kohat	0.0	0.0	0.0	0.0	0.0	2.2	24.4	14.7	30.0	0.0	37.6	39.3	1.6	258
Kohistan	0.0	0.6	0.0	0.0	0.0	0.0	16.5	1.6	31.5	0.9	29.9	12.0	15.4	121
Lakki Marwat	0.7	1.2	0.0	0.0	0.0	0.0	21.7	13.5	29.7	3.0	45.9	18.8	2.8	132
Lower Dir	0.2	0.0	0.0	0.0	0.0	0.7	24.8	9.9	52.5	3.9	25.6	7.1	10.3	248
Malakand Protected Area	0.1	0.1	0.0	0.1	0.0	0.0	41.3	8.0	56.2	0.9	38.8	20.1	0.7	223
Mansehra	1.9	0.0	0.0	0.0	0.0	0.0	27.6	1.6	58.1	0.9	35.4	29.4	1.3	520
Mardan	1.0	0.8	0.0	0.0	0.0	0.0	51.4	19.1	58.5	3.8	39.4	14.9	1.0	560
Nowshera	0.1	0.0	0.0	0.0	0.0	0.2	36.2	17.9	53.2	2.3	23.9	15.2	2.9	417
Peshawar	0.3	0.0	0.0	0.2	0.0	0.2	27.2	16.9	52.9	5.0	45.3	16.8	2.2	1,046
Shangla	0.0	0.0	0.0	0.0	0.0	0.0	11.4	4.7	40.3	2.7	57.2	30.5	3.3	65
Swabi	1.8	0.0	0.0	0.0	0.0	0.0	12.8	5.9	55.5	2.0	51.1	20.5	0.5	237
Swat	0.2	0.6	0.0	0.0	0.0	0.7	17.2	7.9	54.9	1.7	40.0	14.9	2.4	553
Tank	0.4	0.3	0.4	0.0	0.0	0.0	8.8	4.9	63.5	1.2	35.9	20.6	0.5	66
Tor Ghar	3.4	0.0	0.0	0.0	0.0	0.9	24.7	5.4	29.8	0.6	20.7	30.3	3.9	47
Upper Dir	0.4	0.0	0.3	0.3	0.0	0.0	21.2	10.5	57.4	2.9	54.2	19.2	3.1	251

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Table D. CH.22: Diagnostics and anti-malarial treatment of children

Percentage of children age 0-59 months who had a fever in the last two weeks who had a finger or heel stick for malaria testing, who were given Artemisinin-combination Treatment (ACT) and any anti-malarial drugs, and percentage who were given ACT among those who were given anti-malarial drugs,Khyber Pakhtunkhwa , 2016-17

| | Had blood taken from a finger or heel for testing[1] | Percentage of children who: | | | | Number of children age 0-59 months with fever in the last two weeks | Treatment with Artemisinin-based Combination Therapy (ACT) among children who received anti-malarial treatment[3] | Number of children age 0-59 months with fever in the last two weeks who were given any antimalarial drugs |
| | | Were given: | | | | | | |
		Artemisinin-combination Treatment (ACT)	ACT the same or next day	Any antimalarial drugs[2]	Any antimalarial drugs same or next day			
KP	9.8	0.1	0.1	1.4	1.1	7,263	7.1	100
District								
Abbottabad	5.6	0.0	0.0	2.9	2.7	395	(*)	11
Bannu	10.7	0.0	0.0	0.0	0.0	373		0
Batagram	6.3	.8	.6	7.5	6.9	216	10.9	16
Buner	8.4	0.0	0.0	0.0	0.0	151		0
Charsadda	11.6	0.0	0.0	0.0	0.0	326		0
Chitral	5.7	0.0	0.0	0.7	0.0	75	0.0	1
D.I. Khan	5.3	0.0	0.0	0.9	0.2	445	0.0	4
Hangu	14.0	0.0	0.0	2.8	2.4	151	0.0	4
Haripur	9.1	0.0	0.0	1.0	0.0	219	0.0	2
Karak	10.5	3.1	1.5	3.1	1.5	168	100.0	5
Kohat	16.7	0.0	0.0	2.2	2.2	258	0.0	6
Kohistan	5.4	0.0	0.0	0.6	0.6	121	0.0	1
Lakki Marwat	7.9	0.0	0.0	1.9	1.9	132	0.0	3
Lower Dir	8.3	0.0	0.0	0.8	0.8	248	0.0	2
Malakand Protected Area	17.2	0.0	0.0	0.3	0.1	223	0.0	1
Mansehra	7.4	0.0	0.0	1.9	1.9	520	0.0	10
Mardan	14.7	0.0	0.0	1.6	0.7	560	0.0	9
Nowshera	6.4	0.0	0.0	0.3	0.3	417	0.0	1
Peshawar	9.2	0.0	0.0	0.7	0.5	1046	0.0	7
Shangla	4.3	0.0	0.0	0.0	0.0	65	(*)	0
Swabi	2.7	0.0	0.0	1.8	1.8	237	(*)	4
Swat	17.8	0.0	0.0	1.5	1.1	553	(*)	8
Tank	6.8	0.0	0.0	1.0	0.9	66	(*)	1
Tor Ghar	4.9	0.0	0.0	4.2	3.4	47	(*)	2
Upper Dir	8.9	0.0	0.0	0.7	0.3	251	(*)	2

[1] **MICS indicator 3.21 - Malaria diagnostics usage**

[2] **MICS indicator 3.22; MDG indicator 6.8 - Anti-malarial treatment of children under age 5**

[3] **MICS indicator 3.23 - Treatment with Artemisinin-based Combination Therapy (ACT) among children who received anti-malarial treatment**

( ) Figures that are based on 25-49 unweighted cases

(*) Figures that are based on fewer than 25 unweighted cases

Table D. CH.23: Source of anti-malarial

Percentage of children age 0-59 months with fever in the last two weeks who were given anti-malarial by the source of anti-malarial,Khyber Pakhtunkhwa , 2016-17

| | Percentage of children who were given anti-malarial | Number of children age 0-59 months with fever in the last two weeks | Percentage of children for whom the source of anti-malarial was: | | | | | Number of children age 0-59 months who were given anti-malarial as treatment for fever in the last two weeks |
| | | | Health facilities or providers | | | | | |
			Public	Private	Community health provider[a]	Other source	A health facility or provider[b]	
KP	1.4	7,263	14.7	70.0	0.0	12.8	92.2	99.7
District								
Abbottabad	2.9	395	(*)	(*)	(*)	(*)	(*)	11
Bannu	0.0	373						0
Batagram	7.5	216	14.1	78.1	0.0	7.8	92.2	16
Buner	0.0	151						0
Charsadda	0.0	326						0
Chitral	0.7	75	0.0	0.0	0.0	0.0	0.0	1
D.I. Khan	0.9	445	0.0	58.6	0.0	41.4	58.6	4
Hangu	2.8	151	0.0	25.3	0.0	74.7	83.7	4
Haripur	1.0	219	0.0	100.0	0.0	0.0	100.0	2
Karak	3.1	168	13.1	32.1	0.0	49.0	94.2	5
Kohat	2.2	258	0.0	89.8	0.0	10.2	100.0	6
Kohistan	0.6	121	100.0	0.0	0.0	0.0	100.0	1
Lakki Marwat	1.9	132	0.0	100.0	0.0	0.0	100.0	3
Lower Dir	0.8	248	81.3	18.7	0.0	0.0	100.0	2
Malakand Protected Area	0.3	223	0.0	32.2	0.0	36.7	68.9	1
Mansehra	1.9	520	25.4	74.6	0.0	0.0	100.0	10
Mardan	1.6	560	0.0	87.1	0.0	12.9	100.0	9
Nowshera	0.3	417	0.0	100.0	0.0	0.0	100.0	1
Peshawar	0.7	1046	7.4	92.6	0.0	0.0	100.0	7
Shangla	0.0	65	(*)	(*)	(*)	(*)	(*)	0
Swabi	1.8	237	(*)	(*)	(*)	(*)	(*)	4
Swat	1.5	553	(*)	(*)	(*)	(*)	(*)	8
Tank	1.0	66	(*)	(*)	(*)	(*)	(*)	1
Tor Ghar	4.2	47	(*)	(*)	(*)	(*)	(*)	2
Upper Dir	0.7	251	(*)	(*)	(*)	(*)	(*)	2

[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 as well as shops**
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table D. CH.25: Intermittent preventive treatment for malaria

Percentage of women age 15-49 years who had a live birth during the two years preceding the survey and who received intermittent preventive treatment (IPT) for malaria during pregnancy at any antenatal care visit, Khyber Pakhtunkhwa , 2016-17

	Percentage of women who received antenatal care (ANC)	Number of women with a live birth in the last two years	Who took any medicine to prevent malaria at any ANC visit during pregnancy	Percentage of pregnant women: who took SP/Fansidar at least once during an ANC visit and in total took:				Number of women with a live birth in the last two years and who received antenatal care Number of women with a live birth in the last two years and who received antenatal care
				At least once	Two or more times	Three or more times[1]	Four or more times	
KP	74.3	8,365	4.5	2.0	1.4	0.6	0.3	6,218
District								
Abbottabad	85.2	364	2.2	1.7	1.3	0.7	0.7	310
Bannu	68.1	413	16.6	1.7	0.0	0.0	0.0	281
Batagram	62.1	183	5.1	3.6	2.6	1.8	1.1	114
Buner	69.1	243	5.4	5.0	4.7	3.2	1.5	168
Charsadda	78.9	454	3.5	0.2	0.2	0.2	0.2	358
Chitral	78.2	127	3.7	2.6	1.7	0.6	0.0	99
D.I. Khan	64.3	559	3.6	1.2	0.0	0.0	0.0	359
Hangu	73.8	149	4.2	1.0	0.8	0.6	0.5	110
Haripur	73.5	256	.5	0.5	0.5	0.5	0.0	188
Karak	79.9	168	4.0	0.5	0.5	0.0	0.0	134
Kohat	78.1	275	2.5	1.7	1.4	1.1	0.0	215
Kohistan	12.4	179	0.0	0.0	0.0	0.0	0.0	22
Lakki Marwat	51.8	190	8.5	4.8	4.5	2.3	1.4	98
Lower Dir	75.7	336	7.7	0.2	0.1	0.1	0.0	254
Malakand Protected Area	78.7	213	2.9	2.3	0.9	0.3	0.3	167
Mansehra	76.4	453	3.3	2.0	0.8	0.5	0.0	346
Mardan	87.4	627	6.0	4.8	3.7	1.3	0.7	547
Nowshera	83.9	384	3.3	0.6	0.0	0.0	0.0	322
Peshawar	83.4	1130	5.4	2.4	2.2	0.5	0.0	943
Shangla	36.1	150	0.8	0.0	0.0	0.0	0.0	54
Swabi	75.5	389	3.8	3.8	2.2	1.6	1.0	294
Swat	82.7	614	2.0	1.5	1.1	0.0	0.0	508
Tank	57.0	125	3.7	0.0	0.0	0.0	0.0	71
Tor Ghar	32.9	71	0.0	0.0	0.0	0.0	0.0	23
Upper Dir	73.2	314	1.4	0.4	0.0	0.0	0.0	230

[1] MICS indicator 3.25 - Intermittent preventive treatment for malaria
( ) Figures that are based on 25-49 unweighted cases

Table D. WS.1: Use of improved water sources

Percent distribution of household population according to main source of drinking water and percentage of household population using improved drinking water sources, Khyber Pakhtunkhwa , 2016-17

| | Main source of drinking water | | | | | | | | | | | | | | | | | | | | | |
| | Improved sources | | | | | | | | | | | Unimproved sources | | | | | | | | | Percentage using improved sources of drinking water [1] | Number of household members |
	Piped into dwelling	Piped into compound, yard	Piped to neighbour	Public tap / standpipe	Tube well	Hand pump	Motorized Pump (Dunky / Turbine)	Protected well	Protected spring	Rain water collection (Pond)	Bottled water [a]	Unprotected well	Unprotected spring	Tanker-truck	Cart with small tank / drum/Cans	Surface water	Bottled water [a]	Other	Missing	Total		
KP	22.4	2.0	3.6	7.6	2.8	14.6	22.4	10.1	5.5	0.3	0.0	1.5	4.2	0.7	0.5	1.3	0.0	0.5	0.0	100.0	91.3	158,564
District																						
Abbottabad	27.7	7.0	3.5	12.6	1.1	4.6	6.5	3.2	13.6	0.0	0.0	3.4	15.1	0.0	0.1	1.1	0.0	0.6	0.0	100.0	79.9	7,545
Bannu	23.1	.9	4.1	1.5	16.6	30.7	19.0	.4	.9	0.0	0.0	.1	0.0	0.0	0.0	0.0	0.0	2.8	0.0	100.0	97.1	6,742
Batagram	54.2	4.6	7.2	.4	.1	5.3	.8	7.4	11.5	.1	0.0	.9	6.7	0.0	0.0	.5	0.0	.3	0.0	100.0	91.7	2,880
Buner	41.9	.6	4.1	7.1	2.2	5.8	17.2	7.2	4.9	0.0	0.0	2.0	6.2	.4	0.0	.5	0.0	0.0	0.0	100.0	90.9	4,276
Charsadda	1.7	0.0	2.5	1.9	.0	35.8	40.9	15.8	.2	0.0	0.0	.8	0.0	0.0	0.0	0.0	0.0	.3	0.0	100.0	98.9	9,290
Chitral	25.0	50.9	5.1	1.4	.3	0.0	0.0	.9	1.1	.2	0.0	1.0	4.7	0.0	0.0	9.3	0.0	.1	0.0	100.0	84.9	2,483
D.I. Khan	12.5	0.0	2.2	6.2	3.6	45.2	17.5	1.4	0.0	1.3	0.0	.4	0.0	.1	1.5	7.7	0.0	.4	0.0	100.0	89.9	9,672
Hangu	5.8	1.3	3.0	14.3	1.1	9.4	17.2	32.5	.8	1.5	0.0	5.9	.4	4.9	.6	.1	0.0	1.3	0.0	100.0	86.8	2,500
Haripur	56.5	.6	1.6	7.2	2.7	1.5	5.1	5.4	4.1	0.0	.0	6.7	7.7	0.0	0.0	.1	0.0	.6	0.0	100.0	84.8	5,900
Karak	36.5	.3	4.9	1.8	10.4	8.5	14.0	.8	.8	0.0	0.0	4.1	1.4	14.2	1.1	.6	0.0	.5	0.0	100.0	78.0	3,024
Kohat	12.4	.3	2.9	8.0	2.8	13.2	29.8	19.2	.6	0.0	0.0	4.2	.4	5.3	.4	.5	0.0	0.0	0.0	100.0	89.2	5,313
Kohistan	25.8	.5	0.0	1.3	0.0	0.0	0.0	3.1	35.5	0.0	0.0	1.8	28.7	0.0	0.0	3.3	0.0	0.0	0.0	100.0	66.2	4,435
Lakki Marwat	24.5	.1	8.1	6.4	6.4	17.4	17.1	3.7	0.0	3.8	0.0	0.0	0.0	2.9	7.0	2.0	0.0	.6	0.0	100.0	87.6	3,823
Lower Dir	24.4	2.8	5.6	7.0	1.7	4.4	6.2	25.2	18.5	.1	0.0	.5	2.4	.8	0.0	.4	0.0	0.0	.0	100.0	95.8	6,468
Malakand Protected Area	4.7	0.0	6.5	9.0	.6	6.4	39.3	25.2	3.3	0.0	0.0	1.4	1.6	.0	.4	0.0	0.0	1.3	0.0	100.0	95.2	4,042
Mansehra	31.0	3.7	3.7	3.2	.1	2.1	16.7	16.6	10.0	.1	0.0	3.0	8.6	0.0	0.0	1.1	0.0	.0	0.0	100.0	87.3	8,247
Mardan	2.0	.9	2.3	7.3	.4	26.6	54.7	3.8	0.0	0.0	0.0	.7	.2	0.0	0.0	0.0	0.0	1.1	0.0	100.0	97.9	11,329
Nowshera	7.9	1.1	8.2	10.3	.1	20.4	34.5	13.0	3.2	0.0	.3	.6	0.0	.2	0.0	0.0	.1	.1	0.0	100.0	99.0	7,127
Peshawar	16.8	.1	3.1	18.7	6.8	12.5	28.6	12.1	.6	.1	.0	.3	0.0	0.0	0.0	0.0	0.0	.3	0.0	100.0	99.4	22,199
Shangla	61.9	1.2	2.3	0.3	0.0	0.0	0.0	1.3	5.3	1.1	0.0	.4	23.2	0.0	1.8	0.7	0.0	.3	0.0	100.0	73.5	3,091
Swabi	10.2	0.7	3.5	1.5	0.4	21.8	48.4	10.0	0.7	0.0	0.0	2.2	0.0	0.0	0.0	0.0	0.0	0.6	0.0	100.0	97.2	8,096
Swat	35.1	0.4	1.3	9.2	1.0	3.6	13.4	18.6	8.2	0.2	0.0	0.9	5.8	0.2	0.1	1.9	0.0	0.2	0.0	100.0	90.9	11,075
Tank	18.0	2.2	4.6	9.1	1.6	26.9	12.7	0.8	1.4	1.4	0.1	0.0	0.0	3.2	7.0	10.2	0.0	0.6	0.1	100.0	78.9	2,094
Tor Ghar	28.5	0.8	11.7	3.0	0.0	0.3	0.0	0.2	34.0	0.0	0.0	1.5	16.9	0.0	0.0	3.0	0.0	0.1	0.0	100.0	78.5	1,202
Upper Dir	53.1	2.4	4.2	1.1	0.0	0.2	1.1	3.0	19.3	0.2	0.0	1.1	11.6	0.0	0.1	2.7	0.0	0.0	0.0	100.0	84.6	5,710

[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.

Table D. WS.2: Household water treatment

Percentage of household population by drinking water treatment method used in the household, and for household members living in households where an unimproved drinking water source is used, the percentage who are using an appropriate treatment method, Khyber Pakhtunkhwa , 2016-17

	None	Boil	Add bleach/ chlorine	Strain through a cloth	Use water filter	Solar dis-infection	Let it stand and settle	Other	Missing/DK	Number of household members	Percentage of household members in households using unimproved drinking water sources and using an appropriate water treatment method[1]	Number of household members in households using unimproved drinking water sources
KP	95.2	2.2	0.1	1.4	0.6	0.1	0.6	0.1	0.0	158,564	1.8	13,814
District												
Abbottabad	94.6	4.0	0.2	0.9	0.5	0.0	0.1	0.0	0.0	7,545	2.7	1,520
Bannu	94.5	0.9	0.1	1.6	0.1	0.4	2.9	0.0	0.0	6,742	0.0	197
Batagram	95.4	3.1	0.1	1.7	0.0	0.1	1.2	0.1	0.0	2,880	0.0	240
Buner	98.0	1.0	0.0	0.7	0.2	0.0	0.1	0.1	0.0	4,276	0.0	390
Charsadda	95.7	0.6	0.0	1.1	0.5	0.0	2.2	0.4	0.0	9,290	0.0	100
Chitral	93.7	5.5	0.1	0.3	0.2	0.2	0.1	0.2	0.0	2,483	2.6	375
D.I. Khan	95.2	0.1	0.0	4.6	0.0	0.7	0.5	0.0	0.0	9,672	5.7	976
Hangu	90.6	4.2	0.0	2.8	0.4	0.0	2.8	0.0	0.0	2,500	,.3	329
Haripur	90.7	4.3	0.2	3.2	0.6	0.4	0.3	0.8	0.0	5,900	4.8	895
Karak	98.6	0.4	0.0	0.1	0.0	0.0	0.6	0.0	0.3	3,024	,.1	664
Kohat	92.6	2.7	0.0	3.1	0.6	0.0	2.4	0.0	0.0	5,313	6.1	574
Kohistan	99.8	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	4,435	0.0	1,501
Lakki Marwat	84.9	0.5	0.0	13.7	0.0	0.0	0.9	0.1	0.0	3,823	0.0	475
Lower Dir	99.8	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	6,468	0.0	269
Malakand Protected Area	95.8	0.8	0.0	1.3	0.6	0.0	1.3	0.0	0.0	4,042	0.0	195
Mansehra	90.3	6.8	0.0	2.8	0.6	0.3	0.0	0.0	0.0	8,247	3.7	1,046
Mardan	97.4	1.3	0.1	0.0	0.9	0.0	0.2	0.1	0.0	11,329	0.0	233
Nowshera	96.5	2.8	0.0	0.2	0.6	0.0	0.0	0.0	0.0	7,127	0.0	73
Peshawar	92.9	4.6	0.2	0.2	2.1	0.0	0.1	0.2	0.0	22,199	0.0	127
Shangla	99.3	0.6	0.0	0.0	0.1	0.0	0.0	0.0	0.0	3,091	1.0	820
Swabi	97.7	0.6	0.0	0.6	0.6	0.0	0.2	0.2	0.0	8,096	0.0	226
Swat	96.3	2.4	0.0	0.4	0.4	0.0	0.3	0.3	0.1	11,075	1.0	1,008
Tank	96.0	0.6	0.0	2.3	0.1	0.3	1.9	0.0	0.0	2,094	1.6	443
Tor Ghar	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1,202	0.0	258
Upper Dir	99.5	0.2	0.0	0.0	0.2	0.0	0.0	0.0	0.0	5,710	0.0	881

[1] MICS indicator 4.2 - Water treatment

na: not applicable

( ) Figures that are based on 25-49 unweighted cases

Table D. WS.3: Time to source of drinking water

Percent 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, Khyber Pakhtunkhwa , 2016-17

	Time to source of drinking water									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	DK/ Missing	Total	
KP	82.1	4.0	5.0	0.2	1.4	2.0	5.1	0.2	100.0	158,564
District										
Abbottabad	58.2	9.1	12.6	0.0	2.1	3.9	14.1	0.0	100.0	7,545
Bannu	92.1	1.2	3.7	0.2	0.6	0.1	2.3	0.0	100.0	6,742
Batagram	73.7	8.0	9.9	0.0	0.8	4.1	3.3	0.1	100.0	2,880
Buner	78.9	4.2	7.7	0.1	1.1	1.9	6.0	0.0	100.0	4,276
Charsadda	93.4	4.3	1.1	0.1	0.7	0.2	0.1	0.1	100.0	9,290
Chitral	82.2	0.8	1.9	0.0	2.6	2.9	9.3	0.3	100.0	2,483
D.I. Khan	82.4	1.9	4.8	0.8	0.6	2.6	5.9	1.0	100.0	9,672
Hangu	71.6	6.2	9.0	0.0	4.0	1.4	7.8	0.0	100.0	2,500
Haripur	73.7	7.0	4.1	0.0	0.4	6.3	8.4	0.0	100.0	5,900
Karak	61.2	10.0	6.3	0.6	0.4	4.2	15.1	2.3	100.0	3,024
Kohat	75.6	4.9	8.4	0.3	3.6	1.2	6.0	0.0	100.0	5,313
Kohistan	51.5	8.5	6.1	0.0	7.5	9.4	16.8	0.1	100.0	4,435
Lakki Marwat	75.2	2.1	10.3	0.0	1.0	1.7	9.6	0.2	100.0	3,823
Lower Dir	87.7	2.4	5.6	0.1	0.9	0.9	2.4	0.0	100.0	6,468
Malakand Protected Area	87.2	3.9	3.9	0.1	1.1	1.1	2.6	0.0	100.0	4,042
Mansehra	69.4	7.6	9.7	0.6	1.0	2.8	8.7	0.1	100.0	8,247
Mardan	96.3	1.2	0.3	0.1	1.3	0.5	0.2	0.0	100.0	11,329
Nowshera	92.9	1.6	4.5	0.0	0.8	0.0	0.2	0.0	100.0	7,127
Peshawar	95.2	2.5	1.6	0.1	0.3	0.0	0.1	0.2	100.0	22,199
Shangla	67.0	2.3	4.2	0.0	2.2	6.1	18.3	0.0	100.0	3,091
Swabi	93.7	2.2	1.3	0.0	1.7	0.8	0.4	0.0	100.0	8,096
Swat	77.9	4.9	7.0	1.0	1.9	2.5	4.4	0.3	100.0	11,075
Tank	72.5	2.6	3.8	0.0	3.3	3.6	11.1	3.1	100.0	2,094
Tor Ghar	46.5	15.9	16.1	0.0	0.6	7.3	13.6	0.0	100.0	1,202
Upper Dir	74.8	3.5	6.1	0.2	1.9	3.6	9.9	0.0	100.0	5,710

Table D. WS.4: Person collecting water

Percentage of households without drinking water on premises, and percent distribution of households without drinking water on premises according to the person usually collecting drinking water used in the household, Khyber Pakhtunkhwa , 2016-17

	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	Adult man	Female child under age 15	Male child under age 15	Missing /DK	Total	
KP	17.3	20,995	70.2	20.1	4.2	3.3	2.2	100.0	3,623
District									
Abbottabad	40.6	1,216	85.1	7.4	3.7	1.6	2.2	100.0	493
Bannu	7.2	719	31.7	27.5	19.5	20.4	0.9	100.0	52
Batagram	28.0	361	82.5	8.6	7.2	1.3	0.5	100.0	101
Buner	21.2	542	83.4	8.5	4.8	2.2	1.1	100.0	115
Charsadda	6.4	1221	77.1	17.1	3.1	2.7	0.0	100.0	78
Chitral	15.4	386	69.2	16.8	5.0	9.0	0.0	100.0	60
D.I. Khan	20.2	1097	49.8	44.3	1.5	1.2	3.1	100.0	221
Hangu	24.3	256	65.2	28.4	1.5	2.8	2.0	100.0	62
Haripur	27.4	905	81.9	13.4	2.5	2.2	0.0	100.0	247
Karak	40.3	402	47.7	46.3	1.0	1.0	3.9	100.0	162
Kohat	21.2	753	68.1	26.6	0.0	1.3	3.9	100.0	160
Kohistan	40.0	447	92.7	1.8	4.0	.5	0.9	100.0	179
Lakki Marwat	22.6	476	12.3	65.3	6.2	15.0	1.3	100.0	107
Lower Dir	12.6	862	93.7	3.1	2.0	.9	0.2	100.0	109
Malakand Protected Area	12.2	473	69.5	18.6	6.6	3.8	1.5	100.0	57
Mansehra	28.4	1246	78.2	17.3	1.9	2.3	0.4	100.0	354
Mardan.	2.7	1452	62.5	19.3	12.1	0.0	6.2	100.0	39
Nowshera	7.1	1039	78.6	12.7	3.7	5.0	0.0	100.0	74
Peshawar	4.7	2997	55.6	30.8	9.6	2.3	1.7	100.0	140
Shangla	30.4	465	84.9	8.8	2.5	1.2	2.6	100.0	141
Swabi	4.6	1,194	(65.1)	(11.3)	(10.7)	(10.8)	(2.2)	(100.0)	55
Swat	21.3	1,409	46.1	28.9	7.1	8.8	9.1	100.0	300
Tank	24.4	255	14.7	77.6	2.5	3.4	1.8	100.0	62
Tor Ghar	53.7	161	97.3	1.2	0.5	0.0	0.9	100.0	86
Upper Dir	25.2	662	85.5	3.8	6.8	3.3	0.5	100.0	167

( ) Figures that are based on 25-49 unweighted cases

Percent distribution of household population according to type of toilet facility used by the household, Khyber Pakhtunkhwa , 2016-17

	Type of toilet facility used by household														
	Improved sanitation facility							Unimproved sanitation facility							
	Flush/Pour flush to:														
	Piped sewer system	Septic tank	Pit latrine	Unknown place/not sure/DK where	Ventilated improved pit latrine	Pit latrine with slab	Compos-ting toilet	Flush/Pour flush to somewhere else	Pit latrine without slab/open pit	Bucket	Hanging toilet/latrine	Other	Open defecation (no facility, bush, field)	Total	Number of household members
KP	7.8	43.4	20.6	0.6	4.4	5.6	3.0	2.0	2.2	1.1	0.5	0.0	8.7	100.0	158,564
District															
Abbottabad	8.8	59.6	6.7	0.2	1.9	17.7	0.0	0.0	0.4	0.0	0.5	0.0	4.1	100.0	7,545
Bannu	5.7	46.8	11.2	0.0	0.0	0.0	32.8	0.2	0.5	0.1	0.5	0.0	2.0	100.0	6,742
Batagram	13.9	47.8	3.9	0.0	0.2	1.2	0.0	11.3	0.1	0.0	0.1	0.0	21.5	100.0	2,880
Buner	3.2	1.1	3.3	0.0	1.2	58.6	0.9	2.5	5.5	0.8	0.5	0.0	22.5	100.0	4,276
Charsadda	6.6	67.4	9.2	0.0	5.6	2.9	3.2	0.2	0.3	0.5	0.0	0.0	4.3	100.0	9,290
Chitral	1.5	0.5	4.9	0.0	83.3	6.3	0.0	0.0	0.3	0.0	0.0	0.2	3.0	100.0	2,483
D.I. Khan	11.2	44.0	11.9	0.0	6.5	7.9	0.3	0.2	6.7	0.1	1.1	0.0	10.3	100.0	9,672
Hangu	23.2	3.4	30.7	0.3	10.5	13.1	0.9	0.2	13.7	0.3	1.3	0.1	2.3	100.0	2,500
Haripur	6.7	68.0	14.4	0.1	1.7	0.3	0.0	0.8	0.2	0.2	0.2	0.0	7.3	100.0	5,900
Karak	3.1	76.9	0.7	0.0	0.1	0.2	0.0	0.1	0.0	0.0	4.9	0.0	14.0	100.0	3,024
Kohat	12.7	12.2	35.0	0.0	16.6	5.5	1.1	0.6	9.0	0.6	2.4	0.1	4.3	100.0	5,313
Kohistan	0.1	44.2	15.8	0.4	2.8	1.1	0.3	2.8	6.1	0.1	0.0	0.1	26.1	100.0	4,435
Lakki Marwat	0.5	5.0	42.9	0.0	12.3	16.7	6.1	0.3	5.7	0.0	0.9	0.1	9.3	100.0	3,823
Lower Dir	19.2	4.0	57.1	0.0	2.6	0.1	2.3	2.0	1.2	0.4	0.0	0.0	11.2	100.0	6,468
Malakand Protected Area	1.3	44.1	36.7	0.0	5.0	0.8	0.5	0.0	0.9	1.9	0.0	0.0	8.8	100.0	4,042
Mansehra	6.1	57.0	8.1	0.4	1.9	1.6	0.0	9.5	0.2	0.5	0.1	0.0	14.5	100.0	8,247
Mardan	1.0	22.7	47.5	0.1	0.6	7.2	6.9	4.4	1.0	5.1	0.6	0.0	2.9	100.0	11,329
Nowshera	19.4	32.3	37.7	0.1	4.1	1.3	1.0	0.9	0.4	0.5	0.1	0.0	2.3	100.0	7,127
Peshawar	11.1	64.6	12.5	1.4	0.9	1.8	1.4	1.9	1.7	1.1	0.3	0.1	1.1	100.0	22,199
Shangla	1.4	0.3	60.6	0.6	6.4	0.0	0.0	0.9	0.3	0.2	0.5	0.0	28.9	100.0	3,091
Swabi	4.4	74.3	5.6	0.6	1.5	0.8	0.6	1.6	3.1	3.7	0.3	0.0	3.4	100.0	8,096
Swat	7.7	52.4	15.7	1.8	0.7	0.2	1.1	1.4	0.3	2.1	0.4	0.0	16.1	100.0	11,075
Tank	10.3	41.3	15.1	0.0	6.9	10.3	1.8	0.5	9.5	0.3	1.4	0.1	2.5	100.0	2,094
Tor Ghar	0.9	28.3	3.1	0.0	1.1	10.5	0.0	0.4	2.4	0.0	0.8	0.0	52.3	100.0	1,202
Upper Dir	0.7	17.4	37.1	3.9	1.8	9.3	4.4	4.7	1.4	1.4	0.1	0.0	17.8	100.0	5,710

Table D. WS.6: Use and sharing of sanitation facilities

Percent distribution of household population by use of private and public sanitation facilities and use of shared facilities, by users of improved and unimproved sanitation facilities, Khyber Pakhtunkhwa , 2016-17

| | 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	5 households or less	More than 5 households	Missing/DK	Not shared	Public facility	5 households or less	More than 5 households	Missing/DK			
KP	77.8	0.1	6.5	0.8	0.2	5.2	0.0	0.6	0.1	0.0	8.7	100.0	158,564
District													
Abbottabad	91.8	0.3	2.8	0.1	0.0	0.6	0.0	0.0	0.0	0.3	4.1	100.0	7,545
Bannu	86.0	0.5	9.6	0.5	0.2	1.1	0.0	0.1	0.0	0.0	2.0	100.0	6,742
Batagram	61.7	0.0	4.3	1.0	0.0	10.3	0.0	0.6	0.5	0.0	21.5	100.0	2,880
Buner	65.2	0.0	2.9	0.0	0.1	8.5	0.0	0.6	0.2	0.0	22.5	100.0	4,276
Charsadda	91.1	0.0	2.9	0.2	0.7	0.9	0.0	0.0	0.0	0.0	4.3	100.0	9,290
Chitral	95.8	0.2	0.4	0.0	0.0	0.5	0.0	0.0	0.0	0.0	3.0	100.0	2,483
D.I. Khan	74.7	0.0	6.5	0.4	0.0	6.5	0.0	1.5	0.0	0.0	10.3	100.0	9,672.
Hangu	65.5	0.4	14.2	1.9	0.1	12.9	0.0	2.4	0.2	0.0	2.3	100.0	2,500
Haripur	83.9	0.0	7.1	0.3	0.0	1.4	0.0	0.0	0.0	0.0	7.3	100.0	5,900
Karak	79.7	0.2	1.0	0.2	0.0	4.7	0.1	0.1	0.0	0.0	14.0	100.0	3,024
Kohat	65.2	0.2	14.7	2.6	0.5	8.4	0.0	3.2	0.6	0.5	4.3	100.0	5,313
Kohistan	59.2	0.0	4.8	0.6	0.2	9.0	0.1	0.1	0.0	0.0	26.1	100.0	4,435
Lakki Marwat	70.4	0.1	12.6	0.5	0.0	6.2	0.0	0.6	0.2	0.1	9.3	100.0	3,823
Lower Dir	73.3	0.0	11.0	0.9	0.0	2.9	0.0	0.6	0.0	0.0	11.2	100.0	6,468
Malakand Protected Area	86.2	0.0	2.1	0.1	0.0	2.7	0.0	0.1	0.0	0.0	8.8	100.0	4,042
Mansehra	68.5	0.0	6.4	0.3	0.0	9.8	0.0	0.4	0.0	0.0	14.5	100.0	8,247
Mardan	76.2	0.1	8.4	1.1	0.2	10.4	0.1	0.4	0.0	0.1	2.9	100.0	11,329
Nowshera	81.7	0.3	11.7	2.2	0.0	1.8	0.0	0.1	0.0	0.0	2.3	100.0	7,127
Peshawar	87.2	0.0	5.0	1.0	0.6	4.6	0.0	0.4	0.1	0.0	1.1	100.0	22,199
Shangla	68.4	0.3	0.6	0.0	0.0	1.2	0.0	0.6	0.0	0.0	28.9	100.0	3,091
Swabi	73.8	0.0	11.4	2.5	0.1	7.1	0.0	1.7	0.0	0.0	3.4	100.0	8,096
Swat	73.7	0.0	4.9	1.1	0.0	3.7	0.0	0.3	0.1	0.0	16.1	100.0	11,075
Tank	82.1	0.0	3.2	0.4	0.0	11.6	0.0	0.2	0.0	0.0	2.5	100.0	2,094
Tor Ghar	44.0	0.0	0.0	0.0	0.0	3.7	0.0	0.0	0.0	0.0	52.3	100.0	1,202
Upper Dir	69.2	0.3	4.8	0.0	0.2	7.3	0.0	0.3	0.0	0.0	17.8	100.0	5,710

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

Table D. WS.7: Drinking water and sanitation ladders

Percentage of household population by drinking water and sanitation ladders, Khyber Pakhtunkhwa , 2016-17

	Percentage of household population using:										
	Improved drinking water[1, a]					Unimproved sanitation				Improved drinking water sources and improved sanitation	Number of household members
	Piped into dwelling, plot or yard	Other improved	Unimproved drinking water	Total	Improved sanitation[2]	Shared improved facilities	Unimproved facilities	Open defecation	Total		
KP	24.4	66.9	8.7	100.0	77.8	7.6	5.9	8.7	100.0	72.8	158,564
District											
Abbottabad	34.8	45.1	20.1	100.0	91.8	3.2	0.9	4.1	100.0	74.5	7,545
Bannu	24.0	73.1	2.9	100.0	86.0	10.8	1.3	2.0	100.0	83.3	6,742
Batagram	58.8	32.9	8.3	100.0	61.7	5.3	11.4	21.5	100.0	57.3	2,880
Buner	42.4	48.4	9.1	100.0	65.2	3.0	9.2	22.5	100.0	62.9	4,276
Charsadda	1.7	97.2	1.1	100.0	91.1	3.7	0.9	4.3	100.0	90.4	9,290
Chitral	75.9	9.0	15.1	100.0	95.8	0.7	0.5	3.0	100.0	83.2	2,483
D.I. Khan	12.5	77.4	10.1	100.0	74.7	7.0	8.0	10.3	100.0	67.6	9,672
Hangu	7.2	79.7	13.2	100.0	65.5	16.7	15.6	2.3	100.0	58.3	2,500
Haripur	57.1	27.7	15.2	100.0	83.9	7.4	1.4	7.3	100.0	73.6	5,900
Karak	36.8	41.2	22.0	100.0	79.7	1.3	5.0	14.0	100.0	63.8	3,024
Kohat	12.7	76.5	10.8	100.0	65.2	17.9	12.7	4.3	100.0	59.7	5,313
Kohistan	26.3	39.8	33.8	100.0	59.2	5.5	9.2	26.1	100.0	48.5	4,435
Lakki Marwat	24.5	63.0	12.4	100.0	70.4	13.2	7.0	9.3	100.0	61.6	3,823
Lower Dir	27.1	68.7	4.2	100.0	73.3	11.9	3.5	11.2	100.0	71.5	6,468
Malakand Protected Area	4.7	90.4	4.8	100.0	86.2	2.3	2.8	8.8	100.0	85.1	4,042
Mansehra	34.7	52.6	12.7	100.0	68.5	6.8	10.2	14.5	100.0	65.6	8,247
Mardan	2.9	95.1	2.1	100.0	76.2	9.8	11.0	2.9	100.0	75.3	11,329
Nowshera	9.0	90.0	1.0	100.0	81.7	14.2	1.9	2.3	100.0	80.9	7,127
Peshawar	16.9	82.5	0.6	100.0	87.2	6.5	5.1	1.1	100.0	86.6	22,199
Shangla	63.1	10.4	26.5	100.0	68.4	0.9	1.8	28.9	100.0	57.1	3,091
Swabi	10.9	86.3	2.8	100.0	73.8	14.0	8.8	3.4	100.0	72.5	8,096
Swat	35.4	55.5	9.1	100.0	73.7	6.0	4.2	16.1	100.0	69.3	11,075
Tank	20.3	58.6	21.1	100.0	82.1	3.6	11.8	2.5	100.0	65.3	2,094
Tor Ghar	29.3	49.2	21.5	100.0	44.0	-	3.7	52.3	100.0	36.9	1,202
Upper Dir	55.5	29.1	15.4	100.0	69.2	5.3	7.6	17.8	100.0	59.4	5,710

[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.

Table D. WS.8: Disposal of child's faeces

Percent distribution of children age 0-2 years according to place of disposal of child's faeces, and the percentage of children age 0-2 years whose stools were disposed of safely the last time the child passed stools, Khyber Pakhtunkhwa , 2016-17

	Place of disposal of child's faeces									Percentage of children whose last stools were disposed of safely[1]	Number of children age 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	Missing/DK	Total		
KP	5.9	41.5	21.8	26.8	0.6	1.9	0.4	1.1	100.0	47.5	12,467
District											
Abbottabad	22.2	28.9	11.1	32.8	0.2	3.7	0.3	0.8	100.0	51.1	550
Bannu	8.9	62.0	20.6	7.1	0.0	0.5	0.0	1.0	100.0	70.9	608
Batagram	1.2	48.9	25.0	20.6	2.2	1.1	0.3	0.7	100.0	50.2	257
Buner	2.6	23.0	5.6	63.4	0.0	3.2	0.3	1.9	100.0	25.6	351
Charsadda	2.6	44.7	12.1	38.8	1.2	0.2	0.0	0.3	100.0	47.4	657
Chitral	13.0	35.2	21.9	18.8	3.9	6.0	1.0	0.3	100.0	48.2	170
D.I. Khan	1.8	32.2	23.2	37.0	0.4	4.7	0.2	0.5	100.0	34.0	884
Hangu	3.2	45.1	16.9	29.2	0.6	2.9	0.0	2.1	100.0	48.3	229
Haripur	11.2	36.5	21.2	29.9	0.1	0.0	0.5	0.4	100.0	47.8	415
Karak	4.7	6.0	24.3	56.0	3.8	1.8	1.6	1.9	100.0	10.7	259
Kohat	9.1	46.9	17.6	24.9	0.1	0.9	0.2	0.3	100.0	56.0	395
Kohistan	0.6	15.5	43.8	35.7	1.7	1.4	0.0	1.3	100.0	16.1	345
Lakki Marwat	4.1	58.1	23.2	12.1	0.0	0.8	0.0	1.6	100.0	62.2	284
Lower Dir	1.8	37.4	13.9	43.7	0.0	1.6	0.3	1.3	100.0	39.3	491
Malakand Protected Area	4.5	34.0	27.5	29.1	1.5	3.3	0.0	0.2	100.0	38.4	327
Mansehra	8.2	41.5	31.3	15.7	0.2	1.2	0.3	1.6	100.0	49.7	657
Mardan	6.0	49.5	24.5	15.2	0.6	2.8	0.3	1.1	100.0	55.5	951
Nowshera	7.6	43.2	13.2	34.8	0.0	0.4	0.6	0.3	100.0	50.8	552
Peshawar	5.0	52.5	24.7	15.5	0.0	0.5	0.4	1.3	100.0	57.5	1,622
Shangla	1.9	38.9	23.9	23.1	3.1	7.1	1.1	0.9	100.0	40.8	233
Swabi	5.7	41.4	22.4	25.8	0.3	0.5	0.3	3.5	100.0	47.1	560
Swat	7.7	43.4	16.1	28.9	0.3	1.9	1.2	0.6	100.0	51.0	890
Tank	0.8	36.6	19.1	38.2	0.0	4.1	0.2	1.0	100.0	37.5	197
Tor Ghar	1.6	21.0	18.8	48.7	4.1	3.7	0.2	1.8	100.0	22.6	108
Upper Dir	3.0	40.8	40.9	10.1	0.0	3.5	0.0	1.8	100.0	43.8	475

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

Table D. 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 percent distribution of households by availability of water and soap at specific place for handwashing, Khyber Pakhtunkhwa , 2016-17

	Percentage of households :			Place for handwashing observed								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
				Water is available and:			Water is not available and:						
					No soap:			No soap:					
	Where place for handwashing was observed	With no specific place for handwashing in the dwelling, yard, or plot	Number of households	Soap present	Ash, mud, or sand present	No other cleansing agent present	Soap present	Ash, mud, or sand present	No other cleansing agent present	No specific place for handwashing in the dwelling, yard, or plot	Total		
KP	92.7	7.1	20,995	68.7	0.5	17.4	1.3	0.0	5.1	7.1	100.0	69.1	20,946
District													
Abbottabad	98.3	1.6	1,216	64.7	0.3	16.4	2.8	0.0	14.2	1.6	100.0	65.0	1,215
Bannu	93.9	5.8	719	75.6	0.9	16.5	0.6	0.3	0.4	5.9	100.0	76.4	717
Batagram	95.4	4.2	361	71.6	2.0	14.3	0.9	0.0	7.0	4.2	100.0	73.6	360
Buner	91.8	8.2	542	61.8	0.0	12.3	0.9	0.0	16.8	8.2	100.0	61.8	542
Charsadda	99.3	0.6	1,221	65.3	1.6	28.1	0.1	0.4	3.9	0.6	100.0	66.9	1,220
Chitral	94.7	2.5	386	49.0	0.0	5.9	30.9	0.0	11.7	2.6	100.0	49.0	375
D.I. Khan	93.3	6.6	1,097	63.8	1.7	26.3	0.4	0.0	1.3	6.6	100.0	65.5	1,096
Hangu	98.1	1.7	256	58.5	0.5	27.0	2.9	0.0	9.3	1.7	100.0	59.0	256
Haripur	96.1	3.8	905	74.3	0.3	13.0	0.9	0.0	7.7	3.8	100.0	74.6	904
Karak	11.8	88.2	402	10.1	0.0	1.4	0.2	0.0	0.0	88.2	100.0	10.1	402
Kohat	97.5	2.4	753	70.4	0.9	17.9	3.2	0.0	5.2	2.4	100.0	71.3	752
Kohistan	90.2	6.1	447	46.8	0.2	22.5	0.9	0.0	23.2	6.3	100.0	47.0	430
Lakki Marwat	92.2	7.8	476	46.4	0.5	17.6	2.2	0.2	25.2	7.8	100.0	46.9	476
Lower Dir	88.2	11.8	862	71.9	0.4	13.8	0.2	0.1	1.8	11.8	100.0	72.3	862
Malakand Protected Area	99.6	0.4	473	60.9	0.7	34.9	0.3	0.0	2.8	0.4	100.0	61.6	473
Mansehra	93.5	6.5	1,246	77.9	0.0	12.2	0.4	0.0	3.0	6.5	100.0	77.9	1,246
Mardan	94.9	4.9	1,452	68.3	0.1	23.6	0.3	0.0	2.8	4.9	100.0	68.4	1,450
Nowshera	99.2	0.6	1,039	85.4	0.5	12.2	0.0	0.0	1.2	0.6	100.0	85.9	1,037
Peshawar	90.4	9.4	2,997	77.1	0.1	12.5	0.1	0.0	0.8	9.5	100.0	77.3	2,991
Shangla	98.5	1.5	465	66.8	0.1	17.3	5.0	0.0	9.2	1.5	100.0	67.0	465
Swabi	99.6	0.4	1,194	77.0	0.0	20.0	0.0	0.0	2.6	0.4	100.0	77.0	1,193
Swat	97.5	2.5	1,409	75.4	0.4	17.1	0.1	0.0	4.6	2.5	100.0	75.8	1,409
Tank	96.9	2.6	255	77.0	1.2	18.3	0.0	0.0	0.8	2.6	100.0	78.3	254
Tor Ghar	56.1	43.0	161	31.0	0.0	11.8	2.7	0.0	11.1	43.4	100.0	31.0	159
Upper Dir	79.6	20.4	662	55.8	0.6	21.6	0.0	0.0	1.6	20.4	100.0	56.4	662

[1] MICS indicator 4.5 - Place for handwashing

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

Percent distribution of households by availability of soap or other cleansing agent in the dwelling, Khyber Pakhtunkhwa , 2016-17

	Place for handwashing observed					Place for handwashing not observed						
	Soap or other cleansing agent observed	Soap or other cleansing agent not observed: Soap or other cleansing agent shown	Soap or other cleansing agent not observed at place for handwashing: No soap or other cleansing agent in household	Soap or other cleansing agent not observed at place for handwashing: Not able/Does not want to show cleansing agent	Missing	Soap or other cleansing agent not observed: Soap or other cleansing agent shown	Soap or other cleansing agent not observed at place for handwashing: No soap or other cleansing agent in household	Soap or other cleansing agent not observed at place for handwashing: Not able/Does not want to show cleansing agent	Missing	Total	Percentage of households with soap or other cleansing agent anywhere in the dwelling [1]	Number of households
KP	70.3	14.2	6.4	1.7	0.1	4.3	1.7	1.2	0.0	100.0	88.8	20,995
District												
Abbottabad	67.7	15.9	11.8	2.6	0.3	1.3	0.0	0.4	0.0	100.0	84.9	1,216
Bannu	77.1	10.1	3.7	2.9	0.1	3.9	0.7	1.3	0.2	100.0	91.2	719
Batagram	74.2	16.7	4.0	0.3	0.2	3.7	0.4	0.6	0.0	100.0	94.6	361
Buner	62.7	25.5	3.1	0.4	0.0	7.6	0.4	0.2	0.0	100.0	95.9	542
Charsadda	67.3	26.8	4.4	0.7	0.1	0.3	0.2	0.2	0.0	100.0	94.5	1221
Chitral	77.7	6.3	9.4	1.3	0.0	0.9	2.3	2.1	0.0	100.0	84.8	386
D.I. Khan	65.8	16.0	6.6	4.9	0.0	4.8	0.6	1.2	0.0	100.0	86.7	1,097
Hangu	61.9	30.5	4.3	1.1	0.3	1.1	0.6	0.2	0.0	100.0	93.5	256
Haripur	75.4	18.4	0.7	1.6	0.0	3.5	0.1	0.3	0.0	100.0	97.3	905
Karak	10.4	0.2	1.2	0.0	0.0	35.0	50.2	3.0	0.0	100.0	45.6	402
Kohat	74.4	18.4	3.8	0.8	0.1	2.3	0.0	0.3	0.0	100.0	95.1	753
Kohistan	46.2	8.2	33.0	2.8	0.0	4.4	4.5	0.9	0.0	100.0	58.8	447
Lakki Marwat	49.3	36.2	3.8	2.4	.5	5.9	.5	1.5	0.0	100.0	91.4	476
Lower Dir	72.6	7.6	5.7	2.3	0.0	5.7	3.1	3.0	0.0	100.0	86.0	862
Malakand Protected Area	61.9	33.9	1.7	2.1	0.0	0.2	0.0	0.2	0.0	100.0	95.9	473
Mansehra	78.3	11.5	2.6	1.1	0.0	4.3	0.5	1.7	0.0	100.0	94.0	1,246
Mardan	68.6	15.1	9.3	1.8	0.1	4.6	0.3	0.2	0.0	100.0	88.2	1,452
Nowshera	85.8	6.1	5.6	1.5	0.3	0.7	0.1	0.0	0.0	100.0	92.6	1,039
Peshawar	77.2	6.2	5.9	1.1	0.0	5.4	1.3	3.0	0.0	100.0	88.8	2,997
Shangla	71.9	19.5	4.3	2.5	0.2	1.2	0.2	0.1	0.0	100.0	92.7	465
Swabi	77.0	15.1	4.5	3.0	0.0	0.1	0.1	0.3	0.0	100.0	92.1	1,194
Swat	75.9	9.9	11.0	0.6	0.2	2.2	0.0	0.2	0.0	100.0	88.0	1,409
Tank	77.9	14.5	3.4	1.1	0.0	2.4	0.3	0.4	0.0	100.0	94.8	255
Tor Ghar	33.4	7.5	12.9	2.3	0.0	25.3	12.4	6.3	0.0	100.0	66.2	161
Upper Dir	56.4	13.9	7.4	1.9	0.0	13.7	2.3	4.4	0.0	100.0	84.0	662

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

Table D. RH.2: Adolescent birth rate and total fertility rate

Adolescent birth rates and total fertility rates for the one-year period preceding the survey, Khyber Pakhtunkhwa, 2016-17

	Adolescent birth rate[1] (Age-specific fertility rate for women age 15-19)	Total fertility rate
KP	61.7	4.0
District		
Abbotabad	13.5	2.9
Bannu	87	6.0
Batagram	70	5.1
Buner	95	5.3
Charsadda	46	4.1
Chitral	58	3.0
D.I. Khan	102	5.0
Hangu	46	3.8
Haripur	33	3.4
Karak	48	4.7
Kohat	61	3.2
Kohistan	58	3.6
Lakki Marwat	33	4.7
Lower Dir	68	3.4
Malakand	83	4.2
Mansehra	46	4.2
Mardan	88	3.7
Nowshera	68	3.8
Peshawar	46	3.6
Shangla	91.1	3.9
Swabi	59.0	3.5
Swat	87.3	4.4
Tank	43.2	4.3
Tor Ghar	79.9	5.4
Upper Dir	50.0	5.0

[1] **MICS indicator 5.1; MDG indicator 5.4 - Adolescent birth rate**

Table D. RH.3: Early childbearing

Percentage of women ever-married age 15-19 years who have had a live birth, are pregnant with the first child, have begun childbearing, and who have had a live birth before age 15, and percentage of women age 20-24 years who have had a live birth before age 18, Khyber Pakhtunkhwa, 2016-17

	Percentage of ever-married women age 15-19 who:				Number of women ever-married age 15-19	Percentage of women ever-married age 20-24 who have had a live birth before age 18[1]	Number of women ever-married age 20-24
	Have had a live birth	Are pregnant with first child	Have begun childbearing	Have had a live birth before age 15			
KP	40.8	19.4	60.2	3.8	1,518	18.0	3,704
District							
Abbottabad	28.6	6.5	35.1	0.0	35	6.0	152
Bannu	45.4	21.7	67.0	3.9	69	14.5	151
Batagram	36.9	26.2	63.1	2.8	36	22.5	97
Buner	35.6	21.8	57.3	1.3	51	14.8	101
Charsadda	39.0	21.1	60.1	.9	75	10.6	200
Chitral	49.9	8.4	58.4	5.3	22	31.8	74
D. I. Khan	42.9	13.9	56.7	9.6	96	20.5	226
Hangu	28.6	32.2	60.8	3.0	24	23.3	74
Haripur	31.9	13.7	45.6	0.0	32	9.6	148
Karak	55.6	9.4	65.0	12.9	22	17.3	69
Kohat	59.8	7.3	67.1	16.1	52	18.3	117
Kohistan	44.5	5.2	49.7	8.7	61	47.0	114
Lakki Marwat	61.1	15.9	77.0	0.0	16	19.4	69
Lower Dir	34.6	15.0	49.6	1.2	64	16.7	150
Malakand Protected Area	49.5	24.2	73.7	4.3	48	15.9	91
Mansehra	21.8	17.3	39.0	4.8	63	12.5	232
Mardan	39.1	30.0	69.1	2.0	126	17.5	325
Nowshera	44.4	18.1	62.5	2.0	58	18.6	146
Peshawar	36.5	25.9	62.4	3.1	157	16.6	427
Shangla	50.4	11.6	61.9	9.0	52	38.9	91
Swabi	33.8	32.2	66.0	0.0	80	14.0	172
Swat	48.7	18.4	67.2	2.9	187	22.0	256
Tank	41.5	18.0	59.6	3.7	19	10.2	54
Tor Ghar	34.1	12.5	46.6	3.8	11	18.0	33
Upper Dir	31.2	16.5	47.7	0.0	61	19.6	137

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

Table D. RH.5: Use of contraception

Percentage of women ever-married age 15-49 years currently married who are using (or whose partner is using) a contraceptive method, Khyber Pakhtunkhwa, 2016-17

	Percent of women currently married who are using (or whose partner is using):																	Number of women ever-married age 15-49 years currently married
	No method	Female sterili-zation	Male sterili-zation	IUD	Injectables	Implants	Pill	Male condom	Female condom	Diaphragm/Foam/Jelly	Periodic abstinence	Withdrawal	Other	Missing	Any modern method	Any tradi-tional method	Any method[1]	
KP	67.5	1.9	0.1	1.1	9.4	0.2	3.9	9.4	0.1	0.4	1.0	4.9	0.2	0.0	26.3	6.1	32.5	24,373
District																		
Abbottabad	73.3	4.2	0.0	0.6	3.9	0.6	1.7	13.5	0.3	0.4	0.5	0.7	0.3	0.0	25.3	1.5	26.7	1,181
Bannu	72.6	0.5	0.0	0.7	8.2	0.0	4.5	5.9	0.0	0.1	1.4	5.9	0.0	0.0	20.0	7.4	27.4	998
Batagram	80.8	2.9	0.0	0.2	9.1	0.0	3.1	2.0	0.0	0.9	0.0	0.4	0.6	0.0	18.2	1.0	19.2	523
Buner	68.3	1.7	0.0	2.0	16.3	0.0	7.0	1.5	0.1	0.2	0.5	2.3	0.0	0.0	28.9	2.8	31.7	674
Charsadda	57.4	0.8	0.0	1.5	13.1	0.1	4.1	12.1	0.1	0.0	0.6	10.2	0.0	0.0	31.9	10.7	42.6	1,329
Chitral	62.3	0.8	0.0	0.6	23.4	0.0	9.5	2.2	0.1	0.8	0.0	0.2	0.1	0.0	37.4	0.2	37.7	400
D.I. Khan	80.9	1.6	0.0	2.3	3.7	0.1	2.4	8.4	0.0	0.0	0.1	0.5	0.0	0.0	18.5	0.6	19.1	1,460
Hangu	68.5	0.9	0.1	0.3	4.7	0.0	7.3	6.8	0.0	0.0	4.9	6.4	0.1	0.0	20.0	11.4	31.5	423
Haripur	72.4	4.9	0.0	1.0	4.2	1.0	1.8	12.1	0.0	1.0	0.2	0.9	0.3	0.2	26.2	1.3	27.6	974
Karak	78.5	0.9	0.2	1.9	2.4	0.0	2.9	12.5	0.0	0.4	0.2	0.1	0.0	0.0	21.3	0.2	21.5	435
Kohat	69.2	2.3	0.0	1.2	5.0	0.2	2.1	7.2	0.1	0.0	7.5	4.2	1.0	0.0	18.1	12.7	30.8	834
Kohistan	98.0	0.0	0.0	0.1	0.3	0.0	0.0	0.6	0.0	0.0	0.0	1.1	0.0	0.0	0.9	1.1	2.0	650
Lakki Marwat	71.2	1.1	0.3	2.0	7.5	0.0	5.1	10.3	0.1	0.3	0.9	0.9	0.3	0.0	26.7	2.0	28.8	497
Lower Dir	78.6	1.5	0.0	0.0	10.8	0.0	2.2	4.6	0.1	0.3	1.2	0.6	0.0	0.0	19.6	1.8	21.4	1,054
Malakand	53.7	0.8	0.0	0.7	15.9	0.0	9.0	8.9	0.0	0.1	0.2	10.6	0.0	0.0	35.5	10.9	46.3	637
Mansehra	67.8	3.4	0.0	1.2	11.0	0.4	1.8	9.8	0.2	1.0	0.8	2.4	0.1	0.0	28.9	3.3	32.2	1,281
Mardan	64.6	2.1	0.0	0.7	9.3	0.0	3.3	9.5	0.2	1.0	0.7	8.5	0.0	0.1	26.1	9.2	35.4	1,751
Nowshera	68.3	2.2	0.0	1.3	5.2	0.2	3.0	10.1	0.2	0.4	5.6	1.5	2.0	0.0	22.6	9.2	31.7	1,108
Peshawar	51.3	1.9	0.0	1.2	10.7	0.0	4.8	17.4	0.0	0.4	0.5	11.6	0.0	0.2	36.4	12.2	48.7	3,287
Shangla	69.4	1.1	0.0	0.0	13.8	0.6	5.7	4.7	0.0	0.1	0.1	4.2	0.0	0.4	25.9	4.3	30.6	510
Swabi	60.1	2.9	0.0	2.2	9.6	0.4	4.4	10.7	0.1	0.2	0.4	8.9	0.0	0.0	30.6	9.3	39.9	1,236
Swat	60.1	1.6	0.6	0.6	18.5	0.2	5.6	8.3	0.2	0.1	0.3	3.8	0.1	0.1	35.6	4.2	39.9	1,790
Tank	81.7	1.9	0.1	1.3	2.9	0.0	3.1	7.6	0.0	0.2	0.1	1.0	0.0	0.0	17.1	1.1	18.3	319
Tor Ghar	94.5	0.2	0.0	0.4	2.2	0.0	1.6	0.2	0.0	0.2	0.0	0.6	0.0	0.0	4.9	0.6	5.5	200
Upper Dir	79.3	0.5	0.0	0.1	9.4	0.0	3.4	4.5	0.1	0.0	0.0	2.5	0.0	0.0	18.1	2.6	20.7	825

[1] MICS indicator 5.3; MDG indicator 5.3 - Contraceptive prevalence rate

Table D. RH.6: Unmet need for contraception

Percentage of women ever-married age 15-49 years currently married or in with an unmet need for family planning and percentage of demand for contraception satisfied, Khyber Pakhtunkhwa, 2016-17

	Met need for contraception			Unmet need for contraception			Number of women currently married	Percentage of demand for contraception satisfied	Number of women currently married with need for contraception
	For spacing	For limiting	Total	For spacing	For limiting	Total[1]			
KP	12.3	20.1	32.5	13.0	7.8	20.8	24,373	61.0	12,984
District									
Abbottabad	9.1	17.6	26.7	14.5	11.2	25.7	1,181	51.0	619
Bannu	12.3	15.1	27.4	17.8	8.3	26.1	998	51.2	533
Batagram	6.1	13.2	19.2	16.5	11.7	28.2	523	40.5	248
Buner	12.4	19.3	31.7	13.2	9.4	22.6	674	58.3	366
Charsadda	15.1	27.5	42.6	5.8	9.2	15.0	1,329	73.9	766
Chitral	18.3	19.3	37.7	17.0	7.1	24.1	400	61.0	247
D.I. Khan	8.9	10.2	19.1	12.8	9.2	22.0	1,460	46.5	600
Hangu	11.7	19.8	31.5	10.5	9.0	19.5	423	61.7	216
Haripur	8.7	18.9	27.6	12.3	8.7	21.0	974	56.8	474
Karak	9.7	11.8	21.5	16.0	15.6	31.6	435	40.5	231
Kohat	12.1	18.7	30.8	11.8	8.1	19.9	834	60.8	423
Kohistan	1.0	1.0	2.0	33.7	3.7	37.5	650	5.1	257
Lakki Marwat	12.0	16.7	28.8	14.0	8.0	22.0	497	56.6	252
Lower Dir	7.8	13.6	21.4	20.8	8.0	28.7	1,054	42.7	528
Malakand Protected Area	19.8	26.5	46.3	9.0	7.0	15.9	637	74.4	397
Mansehra	11.1	21.1	32.2	8.5	7.0	15.5	1,281	67.5	611
Mardan	10.7	24.7	35.4	10.5	8.0	18.5	1,751	65.7	944
Nowshera	8.2	23.5	31.7	13.1	10.7	23.8	1,108	57.1	616
Peshawar	19.7	29.0	48.7	9.5	4.0	13.6	3,287	78.2	2,047
Shangla	19.2	11.4	30.6	21.9	3.0	24.8	510	55.2	283
Swabi	11.6	28.3	39.9	11.5	8.7	20.3	1236	66.3	744
Swat	15.7	24.2	39.9	8.8	7.2	15.9	1790	71.5	999
Tank	9.1	9.2	18.3	14.5	5.0	19.5	319	48.3	121
Tor Ghar	3.6	1.9	5.5	23.0	6.5	29.5	200	15.7	70
Upper Dir	9.6	11.1	20.7	19.9	7.3	27.2	825	43.2	395

[1] MICS indicator 5.4; MDG indicator 5.6 - Unmet need

Table D. RH.7: Antenatal care coverage

Percent distribution of women ever-married age 15-49 years with a live birth in the last two years by antenatal care provider during the pregnancy for the last birth, Khyber Pakhtunkhwa, 2016-17

	Provider of antenatal care[a]										Number of women with a live birth in the last two years
	Medical doctor	Nurse/ Midwife	Lady Health Visitor (LHV)	Lady Health Worker (LHW)	Traditional birth attendant (TBA)	Relatives /Friends	Other	No antenatal care	Total	Any skilled provider[1]	
KP	67.2	2.0	5.1	0.2	0.6	1.1	0.2	23.5	100.0	74.3	8,365
District											
Abbottabad	74.9	7.2	3.1	0.0	1.6	2.6	0.2	10.4	100.0	85.2	364
Bannu	64.6	0.6	2.9	1.3	0.1	1.4	0.1	29.0	100.0	68.1	413
Batagram	61.7	0.4	0.0	0.0	0.9	0.0	0.0	37.1	100.0	62.1	183
Buner	52.8	1.8	14.5	0.8	0.0	0.0	0.0	30.0	100.0	69.1	243
Charsadda	76.8	0.0	2.1	0.0	0.0	2.0	0.0	19.2	100.0	78.9	454
Chitral	51.0	17.2	10.1	0.0	0.0	3.9	0.5	17.4	100.0	78.2	127
D.I. Khan	44.2	6.2	13.9	0.0	1.9	0.2	0.4	33.3	100.0	64.3	559
Hangu	71.1	0.4	2.3	0.1	2.5	1.8	0.0	21.7	100.0	73.8	149
Haripur	70.2	1.2	2.0	0.4	0.1	2.3	0.0	23.8	100.0	73.5	256
Karak	75.6	1.3	2.9	0.0	0.0	0.7	0.0	19.5	100.0	79.9	168
Kohat	73.8	0.6	3.7	1.8	3.0	1.9	0.0	15.2	100.0	78.1	275
Kohistan	9.9	0.0	2.5	0.0	0.0	0.0	0.0	87.6	100.0	12.4	179
Lakki Marwat	45.6	1.0	5.2	0.0	0.0	0.7	0.4	47.1	100.0	51.8	190
Lower Dir	75.6	0.1	0.0	0.0	0.0	0.0	0.0	24.3	100.0	75.7	336
Malakand Potected Area	76.6	1.7	0.3	0.0	0.0	3.6	0.0	17.7	100.0	78.7	213
Mansehra	71.7	1.3	3.4	0.0	0.6	0.4	0.2	22.4	100.0	76.4	453
Mardan	80.6	2.4	4.4	0.0	0.5	0.2	0.5	11.4	100.0	87.4	627
Nowshera	81.8	0.2	1.9	0.4	0.9	0.0	0.3	14.6	100.0	83.9	384
Peshawar	77.2	0.8	5.4	0.1	0.4	1.2	0.0	14.8	100.0	83.4	1,130
Shangla	21.7	1.0	13.4	0.0	0.4	0.8	1.0	61.7	100.0	36.1	150
Swabi	67.2	0.9	7.4	0.2	0.0	0.5	0.0	23.8	100.0	75.5	389
Swat	76.7	1.7	4.4	0.3	0.6	3.1	0.6	12.7	100.0	82.7	614
Tank	45.4	2.1	9.5	0.0	0.0	0.0	0.0	43.0	100.0	57.0	125
Tor Ghar	32.4	0.0	0.5	0.0	0.9	1.4	0.0	64.8	100.0	32.9	71
Upper Dir	57.0	5.5	10.7	0.0	0.0	0.0	0.0	26.8	100.0	73.2	314

[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.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Percent distribution of women who had:							Percent 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 antenetal care visits	One visit	Two visits	Three visits	4 or more visits[1]	Missing/DK	Total	No antenatal care visits	First trimester	4-5 months	6-7 months	8+ months	DK/Missing	Total			
KP	23.6	5.7	10.9	14.4	44.1	1.2	100.0	23.5	55.6	12.4	5.6	2.1	0.7	100.0	8,365	2.0	6,334
District																	
Abbottabad	10.4	1.0	8.5	18.5	60.0	1.5	100.0	10.4	74.1	10.1	5.4	0.0	0.0	100.0	364	3.0	326
Bannu	29.0	12.8	17.2	13.7	26.3	1.0	100.0	29.0	31.5	18.0	15.5	6.0	0.0	100.0	413	4.0	293
Batagram	37.1	11.1	16.3	7.5	27.7	0.5	100.0	37.1	27.7	18.1	11.0	4.2	1.9	100.0	183	4.0	112
Buner	30.0	3.6	6.4	15.2	44.3	0.5	100.0	30.0	50.4	16.8	2.1	0.6	0.0	100.0	243	2.0	170
Charsadda	19.2	6.2	11.8	23.5	39.1	0.1	100.0	19.2	70.7	7.4	1.9	0.7	0.0	100.0	454	2.0	367
Chitral	17.4	5.8	9.7	18.5	48.2	0.6	100.0	17.4	56.5	16.5	7.6	1.2	0.8	100.0	127	3.0	104
D.I. Khan	33.4	15.6	18.5	14.1	17.3	1.1	100.0	33.3	31.9	14.6	12.7	4.5	2.9	100.0	559	3.0	357
Hangu	21.7	4.5	9.3	14.9	47.7	1.8	100.0	21.7	51.3	18.0	6.4	2.5	0.0	100.0	149	2.0	116
Haripur	23.8	1.6	6.0	17.1	50.1	1.4	100.0	23.8	56.6	14.5	2.5	0.8	1.9	100.0	256	3.0	191
Karak	19.5	6.2	11.6	10.2	50.4	2.1	100.0	19.5	52.2	19.2	4.3	3.8	1.0	100.0	168	3.0	134
Kohat	15.2	7.2	10.2	21.1	46.3	0.0	100.0	15.2	54.4	18.1	9.1	3.1	0.2	100.0	275	3.0	233
Kohistan	87.6	5.1	2.3	2.9	2.0	0.0	100.0	87.6	5.2	4.2	2.9	0.0	0.0	100.0	179	4.0	22
Lakki Marwat	47.1	10.7	15.0	10.0	16.6	0.6	100.0	47.1	26.0	9.9	11.6	5.0	0.4	100.0	190	4.0	100
Lower Dir	24.3	1.0	6.4	8.2	59.3	0.7	100.0	24.3	64.1	7.5	2.9	0.8	0.5	100.0	336	2.0	252
Malakand	17.8	3.2	11.1	24.3	42.3	1.3	100.0	17.7	71.2	8.8	1.9	0.2	0.1	100.0	213	2.0	175
Mansehra	22.4	2.7	15.2	18.7	38.3	2.7	100.0	22.4	61.8	11.9	1.9	1.2	0.8	100.0	453	2.0	348
Mardan	11.4	9.6	13.0	13.6	50.1	2.3	100.0	11.4	64.9	12.0	6.3	5.2	0.3	100.0	627	2.0	554
Nowshera	14.8	4.0	6.2	12.2	62.8	0.0	100.0	14.6	65.5	14.1	3.7	1.3	0.7	100.0	384	2.0	326
Peshawar	14.8	3.7	6.9	11.3	61.5	1.9	100.0	14.8	70.5	9.3	3.8	0.6	1.0	100.0	1,130	2.0	952
Shangla	61.7	2.3	9.2	11.5	10.2	5.1	100.0	61.7	20.8	12.7	2.6	0.0	2.3	100.0	150	3.0	54
Swabi	23.8	3.7	9.4	11.3	50.6	1.0	100.0	23.8	57.2	11.5	5.6	1.8	0.0	100.0	389	2.0	296
Swat	12.9	2.8	10.0	15.3	57.8	1.1	100.0	12.7	67.5	12.7	3.9	2.2	1.1	100.0	614	2.0	529
Tank	43.0	6.7	22.2	15.3	11.4	1.4	100.0	43.0	27.5	19.7	7.7	1.9	0.2	100.0	125	4.0	71
Tor Ghar	64.8	9.3	4.2	9.0	11.4	1.2	100.0	64.8	26.0	4.3	2.7	2.1	0.0	100.0	71	3.0	25
Upper Dir	26.8	3.9	13.3	16.8	39.1	0.1	100.0	26.8	53.8	12.6	4.2	2.1	0.5	100.0	314	2.0	228

[1] MICS indicator 5.5b; MDG indicator 5.5 - Antenatal care coverage
( ) Figures that are based on 25-49 unweighted cases

Table D. RH.9: Content of antenatal care

Percentage of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

| | Percentage of women who, during the pregnancy of their last birth, had: | | | | |
	Blood pressure measured	Urine sample taken	Blood sample taken	Blood pressure measured, urine and blood sample taken[1]	Number of women with a live birth in the last two years
KP	71.2	61.7	60.2	56.1	8,365
District					
Abbottabad	87.1	84.0	82.2	81.0	364
Bannu	64.2	41.3	31.8	24.6	413
Batagram	61.6	51.3	55.6	50.1	183
Buner	56.8	49.1	48.6	43.3	243
Charsadda	78.5	72.2	73.1	71.9	454
Chitral	81.5	70.5	74.8	68.4	127
D.I. Khan	59.6	23.7	26.1	19.7	559
Hangu	72.6	67.4	68.7	63.2	149
Haripur	68.5	72.3	69.0	66.4	256
Karak	69.8	46.0	52.4	42.4	168
Kohat	83.0	75.4	68.7	67.2	275
Kohistan	12.0	8.8	6.6	6.0	179
Lakki Marwat	43.9	30.5	26.6	22.3	190
Lower Dir	65.6	64.3	70.0	56.7	336
Malakand	78.3	72.6	74.9	69.8	213
Mansehra	74.1	65.0	56.2	55.1	453
Mardan	82.0	68.9	68.8	64.8	627
Nowshera	82.4	73.5	73.1	67.9	384
Peshawar	82.7	79.1	76.9	75.8	1,130
Shangla	37.0	30.7	28.4	28.1	150
Swabi	72.4	58.3	57.0	52.8	389
Swat	76.5	79.9	78.4	71.4	614
Tank	51.4	21.8	18.4	13.1	125
Tor Ghar	33.7	28.5	27.0	26.4	71
Upper Dir	68.7	61.0	57.2	54.1	314

[1] **MICS indicator 5.6 - Content of antenatal care**

Table D. RH.10: Assistance during delivery and caesarian section

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

| | Person assisting at delivery | | | | | | | | Percent delivered by C-section | | | Number of women who had a live birth in the last two years |
	Medical doctor	Nurse/ Midwife	Lady Health Visitor (LHV)	Traditional birth attendant (TBA)	Relative/Friend	Other	No attendant	Total	Delivery assisted by any skilled attendant[1]	Decided before onset of labour pains	Decided after onset of labour pains	Total[2]	
KP	56.4	4.6	7.6	14.4	13.7	2.7	0.6	100.0	68.6	4.3	3.2	7.5	8,365
District													
Abbottabad	65.5	5.7	3.5	16.2	7.8	0.2	1.2	100.0	74.7	9.9	9.5	19.4	364
Bannu	48.1	5.7	13.7	10.3	19.0	2.1	1.0	100.0	67.6	6.3	1.9	8.2	413
Batagram	51.1	0.0	0.2	27.5	19.3	1.7	0.1	100.0	51.4	2.8	6.1	8.9	183
Buner	51.0	3.8	18.6	12.3	12.6	1.4	0.2	100.0	73.4	1.3	2.1	3.4	243
Charsadda	64.4	1.1	11.9	15.2	6.1	1.2	0.2	100.0	77.4	1.7	2.3	4.0	454
Chitral	33.6	21.1	8.8	4.2	32.3	0.0	0.0	100.0	63.5	0.8	1.8	2.7	127
D.I. Khan	34.9	8.0	15.9	34.9	5.5	0.6	0.2	100.0	58.7	1.8	3.2	5.0	559
Hangu	78.9	3.5	2.3	6.8	6.2	2.3	0.0	100.0	84.7	6.6	4.6	11.2	149
Haripur	60.2	3.0	1.4	26.6	5.7	2.9	0.2	100.0	64.6	9.6	8.2	17.9	256
Karak	64.7	6.4	8.6	3.6	16.5	0.2	0.0	100.0	79.7	5.5	4.7	10.2	168
Kohat	68.5	4.6	3.3	13.1	7.6	2.5	0.4	100.0	76.5	9.3	5.7	15.0	275
Kohistan	8.1	0.2	2.5	2.2	72.9	6.2	7.9	100.0	10.8	0.2	0.8	1.0	179
Lakki Marwat	43.0	6.5	6.3	11.0	31.1	0.8	1.5	100.0	55.7	1.7	3.5	5.3	190
Lower Dir	77.3	1.5	0.7	4.8	10.4	4.5	0.9	100.0	79.5	1.2	3.3	4.5	336
Malakand	54.1	19.2	10.8	11.4	3.6	0.9	0.0	100.0	84.1	3.2	3.1	6.4	213
Mansehra	43.8	0.5	2.3	22.5	28.1	2.8	0.0	100.0	46.6	6.4	1.4	7.8	453
Mardan	54.7	7.8	9.7	15.5	7.6	3.4	1.3	100.0	72.2	4.9	2.3	7.2	627
Nowshera	65.9	5.0	3.3	11.3	7.6	5.4	1.7	100.0	74.1	3.1	3.2	6.2	384
Peshawar	74.2	1.8	6.9	9.5	5.6	2.1	0.0	100.0	82.9	4.5	3.1	7.6	1,130
Shangla	27.1	0.6	9.1	16.2	20.4	26.6	0.0	100.0	36.8	1.0	2.5	3.5	150
Swabi	53.6	4.0	8.1	15.5	16.5	2.3	0.0	100.0	65.8	6.9	1.0	7.9	389
Swat	68.1	4.4	7.3	6.3	12.2	1.7	0.0	100.0	79.8	5.5	3.2	8.7	614
Tank	29.8	2.5	8.6	46.9	11.1	0.7	0.4	100.0	40.9	0.7	0.9	1.6	125
Tor Ghar	24.8	3.1	1.8	19.0	49.1	1.8	0.4	100.0	29.7	1.1	0.0	1.1	71
Upper Dir	44.6	5.1	9.8	8.2	27.7	4.7	0.0	100.0	59.5	0.5	1.3	1.8	314

¹ **MICS indicator 5.7; MDG indicator 5.2 - Skilled attendant at delivery**

² **MICS indicator 5.9 - Caesarean section**

Table D. RH.11: Place of delivery

Percent distribution of women ever-married age 15-49 years with a live birth in the last two years by place of delivery of their last birth, Khyber Pakhtunkhwa, 2016-17

	Place of delivery						Delivered in health facility[1]	Number of women with a live birth in the last two years
	Health facility							
	Public sector	Private sector	Home	Other	Missing/DK	Total		
KP	28.3	36.1	33.9	0.3	1.3	100.0	64.5	8,365
District								
Abbottabad	38.1	32.7	27.8	1.3	0.2	100.0	70.8	364
Bannu	25.5	30.5	43.4	0.4	0.2	100.0	56.0	413
Batagram	12.8	38.2	47.1	0.3	1.7	100.0	51.0	183
Buner	18.0	55.0	25.5	0.4	1.2	100.0	73.0	243
Charsadda	28.9	44.1	25.8	0.0	1.2	100.0	73.0	454
Chitral	33.5	26.9	39.2	0.4	0.0	100.0	60.4	127
D.I. Khan	15.4	35.8	48.9	0.0	0.0	100.0	51.1	559
Hangu	24.6	61.3	12.0	0.3	1.8	100.0	85.9	149
Haripur	23.2	38.2	35.9	1.2	1.5	100.0	61.3	256
Karak	15.8	56.4	27.6	0.0	0.2	100.0	72.2	168
Kohat	35.6	39.8	23.0	0.3	1.3	100.0	75.4	275
Kohistan	6.5	4.2	85.8	0.0	3.5	100.0	10.6	179
Lakki Marwat	13.9	36.0	49.3	0.0	0.8	100.0	49.9	190
Lower Dir	33.9	44.0	19.7	0.0	2.4	100.0	77.9	336
Malakand	43.3	36.9	19.4	0.0	0.4	100.0	80.2	213
Mansehra	19.4	23.2	54.3	1.1	2.0	100.0	42.6	453
Mardan	29.9	32.4	36.4	0.6	0.7	100.0	62.3	627
Nowshera	42.3	30.4	25.3	0.0	2.0	100.0	72.7	384
Peshawar	38.9	40.7	18.0	0.3	2.0	100.0	79.7	1,130
Shangla	11.8	22.6	64.4	0.0	1.2	100.0	34.4	150
Swabi	26.6	35.0	37.2	0.0	1.2	100.0	61.6	389
Swat	40.4	38.1	19.7	0.0	1.8	100.0	78.5	614
Tank	17.4	21.8	59.5	0.8	0.6	100.0	39.1	125
Tor Ghar	3.4	24.0	70.9	0.0	1.8	100.0	27.3	71
Upper Dir	20.7	34.8	42.0	0.0	2.4	100.0	55.5	314

[1] MICS indicator 5.8 - Institutional deliveries

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Duration of stay in health facility								Number of women who had their last birth delivered in a health facility in the last 2 years
	Less than 6 hours	6-11 hours	12-23 hours	1-2 days	3 days or more	DK/ Missing	Total	12 hours or more[1]	
KP	64.6	8.4	1.2	15.7	9.6	0.5	100.0	26.5	5,392
District									
Abbottabad	28.8	6.7	1.0	35.8	27.6	0.0	100.0	64.4	258
Bannu	62.4	10.4	0.6	14.1	12.4	0.0	100.0	27.2	231
Batagram	63.3	7.7	0.0	15.0	13.5	0.4	100.0	28.5	93
Buner	71.3	12.4	0.6	10.4	3.6	1.7	100.0	14.6	178
Charsadda	70.1	8.1	0.6	14.8	6.2	0.2	100.0	21.6	331
Chitral	39.6	8.1	2.4	45.1	4.7	0.0	100.0	52.2	77
D.I. Khan	81.4	3.7	0.2	5.3	7.2	2.2	100.0	12.7	286
Hangu	70.5	6.1	0.8	13.0	9.5	0.0	100.0	23.4	128
Haripur	48.8	7.9	0.7	16.4	26.2	0.0	100.0	43.3	157
Karak	78.3	7.1	0.0	8.1	3.6	2.9	100.0	11.7	121
Kohat	63.4	3.9	0.7	16.8	13.8	1.4	100.0	31.3	207
Kohistan	58.2	7.9	0.0	15.4	18.5	0.0	100.0	33.8	19
Lakki Marwat	73.9	5.8	2.1	11.2	7.0	0.0	100.0	20.3	95
Lower Dir	55.7	19.3	4.9	14.8	4.7	0.6	100.0	24.4	262
Malakand	72.6	8.6	0.2	12.3	6.2	0.1	100.0	18.7	170
Mansehra	48.2	10.1	1.4	19.7	20.6	0.0	100.0	41.7	193
Mardan	72.4	5.8	0.8	10.7	8.4	1.8	100.0	20.0	390
Nowshera	64.1	12.5	1.4	14.2	7.9	0.0	100.0	23.5	279
Peshawar	63.0	9.5	1.4	17.3	8.8	0.0	100.0	27.5	900
Shangla	54.8	5.2	0.0	28.8	10.3	1.0	100.0	39.1	51
Swabi	78.7	3.9	0.0	11.2	6.1	0.0	100.0	17.3	239
Swat	68.0	6.0	1.9	16.3	7.6	0.3	100.0	25.7	482
Tank	71.3	3.3	0.4	22.8	2.2	0.0	100.0	25.4	49
Tor Ghar	49.9	13.0	3.7	27.3	4.2	1.9	100.0	35.3	19
Upper Dir	74.1	12.3	1.6	9.4	1.8	0.9	100.0	12.8	174

[1] MICS indicator 5.10 - Post-partum stay in health facility
( ) Figures that are based on 25-49 unweighted cases

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

Percentage of women ever-married age 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, percent 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, Khyber Pakhtunkhwa, 2016-17

	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	1 day following birth	2 days following birth	3-6 days following birth	After the first week following birth	No post-natal care visit	DK/ Missing	Total		
KP	67.7	3.3	4.7	1.7	3.8	2.8	83.3	0.4	100.0	68.4	8,365
District											
Abbottabad	69.1	2.0	5.5	3.5	7.0	3.0	78.9	0.0	100.0	71.4	364
Bannu	71.5	2.4	0.7	0.4	1.4	3.0	92.1	0.0	100.0	71.9	413
Batagram	67.1	6.1	1.8	1.7	3.0	2.2	84.1	1.0	100.0	67.8	183
Buner	66.2	3.2	5.3	0.4	4.7	1.9	84.4	0.0	100.0	66.6	243
Charsadda	86.1	1.6	2.1	1.0	3.7	4.1	87.5	0.0	100.0	86.4	454
Chitral	62.5	1.5	4.0	2.3	1.3	0.6	89.9	0.5	100.0	63.1	127
D.I. Khan	70.0	2.9	0.5	0.8	1.1	1.9	92.5	0.3	100.0	70.6	559
Hangu	84.5	2.3	4.4	0.9	3.2	1.8	87.3	0.0	100.0	86.2	149
Haripur	72.5	2.2	5.4	1.7	6.0	7.0	77.7	0.0	100.0	74.1	256
Karak	63.1	7.1	3.0	0.1	1.6	0.4	87.2	0.6	100.0	63.7	168
Kohat	81.5	2.9	2.2	2.0	4.8	3.8	84.0	0.3	100.0	82.0	275
Kohistan	9.7	0.3	1.9	.9	0.6	1.1	95.3	0.0	100.0	11.1	179
Lakki Marwat	40.2	3.3	0.5	0.0	1.9	0.6	93.8	0.0	100.0	42.7	190
Lower Dir	52.1	4.4	21.3	2.0	4.1	0.5	67.7	0.0	100.0	52.7	336
Malakand Protected Area	84.5	1.7	4.1	2.2	5.7	5.8	80.0	0.6	100.0	86.6	213
Mansehra	62.5	1.8	3.7	1.8	6.6	6.9	79.1	0.1	100.0	62.6	453
Mardan	63.1	4.2	3.7	1.8	5.1	3.8	80.3	1.0	100.0	65.1	627
Nowshera	49.4	5.1	11.5	1.6	2.9	1.0	77.8	0.0	100.0	49.4	384
Peshawar	80.6	1.8	5.3	2.2	4.6	3.5	82.0	0.6	100.0	80.9	1,130
Shangla	38.2	3.6	9.7	3.7	4.0	0.5	76.5	2.0	100.0	39.1	150
Swabi	70.1	12.2	6.0	1.8	2.5	3.3	74.1	0.0	100.0	70.5	389
Swat	79.0	3.5	4.7	3.2	4.6	1.0	80.9	2.1	100.0	79.4	614
Tank	74.5	0.5	0.6	1.1	2.2	0.7	94.9	0.0	100.0	74.5	125
Tor Ghar	35.0	1.9	0.6	0.0	1.0	0.8	95.7	0.0	100.0	35.4	71
Upper Dir	52.8	2.0	2.4	0.8	2.8	0.3	91.7	0.0	100.0	53.2	314

[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] Post-natal care visits (PNC) 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.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	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	Other location	Total	Doctor/ nurse/ midwife	Lady health visitor (LHV)	Lady health worker (LHW)	Traditional birth attendant	Total	
KP	18.6	33.4	47.9	0.1	100.0	81.3	5.5	1.2	12.1	100.0	1,128
District											
Abbottabad	16.6	33.9	49.5	0.0	100.0	83.4	0.0	3.0	13.6	100.0	66
Bannu	36.2	33.5	30.4	0.0	100.0	56.1	14.8	0.9	28.1	100.0	20
Batagram	47.6	10.9	39.2	2.3	100.0	50.2	0.0	0.0	49.8	100.0	23
Buner	21.8	17.7	60.4	0.0	100.0	66.0	11.5	3.8	18.8	100.0	33
Charsadda	12.4	50.7	36.9	0.0	100.0	81.9	14.1	0.0	4.0	100.0	38
Chitral	53.0	26.2	20.9	0.0	100.0	54.6	43.8	1.6	0.0	100.0	11
D.I. Khan	37.1	27.2	35.7	0.0	100.0	60.2	2.7	0.0	37.1	100.0	30
Hangu	6.2	25.2	68.6	0.0	100.0	93.8	2.9	0.0	3.3	100.0	16
Haripur	9.3	20.1	69.3	1.3	100.0	90.7	0.0	0.0	9.3	100.0	39
Karak	20.7	10.5	68.7	0.0	100.0	92.1	7.9	0.0	0.0	100.0	20
Kohat	11.3	39.1	49.7	0.0	100.0	92.0	0.0	0.0	8.0	100.0	33
Kohistan	0.0	65.0	35.0	0.0	100.0	88.1	11.9	0.0	0.0	100.0	7
Lakki Marwat	52.7	11.4	35.9	0.0	100.0	68.4	31.6	0.0	0.0	100.0	11
Lower Dir	7.5	49.4	43.1	0.0	100.0	92.3	1.8	0.9	5.1	100.0	107
Malakand	7.2	47.6	45.2	0.0	100.0	92.8	0.0	0.0	7.2	100.0	29
Mansehra	35.1	34.0	30.9	0.0	100.0	67.2	2.6	3.3	26.9	100.0	63
Mardan	20.3	37.6	42.1	0.0	100.0	90.4	1.1	0.0	8.5	100.0	94
Nowshera	15.6	41.1	43.3	0.0	100.0	83.5	3.7	0.0	12.8	100.0	81
Peshawar	17.2	24.9	57.8	0.0	100.0	83.4	9.1	0.0	7.5	100.0	157
Shangla	9.9	38.9	51.2	0.0	100.0	81.9	10.2	0.0	7.9	100.0	32
Swabi	14.6	33.4	52.0	0.0	100.0	82.7	6.1	0.0	11.2	100.0	88
Swat	21.4	27.1	51.6	0.0	100.0	74.1	7.0	7.1	11.9	100.0	98
Tank	2.1	48.4	49.5	0.0	100.0	97.9	0.0	0.0	2.1	100.0	5
Tor Ghar	40.9	14.7	44.4	0.0	100.0	59.1	10.6	0.0	30.3	100.0	2
Upper Dir	18.4	37.0	44.6	0.0	100.0	81.6	0.0	0.0	18.4	100.0	25

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

Percentage of women ever-married age 15-49 years with a live birth in the last two years who received health checks while in facility or at home following birth, percent 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, Khyber Pakhtunkhwa, 2016-17

	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	1 day following birth	2 days following birth	3-6 days following birth	After the first week following birth	No post-natal care visit	Missing/ DK	Total		
KP	64.4	1.8	2.0	1.3	2.8	3.4	88.5	0.2	100.0	65.0	8,365
District											
Abbottabad	68.7	0.3	3.0	2.5	6.4	4.1	83.6	0.0	100.0	68.9	364
Bannu	70.1	0.9	1.4	0.3	2.5	6.1	88.9	0.0	100.0	70.1	413
Batagram	61.8	4.1	1.5	0.3	2.3	2.0	89.4	0.5	100.0	62.1	183
Buner	63.0	0.5	0.9	1.1	1.9	0.7	94.9	0.0	100.0	63.5	243
Charsadda	83.4	1.1	1.0	0.1	1.8	3.4	92.3	0.3	100.0	83.4	454
Chitral	59.3	1.5	2.1	1.4	0.9	0.4	93.3	0.5	100.0	60.4	127
D.I. Khan	62.9	0.8	0.9	1.0	1.3	1.8	94.2	0.0	100.0	63.6	559
Hangu	79.2	2.0	2.2	1.2	3.3	5.0	86.3	0.0	100.0	80.9	149
Haripur	70.2	2.5	3.6	0.7	4.7	9.4	78.5	0.6	100.0	70.6	256
Karak	69.3	4.9	3.4	1.1	1.9	2.3	86.4	0.0	100.0	69.5	168
Kohat	73.8	2.0	1.2	1.8	5.3	5.1	84.4	0.3	100.0	74.8	275
Kohistan	11.0	0.0	0.4	0.7	0.6	1.1	97.3	0.0	100.0	11.0	179
Lakki Marwat	35.6	1.5	0.0	0.0	2.6	5.6	90.3	0.0	100.0	36.7	190
Lower Dir	54.2	1.1	5.6	0.3	3.0	1.6	88.2	0.2	100.0	54.5	336
Malakand Protected Area	80.3	0.9	2.6	1.4	3.4	6.2	85.5	0.0	100.0	80.5	213
Mansehra	59.0	1.2	1.1	1.1	4.1	5.3	86.6	0.6	100.0	59.0	453
Mardan	61.6	1.9	2.6	2.3	3.2	3.6	86.1	0.3	100.0	64.6	627
Nowshera	47.5	4.8	3.4	1.2	2.7	2.5	85.3	0.0	100.0	48.7	384
Peshawar	76.0	0.8	1.8	1.0	2.4	3.7	90.1	0.1	100.0	76.3	1,130
Shangla	30.3	1.7	6.4	4.2	4.8	0.5	80.8	1.5	100.0	30.3	150
Swabi	64.8	8.1	2.6	1.9	1.9	5.5	79.9	0.0	100.0	65.1	389
Swat	73.1	1.8	2.4	2.9	3.3	1.4	87.2	0.9	100.0	74.1	614
Tank	69.3	0.4	0.0	0.4	1.0	2.2	96.1	0.0	100.0	69.3	125
Tor Ghar	34.8	0.4	0.6	0.4	0.0	0.0	98.7	0.0	100.0	34.8	71
Upper Dir	51.8	0.0	0.2	0.0	0.5	0.3	99.0	0.0	100.0	51.8	314

[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] Post-natal care visits (PNC) refer 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 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.

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	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	Other location	Total	Doctor/ nurse/ midwife	Auxiliary midwife	Community health worker	Traditional birth attendant	Total	
KP	20.9	29.2	49.9	0.1	100.0	80.7	8.8	1.0	9.5	100.0	655
District											
Abbottabad	21.5	38.9	39.6	0.0	100.0	(80.3)	(0.0)	(0.0)	(19.7)	(100.0)	45
Bannu	17.9	17.7	64.4	0.0	100.0	82.2	14.5	0.0	3.2	100.0	21
Batagram	57.7	7.9	34.4	0.0	100.0	42.3	0.0	0.0	57.7	100.0	15
Buner	11.7	21.0	67.3	0.0	100.0	40.8	59.2	0.0	0.0	100.0	11
Charsadda	12.1	40.6	47.3	0.0	100.0	75.9	24.1	0.0	0.0	100.0	18
Chitral	76.5	16.3	7.3	0.0	100.0	46.1	51.6	0.0	2.3	100.0	7
D.I. Khan	49.9	15.3	34.8	0.0	100.0	74.1	3.6	0.0	22.4	100.0	22
Hangu	9.1	21.8	69.0	0.0	100.0	90.9	3.6	0.0	5.5	100.0	13
Haripur	6.3	21.8	70.1	1.8	100.0	93.7	0.0	0.0	6.3	100.0	29
Karak	12.8	16.1	71.1	0.0	100.0	95.1	4.9	0.0	0.0	100.0	19
Kohat	10.9	42.5	46.7	0.0	100.0	93.0	0.0	0.0	7.0	100.0	28
Kohistan	0.0	43.7	56.3	0.0	100.0	52.1	47.9	0.0	0.0	100.0	3
Lakki Marwat	36.2	17.9	45.9	0.0	100.0	78.2	21.8	0.0	0.0	100.0	8
Lower Dir	5.4	31.5	63.1	0.0	100.0	94.0	0.6	0.0	5.4	100.0	34
Malakand Protected Area	10.4	43.7	45.9	0.0	100.0	92.0	3.3	0.0	4.7	100.0	18
Mansehra	32.7	26.7	40.6	0.0	100.0	58.9	7.5	6.1	27.5	100.0	34
Mardan	35.7	27.2	37.0	0.0	100.0	79.5	7.6	3.0	10.0	100.0	63
Nowshera	25.5	25.5	49.0	0.0	100.0	76.2	10.9	2.5	10.4	100.0	47
Peshawar	18.9	32.7	48.3	0.0	100.0	81.9	16.0	0.0	2.1	100.0	68
Shangla	4.3	31.3	64.4	0.0	100.0	(89.2)	(6.5)	(0.0)	(4.3)	(100.0)	26
Swabi	10.9	44.0	45.0	0.0	100.0	(85.7)	(6.3)	(0.0)	(8.0)	(100.0)	57
Swat	20.1	21.3	58.6	0.0	100.0	(83.6)	(8.3)	(2.5)	(5.5)	(100.0)	64
Tank	20.3	31.1	48.6	0.0	100.0	(*)	(*)	(*)	(*)	(*)	2
Tor Ghar	28.2	0.0	71.8	0.0	100.0	(*)	(*)	(*)	(*)	(*)	1
Upper Dir	0.0	63.2	36.8	0.0	100.0	(*)	(*)	(*)	(*)	(*)	2

( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

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

Percent distribution of women ever-married age 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, Khyber Pakhtunkhwa, 2016-17

	Post-natal health checks within two days of birth for:						Number of women with a live birth in the last two years
	Both mothers and newborns	Mothers only	Newborns only	Neither mother nor newborn	DK/ Missing	Total	
KP	62.2	2.6	6.1	29.0	0.1	100	8,365
District							
Abbottabad	63.9	5.0	7.5	23.6	0.0	100	364
Bannu	69.5	0.6	2.4	27.5	0.0	100.0	413
Batagram	59.3	2.3	8.0	29.9	0.5	100.0	183
Buner	62.3	1.2	4.3	32.2	0.0	100.0	243
Charsadda	82.2	1.1	4.2	12.5	0.0	100.0	454
Chitral	58.1	1.8	5.0	34.6	0.5	100.0	127
D.I. Khan	61.3	2.3	9.3	27.1	0.0	100.0	559
Hangu	78.7	2.2	7.5	11.5	0.0	100.0	149
Haripur	64.4	6.2	9.7	19.6	0.0	100.0	256
Karak	61.2	8.4	2.5	28.0	0.0	100.0	168
Kohat	72.4	2.1	9.4	15.8	0.3	100.0	275
Kohistan	9.7	1.3	1.4	87.6	0.0	100.0	179
Lakki Marwat	35.6	1.1	7.1	56.2	0.0	100.0	190
Lower Dir	49.2	5.4	3.5	42.0	0.0	100.0	336
Malakand	78.6	1.9	8.0	11.4	0.0	100.0	213
Mansehra	57.9	1.1	4.8	36.3	0.0	100.0	453
Mardan	58.9	5.4	5.9	29.5	0.3	100.0	627
Nowshera	42.0	6.7	7.4	43.9	0.0	100.0	384
Peshawar	74.5	1.7	6.3	17.4	0.1	100.0	1,130
Shangla	27.7	1.3	10.1	59.6	1.2	100.0	150
Swabi	64.4	0.7	6.1	28.8	0.0	100.0	389
Swat	72.1	1.6	6.9	19.0	0.3	100.0	614
Tank	68.9	0.4	5.6	25.2	0.0	100.0	125
Tor Ghar	32.7	2.1	2.7	62.5	0.0	100.0	71
Upper Dir	50.3	1.5	2.8	45.4	0.0	100.0	314

Table D. RH.18: Lady health worker (LHW) visits

Percentage of women with a live birth in the last 2 years who reported that a LHW visited the house during the past month, Khyber Pakhtunkhwa, 2016-17.

	HH visited by lady health worker (LHW) during past month				Number of women with a live birth in the last two years	Purpose of Visit					Number of women visited by LHW
	Yes[1]	No	DK	Missing		ORT, vitamins, medicines	To weigh child	Education / advice	Other	DK	
KP	36.8	61.6	1.6	.0	8365	**43.0**	**3.9**	**34.6**	**38.0**	**1.7**	**3,076**
District											
Abbottabad	**70.6**	**28.5**	**0.9**	**0.0**	**364**	**38.9**	**11.0**	**41.1**	**49.7**	**3.6**	**257**
Bannu	12.0	86.5	1.4	0.0	413	55.9	9.5	7.5	43.4	2.1	50
Batagram	7.7	90.7	1.7	0.0	183	24.3	6.4	49.3	30.4	12.4	14
Buner	22.1	76.7	0.4	0.8	243	33.7	2.6	41.4	63.7	2.7	54
Charsadda	37.3	61.5	1.2	0.0	454	56.6	3.7	46.9	8.2	1.3	170
Chitral	70.2	29.5	0.3	0.0	127	63.9	1.4	26.3	61.2	0.6	89
D.I. Khan	47.1	51.7	1.1	0.0	559	34.1		22.6	47.8	2.0	262
Hangu	13.6	84.6	1.8	0.0	149	51.1	3.8	22.6	45.9		20
Haripur	64.7	33.7	1.5	0.0	256	59.5	20.9	43.0	19.2		166
Karak	76.9	22.9	0.2	0.0	168	30.9		2.0	67.7	1.5	129
Kohat	30.4	68.3	1.3	0.0	275	34.9		13.9	63.7	0.8	83
Kohistan	0.4	95.9	3.7	0.0	179	100.0					1
Lakki Marwat	33.2	66.0	0.6	0.1	190	30.6		2.4	71.5		63
Lower Dir	6.0	91.3	2.7	0.0	336	24.8		75.9		1.1	20
Malakand	41.3	58.1	0.3	0.3	213	67.9		31.8	12.1	2.2	87
Mansehra	33.7	64.8	1.5	0.0	453	43.3	3.7	66.5	27.4	0.3	153
Mardan	63.6	35.7	0.7	0.0	627	36.0	1.5	28.9	53.2		399
Nowshera	33.9	64.1	2.0	0.0	384	36.4	0.6	23.7	44.3	1.7	130
Peshawar	30.9	66.9	2.2	0.0	1,130	44.8	4.0	51.2	10.0	2.0	348
Shangla	8.2	89.4	2.4	0.0	150	65.3		38.0	22.9	6.2	12
Swabi	46.1	51.6	2.3	0.0	389	34.9	2.7	47.1	34.9	3.3	179
Swat	47.3	50.9	1.7	0.0	614	48.3	2.8	30.2	33.1	3.2	291
Tank	44.0	54.9	1.1	0.0	125	23.6		24.7	52.5		54
Tor Ghar	2.6	95.1	2.3	0.0	71	14.3		35.0	25.4	25.4	2
Upper Dir	13.7	83.9	2.4	0.0	314	74.9	4.6	27.4	29.6	1.8	43

[1] **MICS indicator 5.S2 - Care provided by Lady Health Worker (LHW)**

Table D. CD.1: Early childhood education

Percentage of children age 36-59 months who are attending an organized early childhood education programme, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 36-59 months attending early childhood education[1]	Number of children age 36-59 months
KP	8.1	8,520
District		
Abbottabad	16.6	337
Bannu	6.8	401
Batagram	7.3	189
Buner	2.6	220
Charsadda	9.0	426
Chitral	5.2	101
D.I. Khan	3.9	618
Hangu	8.4	152
Haripur	21.9	263
Karak	6.3	180
Kohat	5.9	283
Kohistan	1.0	329
Lakki Marwat	13.3	215
Lower Dir	2.5	326
Malakand Protected Area	5.2	200
Mansehra	12.5	417
Mardan	12.9	603
Nowshera	14.5	387
Peshawar	6.3	1,216
Shangla	1.5	187
Swabi	15.1	379
Swat	6.2	584
Tank	4.0	136
Tor Ghar	0.0	72
Upper Dir	0.9	298

[1] **MICS indicator 6.1 - Attendance to early childhood education**

Table D. CD.2: Support for learning

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	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 age 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 age 36-59 months living with their biological fathers	Percentage of children with whom biological mothers have engaged in four or more activities[3]	Mean number of activities with biological mothers	Number of children age 36-59 months living with their biological mothers
			Biological father	Biological mother							
KP	36.6	2.9	86.1	99.2	8,520	2.8	0.7	7,337	4.1	0.7	8,448
District											
Abbottabad	41.1	2.9	86.2	98.4	337	1.8	0.7	291	8.7	0.9	332
Bannu	48.6	3.3	84.3	98.7	401	0.2	0.6	338	0.9	0.7	396
Batagram	20.8	2.2	59.4	99.3	189	0.9	0.3	112	3.0	0.6	188
Buner	35.5	3.0	78.2	99.7	220	2.4	0.5	172	0.0	0.4	219
Charsadda	49.4	3.6	95.5	100.0	426	1.2	1.0	407	0.3	0.4	426
Chitral	66.8	3.9	60.1	97.4	101	2.2	0.4	61	6.7	0.8	98
D.I. Khan	26.6	2.5	95.7	98.8	618	1.6	0.6	591	1.6	0.4	610
Hangu	49.4	3.4	65.6	99.5	152	3.5	0.6	100	12.2	1.4	152
Haripur	44.7	3.2	82.0	98.3	263	2.1	0.6	216	6.8	0.9	259
Karak	10.2	1.1	82.7	99.0	180	1.3	0.4	149	0.8	0.3	178
Kohat	52.4	3.6	80.3	99.2	283	8.3	1.0	228	9.9	1.4	281
Kohistan	11.6	2.2	98.5	99.1	329	0.0	0.4	324	0.0	0.1	326
Lakki Marwat	34.6	2.8	92.3	99.7	215	2.1	0.6	198	1.2	0.6	214
Lower Dir	27.6	2.8	61.6	100.0	326	2.1	0.6	201	2.1	0.6	326
Malakand Protected Area	54.6	3.6	90.5	99.5	200	1.4	0.8	181	3.9	0.7	199
Mansehra	44.4	3.3	86.1	98.7	417	5.0	0.9	359	8.6	1.1	412
Mardan	45.8	3.1	87.8	98.7	603	2.6	0.7	529	2.8	0.8	595
Nowshera	44.5	3.3	90.3	98.4	387	2.4	0.7	350	0.6	0.5	381
Peshawar	33.9	2.7	92.1	99.0	1,216	5.1	0.9	1,120	7.6	1.0	1,204
Shangla	3.8	1.8	97.1	100.0	187	0.8	0.8	182	0.0	0.2	187
Swabi	61.6	3.8	84.2	99.6	379	4.1	0.7	319	8.1	0.9	377
Swat	24.5	2.3	84.2	99.9	584	2.0	0.7	492	2.9	0.6	584
Tank	16.8	2.3	95.0	99.8	136	0.2	0.4	129	0.2	0.2	136
Tor Ghar	1.1	1.3	72.0	99.1	72	0.0	0.2	52	0.0	0.0	71
Upper Dir	34.8	3.1	79.5	99.7	298	5.0	1.0	237	4.0	1.0	297

[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 both mothers and primary caretakers, who are interviewed when the mother is not listed in the same household. Since indicator 6.4 reports on the biological mother's support for learning, this background characteristic refers to only the educational levels of biological mothers when calculated for the indicator in question.**

Table D. CD.3: Learning materials

Percentage of children under age 5 by numbers of children's books present in the household, and by playthings that child plays with, Khyber Pakhtunkhwa, 2016-17

	Percentage of children living in households that have for the child:		Percentage of children who play with:				Number of children under age 5
	3 or more children's books¹	10 or more children's books	Homemade toys	Toys from a shop/manufactured toys	Household objects/objects found outside	Two or more types of playthings²	
KP	3.9	0.2	37.2	61.5	50.9	48.5	2,0926
District							
Abbottabad	9.0	1.0	33.1	77.5	41.6	45.8	882
Bannu	1.3	0.0	17.7	65.4	43.4	42.7	1,009
Batagram	4.4	0.8	34.7	57.5	62.8	52.4	442
Buner	1.7	0.6	36.1	50.1	49.0	45.6	570
Charsadda	2.8	0.0	40.8	61.9	53.9	52.5	1,081
Chitral	6.0	0.0	39.6	72.1	73.0	68.5	269
D.I. Khan	2.3	0.1	40.4	64.2	45.1	49.8	1,495
Hangu	3.4	0.2	39.1	71.3	55.7	57.7	380
Haripur	10.1	0.0	13.1	69.8	50.2	45.5	678
Karak	2.3	0.0	40.6	63.0	46.5	50.8	436
Kohat	7.0	0.0	49.9	75.4	51.1	56.8	676
Kohistan	0.1	0.0	59.4	43.5	59.1	49.8	669
Lakki Marwat	1.8	0.0	28.1	54.1	33.5	33.3	495
Lower Dir	0.3	0.0	37.9	57.5	47.2	44.0	816
Malakand Protected Area	3.1	0.0	30.0	53.7	54.4	43.7	525
Mansehra	7.9	0.4	31.4	62.1	63.9	57.3	1,071
Mardan	5.7	0.6	39.5	57.9	57.4	56.6	1,551
Nowshera	6.8	0.2	28.5	65.4	42.6	41.1	939
Peshawar	4.2	0.1	48.2	67.0	55.2	52.6	2,829
Shangla	0.3	0.0	47.1	53.6	67.8	54.2	417
Swabi	5.2	0.2	31.2	63.4	48.5	46.8	935
Swat	2.3	0.2	32.8	55.2	37.9	34.4	1,474
Tank	0.5	0.0	29.5	65.3	41.1	45.5	333
Tor Ghar	0.0	0.0	27.2	34.1	19.1	24.8	179
Upper Dir	1.8	0.0	45.2	43.2	65.9	49.6	774

¹ MICS indicator 6.5 - Availability of children's books

² MICS indicator 6.6 - Availability of playthings

Table D. CD.4: Inadequate care

Percentage of children under age 5 left alone or left in the care of another child younger than 10 years of age for more than one hour at least once during the past week, Khyber Pakhtunkhwa, 2016-17

| | **Percentage of children under age 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 under age 5
KP	5.9	3.3	7.3	20,926
District				
Abbottabad	16.9	3.7	17.6	882
Bannu	4.4	4.5	7.4	1,009
Batagram	10.1	2.1	11.4	442
Buner	8.9	7.2	11.6	570
Charsadda	1.0	1.2	2.0	1,081
Chitral	2.5	10.8	11.3	269
D.I. Khan	5.5	1.8	5.9	1,495
Hangu	9.0	14.1	15.3	380
Haripur	4.1	3.6	5.8	678
Karak	9.3	4.6	10.3	436
Kohat	3.1	5.6	6.2	676
Kohistan	5.3	9.3	13.5	669
Lakki Marwat	4.0	2.3	4.6	495
Lower Dir	7.6	0.9	8.0	816
Malakand Protected Area	1.2	0.8	1.7	525
Mansehra	14.2	1.5	15.0	1,071
Mardan	1.9	1.1	2.3	1,551
Nowshera	0.3	1.4	1.5	939
Peshawar	4.6	2.0	5.4	2,829
Shangla	27.3	19.4	28.0	417
Swabi	1.0	2.0	2.3	935
Swat	5.5	4.0	6.4	1,474
Tank	2.1	0.8	2.3	333
Tor Ghar	12.5	1.6	13.3	179
Upper Dir	6.3	1.6	6.9	774

[1] MICS indicator 6.7 - Inadequate care

Table CD.5: Early child development index

Percentage of children age 36-59 months who are developmentally on track in literacy-numeracy, physical, social-emotional, and learning domains, and the early child development index score, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 36-59 months who are developmentally on track for indicated domains				Early child development index score[1]	Percentage of children not on track in any of the four domains	Number of children age 36-59 months
	Literacy-numeracy	Physical	Social-Emotional	Learning			
KP	39.1	92.6	61.7	88.7	68.8	1.9	8,520
District							
Abbottabad	31.6	90.3	68.6	89.7	66.0	2.2	337
Bannu	36.5	91.4	79.3	91.9	81.2	1.8	401
Batagram	10.1	92.7	69.3	93.5	65.9	2.3	189
Buner	42.8	94.7	66.3	82.7	71.5	1.8	220
Charsadda	55.4	92.8	73.1	79.3	73.8	1.4	426
Chitral	38.9	97.0	75.0	89.4	80.8	1.5	101
D.I. Khan	32.9	89.6	65.3	91.9	70.6	2.7	618
Hangu	45.1	90.4	73.7	73.0	66.2	3.8	152
Haripur	38.8	89.5	51.0	95.9	66.1	1.1	263
Karak	31.4	90.1	49.8	58.6	44.5	5.3	180
Kohat	53.0	98.3	67.1	83.0	73.4	1.0	283
Kohistan	15.1	81.8	55.0	69.3	38.5	2.7	329
Lakki Marwat	27.4	97.1	53.3	91.3	63.1	2.4	215
Lower Dir	54.8	97.7	36.3	95.2	70.3	0.4	326
Malakand Protected Area	47.2	97.2	63.0	93.0	77.8	0.9	200
Mansehra	30.3	85.9	59.5	93.6	60.8	1.9	417
Mardan	52.6	98.0	59.3	89.7	78.5	1.4	603
Nowshera	48.5	99.5	52.7	95.5	72.4	0.2	387
Peshawar	47.8	92.3	59.3	91.1	71.5	2.0	1,216
Shangla	10.4	90.0	49.2	82.2	42.6	3.3	187
Swabi	26.6	92.8	70.2	92.0	71.2	3.2	379
Swat	36.7	92.7	67.7	93.3	74.3	1.4	584
Tank	18.2	84.8	72.3	96.7	66.3	1.4	136
Tor Ghar	5.0	86.4	67.9	71.6	43.5	1.9	72
Upper Dir	49.5	96.3	48.6	88.8	68.9	0.8	298

[1] MICS indicator 6.8 - Early child development index

Table D. ED.1: Literacy (young women)

Percentage of women age 15-24 years who are literate, Khyber Pakhtunkhwa, 2016-17.

	Percentage literate[1]	Percentage not known	Number of women age 15-24 years
KP	52.7	0.1	14,499
District			
Abbottabad	87.4	0.0	737
Bannu	40.5	0.0	581
Batagram	25.1	0.0	256
Buner	40.9	0.0	377
Charsadda	50.7	0.0	787
Chitral	75.2	0.0	228
D. I. Khan	30.7	0.0	763
Hangu	31.2	0.2	259
Haripur	83.6	0.0	527
Karak	68.2	0.1	302
Kohat	51.3	0.3	525
Kohistan	3.0	0.0	308
Lakki Marwat	36.1	0.0	349
Lower Dir	64.2	0.0	583
Malakand Protected Area	69.2	0.0	359
Mansehra	66.1	0.1	800
Mardan	56.3	0.2	1,102
Nowshera	61.9	0.5	626
Peshawar	51.1	0.0	2,168
Shangla	11.3	0.0	241
Swabi	63.1	0.6	787
Swat	49.8	0.2	1,012
Tank	37.8	0.1	177
Tor Ghar	4.1	0.0	99
Upper Dir	43.0	0.0	546

[1] MICS indicator 7.1; MDG indicator 2.3 - Literacy rate among young women

Table D. ED.2: School readiness

Percentage of children attending first grade of primary school who attended pre-school the previous year, Khyber Pakhtunkhwa, 2016-17.

	Percentage of children attending first grade who attended preschool in previous year[1]	Number of children attending first grade of primary school
KP	88.0	4,169
District		
Abbottabad	84.2	179
Bannu	96.2	214
Batagram	86.4	105
Buner	80.0	89
Charsadda	93.1	307
Chitral	66.6	60
D. I. Khan	51.1	184
Hangu	94.3	57
Haripur	87.3	171
Karak	92.5	82
Kohat	92.9	138
Kohistan	71.8	61
Lakki Marwat	90.8	92
Lower Dir	99.9	220
Malakand Protected Area	91.9	140
Mansehra	88.7	208
Mardan	87.3	359
Nowshera	95.8	208
Peshawar	96.1	577
Shangla	63.5	66
Swabi	78.9	226
Swat	90.9	204
Tank	(73.1)	44
Tor Ghar	(82.0)	28
Upper Dir	89.6	150
[1] MICS indicator 7.2 - School readiness		

Table D. ED.3: Primary school entry

Percentage of children of primary school entry age entering grade 1 (net intake rate) and percentage of children age 6 years entering grade 1,Khyber Pakhtunkhwa, 2016-17.

	Percentage of children of primary school entry age entering grade 1[1]	Number of children of primary school entry age (5 years old)	Percentage of children age 6 years entering grade 1	Number of children age 6 years
KP	22.5	4,745	48.5	4,842
District				
Abbottabad	35.4	194	64.3	184
Bannu	16.7	214	31.1	217
Batagram	17.9	103	30.6	116
Buner	8.7	145	38.5	132
Charsadda	27.3	272	52.2	273
Chitral	33.5	71	76.4	66
D. I. Khan	15.2	291	38.6	313
Hangu	19.8	72	39.9	74
Haripur	34.1	123	76.6	147
Karak	28.5	86	69.9	89
Kohat	32.1	142	73.1	143
Kohistan	10.3	207	19.0	165
Lakki Marwat	14.2	127	28.1	137
Lower Dir	23.3	212	48.4	224
Malakand Protected Area	25.0	123	59.1	135
Mansehra	33.6	227	67.5	234
Mardan	29.8	322	62.8	304
Nowshera	34.4	229	59.3	207
Peshawar	23.7	617	48.5	680
Shangla	12.6	123	26.1	118
Swabi	28.1	198	56.2	243
Swat	11.8	345	39.6	325
Tank	17.2	66	41.4	66
Tor Ghar	13.1	46	22.4	43
Upper Dir	10.3	189	30.8	208

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

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

Percentage of children of primary school age attending primary or secondary school (adjusted net attendance ratio), percentage attending preschool, and percentage out of school, Khyber Pakhtunkhwa, 2016-17.

	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)[1]	Percentage of children:			Number of children
		Not attending school or preschool	Attending preschool	Out of school[a]			Not attending school or preschool	Attending preschool	Out of school[a]			Not attending school or preschool	Attending preschool	Out of school[a]	
KP	63.5	20.2	16.2	36.4	11,728	51.8	33.3	14.8	48.2	11,224	57.8	26.7	15.5	42.1	22,952
District															
Abbottabad	77.8	10.1	11.7	21.8	457	77.1	10.2	12.7	22.9	467	77.5	10.1	12.2	22.4	924
Bannu	58.1	14.9	26.9	41.8	553	32.2	45.1	22.4	67.5	535	45.4	29.7	24.7	54.4	1,088
Batagram	51.4	29.0	19.6	48.6	265	32.0	51.9	16.1	68.0	229	42.4	39.6	18.0	57.6	494
Buner	51.4	33.8	14.4	48.1	353	46.6	46.3	7.1	53.4	300	49.2	39.5	11.0	50.5	653
Charsadda	71.7	11.0	17.3	28.3	654	59.2	23.1	17.7	40.8	693	65.2	17.3	17.5	34.8	1,347
Chitral	77.1	15.6	7.1	22.7	171	75.1	15.1	9.8	24.9	166	76.1	15.3	8.4	23.8	337
D. I. Khan	46.0	38.3	15.7	54.0	743	33.3	49.1	17.3	66.4	724	39.7	43.6	16.5	60.1	1,467
Hangu	71.6	13.5	14.7	28.2	192	36.1	49.9	14.0	63.9	192	53.8	31.7	14.3	46.0	384
Haripur	80.8	2.1	17.2	19.2	317	75.2	8.4	16.3	24.8	313	78.0	5.2	16.7	22.0	630
Karak	75.0	4.7	20.3	25.0	244	72.9	12.3	14.8	27.1	190	74.1	8.0	17.9	25.9	434
Kohat	74.0	9.5	16.6	26.0	361	67.9	24.1	8.0	32.1	289	71.3	16.0	12.8	28.7	650
Kohistan	39.6	55.6	4.8	60.4	495	12.7	85.4	1.8	87.3	417	27.3	69.2	3.5	72.7	911
Lakki Marwat	56.7	20.8	22.5	43.3	306	35.7	51.4	12.9	64.3	332	45.8	36.7	17.5	54.2	638
Lower Dir	71.1	20.7	8.2	28.9	533	51.3	40.6	8.1	48.7	533	61.2	30.6	8.2	38.8	1,066
Malakand Protected Area	74.4	8.9	16.7	25.6	336	70.3	15.5	14.1	29.6	301	72.5	12.0	15.5	27.5	637
Mansehra	74.4	7.3	18.3	25.6	523	66.2	15.6	18.2	33.8	524	70.3	11.5	18.3	29.7	1,047
Mardan	70.7	9.9	19.3	29.3	736	70.0	12.9	17.1	30.0	736	70.3	11.4	18.2	29.7	1,472
Nowshera	72.7	8.2	19.1	27.3	524	63.4	16.9	19.6	36.6	470	68.3	12.3	19.4	31.7	994
Peshawar	62.2	18.8	19.0	37.8	1539	54.0	28.0	18.0	46.0	1526	58.1	23.4	18.5	41.9	3,065
Shangla	42.2	51.4	4.5	55.9	286	24.2	71.5	2.6	74.1	264	33.6	61.0	3.6	64.6	550
Swabi	72.8	12.8	14.5	27.2	553	65.1	20.3	14.6	34.9	500	69.1	16.3	14.5	30.9	1,054
Swat	60.2	22.9	16.8	39.7	839	44.9	37.0	18.1	55.1	798	52.7	29.8	17.4	47.2	1,638
Tank	58.9	25.5	15.5	41.0	152	43.5	45.0	11.5	56.5	156	51.1	35.4	13.5	48.9	308
Tor Ghar	38.6	51.8	9.3	61.1	117	26.8	65.7	7.6	73.2	104	33.0	58.3	8.5	66.8	221
Upper Dir	53.8	32.5	13.6	46.2	480	35.3	52.6	12.1	64.7	464	44.7	42.4	12.9	55.3	944

[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 preschool

Table D. ED.4B: Primary school gross attendance ratio (5-9) years

Percentage of children of all ages attending primary school or secondary school (adjusted gross attendance), Khyber Pakhtunkhwa, 2016-17.

	Male		Female		Total	
	Gross attendance ratio (adjusted)	Number of children	Gross attendance ratio (adjusted)	Number of children	Gross attendance ratio (adjusted)	Number of children
KP	`	11,728	75.4	11,224	86.3	22,952
District						
Abbottabad	111.6	457	99.5	467	105.5	924
Bannu	85.9	553	50.4	535	68.5	1,088
Batagram	89.4	265	52.7	229	72.4	494
Buner	85.1	353	73.7	300	79.9	653
Charsadda	110.3	654	82.0	693	95.7	1,347
Chitral	102.0	171	96.8	166	99.4	337
D. I. Khan	71.6	743	48.6	724	60.2	1,467
Hangu	107.8	192	51.5	192	79.6	384
Haripur	111.3	317	101.4	313	106.4	630
Karak	92.3	244	98.5	190	95.0	434
Kohat	111.7	361	102.8	289	107.7	650
Kohistan	66.3	495	20.2	417	45.2	911
Lakki Marwat	85.0	306	49.4	332	66.5	638
Lower Dir	104.3	533	79.4	533	91.8	1,066
Malakand Protected Area	97.9	336	99.1	301	98.5	637
Mansehra	111.5	523	89.4	524	100.5	1,047
Mardan	108.0	736	97.7	736	102.9	1,472
Nowshera	99.5	524	92.8	470	96.3	994
Peshawar	97.9	1539	85.1	1526	91.6	3,065
Shangla	81.0	286	35.9	264	59.4	550
Swabi	106.5	553	94.4	500	100.7	1,054
Swat	98.2	839	67.9	798	83.4	1,638
Tank	93.1	152	56.9	156	74.8	308
Tor Ghar	71.4	117	42.2	104	57.7	221
Upper Dir	94.6	480	59.2	464	77.2	944

Table D. ED.5: 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, Khyber Pakhtunkhwa, 2016-17

	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)[1]	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]	
KP	48.9	35.9	15.1	10,300	30.2	24.9	44.8	10,015	39.7	30.5	29.7	20,315
District												
Abbottabad	58.4	36.2	5.5	371	60.8	27.9	11.3	342	59.6	32.2	8.3	713
Bannu	51.9	33.6	14.4	442	19.2	21.5	59.1	426	35.8	27.6	36.3	868
Batagram	27.5	50.4	22.1	184	4.7	21.8	73.4	206	15.4	35.3	49.2	390
Buner	45.4	33.8	20.8	338	17.4	25.4	56.7	313	31.9	29.8	38.1	651
Charsadda	50.7	37.8	11.3	648	31.3	26.0	42.7	608	41.3	32.1	26.5	1,256
Chitral	70.1	25.9	4.0	160	64.8	20.9	14.4	167	67.4	23.3	9.3	326
D. I. Khan	35.2	30.1	34.6	577	15.8	16.3	67.9	594	25.3	23.1	51.5	1,171
Hangu	52.1	41.0	6.9	162	19.7	15.7	64.7	175	35.2	27.8	36.9	337
Haripur	57.8	32.5	9.7	301	51.4	27.6	20.9	263	54.8	30.2	14.9	564
Karak	74.6	19.8	5.2	208	39.4	22.3	38.3	200	57.3	21.0	21.4	407
Kohat	53.4	39.0	7.6	335	33.5	28.0	38.4	292	44.1	33.9	21.9	626
Kohistan	33.7	33.3	32.9	364	1.3	9.9	88.8	291	19.3	22.9	57.7	654
Lakki Marwat	50.0	35.6	14.5	245	19.8	15.5	64.7	257	34.5	25.3	40.2	502
Lower Dir	55.5	36.4	8.1	481	41.3	27.4	31.3	511	48.2	31.8	20.1	992
Malakand Protected Area	59.6	33.6	6.8	246	47.1	30.7	21.7	262	53.1	32.1	14.5	509
Mansehra	47.2	37.9	14.6	500	41.3	26.9	31.8	445	44.4	32.7	22.7	945
Mardan	55.8	33.2	10.7	768	40.6	27.7	31.7	671	48.7	30.6	20.5	1,439
Nowshera	57.1	31.0	11.9	461	41.4	29.6	29.1	450	49.3	30.3	20.4	911
Peshawar	44.9	38.6	16.5	1,321	26.3	30.9	42.7	1,476	35.1	34.5	30.3	2,797
Shangla	24.3	43.7	31.6	229	8.6	13.5	77.3	193	17.1	29.9	52.5	422
Swabi	58.9	30.7	10.4	574	36.8	25.9	37.3	520	48.4	28.4	23.2	1,094
Swat	46.9	38.5	14.6	798	27.9	24.5	47.6	734	37.8	31.8	30.4	1,531
Tank	37.4	35.0	27.6	120	14.4	14.4	71.2	130	25.4	24.3	50.3	250
Tor Ghar	26.5	44.9	28.6	80	2.2	19.2	78.7	81	14.2	32.0	53.8	161
Upper Dir	36.8	47.4	15.8	390	20.5	25.6	53.9	409	28.5	36.3	35.3	799

[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**

[b] **Children age 15 or higher at the time of the interview whose mothers were not living in the household**

Table D. ED.5: 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, Khyber Pakhtunkhwa, 2016-17.

	Male				Female				Total			
	Percentage of children:				Percentage of children:				Percentage of children:			
	Net attendance ratio (adjusted)	Attending primary school	Out of school[a]	Number of children	Net attendance ratio (adjusted)	Attending primary school	Out of school[a]	Number of children	Net attendance ratio (adjusted)[1]	Attending primary school	Out of school[a]	Number of children
KP	52.9	27.4	19.6	13,851	30.8	19.2	49.9	13,235	42.1	23.4	34.4	27,086
District												
Abbottabad	63.5	27.3	9.3	495	61.3	18.9	19.8	504	62.4	23.0	14.6	999
Bannu	55.2	26.2	18.5	921	20.6	15.2	64.0	880	38.3	20.8	40.8	1,801
Batagram	31.8	41.1	27.1	240	5.3	17.0	77.7	268	17.8	28.4	53.8	508
Buner	51.7	25.8	22.5	458	17.4	20.6	61.6	389	35.9	23.4	40.5	847
Charsadda	53.9	29.5	16.4	851	32.1	20.7	47.3	766	43.6	25.3	31.0	1,617
Chitral	75.4	19.9	4.7	207	65.6	17.4	17.0	200	70.6	18.7	10.7	408
D. I. Khan	39.5	22.3	38.1	786	16.1	13.0	70.9	748	28.1	17.8	54.1	1,534
Hangu	54.6	31.2	14.1	215	19.3	12.1	68.4	233	36.2	21.3	42.4	448
Haripur	60.4	25.0	14.5	395	54.7	20.5	23.8	355	57.7	22.9	18.9	750
Karak	78.0	14.7	6.9	279	38.6	17.7	43.8	262	58.9	16.2	24.8	541
Kohat	62.0	26.1	11.7	933	30.9	17.6	51.2	919	46.6	21.9	31.3	1,852
Kohistan	38.0	24.9	37.1	505	1.9	7.9	90.3	371	22.7	17.7	59.6	876
Lakki Marwat	55.6	26.4	18.0	334	20.6	12.1	67.3	330	38.2	19.3	42.5	663
Lower Dir	61.2	27.5	11.2	639	41.8	21.5	36.7	653	51.4	24.5	24.1	1,291
Malakand Protected Area	60.8	26.3	12.7	317	47.5	24.1	28.0	337	54.0	25.2	20.6	654
Mansehra	51.5	28.0	20.3	686	38.9	19.7	41.2	611	45.6	24.1	30.1	1,296
Mardan	60.3	24.5	15.0	1,799	37.8	20.4	41.7	1,630	49.6	22.6	27.7	3,429
Nowshera	58.7	23.8	17.4	624	42.3	22.9	34.8	588	50.7	23.4	25.8	1,212
Peshawar	52.1	28.0	19.7	3,301	30.8	22.5	46.7	3,347	41.3	25.2	33.3	6,647
Shangla	30.0	35.3	34.4	311	9.6	11.5	78.4	233	21.3	25.1	53.2	544
Swabi	60.5	23.7	15.7	768	36.9	19.5	43.5	710	49.1	21.7	29.0	1,478
Swat	51.4	30.1	18.5	1,061	29.0	18.4	52.5	994	40.6	24.4	34.9	2,055
Tank	43.3	26.0	30.5	167	15.4	11.9	72.7	173	29.1	18.8	52.0	339
Tor Ghar	30.5	38.3	31.2	99	3.0	15.4	81.7	105	16.4	26.6	57.1	204
Upper Dir	44.3	36.3	19.4	530	21.8	21.5	56.8	521	33.1	29.0	37.9	1,051

[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

[b] Children age 15 or higher at the time of the interview whose mothers were not living in the household

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

Percentage of children entering first grade of primary school who eventually reach the last grade of primary school (Survival rate to last grade of primary school), Khyber Pakhtunkhwa, 2016-17.

	Percent attending grade 1 last school year who are in grade 2 this school year	Percent attending grade 2 last school year who are attending grade 3 this school year	Percent attending grade 3 last school year who are attending grade 4 this school year	Percent attending grade 4 last school year who are attending grade 5 this school year	Percent who reach grade 5 of those who enter grade 1[1]
KP	99.6	99.1	99.4	98.8	96.8
District					
Abbottabad	100.0	100.0	100.0	100.0	100.0
Bannu	100.0	100.0	100.0	98.0	98.0
Batagram	98.0	96.7	94.3	96.2	86.0
Buner	98.8	100.0	99.6	97.7	96.1
Charsadda	100.0	99.2	100.0	100.0	99.2
Chitral	100.0	100.0	100.0	99.3	99.3
D. I. Khan	100.0	96.9	97.2	100.0	94.3
Hangu	100.0	99.2	100.0	99.0	98.2
Haripur	99.0	100.0	100.0	99.5	98.5
Karak	100.0	97.7	100.0	98.3	96.0
Kohat	99.1	100.0	100.0	98.7	97.8
Kohistan	100.0	100.0	100.0	99.0	99.0
Lakki Marwat	100.0	100.0	97.6	100.0	97.6
Lower Dir	100.0	98.4	100.0	100.0	98.4
Malakand Protected Area	100.0	99.4	100.0	99.8	99.1
Mansehra	99.4	100.0	99.4	97.2	96.0
Mardan	99.2	98.7	99.2	97.7	94.9
Nowshera	99.2	99.0	95.2	98.2	91.8
Peshawar	99.8	100.0	100.0	99.9	99.8
Shangla	99.0	100.0	100.0	98.6	97.5
Swabi	98.1	98.2	100.0	98.4	94.9
Swat	99.8	96.5	99.4	94.5	90.5
Tank	100.0	100.0	97.3	97.2	94.6
Tor Ghar	100.0	100.0	100.0	98.4	98.4
Upper Dir	100.0	99.5	100.0	100.0	99.5

[1] **MICS indicator 7.6; MDG indicator 2.2 - Children reaching last grade of primary**
(*) Figures that are based on fewer than 25 unweighted cases

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

Primary school completion rates and transition and effective transition rates to secondary school, Khyber Pakhtunkhwa, 2016-17.

	Primary school completion rate[1]	Number of children of primary school completion age	Transition rate to secondary school[2]	Number of children who were in the last grade of primary school the previous year	Effective transition rate to 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
KP	72.0	4,572	92.7	2,577	94.8	2,521
District						
Abbottabad	106.7	189	90.2	109	93.2	105
Bannu	48.4	222	98.5	90	98.5	90
Batagram	51.3	76	86.9	33	86.9	33
Buner	93.6	117	87.0	87	89.7	84
Charsadda	76.6	297	92.4	166	92.4	166
Chitral	93.1	58	99.2	61	99.2	61
D. I. Khan	44.7	289	93.2	86	93.2	86
Hangu	48.1	83	95.5	35	96.9	35
Haripur	97.9	115	86.1	104	88.6	101
Karak	89.4	84	93.9	64	93.9	64
Kohat	90.3	130	99.1	85	99.7	84
Kohistan	35.2	201	86.0	32	100.0	28
Lakki Marwat	56.4	137	98.6	48	98.6	48
Lower Dir	84.6	235	98.2	137	98.4	136
Malakand Protected Area	79.9	133	95.9	82	96.9	81
Mansehra	85.3	186	92.0	147	94.3	143
Mardan	88.8	279	89.1	214	92.2	207
Nowshera	87.4	181	97.0	151	97.9	149
Peshawar	74.9	610	94.7	313	97.2	305
Shangla	48.1	109	(93.6)	28	(95.1)	28
Swabi	83.6	210	88.8	184	92.3	177
Swat	59.0	333	87.4	201	93.0	189
Tank	49.1	64	96.2	24	97.1	23
Tor Ghar	33.5	48	(96.9)	8	(96.9)	8
Upper Dir	70.2	184	95.6	90	96.0	90

[1] **MICS indicator 7.7 - Primary completion rate**
[2] **MICS indicator 7.8 - Transition rate to secondary school**
( ) Figures that are based on 25-49 unweighted cases

Table D. ED.8: Education gender parity index (GPI)						
Ratio of adjusted net attendance ratios of girls to boys, in primary and secondary school, Khyber Pakhtunkhwa, 2016-17.						
	Primary school			Secondary school		
	Primary school adjusted net attendance ratio (NAR), girls	Primary school adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for primary school adjusted NAR[1]	Secondary school adjusted net attendance ratio (NAR), girls	Secondary school adjusted net attendance ratio (NAR), boys	Gender parity index (GPI) for secondary school adjusted NAR[2]
KP	51.8	63.5	0.8	30.2	48.9	0.6
District						
Abbottabad	77.1	77.8	1.0	60.8	58.4	1.0
Bannu	32.2	58.1	.55	19.2	51.9	.37
Batagram	32.0	51.4	.62	4.7	27.5	.17
Buner	46.6	51.4	.91	17.4	45.4	.38
Charsadda	59.2	71.7	.83	31.3	50.7	.62
Chitral	75.1	77.1	.97	64.8	70.1	.92
D. I. Khan	33.3	46.0	.72	15.8	35.2	.45
Hangu	36.1	71.6	.50	19.7	52.1	.38
Haripur	75.2	80.8	.93	51.4	57.8	.89
Karak	72.9	75.0	.97	39.4	74.6	.53
Kohat	67.9	74.0	.92	33.5	53.4	.63
Kohistan	12.7	39.6	.32	1.3	33.7	.04
Lakki Marwat	35.7	56.7	.63	19.8	50.0	.40
Lower Dir	51.3	71.1	.72	41.3	55.5	.74
Malakand Protected Area	70.3	74.4	.94	47.1	59.6	.79
Mansehra	66.2	74.4	.89	41.3	47.2	.88
Mardan	70.0	70.7	.99	40.6	55.8	.73
Nowshera	63.4	72.7	.87	41.4	57.1	.72
Peshawar	54.0	62.2	.87	26.3	44.9	.59
Shangla	24.2	42.2	0.6	8.6	24.3	0.4
Swabi	65.1	72.8	0.9	36.8	58.9	0.6
Swat	44.9	60.2	0.7	27.9	46.9	0.6
Tank	43.5	58.9	0.7	14.4	37.4	0.4
Tor Ghar	26.8	38.6	0.7	2.2	26.5	0.1
Upper Dir	35.3	53.8	0.7	20.5	36.8	0.6
[1] MICS indicator 7.9; MDG indicator 3.1 - Gender parity index (primary school)						
[2] MICS indicator 7.10; MDG indicator 3.1 - Gender parity index (secondary school)						
[a] Children age 15 or higher at the time of the interview whose mothers were not living in the household						

Table D. ED.9: Out of school gender parity

Percentage of girls in the total out of school population, in primary and secondary school, Khyber Pakhtunkhwa, 2016-17.

	Primary school				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
KP	42.1	22,952	55.9	9,674	29.7	20,315	74.3	6,044
District								
Abbottabad	22.4	924	51.7	207	8.3	713	(65.5)	59
Bannu	54.4	1,088	61.0	592	36.3	868	79.9	315
Batagram	57.6	494	54.8	284	49.2	390	78.8	192
Buner	50.5	653	48.5	330	38.1	651	71.6	248
Charsadda	34.8	1,347	60.4	468	26.5	1256	78.1	333
Chitral	23.8	337	51.5	80	9.3	326	79.0	30
D. I. Khan	60.1	1,467	54.5	882	51.5	1171	66.9	603
Hangu	46.0	384	69.5	177	36.9	337	91.1	124
Haripur	22.0	630	56.0	138	14.9	564	65.4	84
Karak	25.9	434	45.8	112	21.4	407	87.6	87
Kohat	28.7	650	49.7	187	21.9	626	81.6	137
Kohistan	72.7	911	54.9	662	57.7	654	68.3	378
Lakki Marwat	54.2	638	61.8	346	40.2	502	82.4	202
Lower Dir	38.8	1,066	62.8	413	20.1	992	80.3	199
Malakand Protected Area	27.5	637	51.0	175	14.5	509	77.1	74
Mansehra	29.7	1,047	57.0	311	22.7	945	66.0	215
Mardan	29.7	1,472	50.7	436	20.5	1439	72.1	295
Nowshera	31.7	994	54.6	315	20.4	911	70.4	186
Peshawar	41.9	3,065	54.6	1,284	30.3	2797	74.3	848
Shangla	64.6	550	55.0	355	52.5	422	67.3	221
Swabi	30.9	1,054	53.7	325	23.2	1,094	76.4	254
Swat	47.2	1,638	56.9	773	30.4	1,531	74.9	466
Tank	48.9	308	58.6	151	50.3	250	73.6	126
Tor Ghar	66.8	221	51.5	148	53.8	161	73.6	87
Upper Dir	55.3	944	57.5	522	35.3	799	78.1	282

[a] **Children age 15 or higher at the time of the interview whose mothers were not living in the household**
na: not applicable
( ) Figures that are based on 25-49 unweighted cases

Table D. ED.10: Pre-school attendance

Percentage of children of aged 3-4 years attending pre-school, Khyber Pakhtunkhwa, 2016-17.

	Male			Female			Total	
	Pre-school attendance	Number of children age 3-4 years		Pre-school attendance	Number of children age 3-4 years		Pre-school attendance	Number of children age 3-4 years
KP	23.3	4,531		21.8	4,244		22.6	8,775
District								
Abbottabad	40.4	187		38.0	160		39.3	347
Bannu	34.9	218		23.4	200		29.4	418
Batagram	14.7	110		16.6	86		15.5	196
Buner	8.4	126		4.5	129		6.4	255
Charsadda	38.5	252		26.1	228		32.6	480
Chitral	10.7	60		9.6	73		10.1	133
D. I. Khan	16.7	341		19.1	277		17.8	618
Hangu	19.4	84		10.7	82		15.1	166
Haripur	47.0	143		52.5	146		49.8	290
Karak	29.1	83		37.0	85		33.1	168
Kohat	26.3	134		21.2	142		23.7	275
Kohistan	3.5	182		2.2	155		2.9	337
Lakki Marwat	25.0	122		17.2	96		21.6	218
Lower Dir	5.5	207		4.0	169		4.8	376
Malakand Protected Area	30.8	103		30.5	117		30.7	220
Mansehra	45.2	219		38.8	208		42.0	426
Mardan	28.5	309		33.4	324		31.0	633
Nowshera	35.5	190		29.6	145		32.9	334
Peshawar	21.8	544		21.0	552		21.4	1,096
Shangla	2.9	102		2.6	103		2.7	205
Swabi	26.7	216		23.5	192		25.2	408
Swat	10.7	319		14.0	312		12.3	631
Tank	11.7	62		13.7	60		12.6	121
Tor Ghar	7.2	36		1.5	35		4.4	71
Upper Dir	8.7	183		13.0	168		10.7	351

Table D. ED.11: Literacy rate among population age 10 years or above

Percentage of household members aged 10 years or above who are literate, Khyber Pakhtunkhwa, 2016-17.

	Male		Female		Total	
	Literacy rate	Number of household members age 10 years or above	Literacy rate	Number of household members age 10 years or above	Literacy rate[1]	Number of household members age 10 years or above
KP	68.9	56,549	35.9	57,629	52.3	11,4178
District						
Abbottabad	79.1	2,767	57.9	2,930	68.2	5,696
Bannu	69.5	2,239	27.6	2,390	47.9	4,629
Batagram	55.7	850	16.2	1,066	33.8	1,916
Buner	60.5	1,469	24.4	1,547	41.9	3,016
Charsadda	68.4	3,556	35.2	3,308	52.4	6,864
Chitral	68.5	831	44.8	1,011	55.5	1,843
D. I. Khan	60.7	3,430	25.1	3,276	43.3	6,706
Hangu	72.2	753	23.4	969	44.7	1,722
Haripur	79.9	2,220	54.8	2,313	67.1	4,533
Karak	86.0	1,065	43.1	1,077	64.4	2,143
Kohat	79.4	1,896	41.4	2,055	59.7	3,951
Kohistan	54.1	1,578	5.2	1,315	31.9	2,893
Lakki Marwat	68.8	1,354	21.2	1,366	44.9	2,720
Lower Dir	70.8	2,150	35.2	2,414	52.0	4,564
Malakand Protected Area	72.9	1,416	45.9	1,457	59.2	2,873
Mansehra	80.0	3,042	50.2	3,036	65.1	6,078
Mardan	70.1	4,132	38.8	4,104	54.5	8,235
Nowshera	74.1	2,564	42.6	2,623	58.2	5,187
Peshawar	65.7	8,073	37.7	8,196	51.6	16,269
Shangla	43.8	1,128	9.2	992	27.6	2,120
Swabi	72.9	3,037	40.2	3,058	56.5	6,095
Swat	71.2	4,002	36.0	3,899	53.8	7,900
Tank	68.9	731	25.8	736	47.3	1,467
Tor Ghar	27.0	356	4.1	459	14.1	815
Upper Dir	52.4	1,910	21.2	2,032	36.3	3,943

[1] **MICS indicator 7.S1 - Literacy rate 10+ (Reported)**

Table D. ED.12: Literacy rate among population age 15 years or above

Percentage of household member's age 15 years or above who are literate, Khyber Pakhtunkhwa, 2016-17.

	Male		Female		Total	
	Literacy rate	Number of household members age 15 years or above	Literacy rate	Number of household members age 15 years or above	Literacy rate[1]	Number of household members age 15 years or above
KP	68.0	45,814	31.7	47,218	49.6	93,032
District						
Abbottabad	78.4	2,374	54.3	2,570	65.9	4,944
Bannu	69.5	1770	24.2	1918	45.9	3,688
Batagram	54.7	647	12.6	849	30.8	1,496
Buner	56.6	1125	19.2	1235	37.0	2,360
Charsadda	65.7	2875	28.0	2670	47.5	5,545
Chitral	65.6	673	38.2	844	50.4	1,517
D. I. Khan	59.0	2825	21.8	2648	41.0	5,474
Hangu	72.2	571	20.2	788	42.1	1,358
Haripur	77.2	1920	50.7	2030	63.6	3,949
Karak	86.7	850	39.6	887	62.6	1,738
Kohat	78.6	1554	36.8	1760	56.4	3,314
Kohistan	53.5	1180	2.6	976	30.5	2,156
Lakki Marwat	69.6	1095	17.4	1074	43.8	2,169
Lower Dir	68.5	1643	29.5	1881	47.7	3,524
Malakand Protected Area	71.4	1156	39.0	1170	55.1	2,326
Mansehra	78.2	2547	45.5	2570	61.8	5,117
Mardan	70.0	3395	33.4	3414	51.6	6,809
Nowshera	72.8	2093	37.3	2178	54.7	4,272
Peshawar	66.2	6675	33.6	6708	49.8	13,382
Shangla	40.4	885	5.8	769	24.3	1,654
Swabi	71.9	2,452	35.3	2,550	53.3	5,003
Swat	69.9	3,146	30.4	3,154	50.1	6,300
Tank	67.1	598	21.1	595	44.2	1,193
Tor Ghar	24.9	266	2.6	362	12.0	627
Upper Dir	52.9	1,498	18.8	1,619	35.2	3,118

[1] **MICS indicator 7.S2 - Literacy rate 15+ (Reported)**

Table D. ED.13: Literacy rate among population age 15-24 years

Percentage of household member's age 15-24 years who are literate, Khyber Pakhtunkhwa, 2016-17.

	Male		Female		Total	
	Literacy rate	Number of household members age 15-24 years	Literacy rate	Number of household members age 15-24 years	Literacy rate[1]	Number of household members age 15-24 years
KP	82.5	15,665	53.9	14,842	68.6	30,506
District						
Abbottabad	88.5	633	86.3	756	87.3	1,389
Bannu	85.0	617	43.2	589	64.6	1,206
Batagram	68.3	246	25.2	260	46.1	507
Buner	79.7	408	43.1	387	61.9	795
Charsadda	84.2	969	53.4	807	70.2	1,776
Chitral	92.8	197	74.4	234	82.8	431
D. I. Khan	71.7	953	33.6	785	54.5	1,738
Hangu	88.5	211	33.1	262	57.8	473
Haripur	95.0	516	85.9	542	90.3	1,058
Karak	94.5	312	69.5	306	82.1	619
Kohat	90.5	506	60.4	535	75.0	1,041
Kohistan	71.9	498	5.2	321	45.7	819
Lakki Marwat	84.7	397	35.9	354	61.7	751
Lower Dir	84.6	689	59.5	593	73.0	1,282
Malakand Protected Area	86.8	370	67.5	368	77.2	738
Mansehra	91.9	823	69.2	819	80.6	1,642
Mardan	85.3	1,169	56.2	1,125	71.0	2,294
Nowshera	83.3	693	64.2	638	74.2	1,331
Peshawar	77.3	2,333	51.9	2,217	64.9	4,551
Shangla	58.0	320	11.7	249	37.7	569
Swabi	87.9	876	63.8	808	76.3	1,683
Swat	85.4	1,105	52.7	1,043	69.5	2,147
Tank	82.3	183	41.9	184	62.0	366
Tor Ghar	49.8	72	7.0	102	24.7	174
Upper Dir	73.6	570	39.1	558	56.5	1,128

[1] MICS indicator 7.S3 - Literacy rate 15-24 years (Reported)

Table D. ED.14: Public and private primary school attendance rate

Percentage of children (5-9 years) attending primary schools by type of school, Khyber Pakhtunkhwa, 2016-17.

	Attending primary school					Number of children 5-9 years old
	Attending Government / Public primary school[1]	Attending Private primary school	Attending Others	Attending primary school but DK / Missing type of school	Total	
KP	65.1	34.8	0.1	0.0	100.0	13,256
District						
Abbottabad	59.8	39.7	0.5	0.0	100.0	717
Bannu	75.7	24.3	0.0	0.0	100.0	496
Batagram	63.6	36.2	0.0	.2	100.0	209
Buner	69.4	30.6	0.0	0.0	100.0	320
Charsadda	74.9	25.1	0.0	0.0	100.0	879
Chitral	67.3	32.7	0.0	0.0	100.0	256
D. I. Khan	65.6	34.4	0.0	0.0	100.0	582
Hangu	62.4	37.1	.5	0.0	100.0	207
Haripur	62.4	37.0	.5	0.0	100.0	491
Karak	68.1	31.9	0.0	0.0	100.0	322
Kohat	66.5	33.4	.1	0.0	100.0	463
Kohistan	95.2	4.8	0.0	0.0	100.0	247
Lakki Marwat	87.9	12.1	0.0	0.0	100.0	292
Lower Dir	79.0	21.0	0.0	0.0	100.0	649
Malakand Protected Area	73.9	26.1	0.0	.1	100.0	462
Mansehra	59.4	40.3	.3	0.0	100.0	736
Mardan	67.3	32.5	0.0	.1	100.0	1,035
Nowshera	59.2	40.8	0.0	0.0	100.0	679
Peshawar	42.6	57.0	.4	0.0	100.0	1,781
Shangla	68.8	31.2	0.0	0.0	100.0	187
Swabi	65.8	34.0	0.0	0.2	100.0	728
Swat	55.1	44.9	0.0	0.0	100.0	863
Tank	69.7	29.9	0.4	0.0	100.0	157
Tor Ghar	99.4	0.6	0.0	0.0	100.0	73
Upper Dir	90.4	9.6	0.0	0.0	100.0	422

[1] MICS indicator 7.S4 - Government school attendance rate (Primary)

Table D. CP.1: Birth registration

Percentage of children under age 5 by whether birth is registered and percentage of children not registered whose mothers/caretakers know how to register birth, Khyber Pakhtunkhwa, 2016-17

| | Children under age 5 whose birth is registered with civil authorities | | | | | Children under age 5 whose birth is not registered | |
| | Has birth certificate | | | | | | |
	Seen	Not seen	No birth certificate	Total registered[1]	Number of children under age 5	Percent of children whose mother/caretaker knows how to register birth	Number of children under age 5 without birth registration
KP	8.7	4.8	5.6	19.1	20,926	11.2	16,928
District							
Abbottabad	15.1	21.7	5.3	42.0	882	34.1	511
Bannu	2.5	4.1	3.0	9.6	1,009	11.0	913
Batagram	1.3	3.4	3.8	8.4	442	7.1	405
Buner	2.1	1.6	1.1	4.8	570	2.1	543
Charsadda	4.6	7.0	1.9	13.4	1,081	8.2	936
Chitral	21.6	12.9	.9	35.5	269	10.4	174
D.I. Khan	2.2	2.3	17.4	21.9	1,495	3.7	1,168
Hangu	9.7	2.2	14.2	26.2	380	8.8	281
Haripur	32.9	10.0	11.1	54.1	678	43.6	312
Karak	6.3	1.7	1.8	9.8	436	21.0	393
Kohat	31.8	6.3	7.2	45.3	676	26.1	370
Kohistan	0.0	1.4	.1	1.5	669	.2	659
Lakki Marwat	4.6	1.1	3.3	9.0	495	23.8	451
Lower Dir	6.0	7.3	.1	13.4	816	3.3	707
Malakand Protected Area	6.0	7.6	1.1	14.8	525	4.9	448
Mansehra	8.3	2.9	4.0	15.2	1,071	33.3	908
Mardan	7.2	2.0	5.5	14.8	1,551	7.8	1,322
Nowshera	14.4	4.3	8.9	27.7	939	11.8	679
Peshawar	11.3	5.2	3.9	20.4	2,829	10.2	2,252
Shangla	0.2	2.1	0.2	2.4	417	0.5	407
Swabi	5.3	6.2	9.7	21.2	935	14.7	737
Swat	11.2	2.4	2.6	16.2	1,474	8.3	1,235
Tank	0.3	0.9	38.0	39.2	333	4.5	202
Tor Ghar	0.8	2.2	1.0	3.9	179	1.2	172
Upper Dir	1.8	1.5	0.2	3.5	774	1.0	747

[1] MICS indicator 8.1 - Birth registration

Table D. CP.2: Children's involvement in economic activities

Percentage of children by involvement in economic activities during the last week, according to age groups, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 5-11 years involved in economic activity for at least one hour	Number of children age 5-11 years	Percentage of children age 12-14 years involved in:		Number of children age 12-14 years	Percentage of children age 15-17 years involved in:		Number of children age 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	
KP	8.0	31,969	15.7	5.3	13,485	26.7	2.4	10,198
District								
Abbottabad	3.0	1,309	2.3	1.3	403	17.9	0.1	386
Bannu	16.3	1,546	31.1	8.6	599	28.0	2.6	384
Batagram	5.7	670	14.5	.9	292	36.4	.3	169
Buner	8.4	956	15.3	7.3	385	28.5	0.0	228
Charsadda	6.6	1,892	16.2	3.0	813	36.6	.5	528
Chitral	12.2	500	20.8	3.8	180	35.6	0.0	144
D.I. Khan	17.8	1,967	35.9	12.3	846	48.0	7.9	621
Hangu	10.3	565	14.6	1.5	214	35.5	1.7	167
Haripur	1.0	900	15.8	3.2	378	11.6	4.8	238
Karak	11.0	632	10.7	.2	267	18.2	.8	224
Kohat	8.2	923	22.4	4.2	361	37.5	1.0	389
Kohistan	18.4	1,126	45.2	4.1	455	50.0	6.5	365
Lakki Marwat	17.5	834	39.3	13.8	355	53.9	0.0	248
Lower Dir	2.2	1,390	10.1	2.0	682	21.6	2.4	487
Malakand Protected Area	7.5	854	12.0	4.4	342	35.6	1.7	244
Mansehra	5.7	1,457	7.1	6.8	564	14.4	1.0	553
Mardan	6.8	2,261	11.1	9.2	944	20.6	4.9	767
Nowshera	2.9	1,371	10.5	1.2	516	15.6	2.0	503
Peshawar	5.9	4,246	7.9	5.5	2,066	17.8	.9	1,325
Shangla	4.6	732	19.8	3.4	301	34.3	0.0	215
Swabi	4.1	1,457	14.6	3.0	743	11.7	1.5	649
Swat	3.1	2,273	6.9	2.7	1,061	20.7	5.1	808
Tank	5.0	397	13.9	7.5	152	40.6	2.0	121
Tor Ghar	3.4	305	9.6	2.8	91	20.2	0.0	69
Upper Dir	15.6	1,405	13.1	9.0	474	43.7	1.4	366

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

Table D. CP.3: Children's involvement in household chores

Percentage of children by involvement in household chores during the last week, according to age groups, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 5-11 years involved in:		Number of children age 5-11 years	Percentage of children age 12-14 years involved in:		Number of children age 12-14 years	Percentage of children age 15-17 years involved in:		Number of children age 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 43 hours	Household chores for 43 hours or more	
KP	47	1	31,969	72	4	13,485	80	2	10,198
District									
Abbottabad	33	0	1,309	56	1	403	64	0	386
Bannu	65	1.1	1,546	88.9	.8	599	92.7	0.0	384
Batagram	63	1.2	670	74.2	12.7	292	92.2	1.9	169
Buner	32	.7	956	63.6	3.0	385	80.5	0.0	228
Charsadda	39	.4	1,892	65.0	0.0	813	83.2	0.0	528
Chitral	82	2.2	500	92.5	1.5	180	89.7	3.5	144
D.I. Khan	55	3.9	1,967	76.6	6.6	846	78.1	2.7	621
Hangu	47	.3	565	71.1	1.3	214	89.8	.8	167
Haripur	35	1.3	900	66.0	1.0	378	79.2	2.2	238
Karak	56	.2	632	64.0	3.1	267	83.8	2.6	224
Kohat	46	.4	923	70.2	4.3	361	84.6	.3	389
Kohistan	44	.4	1,126	84.4	2.5	455	91.2	.4	365
Lakki Marwat	58	1.8	834	74.1	4.4	355	78.2	3.3	248
Lower Dir	28	0.0	1,390	54.1	4.2	682	68.8	0.0	487
Malakand Protected Area	50	2.1	854	60.6	3.0	342	84.5	.7	244
Mansehra	52	.7	1,457	67.6	9.6	564	89.0	2.1	553
Mardan	56	1.9	2,261	69.8	7.4	944	79.5	1.0	767
Nowshera	29	.4	1,371	68.1	.5	516	61.0	0.0	503
Peshawar	51	.1	4,246	78.3	3.1	2,066	76.2	1.1	1,325
Shangla	43	1	732	64	7	301	86	2	215
Swabi	41	1	1,457	72	3	743	83	5	649
Swat	50	0	2,273	78	1	1,061	80	2	808
Tank	46	1	397	67	6	152	83	2	121
Tor Ghar	30	0	305	51	4	91	78	2	69
Upper Dir	47	3	1,405	73	5	474	85	4	366

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

na: not applicable

Table CP.4: Child labour

Percentage of children age 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, Khyber Pakhtunkhwa, 2016-17

	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:				Number of children age 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	Children working under hazardous conditions	Total child labour[1]	
KP	9.7	6.3	59.2	1.7	12.3	14.4	55,651
District							
Abbottabad	4.8	2.2	43.1	0.3	6.1	6.7	2,098
Bannu	12.4	12.4	75.0	.9	21.7	22.9	2,529
Batagram	11.5	3.7	70.5	4.3	11.4	15.1	1,131
Buner	8.1	6.9	46.6	1.1	10.6	13.4	1,569
Charsadda	10.1	4.7	52.6	.2	12.9	13.8	3,233
Chitral	13.7	8.2	85.9	2.3	16.6	18.2	825
D.I. Khan	22.6	14.7	64.5	4.4	27.9	30.2	3,433
Hangu	11.7	6.8	59.8	.6	16.1	16.9	947
Haripur	6.7	2.1	49.7	1.3	4.9	5.9	1,515
Karak	6.8	6.4	63.7	1.4	8.6	11.7	1,123
Kohat	13.8	5.7	60.2	1.2	14.2	17.1	1,674
Kohistan	20.0	12.8	62.2	.9	30.1	31.7	1,947
Lakki Marwat	20.2	13.6	65.7	2.7	30.0	34.3	1,437
Lower Dir	7.7	2.2	42.9	1.1	5.2	6.8	2,560
Malakand Protected Area	10.0	5.8	58.6	2.0	12.4	14.5	1,441
Mansehra	5.2	4.9	63.3	3.0	8.4	10.2	2,573
Mardan	7.2	7.0	63.6	3.0	13.0	15.4	3,972
Nowshera	5.6	2.4	44.3	.3	5.2	6.3	2,389
Peshawar	5.2	4.9	62.8	1.1	5.5	8.3	7,636
Shangla	11.0	3.5	55.2	2.5	11.6	14.3	1,248
Swabi	7.8	3.3	58.5	2.4	9.3	10.8	2,848
Swat	5.9	3.4	63.0	0.8	8.3	8.9	4,142
Tank	19.7	5.0	57.7	2.1	14.0	16.6	670
Tor Ghar	5.7	2.8	41.3	1.1	5.8	6.3	464
Upper Dir	11.1	11.9	58.7	3.4	14.7	19.7	2,245

[1] MICS indicator 8.2 - Child labour

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

Table D. CP.5: Child discipline

Percentage of children age 1-14 years by child disciplining methods experienced during the last one month, Khyber Pakhtunkhwa, 2016-17

	Percentage of children age 1-14 years who experienced:					
	Only non-violent discipline	Psychological aggression	Physical punishment		Any violent discipline method1	Number of children age 1-14 years
			Any	Severe		
KP	5.2	77.3	64.3	24.8	81.0	62,104
District						
Abbottabad	6.1	80.8	74.4	33.6	86.2	2,500
Bannu	3.4	90.8	82.6	30.9	93.2	2,865
Batagram	5.4	79.5	66.8	25.6	83.4	1,301
Buner	1.5	82.6	74.2	34.9	84.3	1,882
Charsadda	3.5	85.2	64.3	18.5	86.6	3,579
Chitral	15.6	67.9	59.3	8.4	81.6	915
D.I. Khan	11.4	64.5	70.8	23.4	81.4	3,894
Hangu	1.4	83.5	59.9	24.7	86.2	1,075
Haripur	11.2	78.8	62.2	10.0	80.6	1,856
Karak	2.1	70.9	53.5	5.9	72.9	1,211
Kohat	1.4	66.5	51.6	22.6	68.5	1,865
Kohistan	2.2	69.9	64.1	11.8	78.9	2,186
Lakki Marwat	2.1	88.0	83.2	53.0	89.9	1,569
Lower Dir	5.6	74.4	56.5	18.4	76.4	2,809
Malakand Protected Area	5.3	82.8	60.5	24.7	83.8	1,613
Mansehra	5.0	79.4	64.6	26.0	82.3	2,922
Mardan	4.1	74.6	59.9	25.0	75.5	4,279
Nowshera	10.4	72.8	57.7	17.1	73.9	2,637
Peshawar	2.6	80.1	64.6	24.9	82.4	8,568
Shangla	3.8	58.3	48.0	12.3	62.4	1,357
Swabi	14.0	72.9	50.5	30.8	76.0	2,885
Swat	3.0	77.2	61.1	28.9	78.6	4,468
Tank	15.2	70.0	66.6	31.8	78.2	855
Tor Ghar	6.4	67.9	62.6	9.8	74.8	534
Upper Dir	-	-	-	-	-	-

¹ **MICS indicator 8.3 - Violent discipline**

Table D. 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, Khyber Pakhtunkhwa, 2016-17

	Respondent believes that a child needs to be physically punished	Number of respondents to the child discipline module
KP	45.0	15,587
District		
Abbottabad	47.4	822
Bannu	80.7	573
Batagram	44.3	296
Buner	70.5	437
Charsadda	49.7	890
Chitral	14.0	293
D.I. Khan	34.5	830
Hangu	28.3	200
Haripur	34.1	618
Karak	84.2	285
Kohat	30.2	520
Kohistan	38.9	373
Lakki Marwat	76.1	357
Lower Dir	55.1	679
Malakand Protected Area	38.3	369
Mansehra	28.0	890
Mardan	26.8	1,061
Nowshera	43.5	716
Peshawar	44.8	2,261
Shangla	10.1	367
Swabi	52.3	811
Swat	49.2	1,083
Tank	35.2	192
Tor Ghar	67.4	131
Upper Dir	64.2	530

Table D. CP.7: Early marriage and polygyny

Percentage of women age 15-49 years who first married before their 15th birthday, percentages of women age 20-49 years who first married before their 15th and 18th birthdays, percentage of women age 15-19 years currently married , and the percentage of women who are in a polygynous marriage, Khyber Pakhtunkhwa, 2016-17

	Women age 15-49 years		Women age 20-49 years			Women age 15-19 years		Women age 15-49 years	
	Percentage married before age 15[1]	Number of women age 15-49 years	Percentage married before age 15	Percentage married before age 18[2]	Number of women age 20-49 years	Percentage currently married	Number of women age 15-19 years	Percentage in polygynous marriage[4]	Number of women age 15-49 years currently married
KP	7.7	36,703	8.9	29.6	28,719	18.8	7,984	3.8	24,373
District									
Abbottabad	4.2	1,875	5.1	16.6	1,491	8.9	384	1.6	1,181
Bannu	8.5	1,513	9.6	29.0	1,191	21.2	321	5.0	998
Batagram	11.8	662	13.2	43.2	526	26.2	136	2.8	523
Buner	8.9	952	10.5	33.2	737	23.1	214	6.6	674
Charsadda	5.2	2,087	6.0	25.1	1,647	17.1	440	2.7	1,329
Chitral	12.6	607	13.7	33.2	502	20.2	105	2.5	400
D.I. Khan	8.7	2,083	8.8	25.5	1,679	23.5	404	3.0	1,460
Hangu	11.9	629	14.3	36.5	489	17.4	140	5.3	423
Haripur	4.0	1,468	4.3	16.6	1,231	13.4	237	1.4	974
Karak	6.7	700	7.2	23.4	538	13.9	162	3.8	435
Kohat	9.2	1,311	10.3	33.3	1,013	16.8	298	4.4	834
Kohistan	20.3	798	22.2	62.1	622	33.6	176	11.0	650
Lakki Marwat	5.0	849	6.4	21.1	656	8.0	193	3.7	497
Lower Dir	6.0	1,514	7.3	32.1	1,178	19.0	336	4.2	1,054
Malakand Protected Area	6.7	928	7.5	32.4	720	22.9	208	3.0	637
Mansehra	4.8	1,898	5.4	24.4	1,507	16.2	391	3.2	1,281
Mardan	7.0	2,681	8.1	30.4	2,121	22.3	560	3.8	1,751
Nowshera	7.0	1,714	8.4	24.3	1,357	16.4	357	2.2	1,108
Peshawar	5.2	5,357	6.6	25.6	4,115	12.7	1241	4.0	3,287
Shangla	20.0	630	21.8	47.8	510	42.8	120	4.9	510
Swabi	6.1	1,952	7.2	30.5	1,499	17.0	454	5.2	1,236
Swat	14.1	2,529	16.9	45.4	1,883	28.9	646	3.6	1,790
Tank	8.7	469	9.5	25.6	378	21.4	90	1.8	319
Tor Ghar	9.8	263	11.7	36.4	209	19.4	54	5.2	200
Upper Dir	7.4	1,236	9.2	36.1	920	19.1	316	5.2	825

[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 age 15-19 years currently married or in**

[4] **MICS indicator 8.7 – Polygyny**

na: not applicable

Table D. CP.9: Spousal age difference

Percent distribution of women currently married age 15-19 and 20-24 years according to the age difference with their husband or, Khyber Pakhtunkhwa, 2016-17

	Percentage of currently married/in women age 15-19 years whose husband or is:						Number of women age 15-19 years currently married	Percentage of currently married/in women age 20-24 years whose husband is:						Number of women age 20-24 years currently married
	Younger	0-4 years older	5-9 years older	10+ years older[1]	Husband's age unknown	Total		Younger	0-4 years older	5-9 years older	10+ years older[2]	Husband 's age unknown	Total	
KP	2.98	35.35	37.10	22.34	2.24	100.00	1,503	5.22	42.59	34.15	15.77	2.27	100.00	3,666
District														
Abbottabad	0.00	32.00	46.27	19.63	2.11	100.00	34	2.80	45.31	40.00	8.63	3.25	100.00	150
Bannu	10.7	38.4	23.7	21.2	6.0	100.0	68	7.4	41.1	31.8	9.8	10.0	100.0	150
Batagram	5.4	50.3	32.5	11.8	0.0	100.0	36	9.1	53.6	30.1	7.1	0.0	100.0	97
Buner	6.4	46.1	38.6	8.9	0.0	100.0	50	9.3	43.2	36.1	11.3	0.0	100.0	101
Charsadda	1.3	28.8	32.4	37.4	0.0	100.0	75	3.1	42.8	34.5	19.6	0.0	100.0	200
Chitral	4.7	15.4	45.6	31.7	2.5	100.0	21	4.4	38.1	39.0	15.8	2.7	100.0	72
D.I. Khan	.5	31.1	43.8	23.0	1.6	100.0	95	13.5	45.9	24.9	14.2	1.5	100.0	222
Hangu	2.9	32.7	29.2	33.5	1.7	100.0	24	13.3	41.7	27.5	13.8	3.7	100.0	72
Haripur	2.7	33.3	45.9	18.0	0.0	100.0	32	1.3	43.3	40.2	15.2	0.0	100.0	147
Karak	.6	42.4	31.9	25.1	0.0	100.0	22	6.4	44.7	33.2	14.6	1.2	100.0	68
Kohat	6.8	51.4	20.1	15.9	5.7	100.0	50	10.6	30.9	39.2	15.7	3.6	100.0	116
Kohistan	2.0	49.0	13.2	7.4	28.5	100.0	59	5.1	46.8	6.4	6.0	35.7	100.0	114
Lakki Marwat	6.5	41.2	19.8	32.5	0.0	100.0	15	11.6	53.7	23.8	10.3	.7	100.0	69
Lower Dir	3.7	38.5	36.1	21.5	.3	100.0	64	1.9	48.6	31.7	17.7	.1	100.0	150
Malakand Protected Area	0.0	20.8	50.5	28.3	.4	100.0	48	2.2	39.5	36.9	19.4	2.0	100.0	89
Mansehra	1.2	34.5	58.8	5.5	0.0	100.0	63	5.0	49.8	35.4	9.7	0.0	100.0	228
Mardan	0.0	23.3	40.4	36.2	0.0	100.0	125	4.6	33.2	39.2	23.0	0.0	100.0	321
Nowshera	0.0	17.9	44.2	36.7	1.2	100.0	58	3.3	36.2	35.2	25.3	0.0	100.0	141
Peshawar	6.2	36.5	39.0	18.3	0.0	100.0	157	4.0	45.0	34.5	16.4	0.0	100.0	427
Shangla	4.07	56.73	30.30	8.89	0.00	100.00	51	5.77	45.26	36.28	10.65	2.04	100.00	91
Swabi	0.83	30.58	35.13	29.68	3.79	100.00	77	3.16	34.70	37.24	24.04	0.87	100.00	168
Swat	0.72	38.57	39.16	20.47	1.08	100.00	186	2.07	31.23	44.60	21.16	0.94	100.00	253
Tank	0.00	27.02	45.92	27.07	0.00	100.00	19	4.17	39.13	39.45	15.82	1.43	100.00	53
Tor Ghar	2.72	64.42	25.28	7.58	0.00	100.00	11	5.22	72.63	17.68	4.09	0.38	100.00	33
Upper Dir	8.92	32.80	33.23	23.99	1.07	100.00	61	2.67	56.89	27.18	12.61	0.65	100.00	134

[1] MICS indicator 8.8a - Spousal age difference (among women age 15-19)

[2] MICS indicator 8.8b - Spousal age difference (among women age 20-24)

Table D. CP.13: Attitudes toward domestic violence

Percentage of women age 15-49 years who believe a husband is justified in beating his wife in various circumstances, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-49 years who believe a husband is justified in beating his wife:						Number of women age 15-49 years
	If she goes out without telling him	If she neglects the children	If she argues with him	If she refuses sex with him	If she burns the food	For any of these five reasons[1]	
KP	65.2	62.0	60.9	31.5	30.6	75.1	36,703
District							
Abbottabad	44.8	47.3	50.3	26.4	30.5	60.6	1,875
Bannu	93.2	91.0	59.5	35.4	39.3	97.2	1,513
Batagram	76.6	79.9	79.0	58.8	64.7	85.5	662
Buner	83.2	82.5	80.5	39.9	47.3	92.2	952
Charsadda	76.7	67.0	65.6	28.9	34.9	86.2	2,087
Chitral	67.0	63.4	62.8	45.4	50.8	75.6	607
D.I. Khan	23.1	22.1	22.2	5.7	7.1	30.2	2,083
Hangu	83.8	67.6	80.1	30.1	20.9	94.0	629
Haripur	18.1	16.8	18.3	8.9	6.6	29.0	1,468
Karak	87.8	89.8	81.0	49.0	63.0	91.9	700
Kohat	68.0	55.6	63.7	24.5	18.2	74.0	1,311
Kohistan	81.1	66.0	75.9	47.3	36.5	86.7	798
Lakki Marwat	81.9	85.4	68.5	34.3	40.3	94.7	849
Lower Dir	84.9	88.3	80.9	50.7	51.4	92.8	1,514
Malakand Protected Area	73.6	62.2	67.9	23.1	22.7	84.5	928
Mansehra	53.9	52.1	48.6	34.4	26.5	65.2	1,898
Mardan	70.0	65.0	64.6	35.9	28.3	77.8	2,681
Nowshera	61.1	65.0	62.5	28.4	33.6	75.5	1,714
Peshawar	64.5	62.1	63.4	30.7	27.5	76.4	5,357
Shangla	51.1	38.0	57.3	18.2	18.4	62.2	630
Swabi	74.6	77.2	78.5	44.3	34.9	87.3	1,952
Swat	64.5	57.6	58.6	26.9	27.4	76.2	2,529
Tank	30.0	29.4	29.8	14.1	13.7	37.2	469
Tor Ghar	86.1	83.5	80.5	38.6	57.3	94.9	263
Upper Dir	88.0	82.4	77.6	45.0	36.6	94.5	1,236

[1] MICS indicator 8.12 - Attitudes towards domestic violence

Table D. CP.14: Children's living arrangements and orphanhood

Percent distribution of children age 0-17 years according to living arrangements, percentage of children age 0-17 years not living with a biological parent and percentage of children who have one or both parents dead, Khyber Pakhtunkhwa, 2016-17

	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 age 0-17 years
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead					
KP	83.4	0.1	0.1	0.9	0.1	12.0	2.3	0.1	0.8	0.1	100.0	1.2	3.5	76,016
District														
Abbottabad	82.0	0.2	0.1	1.0	0.1	13.3	1.8	0.2	1.2	0.2	100.0	1.3	3.5	3,027
Bannu	81.1	0.2	0.1	0.7	0.2	12.7	3.2	0.2	1.5	0.1	100.0	1.1	5.2	3,481
Batagram	56.6	0.8	0.0	0.7	0.2	38.6	1.5	0.2	1.2	0.1	100.0	1.8	3.8	1548
Buner	77.6	0.0	0.0	0.7	0.1	19.1	1.8	0.0	0.6	0.1	100.0	0.8	2.5	2,219
Charsadda	93.1	0.1	0.0	0.3	0.0	3.1	3.0	0.0	0.4	0.0	100.0	0.4	3.6	4,334
Chitral	63.3	0.0	0.0	2.5	0.1	29.4	2.7	0.9	0.8	0.3	100.0	2.6	3.7	1,109
D.I. Khan	90.0	0.0	0.1	1.3	0.1	4.3	2.8	0.5	0.7	0.1	100.0	1.6	3.9	4,778
Hangu	60.0	0.4	0.1	0.9	0.1	35.2	2.2	0.5	0.4	0.2	100.0	1.6	3.3	1,308
Haripur	81.5	0.4	0.0	0.8	0.1	13.1	2.8	0.4	0.9	0.0	100.0	1.3	4.1	2,230
Karak	81.0	0.5	0.0	0.8	0.0	13.9	3.1	0.0	0.7	0.0	100.0	1.3	4.3	1,511
Kohat	79.7	0.3	0.0	0.5	0.0	16.8	2.3	0.2	0.2	0.0	100.0	0.8	2.9	2,359
Kohistan	94.9	0.4	0.1	0.8	1.2	0.7	1.3	0.1	0.4	0.1	100.0	2.5	3.3	2,609
Lakki Marwat	89.9	0.0	0.1	0.1	0.1	5.2	3.1	0.3	1.2	0.0	100.0	0.4	4.5	1,901
Lower Dir	62.0	0.3	0.0	0.3	0.0	35.2	1.7	0.0	0.4	0.1	100.0	0.6	2.4	3,420
Malakand Protected Area	88.6	0.0	0.0	1.2	0.1	7.9	1.2	0.0	0.9	0.0	100.0	1.3	2.3	1,957
Mansehra	83.5	0.1	0.0	1.0	0.2	11.3	1.9	0.2	1.6	0.0	100.0	1.3	3.9	3,672
Mardan	85.8	0.1	0.2	1.2	0.0	9.0	2.8	0.1	0.7	0.1	100.0	1.5	3.9	5,317
Nowshera	86.6	0.1	0.1	0.8	0.0	8.6	2.9	0.1	0.7	0.0	100.0	1.0	3.8	3,319
Peshawar	90.1	0.0	0.0	0.9	0.2	5.1	2.5	0.0	1.0	0.1	100.0	1.2	3.7	10,367
Shangla	93.6	0.1	0.0	0.8	0.1	2.9	1.5	0.0	0.9	0.1	100.0	1.0	2.7	1,617
Swabi	83.2	0.1	0.0	1.0	0.0	12.4	2.0	0.1	1.1	0.0	100.0	1.1	3.2	3,701
Swat	82.4	0.1	0.0	1.3	0.2	13.9	1.5	0.0	0.4	0.1	100.0	1.6	2.2	5,566
Tank	91.9	0.0	0.1	0.5	0.0	2.9	3.6	0.1	0.8	0.0	100.0	0.7	4.7	1,029
Tor Ghar	67.9	0.1	0.0	0.2	0.1	28.8	1.0	0.0	1.6	0.1	100.0	0.4	2.9	637
Upper Dir	76.6	0.1	0.2	1.0	0.1	19.0	2.6	0.0	0.4	0.1	100.0	1.3	3.3	3,002

[1] MICS indicator 8.13 - Children's living arrangements

[2] MICS indicator 8.14 - Prevalence of children with one or both parents dead

Table D. CP.15: Children with parents living abroad

Percent distribution of children age 0-17 years by residence of parents in another country, Khyber Pakhtunkhwa, 2016-17

	Percent distribution of children age 0-17 years:				Percentage of children age 0-17 years with at least one parent living abroad[1]	Number of children age 0-17 years
	Only father abroad	Both mother and father abroad	With neither parent living abroad	Total		
KP	8.0	0.0	91.9	100.0	8.1	76,016
District						
Abbottabad	4.8	0.0	95.2	100.0	4.8	3,027
Bannu	11.5	0.0	88.5	100.0	11.5	3,481
Batagram	24.8	0.0	75.2	100.0	24.8	1,548
Buner	15.3	0.1	84.5	100.0	15.5	2,219
Charsadda	2.4	0.0	97.6	100.0	2.4	4,334
Chitral	4.9	0.0	95.1	100.0	4.9	1,109
D.I. Khan	3.2	0.0	96.8	100.0	3.2	4,778
Hangu	31.6	0.2	68.3	100.0	31.7	1,308
Haripur	7.6	0.0	92.4	100.0	7.6	2,230
Karak	5.1	0.0	94.9	100.0	5.1	1,511
Kohat	10.3	0.0	89.7	100.0	10.3	2,359
Kohistan	0.4	0.0	99.6	100.0	0.4	2,609
Lakki Marwat	2.5	0.0	97.5	100.0	2.5	1,901
Lower Dir	27.2	0.0	72.8	100.0	27.2	3,420
Malakand Protected Area	6.5	0.1	93.4	100.0	6.6	1,957
Mansehra	5.3	0.0	94.7	100.0	5.3	3,672
Mardan	7.8	0.1	92.1	100.0	7.9	5,317
Nowshera	4.4	0.0	95.6	100.0	4.4	3,319
Peshawar	2.9	0.0	97.1	100.0	2.9	10,367
Shangla	1.8	0.0	98.2	100.0	1.8	1,,617
Swabi	10.0	0.0	90.0	100.0	10.0	3,701
Swat	10.5	0.1	89.3	100.0	10.7	5,566
Tank	0.7	0.0	99.3	100.0	0.7	1,029
Tor Ghar	4.4	0.0	95.6	100.0	4.4	637
Upper Dir	14.6	0.1	85.3	100.0	14.7	3,002

[1] **MICS indicator 8.15 - Children with at least one parent living abroad**

Percentage of women ever married age 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, Khyber Pakhtunkhwa, 2016-17

| | 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 ever married age 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			
KP	21.7	12.1	10.5	7.3	12.8	10.3	14.8	10.9	3.8	1.9	25,004
District											
Abbottabad	36.3	22.2	19.3	14.3	22.3	17.5	23.0	17.7	6.7	4.5	1,212
Bannu	14.7	13.2	11.1	10.5	12.1	8.3	13.0	8.3	4.6	3.6	1,036
Batagram	3.8	2.3	1.3	1.2	2.3	2.4	2.3	2.2	1.3	0.5	527
Buner	2.9	1.8	1.5	1.1	2.0	1.7	2.4	1.8	0.8	0.7	688
Charsadda	30.4	8.0	10.7	3.4	16.5	10.5	17.8	15.8	3.1	0.3	1,358
Chitral	5.9	2.9	2.9	1.7	3.5	4.3	4.5	4.0	1.9	0.7	414
D.I. Khan	13.0	4.7	5.6	3.0	7.9	5.5	9.7	7.1	2.1	0.6	1,514
Hangu	6.7	5.1	3.4	2.5	2.8	3.2	5.4	4.3	1.1	0.6	432
Haripur	35.9	24.6	19.5	17.6	18.8	24.5	26.5	17.1	8.4	5.8	1,016
Karak	35.8	20.1	25.4	15.2	23.4	13.0	27.2	9.2	4.0	3.9	454
Kohat	20.8	14.1	10.5	8.3	13.0	12.4	15.5	10.9	4.5	2.3	859
Kohistan	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	663
Lakki Marwat	10.2	7.3	6.4	5.7	5.8	4.0	8.3	7.4	1.2	0.5	516
Lower Dir	20.9	5.4	6.6	1.6	11.2	9.8	12.4	11.4	4.8	0.4	1,065
Malakand Protected Area	36.8	19.4	14.7	10.4	22.6	14.3	24.0	19.7	5.6	2.7	647
Mansehra	17.8	11.4	11.3	8.7	13.7	10.9	12.3	9.9	6.1	3.8	1,312
Mardan	30.6	20.7	16.8	12.8	16.8	11.7	19.7	15.2	3.8	2.2	1,796
Nowshera	47.1	21.7	16.4	10.9	23.0	15.2	26.0	22.6	7.1	2.4	1,144
Peshawar	28.1	16.3	13.5	9.2	18.1	14.1	20.7	13.9	4.4	1.9	3,375
Shangla	0.6	0.1	0.2	0.1	0.3	0.4	0.6	0.2	0.1	0.0	516
Swabi	22.6	11.8	8.7	6.1	11.0	12.4	14.8	11.3	3.1	1.2	1,275
Swat	13.8	10.3	7.7	6.0	7.4	9.1	11.1	6.9	2.5	1.7	1,822
Tank	11.7	4.9	4.4	2.9	6.5	4.3	6.3	4.6	2.0	0.8	329
Tor Ghar	2.3	0.0	0.0	0.0	0.0	1.4	2.0	1.7	0.0	0.0	202
Upper Dir	7.5	4.3	4.5	3.0	6.0	3.1	5.3	3.8	1.7	0.7	834

[1]MICS indicator 9.1; MDG indicator 6.3 - Knowledge about HIV prevention among young women

Table D. HA.2: Knowledge of mother-to-child HIV transmission

Percentage of women ever married age 15-49 years who correctly identify means of HIV transmission from mother to child, Khyber Pakhtunkhwa, 2016-17

	Percentage of women ever married age 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 ever married age 15-49
	During pregnancy	During delivery	By breastfeeding	By at least one of the three means	By all three means[1]		
KP	13.0	11.4	12.6	15.8	9.0	5.9	25,004
District							
Abbottabad	26.8	24.7	22.4	30.0	19.0	6.3	1,212
Bannu	6.9	3.6	6.9	8.8	3.1	5.9	1,036
Batagram	2.2	1.8	2.1	2.5	1.5	1.3	527
Buner	2.2	.8	1.0	2.2	.8	.7	688
Charsadda	16.5	13.1	18.0	23.2	9.7	7.2	1,358
Chitral	3.9	4.4	4.2	5.2	3.4	.7	414
D.I. Khan	8.5	8.2	8.5	9.2	7.3	3.8	1,514
Hangu	4.0	4.3	4.3	5.7	2.8	1.0	432
Haripur	13.6	10.3	10.4	15.2	7.8	20.7	1,016
Karak	31.2	29.1	29.1	32.3	26.9	3.5	454
Kohat	13.7	11.7	14.6	17.0	9.9	3.8	859
Kohistan	0.0	0.0	0.0	0.0	0.0	0.0	663
Lakki Marwat	8.5	8.2	8.4	9.2	7.4	.9	516
Lower Dir	9.5	7.5	12.9	13.5	6.0	7.3	1,065
Malakand Protected Area	19.6	19.0	23.6	30.1	12.1	6.7	647
Mansehra	11.9	8.8	8.9	14.4	6.1	3.3	1,312
Mardan	18.8	16.7	16.7	21.4	13.4	9.2	1,796
Nowshera	20.5	21.3	24.4	29.9	14.4	17.2	1,144
Peshawar	18.4	16.6	18.2	21.7	14.1	6.4	3,375
Shangla	0.3	0.3	0.6	0.6	0.3	0.0	516
Swabi	14.6	12.2	13.8	16.3	10.3	6.3	1,275
Swat	9.6	8.9	8.1	11.5	5.8	2.3	1,822
Tank	4.9	4.3	4.6	5.3	4.1	6.5	329
Tor Ghar	1.3	0.2	0.4	1.5	0.0	0.8	202
Upper Dir	5.5	4.0	4.3	6.4	2.5	1.1	834

[1] **MICS indicator 9.2 - Knowledge of mother-to-child transmission of HIV**

Table D. HA.3: Accepting attitudes toward people living with HIV

Percentage of women ever married age 15-49 years who have heard of AIDS who express an accepting attitude towards people living with HIV, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:						
	Are willing to care for a family member with AIDS in own home	Would buy fresh vegetables from a shopkeeper or vendor who is HIV-positive	Believe that a female teacher who is HIV-positive and is not sick should be allowed to continue teaching	Would not want to keep secret that a family member is HIV-positive	Agree with at least one accepting attitude	Express accepting attitudes on all four indicators[1]	Number of women ever married age 15-49 who have heard of AIDS
KP	73.2	56.4	57.9	53.8	93.8	20.2	5,432
District							
Abbottabad	80.2	43.6	48.8	54.1	98.0	14.1	440
Bannu	94.5	72.7	82.1	32.1	100.0	12.8	152
Batagram	88.1	29.5	25.4	58.1	96.1	5.9	20
Buner	73.3	54.8	55.4	66.0	87.6	40.2	20
Charsadda	92.3	64.6	54.0	57.7	98.8	29.8	413
Chitral	57.6	49.2	47.7	65.0	99.5	10.7	24
D.I. Khan	68.3	44.8	49.8	26.2	83.0	7.6	197
Hangu	59.0	32.1	48.4	51.6	97.1	11.5	29
Haripur	78.7	54.9	67.0	53.4	94.3	24.9	365
Karak	47.0	35.2	43.0	42.6	85.1	.6	163
Kohat	50.3	45.8	48.5	63.4	93.9	14.6	179
Kohistan	91.2	60.7	60.8	44.3	93.7	22.3	52
Lakki Marwat	72.3	57.2	60.0	65.9	86.0	34.1	222
Lower Dir	83.1	60.9	60.5	53.3	96.2	24.9	238
Malakand Protected Area	79.0	57.5	58.9	46.6	94.7	17.0	233
Mansehra	69.6	64.8	60.8	65.6	93.9	30.0	550
Mardan	58.3	59.1	55.3	63.6	87.1	28.8	539
Nowshera	72.6	63.5	67.2	58.8	98.5	19.1	948
Peshawar	72.8	62.5	61.0	59.9	95.3	24.2	1,899
Shangla	(*)	(*)	(*)	(*)	(*)	(*)	3
Swabi	67.1	45.9	49.4	36.2	92.7	6.0	288
Swat	79.2	52.5	52.8	36.5	92.5	11.1	252
Tank	60.2	45.0	49.0	20.7	70.5	4.8	39
Tor Ghar	(*)	(*)	(*)	(*)	(*)	(*)	5
Upper Dir	91.0	53.0	52.2	59.9	98.6	20.4	63

[1] MICS indicator 9.3 - Accepting attitudes towards people living with HIV
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table D. HA.4: Knowledge of a place for HIV testing

Percentage of women ever married age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:					Number of women ever married age 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, 3]	
KP	3.8	0.8	0.7	0.3	0.3	25,004
District						
Abbottabad	4.4	0.9	0.9	0.0	0.0	1,212
Bannu	2.7	0.7	0.7	0.4	0.4	1,036
Batagram	0.3	0.0	0.0	0.0	0.0	527
Buner	0.1	0.1	0.0	0.0	0.0	688
Charsadda	6.7	0.5	0.4	0.2	0.2	1,358
Chitral	0.8	0.1	0.1	0.1	0.1	414
D.I. Khan	0.6	0.1	0.1	0.1	0.1	1,514
Hangu	1.1	0.1	0.1	0.0	0.0	432
Haripur	3.8	1.2	1.0	0.9	0.9	1,016
Karak	4.2	0.4	0.2	0.0	0.0	454
Kohat	6.7	1.9	1.8	0.9	0.9	859
Kohistan	0.0	0.0	0.0	0.0	0.0	663
Lakki Marwat	4.1	0.3	0.3	0.0	0.0	516
Lower Dir	1.4	0.0	0.0	0.0	0.0	1,065
Malakand Protected Area	10.1	0.8	0.8	0.1	0.1	647
Mansehra	5.4	0.1	0.0	0.0	0.0	1,312
Mardan	3.5	0.9	0.7	0.4	0.3	1,796
Nowshera	8.5	2.1	1.7	0.7	0.6	1,144
Peshawar	5.3	1.7	1.4	0.5	0.4	3,375
Shangla	0.2	0.1	0.0	0.0	0.0	516
Swabi	5.1	0.4	0.3	0.3	0.3	1,275
Swat	2.2	0.9	0.9	0.3	0.3	1,822
Tank	0.0	0.0	0.0	0.0	0.0	329
Tor Ghar	0.0	0.0	0.0	0.0	0.0	202
Upper Dir	2.0	0.6	0.6	0.3	0.3	834

[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

[3] MICS indicator 9.6 - Sexually active young women who have been tested for HIV and know the results

Table D. HA.5: HIV counselling and testing during antenatal care

Percentage of women ever married age 15-49 with a live birth in the last 2 years who received antenatal care from a health professional during the last pregnancy, percentage who received HIV counselling, percentage who were offered and tested for HIV, percentage who were offered, tested and received the results of the HIV test, and percentage who received counselling and were offered, accepted and received the results of the HIV test, Khyber Pakhtunkhwa, 2016-17

	Percentage of women who:					Number of women ever married age 15-49 with a live birth in the last 2 years
	Received antenatal care from a health care professional for last pregnancy	Received HIV counselling 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 counselling, were offered an HIV test, accepted and received the results	
KP	74.3	0.4	0.3	0.3	0.1	8,365
District						
Abbottabad	85.2	0.8	0.0	0.0	0.0	364
Bannu	68.1	0.2	0.2	0.1	0.1	413
Batagram	62.1	0.0	0.0	0.0	0.0	183
Buner	69.1	0.3	0.0	0.0	0.0	243
Charsadda	78.9	0.6	0.1	0.1	0.1	454
Chitral	78.2	0.0	0.0	0.0	0.0	127
D.I. Khan	64.3	0.0	0.3	0.3	0.0	559
Hangu	73.8	0.6	0.0	0.0	0.0	149
Haripur	73.5	0.0	0.0	0.0	0.0	256
Karak	79.9	2.3	0.4	0.4	0.4	168
Kohat	78.1	0.4	0.6	0.4	0.2	275
Kohistan	12.4	0.0	0.0	0.0	0.0	179
Lakki Marwat	51.8	0.0	0.0	0.0	0.0	190
Lower Dir	75.7	0.0	0.0	0.0	0.0	336
Malakand Protected Area	78.7	0.1	0.0	0.0	0.0	213
Mansehra	76.4	0.0	0.1	0.1	0.0	453
Mardan	87.4	0.2	0.4	0.4	0.1	627
Nowshera	83.9	0.0	1.3	1.3	0.0	384
Peshawar	83.4	0.9	0.5	0.3	0.2	1,130
Shangla	36.1	0.0	0.5	0.5	0.0	150
Swabi	75.5	0.2	0.0	0.0	0.0	389
Swat	82.7	0.8	0.4	0.4	0.1	614
Tank	57.0	0.0	0.0	0.0	0.0	125
Tor Ghar	32.9	0.0	0.0	0.0	0.0	71
Upper Dir	73.2	0.0	0.6	0.6	0.0	314

Table D. HA.6: Key HIV and AIDS indicators (young women)

Percentage of women ever married age 15-24 years by key HIV and AIDS indicators, Khyber Pakhtunkhwa, 2016-17

	Percentage of women ever married age 15-24 years who:					Number of women ever married age 15-24 years	Percentage who express accepting attitudes towards people living with HIV on all four indicators[a]	Number of women ever married age 15-24 years who have heard of 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 ever been tested and know the result of the most recent test	Have been tested for HIV in the last 12 months and know the result			
KP	1.7	8.1	3.1	0.5	0.3	5,222	21.7	1,026
District								
Abbottabad	4.0	19.4	4.8	0.0	0.0	187	10.4	60
Bannu	2.6	2.2	1.4	1.1	1.1	220	(1.2	39
Batagram	0.4	0.4	0.0	0.0	0.0	133	(*)	3
Buner	0.9	0.0	0.0	0.0	0.0	152	(*)	5
Charsadda	0.8	10.5	7.7	0.6	0.2	275	39.9	99
Chitral	0.4	4.6	0.5	0.0	0.0	96	(*)	7
D.I. Khan	0.2	6.4	0.5	0.5	0.5	323	(7.0)	36
Hangu	0.2	3.1	0.8	0.0	0.0	98	(*)	7
Haripur	3.8	7.5	2.1	0.0	0.0	180	22.0	57
Karak	5.4	28.9	5.0	0.0	0.0	91	2.5	37
Kohat	1.6	6.7	3.8	1.6	1.0	169	10.6	24
Kohistan	0.0	0.0	0.0	0.0	0.0	175	(*)	0
Lakki Marwat	1.3	9.1	5.5	0.0	0.0	86	(*)	10
Lower Dir	0.4	10.4	1.5	0.0	0.0	214	45.6	62
Malakand Protected Area	1.9	16.2	12.4	0.4	0.0	138	25.1	56
Mansehra	2.3	3.4	4.4	0.0	0.0	296	19.6	40
Mardan	2.1	13.7	3.9	1.2	1.2	450	36.7	129
Nowshera	0.4	13.7	4.3	0.2	0.2	204	34.4	76
Peshawar	2.6	11.9	3.4	1.3	0.1	584	10.4	158
Shangla	0.0	0.9	0.0	0.0	0.0	142	(*)	1
Swabi	3.0	8.1	4.3	0.3	0.0	252	(4.4)	48
Swat	1.6	4.2	2.2	0.7	0.3	443	(10.8)	48
Tank	0.6	7.3	0.0	0.0	0.0	73	(0.0)	13
Tor Ghar	0.0	0.0	0.0	0.0	0.0	43	(*)	1
Upper Dir	1.1	2.3	2.8	1.0	0.0	198	(*)	18

1 MICS indicator 9.1; MDG indicator 6.3 - Knowledge about HIV prevention among young women
2 MICS indicator 9.6 - Sexually active young women who have been tested for HIV and know the results
a Refer to Table HA.3 for the four indicators.
( ) Figures that are based on 25-49 unweighted cases
(*) Figures that are based on fewer than 25 unweighted cases

Table D. MT.1: Exposure to mass media

Percentage of women ever married age 15-49 years who are exposed to specific mass media on a weekly basis, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 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	Number of women ever married age 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				
KP	8.7	5.8	29.9	0.7	36.0	63.9	36,703
District							
Abbottabad	9.3	4.6	59.3	1.2	62.0	37.6	1,875
Bannu	6.1	6.0	15.7	0.6	22.9	76.8	1,513
Batagram	6.3	1.6	8.8	0.6	13.3	86.6	662
Buner	6.2	5.1	7.1	0.2	14.6	85.3	952
Charsadda	8.8	9.3	18.0	1.3	26.9	72.9	2,087
Chitral	10.3	13.6	33.4	1.9	43.9	56.0	607
D. I. Khan	4.4	2.9	30.2	0.5	33.4	66.6	2,083
Hangu	3.9	4.8	23.1	0.1	28.4	71.4	629
Haripur	8.9	4.9	49.1	1.0	53.5	46.3	1,468
Karak	9.9	3.1	24.0	0.7	29.4	70.3	700
Kohat	8.3	3.4	40.0	0.8	43.2	56.7	1,311
Kohistan	0.0	0.1	0.0	0.0	0.1	99.9	798
Lakki Marwat	6.7	2.9	16.6	0.3	21.2	78.8	849
Lower Dir	7.6	7.6	18.8	0.8	27.8	72.2	1,514
Malakand Protected Area	10.3	5.2	26.3	0.8	33.0	66.6	928
Mansehra	14.9	4.6	42.2	0.9	48.9	51.0	1,898
Mardan	8.6	6.7	33.0	0.6	39.3	60.6	2,681
Nowshera	12.5	5.2	42.3	0.5	49.7	50.2	1,714
Peshawar	12.9	7.8	40.0	1.1	46.8	53.1	5,357
Shangla	0.1	3.3	4.8	0.1	7.4	92.5	630
Swabi	6.7	9.3	30.4	0.9	37.8	62.0	1,952
Swat	9.2	5.1	28.5	0.2	35.7	64.2	2,529
Tank	3.7	3.5	19.0	0.4	22.4	77.3	469
Tor Ghar	0.0	1.8	0.1	0.0	1.9	98.1	263
Upper Dir	5.7	5.1	6.9	0.6	13.2	86.2	1,236

[1] MICS indicator 10.1 - Exposure to mass media

Table D. MT.2: Use of computers and internet

Percentage of young women age 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, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-24 years who have:						
	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	Number of women age 15-24 years
KP	12.5	9.3	6.4	9.3	8.4	6.7	14,499
District							
Abbottabad	19.1	15.5	9.1	14.6	13.4	10.4	737
Bannu	6.6	4.3	4.0	3.5	3.3	3.1	581
Batagram	5.3	4.6	2.6	4.0	3.8	1.9	256
Buner	4.8	3.0	1.4	4.4	2.9	0.9	377
Charsadda	8.6	4.7	3.1	5.9	5.7	5.3	787
Chitral	19.7	10.8	6.7	9.8	7.2	4.7	228
D. I. Khan	6.0	5.4	4.0	3.2	2.7	2.2	763
Hangu	5.5	3.3	2.8	5.1	4.5	3.5	259
Haripur	17.8	13.4	8.1	15.5	15.2	11.5	527
Karak	17.4	10.6	8.2	8.2	7.0	6.7	302
Kohat	15.2	11.0	6.6	11.2	10.3	7.4	525
Kohistan	0.0	0.0	0.0	0.0	0.0	0.0	308
Lakki Marwat	6.4	4.3	1.9	5.5	5.4	3.2	349
Lower Dir	6.8	4.6	3.3	2.6	2.3	1.6	583
Malakand Protected Area	19.9	13.3	8.1	11.4	9.8	7.9	359
Mansehra	21.0	16.4	9.0	16.0	15.3	10.8	800
Mardan	13.4	10.4	9.0	8.9	7.8	6.9	1,102
Nowshera	21.3	14.3	10.9	10.9	9.5	6.6	626
Peshawar	14.4	11.8	9.1	14.6	13.5	11.8	2,168
Shangla	0.0	0.0	0.0	0.0	0.0	0.0	241
Swabi	21.1	16.9	10.2	14.2	11.7	8.3	787
Swat	9.0	6.5	5.2	8.7	8.4	7.1	1,012
Tank	3.7	3.0	2.4	2.3	2.3	1.7	177
Tor Ghar	0.0	0.0	0.0	0.0	0.0	0.0	99
Upper Dir	7.2	5.6	2.1	5.1	4.5	3.0	546

[1] MICS indicator 10.2 - Use of computers

[2] MICS indicator 10.3 - Use of internet

Table D. SW.1: Domains of life satisfaction

Percentage of women age 15-24 years who are very or somewhat satisfied in selected domains of satisfaction, Khyber Pakhtunkhwa, 2016-17

	Percentage of women age 15-24 years who are very or somewhat satisfied in selected domains:						Percentage of women age 15-24 years who:			Number of women age 15-24 years	Percentage of women age 15-24 years who are very or somewhat satisfied with school	Number of women age 15-24 years attending school	Percentage of women age 15-24 years who are very or somewhat satisfied with their job	Number of women age 15-24 years who have a job	Percentage of women age 15-24 years who are very or somewhat satisfied with their income	Number of women age 15-24 years who have an income
	Family life	Friendships	Health	Living environment	Treatment by others	The way they look	Are attending school	Have a job	Have an income							
KP	93	88	89	89	91	93	20	3	9	14,499	94	2,927	71	459	82	1,297
District																
Abbottabad	89	88	78	80	80	88	36	9	10	737	80	263	(27)	64	72	76
Bannu	91	87	91	86	85	90	17	3	4	929	93	157	(*)	30	(*)	42
Batagram	95	82	90	92	94	95	6	2	4	256	(*)	15	(*)	5	(*)	10
Buner	90	80	88	76	88	87	13	2	7	377	94	49	(*)	7	(*)	28
Charsadda	94	85	89	90	93	93	18	4	22	787	93	138	(90)	31	97	170
Chitral	95	93	90	88	89	94	30	3	3	228	93	67	(*)	6	(*)	6
D.I.Khan	98	82	92	92	97	97	12	1	6	763	98	88	(*)	8	(82)	48
Hangu	81	74	78	73	71	81	9	6	6	259	87	23	(20)	16	(65)	15
Haripur	91	85	86	91	92	95	27	4	9	527	92	141	(75)	21	(60)	48
Karak	91	92	87	85	90	90	19	2	6	302	99	58	(*)	5	(*)	18
Kohat	86	82	83	77	80	86	17	3	8	1,086	94	185	(*)	28	60	89
Kohistan	91	87	78	84	87	88	1	5	3	308	(*)	4	(*)	15	(*)	9
Lakki Marwat	92	87	89	87	87	91	15	5	6	349	96	51	(54)	17	(73)	22
Lower Dir	98	99	97	99	99	99	27	2	3	583	100	158	(*)	13	100	20
Malakand Protected Area	93	91	91	95	96	96	26	4	14	359	99	93	(*)	13	96	51
Mansehra	94	80	86	88	93	96	21	2	4	800	96	165	(*)	17	(*)	31
Mardan	92	90	90	88	87	91	23	3	7	1,889	94	431	(90)	55	86	130
Nowshera	94	92	91	94	96	96	28	6	7	626	93	177	(89)	39	(92)	47
Peshawar	95	91	92	91	94	94	21	4	13	3,581	96	766	(93)	136	89	458
Shangla	99	90	95	91	93	98	4	2	3	241	(*)	10	(*)	5	(*)	6
Swabi	91	95	86	94	94	91	23	1	7	787	94	179	(*)	5	(86)	56
Swat	93	92	87	94	94	88	20	2	17	1,012	97	207	(*)	20	84	176
Tank	98	87	94	93	96	97	14	1	4	177	96	24	(*)	1	(87)	6
Tor Ghar	95	83	87	88	87	90	3	13	11	99	(*)	3	(19)	13	(61)	11
Upper Dir	96	94	94	91	95	97	18	0	10	546	93	100	(*)	1	(82)	52

( ) Figures that are based on 25-49 unweighted cases   (*) Figures that are based on fewer than 25 unweighted cases

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Table D. SW.2: Overall life satisfaction and happiness

Percentage of women age 15-24 years who are very or somewhat satisfied with their life overall, the average overall life satisfaction score, and percentage of women age 15-24 years who are very or somewhat happy, Khyber Pakhtunkhwa, 2016-17

	Percentage of women with overall life satisfaction[1]	Average life satisfaction score	Percentage of women who are very or somewhat happy [2]	Number of women age 15-24 years
KP	93.0	1.4	93.2	14,499
District				
Abbottabad	82.0	1.8	88.7	737
Bannu	89.6	1.6	93.9	581
Batagram	94.7	1.4	93.7	256
Buner	87.0	1.6	90.1	377
Charsadda	94.0	1.5	94.6	787
Chitral	95.3	1.3	95.5	228
D.I. Khan	97.2	1.3	97.2	763
Hangu	81.7	1.8	81.9	259
Haripur	90.7	1.4	90.6	527
Karak	93.2	1.7	89.7	302
Kohat	89.6	1.6	82.7	525
Kohistan	88.5	1.6	93.6	308
Lakki Marwat	91.8	1.4	94.0	349
Lower Dir	98.9	1.1	98.3	583
Malakand Protected Area	93.8	1.4	92.9	359
Mansehra	95.0	1.5	94.1	800
Mardan	93.7	1.4	92.3	1,102
Nowshera	95.1	1.3	92.6	626
Peshawar	95.6	1.3	95.2	2,168
Shangla	96.7	1.4	98.9	241
Swabi	91.3	1.4	90.2	787
Swat	93.0	1.4	94.8	1,012
Tank	98.7	1.2	96.8	177
Tor Ghar	89.3	1.5	97.3	99
Upper Dir	97.2	1.3	96.4	546

[1] MICS Indicator 11.1 - Life satisfaction

[2] MICS indicator 11.2 – Happiness

Table D. SW.3: Perception of a better life

Percentage of women age 15-24 years who think that their lives improved during the last one year and those who expect that their lives will get better after one year, Khyber Pakhtunkhwa, 2016-17

| | Percentage of women who think that their life | | | |
	Improved during the last one year	Will get better after one year	Both[1]	Number of women age 15-24 years
KP	61.9	86.9	59.3	14,499
District				
Abbottabad	60.6	83.0	57.8	737
Bannu	56.8	87.8	54.5	581
Batagram	67.6	89.4	66.4	256
Buner	45.4	74.8	42.6	377
Charsadda	64.9	82.9	61.3	787
Chitral	71.5	96.6	70.7	228
D.I. Khan	45.8	86.1	43.8	763
Hangu	58.3	89.7	56.7	259
Haripur	64.5	92.4	63.2	527
Karak	43.4	83.9	40.7	302
Kohat	63.1	90.6	61.1	525
Kohistan	55.9	67.6	51.1	308
Lakki Marwat	59.2	77.4	49.8	349
Lower Dir	82.8	97.5	82.3	583
Malakand Protected Area	79.4	94.9	78.6	359
Mansehra	62.8	91.2	60.3	800
Mardan	62.0	79.5	56.4	1,102
Nowshera	71.1	91.6	69.8	626
Peshawar	66.2	90.3	64.3	2,168
Shangla	48.9	83.2	47.5	241
Swabi	65.6	81.5	63.7	787
Swat	60.5	90.9	59.2	1,012
Tank	51.7	88.2	50.9	177
Tor Ghar	62.4	77.0	52.9	99
Upper Dir	48.3	85.4	44.1	546

[1] **MICS indicator 11.3 - Perception of a better life**

Table D.MPI.1: The Multidimensional Poverty Index (MPI) - Total Population

Distribution of households member by dimensions and indicators of poverty, poverty headcount ratio, intensity of poverty, and the MPI, Khyber Pakhtunkhwa, 2016-17

	Percentage of the Population who are MPI poor and deprived in each indicator										H - The headcount ratio (the proportion of the population who are multidimensional poor; c > 1/3)	A - The intensity of poverty (the proportion of the weighted component indicators of which the poor, on average, are deprived)	The Multidimensional Poverty Index (MPI) (H x A)	Percentage of Population Vulnerable to Poverty (c>1/5 and c<1/3)	Percentage of Population in Severe Poverty (c>1/2)	Number of household members
	Education		Health		Living Standards											
	Years of Schooling	School Attendance	Child Mortality	Nutrition	Electricity	Sanitation	Drinking Water	Floor	Cooking fuel	Assets						
KP	15.6	31.3	22.2	20.9	5.6	22.5	13.5	56.9	60.9	23.8	34.5	48.0	.166	19.9	15.0	145,811
District																
Abbottabad	5.3	9.3	16.2	7.2	.8	8.5	33.7	23.0	66.1	14.7	11.8	41.2	.049	17.3	2.2	7,240
Bannu	11.5	44.4	35.7	30.3	1.8	15.1	6.3	83.6	35.9	13.7	42.2	46.4	.196	27.7	14.8	5,661
Batagram	34.6	53.5	39.2	40.6	15.2	38.9	18.6	51.2	95.4	52.3	71.3	53.0	.378	16.3	39.7	2,672
Buner	26.2	45.4	22.0	18.3	11.2	34.4	17.2	52.8	91.6	39.6	47.8	51.0	.244	21.9	24.0	4,117
Charsadda	13.4	25.9	18.5	14.8	5.8	8.4	1.7	78.3	48.9	17.4	22.9	45.0	.103	24.8	7.7	8,687
Chitral	8.3	15.6	14.5	8.6	26.4	3.4	16.5	65.2	99.4	33.2	24.2	42.3	.103	19.8	7.4	2,369
D. I. Khan	26.4	52.0	29.8	36.0	2.9	25.6	14.2	81.7	89.3	10.2	56.9	50.7	.289	20.6	28.9	8,786
Hangu	12.3	46.1	31.1	26.1	17.1	35.2	22.4	51.5	73.3	23.9	48.7	49.1	.239	19.8	24.1	2,403
Haripur	6.8	8.1	17.9	9.6	1.9	15.5	19.8	25.5	68.4	16.0	13.2	42.5	.056	20.1	2.8	5,094
Karak	3.9	14.8	24.1	9.9	4.5	20.9	26.8	89.8	46.8	18.1	20.1	41.1	.082	26.9	4.0	2,795
Kohat	9.8	20.3	19.8	13.9	1.5	34.4	19.0	50.3	55.4	15.0	22.9	45.6	.104	22.6	8.5	5,037
Kohistan	26.9	83.5	33.6	48.0	14.3	44.8	41.8	92.5	99.5	80.1	89.4	56.3	.504	7.8	61.5	3,321
Lakki Marwat	13.0	47.1	23.6	19.8	2.6	28.9	21.4	95.1	58.6	36.7	46.3	46.4	.215	22.7	20.7	3,615
Lower Dir	16.0	35.6	13.4	17.8	5.3	26.2	10.2	55.9	71.3	25.8	31.0	47.8	.148	25.9	12.7	5,608
Malakand Protected Area	8.3	20.5	19.4	16.7	5.0	13.6	8.6	68.4	41.3	18.5	23.1	45.5	.105	17.8	7.7	3,795
Mansehra	10.6	14.4	23.2	20.5	3.2	32.3	22.1	30.1	84.7	31.4	29.3	46.6	.137	21.2	10.8	7,556
Mardan	9.0	18.9	24.6	16.5	2.0	23.9	2.3	61.9	51.0	11.6	21.1	43.8	.093	23.4	6.9	10,572
Nowshera	12.3	16.8	19.8	17.5	1.3	18.9	5.8	47.3	34.1	13.1	22.2	42.9	.096	15.7	5.9	6,597
Peshawar	16.7	28.9	17.9	19.6	2.0	13.2	2.0	46.5	19.8	11.1	26.3	44.5	.117	14.9	9.1	21,545
Shangla	43.8	58.1	16.3	41.8	13.5	30.9	29.6	67.0	98.3	68.4	73.6	53.2	.392	13.4	44.4	2,821
Swabi	10.7	22.7	22.8	16.9	1.5	27.2	4.3	52.1	68.8	16.2	26.5	44.2	.117	23.7	9.1	7,510
Swat	17.8	38.0	25.2	20.1	5.3	28.2	17.9	37.7	72.0	36.7	42.1	48.4	.204	18.3	18.6	9,628
Tank	16.7	46.9	24.3	18.0	4.5	18.7	23.3	83.6	91.5	11.8	43.0	45.9	.197	29.7	17.8	1,902
Tor Ghar	60.1	66.1	20.2	35.0	46.2	56.7	38.2	82.1	100.0	85.6	86.1	57.9	.499	9.1	62.5	1,064
Upper Dir	23.5	51.2	19.7	36.9	27.2	31.8	22.2	70.0	90.4	59.5	63.5	50.5	.320	18.0	31.6	5,414

Table D.MPI.2: The Multidimensional Poverty Index (MPI) - Poor Population

Percentage of the population who are MPI poor and deprived in each indicator, by selected characteristics, Khyber Pakhtunkhwa, 2016-17

| | Percentage of the Population who are MPI poor and deprived in each indicator | | | | | | | | | | H - The headcount ratio (the proportion of the population who are multidimensionally poor; c > 1/3) | Number of household members |
| | Education | | Health | | Living Standards | | | | | | | |
	Years of Schooling	School Attendance	Child Mortality	Nutrition	Electricity	Sanitation	Drinking Water	Floor	Cooking fuel	Assets		
KP	38.4	69.2	42.6	43.2	12.4	41.9	24.4	80.3	78.0	47.4	100.0	50,374
District												
Abbottabad	26.1	48.3	46.7	33.3	.5	25.4	60.9	57.1	87.0	47.4	100.0	857
Bannu	23.2	79.3	59.3	53.7	3.9	22.4	8.8	95.3	35.5	22.7	100.0	2,390
Batagram	47.0	70.1	49.0	49.3	18.8	45.3	22.3	61.9	95.0	64.2	100.0	1,905
Buner	48.8	76.3	34.0	31.7	20.8	58.8	29.8	75.6	97.1	64.0	100.0	1,966
Charsadda	38.1	63.7	48.4	43.1	12.8	19.5	4.6	91.5	61.1	40.0	100.0	1,988
Chitral	28.1	49.8	40.0	24.0	39.8	13.1	32.8	90.1	99.9	60.5	100.0	574
D. I. Khan	43.3	75.4	42.7	54.3	4.8	39.7	19.5	93.2	92.9	15.5	100.0	5,004
Hangu	22.2	74.1	53.8	44.8	27.6	43.8	34.5	70.5	85.9	37.5	100.0	1,171
Haripur	35.5	39.2	44.9	29.1	11.7	44.4	51.1	67.1	93.6	50.4	100.0	670
Karak	16.1	39.5	69.0	23.7	11.4	50.6	38.2	96.6	58.1	39.6	100.0	561
Kohat	33.1	52.5	49.2	38.3	4.3	66.7	32.9	84.3	83.4	29.6	100.0	1,153
Kohistan	30.1	89.1	36.5	52.2	16.0	48.3	45.8	95.0	99.8	85.2	100.0	2,968
Lakki Marwat	25.5	80.0	40.7	33.8	3.7	42.2	30.4	99.1	65.1	55.3	100.0	1,675
Lower Dir	43.5	68.9	27.2	39.5	14.8	55.6	23.6	85.7	87.1	55.5	100.0	1,736
Malakand PA	30.1	58.0	44.4	47.9	15.4	41.5	27.4	88.3	55.6	49.2	100.0	876
Mansehra	32.0	38.8	46.5	48.6	8.6	65.5	40.7	59.0	98.5	68.3	100.0	2,217
Mardan	29.4	59.5	58.7	38.4	5.3	49.5	5.3	77.4	60.8	32.8	100.0	2,233
Nowshera	39.9	56.0	48.1	47.2	2.4	26.8	16.1	67.6	56.7	29.8	100.0	1,467
Peshawar	49.3	74.7	45.8	41.3	4.5	26.7	5.2	71.7	36.1	23.6	100.0	5,671
Shangla	58.3	73.1	21.4	50.8	17.2	37.8	36.2	78.4	99.0	78.8	100.0	2,077
Swabi	33.4	63.3	47.2	32.9	2.8	51.1	10.5	85.6	80.8	34.2	100.0	1,990
Swat	38.5	73.1	40.8	36.4	10.8	50.0	32.5	65.6	85.7	59.7	100.0	4,055
Tank	32.6	73.9	43.8	28.7	8.1	34.0	38.4	92.0	94.8	21.2	100.0	818
Tor Ghar	69.3	73.4	22.6	39.1	49.7	62.5	41.1	87.3	100.0	89.3	100.0	917
Upper Dir	35.9	71.5	27.8	47.8	36.2	41.5	26.3	83.6	96.8	75.1	100.0	3,436

XVII. Appendix B. Sample Design

The major features of the sample design are described in this appendix. Sample design features include target sample size, sample allocation, sampling frame and listing, stratification, and the calculation of sample weights. The primary objective of the sample design for the KP-MICS, 2016-17 was to produce statistically reliable estimates of most indicators, for the seven divisions and 25 districts of KP, and at the provincial level for urban and rural areas.

Universe

The universe of the survey consists of household-based population in all urban and rural areas of Khyber Pakhtunkhwa (KP). The military restricted areas and cantonment have been excluded from the scope of the survey which is only 2% of total population.

Sampling Frame

Urban Frame:
The Pakistan Bureau of Statistics has developed and updated its own sampling frame for all urban areas of the country in 2013. Each city/town has been divided into a number of small compact areas called Enumeration Blocks (EBs). Each enumeration block consists of on average 200 to 250 houses with well-defined boundaries recorded in the prescribed forms and maps thereof along with physical features.

Rural Frame:
The Rural Frame consists of a list of Enumeration blocks; an Enumeration block may be a whole village or part of a village. The rural area frame has been updated during the Housing Census 2011 and also updated in 2015. Each PSU of Urban and Rural areas has well-defined geographical boundaries described on a specified form along with map.

Total number of Enumeration Blocks in urban and rural areas of KP are as follows:

Name of Province	Number of Enumeration Blocks (PSUs) in Sampling Frame		
Khyber Pakhtunkwha (KP)	Urban	Rural	Total
	2887	**16,247**	**19,134**

Stratification Plan

The sample size has been determined to provide a representative sample at the district level, and each administrative district has been treated as an independent stratum. In addition, the urban and rural part of each district has been treated as urban and rural strata respectively, and the sample selection has been undertaken independently.

Urban Domain: All Urban areas of each administrative district have been taken as an independent stratum for the urban domain.
Self-Representative City (SRC): There is only one SRC or big city in KP namely Peshawar. This has been treated as an independent stratum and further sub-stratified according to low, middle and high income groups.

Rural domain: All Rural areas of each administrative district has been taken as an independent stratum for the rural domain.

Sample Size and Sample Allocation

The key indicator used for the computation of sample size was "Skilled birth attendant at the time of delivery". The following formula was used to estimate the required sample size for the above mentioned indicator.

$$n = \frac{[4(r)(1-r)(deff)]}{[(0.20r)^2(pb)(AveSize)(RR)]}$$

Where:

- *n* is the required sample size, expressed as number of households
- *4* is a factor to achieve the 95 percent level of confidence
- *r* is the predicted or anticipated value of the indicator, expressed in the form of a proportion
- *deff* is the design effect for the indicator, estimated from a previous survey or using a default value of 2.0
- *0.20r* is the margin of error to be tolerated at the 95 percent level of confidence, defined as 20 per cent of *r* (relative margin of error of *r*)
- *pb* is the proportion of the total population upon which the indicator, *r*, is based
- *AveSize* is the average household size (number of persons per household)
- *RR* is the predicted response rate

For the calculation of sample size for each district (domain of estimation), the prevalence indicator "Skilled birth attendant at the time of delivery (women with a birth in the last two years)" of married women age 15-49 years has been taken from the MICS NWFP 2008 report. The value of deff (design effect) has been taken as 2.0 based on the estimates derived from previous surveys, pb has been taken from the Population Census 1998, average household size (AveSize) for each district has been taken from the Population Census 1998, and the response rate has been assumed to be 90 percent, based on the experience gained from the previous surveys.

Multiple exercises have been carried out to determine sample size based on following indicators –e.g. Net attendance ratio , Skilled birth attendant at delivery , antenatal care , Immunization Coverage (fully, based on record and recall), vitamin A supplement (children <5) etc. Finally, sample size of **22,140 households** covering **1107 PSUs** has been computed at 20% Relative Margin of Error using prevalence of "Skilled birth attendant at the time of delivery ".

SR.NO	NAME OF DIVISION	NAME OF ADMN DISTRICT	RURAL	URBAN	SRC	Total	RURAL	URBAN	SRC	Total
			PSUs				HHs			
1	BANNU	BANNU	32	11		43	640	220	0	860
2		LAKKI MARWAT	29	10		39	580	200	0	780
3	D. I. KHAN	D. I. KHAN	33	12		45	660	240	0	900
4		TANK	25	9		34	500	180	0	680
5	HAZARA	ABBOTTABAD	34	18		52	680	360	0	1040
6		BATAGRAM	33			33	660	0	0	660

Table title: ALLOCATION OF SAMPLE CLUSTERS (PRIMARY SAMPLING UNITS) TO SAMPLING STRATA KP-MICS, 2016-17

#	Division	District								
7		HARIPUR	33	13		46	660	260	0	920
8		KOHISTAN	42			42	840	0	0	840
9		MANSEHRA	35	13		48	700	260	0	960
10		TOR GHAR	31			31	620	0	0	620
11		HANGU	24	12		36	480	240	0	720
12	KOHAT	KARAK	22	9		31	440	180	0	620
13		KOHAT	29	17		46	580	340	0	920
14		BUNER	34			34	680	0	0	680
15		CHITRAL	31	9		40	620	180	0	800
16		LOWER DIR	33	12		45	660	240	0	900
17	MALAKAND	MALAKAND PROTECTED AREA	28	10		38	560	200	0	760
18		SHANGLA	32			32	640	0	0	640
19		SWAT	32	19		51	640	380	0	1020
20		UPPER DIR	34	9		43	680	180	0	860
21	MARDAN	MARDAN	32	21		53	640	420	0	1060
22		SWABI	32	15		47	640	300	0	940
23		CHARSADDA	32	17		49	640	340	0	980
24	PESHAWAR	NOWSHERA	31	18		49	620	360	0	980
25		PESHAWAR	25		75	100	500	0	1500	2000
		LOW INCOME GROUP			12				240	
		MIDDLE INCOME GROUP			43				860	
		HIGH INCOME GROUP			20				400	
Grand Total			**778**	**254**	**75**	**1107**	**15,560**	**5080**	**1740**	**22,140**

4 PSUs (one from Swat and three from Torgarh) were dropped due to refusal and Security reasons.

Sample Design

A two-stage stratified systematic sampling approach has been used for the selection of the PSUs in the survey. A certain number of urban and rural clusters have been selected in each district using systematic probability proportional to size (PPS) sampling method, while a fixed number of households (in this case 20) have been selected within each of those sample clusters/PSUs using systematic random sampling.

The enumeration blocks in urban areas and rural areas, have been taken as the Primary Sampling Units (PSUs), and the number of households in the blocks taken from the sampling frame has been used as the measure of size (MOS) for selecting the sample PSUs with the systematic PPS sampling method.

A household listing exercise was then carried out in each selected PSU, and a sample of 20 households has been selected from the updated list of households, using systematic sampling with a random start. These selected households are referred to as Secondary Sampling Units (SSUs). Four clusters of the selected enumeration areas of Kala Dhaka and Kalam could not be visited. They were inaccessible due to migration in the winter season. Three clusters of district Tank were not accessible due to security reasons. However, these clusters were substituted in consultation with PBS

Calculation of Sampling Weights

The MICS KP sample is not self-weighting. Essentially, by allocating specific numbers of sample households to each of the districts, different sampling fractions were used in each district since the size of the districts varied by district. For this reason, sample weights were calculated which were used in the subsequent analysis of the survey data.

The major component of the sampling weight is the reciprocal of the sampling probabilities 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 defined as the product of the probabilities of selection at every stage in each sampling stratum:

$$f_{hi} = p_{1hi} \times p_{2hi}$$

Where p_{shi} is the probability of selection of the sampling unit at stage s for the i-th sample PSU in the h-th sampling stratum. Based on the sample design, these probabilities were calculated as follows:

$$p_{1hi} = \frac{n_h \times M_{hi}}{M_h},$$

n_h = number of sample PSUs selected in stratum h
M_{hi} = number of households in the frame for the i-th sample PSU in stratum h
M_h = total number of households in the frame for stratum h

$$p_{2hi} = \frac{m_{hi}}{M'_{hi}}$$

m_{hi} = take of 20 households from each PSU
M'_{hi} = number of households listed in the i-th sample PSU in stratum h

The number of households in each enumeration block (PSU) from the frame was used for the first stage selection. The updated number of households in the enumeration block from the actual household listing is generally from the number in the frame. Consequently, the overall probabilities of selection for households in each sample enumeration block (cluster) were calculated.

XVIII. Appendix C: List of personnel involved in survey & survey committees

Project Director

Mr. Tariq Mahmood, Director, Bureau of Statistics, Government of Khyber Pakhtunkhwa

Head Core Group /Focal Person

Mr. Muhammad Farooq, Deputy Director, Bureau of Statistics KP

Finance, Logistics and Coordination
Mr. Mr Zia ur Rehman Admin and Finance Officer, KP-MICS, BoS, Peshawar
Mr. Saleem Khan, Statistical Officer, Coordinator, Swat Region
Mr. Muhammad Anwar, Statistical Officer, Coordinator, D.I.Khan Region
Mr. Jehanzeb, Statistical Officer, BoS Coordinator, Hazara Region
Mr Abdullah, Statistical Assistant, Bureau of Statistics, Peshawar
Mr. Multan Khan, Bureau of Statistics, Peshawar

Sample Design and Listing
Mr. Muhammad Ayaz, Chief Economist P&D Department, KP
Mr. Tariq Mahmood, Director BoS, P&D Department, KP
Ms. Rabia Awan, Director Sample Design, Pakistan Bureau of Statistics, Islamabad
Mr. Naseer Ahmad Chief, Statistical Officer, Pakistan Bureau of Statistics, Islamabad
Ms. Rumana Sadaf, Statistical Officer, Sample Design, Pakistan Bureau of Statistics, Islamabad
Mr. Sher Rehman, Chief Statistical Officer, Regional Office Pakistan Bureau of Statistics, Peshawar
Mr. Hassan Khan, Statistical Officer, Regional Office Pakistan Bureau of Statistics, Peshawar
Mr. Muhammad Farooq, Deputy Director Bureau of Statistics, KP
Dr. Shabbir Hussain, UNICEF Consultant MICS, KP
Mr. Zaheer Ahmad Durrani, PME Officer, UNICEF KP
Mr. Ashiq Rasool, Statistical Assistant, Bureau of Statistics
Mr. Saadat Hussain, Statistical Assistant, Bureau of Statistics

Project Consultants

Dr. Shabbir Hussain, UNICEF MICS Consultant (UMC)
Mr. Mehboob Sultan, UMC (Jan 2016-May, 2016)
Ch. Shamim Rafique, Ex DG BOS, Punjab, Resource Person, ToT, (Jul – Aug, 2016)
Mr. Muhammad Mumtaz Ahmad, Data Processing Consultant, UNICEF (Jan-Jun 2017)
Mr. Mirza Jibran Hussain, Data Processing Consultant, UNICEF (Aug- Oct, 2017)

Project Monitoring and Support
Syed Zafar Ali Shah, Ex-Secretary, P&D Department
Mr. Muhammad Ayaz, Ex-Chief Economist, P&D Department
Mr. Inayat Ullah Waseem, Additional Secretary, P&D Department
Mr. Qaiseer Alam Senior Chief, P&D Department
Mr. Muhammad Shafique, Director PERA, P&D Department
Mr. Zahir Shah, Chief Coordination, P&D Department
Mr. Muhammad Islam, Chief R&D, P&D Department
Mr. Shakir Ullah, Deputy Director, Resource Center, P&D Department

Mr. Muhammad Irfan, Accounts Officer, P&D Department
Mr. Riaz Ahmed, Assistant Director, P&D Department
Mr. Waqas Ghaus, Section Officer (G) P&D Department
Members Core Group, KP-MICS

Third Party Field Monitoring: Foundation for Rural Development

Filed Coordinators:

Mr. Salman Farooq, Peshawar Region   Mr. Tahir Hussain, Hazara Region
Mr. Dil Jan, D.I.Khan Region   Mr. Waseem Riaz Khan, Malakand Region

Field Monitors:

Ms. Noor ul Ain, Peshawar Region   Ms. Madiah, Peshawar Region
Ms. Nawal Khattak, Peshawar Region   Ms. Sadia Suleman, Hazara Region
Ms. Lubna, Hazara Region   Ms. Nayab Kanwal, D.I.Khan Region
Ms. Maria Javed, D.I. Khan, Region   Ms. Sajida, Malakand Region
Ms. Ulfat, Malakand Region

UNICEF Field Office, Peshawar

Dr. Francois Kampundu, Ex-Chief Field Office
Mr. Charles Nzuki, Chief Field Office
Mr. Seifu Ali, Program Specialist
Dr Shabbir Hussain, UNICEF MICS Consultant
Mr. Zaheer Ahmed Durrani, PME Officer
Syed Natiq Abbas Kazmi, Information Management Officer
Ms. Yasmin Rehman, Program Associate

UNICEF Country Office, Islamabad

Ms. Janette Shaheen Hussain, Chief (PMER)
Ms. Shandana Aurangzeb, Reports Specialist
Ms. Mussarat Yousaf, Research and Evaluation Specialist
Mr. Faateh ud Din Ahmad, PME Officer
Mr. Fayaz Karim, PME Officer

UNICEF Regional Office, South Asia (ROSA) and Headquarter

Mr. Turgay Unalan, Statistical Specialist, HQ
Mr. Daniel Reijer, Statistics and Monitoring Specialist, ROSA
Ms. Rhiannon James, Ex- Regional MICS Coordinator

District Based Data Collection Teams

D. I. Khan Region

Team 01, District : Bannu
Mr. Obaid Rehman, Team Supervisor
Ms. Noor ul Sahar, Field Editor
Mr. Yasir, Male Interviewer
Ms. Nadia Iqbal, Female Interviewer
Ms. Nazish Sana, Female Interviewer
Ms.Tabassum, Female Interviewer
Ms. Liala Gul, Female Interviewer
Ms. Noshad Akhtar, Measurer

Team 02, District : D.I,Khan
Mr. Zeeshan , Team Supervisor
Ms. Shagufta Naz , Field Editor
Mr. Aurangz, Male Interviewer
Ms. Huma Kamil, Female Interviewer
Ms. Nosheen Anwar, Female Interviewer
Ms. Wajeeha Saeed, Female Interviewer
Ms. Taiba Batool , Female Interviewer
Ms. Noshad Akhtar, Measurer

Team 03, District : Lakki Marwat
Mr. Sajjad Mehmood, Team Supervisor
Ms. Sana Maham , Field Editor
Mr. Wasif Ur Rehman , Male Interviewer
Ms. Asma Tabassum , Female Interviewer
Ms. Shagufta Shaheen, Female Interviewer
Ms. Seemab Akhtar, Female Interviewer
Ms. Ulfat Naqib , Female Interviewer
Ms. Robi Shaheen, Measurer

Team 04, District : Karak
Mr. Arif Khan, Team Supervisor
Ms. Shazia Khan, Field Editor
Mr. Shakoor Khan, Male Interviewer
Ms. Sarwat Akhtar, Female Interviewer
Ms. Khalida Yasmeen, Female Interviewer
Ms. Kiran Qadir, Female Interviewer
Ms. Hajira , Female Interviewer
Ms. Dil Naz, Measurer

Team 05, District: Tank
Mr. Muhammad Noor, Team Supervisor
Ms. Shenila Kanwal, Field Editor
Mr. Inam Ullah Khan, Male Interviewer
Ms. Kalsoom Bibi, Female Interviewer
Ms. Zar Saman, Female Interviewer
Ms. Naheed Akhtar, Female Interviewer
Ms. Robina, Female Interviewer
Ms. Dil Naz, Measurer

Hazara Region

Team 01, District : Abbottabad
Mr. Mohammad Azhar,Team Supervisor
Ms. Anam Mahmood Awan, Field Editor
Mr. Juanid Ahmad,Male Interviewer
Ms. Farzana Bibi,Female Interviewer
Ms. Tehreem Sheikh,Female Interviewer
Ms. Sadia Mehrab,Female Interviewer
Ms. Sajeela Bibi,Female Interviewer
Ms. Sundas Mehmood,Measurer
Ms. .Arifa Sohail (Backup)

Team 02, District : Batagram
Mr. Shakoor Khan,Team Supervisor
Ms. Nazish Rehmat,Field Editor
Mr. Naveed Akhtar,Male Interviewer
Ms. Shumaila Bibi,Female Interviewer
Ms. Bushra,Female Interviewer
Ms. Bibi Shazai,Female Interviewer
Ms. Tayyaba Irshad,Female Interviewer
Ms. Fozia Shah,Measurer
Ms. Rabia (Backup)

Team 03, District : Haripur

Mr. Ishtiaq Khan,Team Supervisor
Ms. Reema Anwar,Field Editor
Mr. Akhtar Ali Sultan,Male Interviewer
Mr. Sultan,Male Interviewer
Ms. Saeeda Jamal,Female Interviewer
Ms. Sana Shireen,Female Interviewer
Ms. Zaniab,Female Interviewer
Ms. Arousa,Female Interviewer
Ms. Arisha Zia,Measurer
Ms. Saneela Arshad (Backup)

Team 05, District : Torghar

Mr. Khurram Shahzad,Team Supervisor
Ms. Gul Rukh, Field Editor
Mr. Azmat Ali,Male Interviewer
Ms. Qurat ul Ain ,Female Interviewer
Ms. Warda Farooq, Female Interviewer
Ms. Saqia,Female Interviewer
Ms. Lubna Gul,Female Interviewer
Ms. Nadia Irum,Measurer
Ms. Nazo (Backup)

Malakand Region

Team 01, District : Buner

Mr. Javed Iqbal,Team Supervisor
Ms. Nazish Bibi,Field Editor
Mr. Naveed Ullah,Male Interviewer
Ms. Nasira Bibi,Female Interviewer
Ms. Gul Hina,Female Interviewer
Ms. Maryam Shah,Female Interviewer
Ms. Nida Bibi,Female Interviewer
Ms. Saman Kaseer,Measurer
Ms. Kanwal Khan (Backup)

Team 03, District : Lower Dir

Mr. Sohail M. Anjum,Team Supervisor
Ms. Hira Zakiria,Field Editor
Mr. Kashif Ali,Male Interviewer
Ms. Salma Shaheen,Female Interviewer
Ms. Neelam,Female Interviewer
Ms. Tahira Naz,Female Interviewer
Ms. Zubaida,Female Interviewer

Team 04, District : Mansehra

Mr. Mir Baz Khan,Team Supervisor
Ms. Sundus Altaf,Field Editor
Mr. Sabz Ali, Male Interviewer
Ms. Nighat Shaheen,Female Interviewer
Ms. Ayesha Riaz,Female Interviewer
Ms. Sundus Nawaz,Female Interviewer
Ms. Sadia Manzoor,Female Interviewer
Ms. Rabia Riaz,Measurer
Ms. Sidra Aziz (Backup)

Team 06, District : Kohistan

Mr. Rab Nawaz,Team Supervisor
Ms. Sana Bibi,Field Editor
Mr. Amin ur Rehman,Male Interviewer
Ms. Sadaf Liala,Female Interviewer
Ms. Shaista Naz,Female Interviewer
Ms. Nasreen,Female Interviewer
Ms. Laila Ameer,Female Interviewer
Ms. Lal Meena,Measurer
Ms. Rabia Khawaj (Backup)

Team 02, District : Chitral

Mr. Maraj Maqbool,Team Supervisor
Ms. Bushra Faizi,Field Editor
Mr. Aziz Ud Din,Male Interviewer
Ms. Nasima Bibi,Female Interviewer
Ms. Shabnam Bibi,Female Interviewer
Ms. Farida Alam,Female Interviewer
Ms. Zubaida Khanum,Female Interviewer
Ms. Safia Sardar,Measurer
Ms. Amina Bibi (Backup)

Team 04, District : Upper Dir

Mr. Hidayat Ullah,Team Supervisor
Ms. Tahira Naz,Field Editor
Mr. Hanif Ullah,Male Interviewer
Ms. Uroosa Saleem,Female Interviewer
Ms. Sheeba,Female Interviewer
Ms. Ashi Sumbal,Female Interviewer
Ms. Nuzat Muneer,Female Interviewer

Ms. Rahat Iqbal,Measurer

Ms. Nazia (Backup)

Ms. Hasnat Gul,Measurer

Ms. Sumi Naz(Backup)

Team 05, District : Malakand Pretected Area

Mr. Yasir Ali,Team Supervisor

Ms. Ruqia,Field Editor

Mr. Nasurullah,Male Interviewer

Ms. Sajida,Female Interviewer

Ms. Farhila,Female Interviewer

Ms. Zeenat,Female Interviewer

Ms. Nelofar,Female Interviewer

Ms. Sadaf Jabeen,Measurer

Ms. Abida Younis (Backup)

Team 06, District : Shangala

Mr. Waqar Ahmad,Team Supervisor

Mr. Suleman Ghani,Team Supervisor

Ms. Moumna Shamrez,Field Editor

Mr. Zameer Alam,Male Interviewer

Ms. Robina Khitab,Female Interviewer

Ms. Hafza Shabina Shoukat,Female Interviewer

Ms. Uroosha Saleem,Female Interviewer

Ms. Hadia Jalil,Female Interviewer

Ms. Asma Gul,Measurer

Ms. Sadaf Batol (Backup)

Team 07, District : Swat

Mr. Asad Hussain, Team Supervisor

Ms. Sania Shaukat, Field Editor

Mr. Fazal Qadir,Male Interviewer

Ms. Sanam Faryal, Interviewer

Ms. Zainab,Female Interviewer

Ms. Shaheen,Female Interviewer

Ms. Nooreen Khalid, Female Interviewer

Ms. Nelofar,Female Interviewer

Ms. Rashida Noreen,Measurer

Peshawar Region

Team 01, District : Peshawar

Mr. Junaid Saif,Team Supervisor

Ms. Munawar Sultana,Field Editor

Mr. Irfan Ullah,Male Interviewer

Ms. Tehrish Jamil,Female Interviewer

Ms. Shameem,Female Interviewer

Ms. Sidra Jabeen,Female Interviewer

Ms. Anum Farid,Female Interviewer

Ms. Roobi Rehman,Measurer

Team 02, District : Charsadda

Mr. Allah Yar,Team Supervisor

Ms. Nusrat Ali,Field Editor

Mr. Zeeshan Ahmad,Male Interviewer

Ms. Uzma Subhan,Female Interviewer

Ms. Irum,Female Interviewer

Ms. Aiman Alamgir,Female Interviewer

Ms. Uroosha Khan,Female Interviewer

Ms. Sheraz,Measurer

Team 03, District : Nowshera

Mr. Aamir Ali.,Team Supervisor

Ms. Hira Mehfooz,Female Editor

Mr. Zeeshan Suhai,Male Interviewer

Ms. Huma Noor,Female Interviewer

Ms. Sumaira Ali,Female Interviewer

Ms. Meena Gul Khattak,Female Interviewer

Ms. Zaibi,Female Interviewer

Ms. Gul Rima,Measurer

Team 04, District : Mardan

Mr. Mehboob Alam,Team Supervisor

Mr. Ayesha Ayaz, Female Editor

Mr. Azmat ,Male Interviewer

Ms. Sidra Tul Muntaha,Female Interviewer

Ms. Shabnum Nooreen,Female Interviewer

Ms. Been Nasir,Female Interviewer

Ms. Salma Nawaz,Female Interviewer

Ms. Asia,Measurer

Team 05, District : Swabi

Mr. Tauseef Asmat,Team Supervisor

Ms. Daniya Gul,Female Editor

Mr. Taimur Rehman,Male Interviewer

Ms. Tamanna,Female Interviewer

Ms. Kalsoom Umar,Female Interviewer

Ms. Asma Umar,Female Interviewer

Ms. Samreen Akhtar,Female Interviewer

Ms. Asma Ul Husna,Measurer

Team 06, District : Kohat

Mr. Athar Abbas,Team Supervisor

Ms. Somi,Female Editor

Mr. Ishtiaq Ahmad,Male Interviewer

Ms. Nazia Nooreen,Female Interviewer

Ms. Saba Bibi,Female Interviewer

Ms. Shahana Sarwat,Female Interviewer

Ms. Sonia Bibi,Female Interviewer

Ms. Saiqa Bibi,Measurer

Team 07, District : Hangu

Mr. Sajjad Rehman,Team Supervisor

Ms. Bibi Elem-e Zuhra,Female Editor

Mr. Tahir Abbas,Male Interviewer

Ms. Sakina Luqmani,Female Interviewer

Ms. Nabila Bibi,Female Interviewer

Ms. Nafees Bano,Female Interviewer

Ms. Salma Begum,Female Interviewer

Ms. Farzana Saddique,Measurer

Data Processing

Qazi Fahad, DP Incharge	Mr. Jibran Hussain, Data Processing Consultant
Mr. Fazal –e-Subhan, DP Supervisor	Mr. Jalal Ahmad and Mr Kabir Ahmed, Questionnaire Admin

Secondary Editors

Ms. Mehreen Meher	Ms. Nooreen Zaki	Ms. Nooreen Zaki
Ms. Sundus Nawaz	Ms. Saheeda Jamal	Mr. Asad
Ms. Mehreen Meher	Mr. Shakoor	Ms. Nooreen Zaki
Mr. Muhammad Danyal	Mr. Suleman Ghani	Ms. Rashida Bano
Mr. Samin ullah	Ms. Shazia Rehman	Mr. Muhammad Qaid
Mr. Muhammad Noman	Mr. Hilal Ahmed	Ms. Sidra Nisar

Data Entry Operators

Mr. Waseem ur Rehman	Mr. Nafees ur Rehman	Mr. Nawaz
Mr. Muhammad Noman	Mr. Muhammad Qaid	Mr. Samin ullah
Mr. Muhammad Arsalan	Mr. Haseeb Khan	Ms. Shazia Rehman
Mr. Hilal Ahmed	Mr. Yasir	Mr. Muhammad Qaid
Ms Faryal Gula	Mr. Munsanif Shah	Mr. Muhammad Bilal
Ms Tabir Majid	Mr. Ateef ur Rehman	Mr. Ramiz Afridi
Ms.Sharifa	Mr. Samin ullah	Mr. Muhammad Danyal
Ms. Rashida Bano	Mr. Muhammad Noman	Mr. Saad
Ms.Sidra Nisar	Mr. Hamza	Mr. Muhammad Danyal
Ms.Laila Noor	Mr. Kashif Hussain	Mr. Habib
Ms. Aneela Rehman	Mr. Waqas	Mr. Muhammad Bilal Ghalib
Ms.Najma Noor	Mr. Zeeshan	Mr. Saifullah
Ms.Farhanda Jan		

BUREAU OF STATISTICS
PLANNING & DEVELOPMENT DEPARTMENT
GOVERNMENT OF KHYBER PAKHTUNKHWA

NOTIFICATION

No. Coord/BOS/MICS/175/2012. The competent authority is pleased to constitute the following **Steering Committee** for undertaking the Multiple Indicator Cluster Survey 2014 in Khyber Pakhtunkhwa.

STEERING COMMITTEE

The Steering Committee will be the apex decision forum comprising the following:

1.	Additional Chief Secretary, P&D Department	Chairman
2.	Secretary, Finance Department	Member
3.	Secretary P&D Department.	Member
4.	Secretary Health Department.	Member
5.	Secretary Elementary & Secondary Education	Member
6.	Secretary Higher Education Department.	Member
7.	Secretary LG&RD Department.	Member
8.	Secretary, W&S Department.	Member
9.	Secretary Population Welfare Department.	Member
10.	Chief Economist, P&D Department.	Member
11.	Director Bureau of Statistics/DG MICS	Member
12.	Representative of Pakistan Bureau of Statistics.	Member
13.	Representative of UNICEF.	Member
14.	Representative of UNDP.	Member
15.	MICS Focal Person (BOS)	Member/Secretary

The ToR's of the Steering Committee are as under:

1. To ensure the use of survey data for the Resource Distribution to the Districts
2. Review and finalize the indicators.
3. Oversee the survey design and execution process.
4. Approval of Survey Methodology and Financial Plan and Work Plan.
5. Review preliminary findings of the Survey.
6. Approve the draft final report.

Sd/-
Additional Chief Secretary
Khyber Pakhtunkhwa

Endst: No. 3529-43/Coord/BOS/MICS/175/2012   Dated 29/09/2014

Copy to:

1. All concerned.

Focal Person MICS
Bureau of Statistics
Khyber Pakhtunkhwa

BUREAU OF STATISTICS
PLANNING & DEVELOPMENT DEPARTMENT
GOVERNMENT OF KHYBER PAKHTUNKHWA

<u>NOTIFICATION</u>

No. Coord/BOS/MICS/175/2012. The competent authority is pleased to constitute the following **Technical Committee** for undertaking the Multiple Indicator Cluster Survey 2014 in Khyber Pakhtunkhwa.

TECHNICAL COMMITTEE

The Technical Committee will comprise the following:

1.	Chief Economist (P&DD)	Chairman
2.	Chief Planning Officer DG Health Department.	Member
3.	Chief Planning Officer Director Education Deptt.	Member
4.	Senior Demographer DG, PW Deptt.	Member
5.	Deputy Director, Bureau of Statistics.	Member
6.	Representative of Pakistan Bureau of Statistics.	Member
7.	Members Core Group	Member
8.	MICS Focal Person	Member/Secretary
9.	UNICEF	

The ToR's of the Technical Committee are as under:

1. Provide technical support to the Steering and Planning & Coordination Group.
2. Technical Review /approval of survey planning work.
3. Questionnaire Development and approval.
4. Translation and field testing.
5. Monitoring of listing as well as data collection process.

Sd/-
Additional Chief Secretary
Khyber Pakhtunkhwa

Endst: No. 3554-62/Coord/BOS/MICS/175/2012   Dated 29/09/2014

Copy to:

1. All concerned.
2. P.S to Additional Chief Secretary, Government of Khyber Pakhtunkhwa for information please.
3. P.S to Secretary, Planning & Development Department, Government of Khyber Pakhtunkhwa for information please.

Focal Person MICS
Bureau of Statistics
Khyber Pakhtunkhwa

BUREAU OF STATISTICS
PLANNING & DEVELOPMENT DEPARTMENT
GOVERNMENT OF KHYBER PAKHTUNKHWA

NOTIFICATION

No. Coord/BOS/MICS/175/2012. The competent authority is pleased to constitute the following **Core Group** for undertaking the Multiple Indicator Cluster Survey 2014 in Khyber Pakhtunkhwa.

CORE GROUP

The Core Group will comprise the following:

1.	Asstt. Director (Communication & Coord.)/Focal Person MICS	Head
2.	Deputy Director BOS/Deputy Survey Coordinator	Member
3.	Asstt: Chief/Incharge Resource Center, P&D Department	Member
4.	Statistical Assistant (Comm. & Coord.) BOS	Member
5.	PME&R Officer, UNICEF Peshawar	Member
6.	Database/Network Admn. BOS	Secretary

The ToR's of the Core Group are as under:

1. Development of PC-I and its approval from competent forum.
2. Finalization of Indicators and its approval from competent forum.
3. Customization of Questionnaire.
4. Translation of Questionnaire and its approval from MICS Regional and Global Teams.
5. Recruitment of staff for data collection and its approval from competent forum.
6. Training of the Trainers and Regional Training.
7. Monitoring of listing as well as data collection process.
8. Supervision of Data Entry and Data Processing Process.
9. Provide technical support to the Steering and Planning & Coordination Group Technical Committee.

Sd/-
Secretary
Planning & Development Department

Endst: No. 3973-78 /Coord/BOS/MICS/175/2012   Dated 29/10/2014

Copy to:

1. All concerned.
2. PME Officer, UNICEF Country Office Islamabad.
3. PMER Officer, UNICEF, Provincial Office Peshawar,
4. P.S to Secretary, Planning & Development Department, Government of Khyber Pakhtunkhwa for information please.
5. P.A to Chief Economist, Planning & Development Department, Government of Khyber Pakhtunkhwa for information please.
6. P.A to Director, Bureau of Statistics, Khyber Pakhtunkhwa.

Focal Person MICS
Bureau of Statistics

BUREAU OF STATISTICS
PLANNING & DEVELOPMENT DEPARTMENT
GOVERNMENT OF KHYBER PAKHTUNKHWA

<u>NOTIFICATION</u>

No. Coord/BOS/MICS/175/2012. The competent authority is pleased to constitute the following **Planning & Coordination Group** for undertaking the Multiple Indicator Cluster Survey 2014 in Khyber Pakhtunkhwa.

PLANNING & COORDINATION GROUP

The Planning & Coordination Group will comprise the following:

1.	Secretary (P&DD)	Chairman
2.	Director General Health Department.	Member
3.	Director BOS, P&D Department.	Member
4.	Director General Local Govt. Department.	Member
5.	Chief Engineer (PHE) W&S Department(North-South)	Member
6.	Director General, Population Welfare Department.	Member
7.	Director, Bureau of Statistics	Member
8.	Representative of Pakistan Bureau of Statistics.	Member
9.	MICS Focal Person	Member/Secretary
10.	UNICEF Chief Provincial Office	

The ToR's of the Planning & Coordination Group are as under:

1. Discuss and approve survey methodology, design, work plan and endorse budget estimates etc.
2. Coordinate vertically and horizontally for supporting the survey in terms of logistic and administration.
3. To Hire/Requisition of Field Operation Staff and requisition on the Resource Person and recommendation of Operational Group and Data Management Staff:
   To Hire/Requisition:
   i.   Field Operation Staff
   ii.   Data Management Staff
   iii.   Training Resource Person.
4. To assist the Steering Committee with regard to reviewing the preliminary findings and final reports for approval of the steering committee.
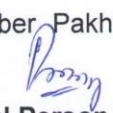
Sd/-
Additional Chief Secretary
Khyber Pakhtunkhwa

Endst: No.3544-53 /Coord/BOS/MICS/175/2012   Dated 29/09/2014

Copy to:

1. All concerned.
2. P.S to Additional Chief Secretary, Government of Khyber Pakhtunkhwa for information please.

Focal Person MICS
Bureau of Statistics
Khyber Pakhtunkhwa

BUREAU OF STATISTICS
PLANNING & DEVELOPMENT DEPARTMENT
GOVERNMENT OF KHYBER PAKHTUNKHWA

<u>**NOTIFICATION**</u>

No. Coord/BOS/MICS/175/2012. The competent authority is pleased to constitute the following **Operational Group** for undertaking the Multiple Indicator Cluster Survey 2014 in Khyber Pakhtunkhwa.

OPERATIONAL GROUP

The Operational Group will comprise the following:

1.	Director Bureau of Statistics	Chairman
2.	Deputy Director Bureau of Statistics	Member
3.	Technical Staff of BOS	Member
4.	Members Core Groups	Member
5.	Representative of Pakistan Bureau of Statistics, Peshawar	Member
6.	Representative of (UNICEF) Peshawar	Member
7.	MICS Focal Person, BOS.	Member/Secretary

The ToR's of the Operational Group are as under:

1. Provide technical support to the Steering and planning coordination committees.
2. Technical Review /approval of survey planning work.
3. Questionnaire Development and approval.
4. Finalization of sample design.
5. Translation and field testing.
6. Recommendation/Hiring/Requisition of field staff and recommended requisition of Master Trainer.
7. Monitoring of listing as well as data collection process.
8. Logistical arrangements and financial disbursements.
9. Survey implementation and field work coordination.
10. Supervision of Data editing/entry.
11. Contribution to analysis and report writing.

Sd/-
Additional Chief Secretary
Khyber Pakhtunkhwa

Endst: No. 3563-69 /Coord/BOS/MICS/175/2012   Dated 29/09/2014

Copy to:

1. All concerned.
2. P.S to Additional Chief Secretary, Government of Khyber Pakhtunkhwa for information please.
3. P.S to Secretary, Planning & Development Department, Government of Khyber Pakhtunkhwa for information please.
4. P.A to Chief Economist, Planning & Development Department, Government of Khyber Pakhtunkhwa for information please.

Focal Person MICS
Bureau of Statistics
Khyber Pakhtunkhwa

XIX. Appendix D.   Estimates of Sampling Errors

The sample of respondents selected in the KP- Multiple Indicator Cluster Survey is only one of the samples that could have been selected from the same population, using the same design and size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between 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 which contains the true value of the indicator for the population, with a specified level of confidence. For MICS results 95% confidence intervals are used, which is the standard for this type of survey. The concept of the 95% confidence interval can be understood in this way: if many repeated samples of identical size and design were taken and the confidence interval computed for each sample, then 95% of these intervals would contain the true value of the indicator.

For the calculation of sampling errors from MICS data, programs developed in CSPro Version 5.0, SPSS Version 21 Complex Samples module and CMRJack[75] 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 and 4.3, for which the unweighted count represents the number of sample households, and the weighted counts reflect the total population.

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[75] *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**

Sampling errors are calculated for indicators of primary interest, for the provincial level, for urban and rural areas, and for all divisions.   Three of the selected indicators are based on households members, 9 are based on women, and 3 are based on children under 5. 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 11 show the calculated sampling errors for selected domains.

Table SE.1: Indicators selected for sampling error calculations	
List of indicators selected for sampling error calculations, and base populations (denominators) for each indicator, KP-MICS, 2016-17	
MICS5 Indicator	**Base Population**
Household members	
4.1 Use of improved drinking water sources	All household members[a]
4.3 Use of improved sanitation	All household members[a]
7.4 Primary school net attendance ratio (adjusted)	Children of primary school age
Women	
5.3 Contraceptive prevalence rate	Women age 15-49 years who are currently married
5.4 Unmet need	Women age 15-49 years who are currently married
5.5a Antenatal care coverage (1+ times, skilled provider)	Women age 15-49 years with a live birth in the last 2 years
5.5b Antenatal care coverage (4+ times, any provider)	Women age 15-49 years with a live birth in the last 2 years
5.7 Skilled attendant at delivery	Women age 15-49 years with a live birth in the last 2 years
7.1 Literacy rate (young women)	Women age 15-24 years
9.S1 Knowledge about HIV prevention (young women)	Women age 15-24 years
Under-5s	
2.1a Underweight prevalence (moderate and severe)	Children under age 5 years
2.1b Underweight prevalence (severe)	Children under age 5 years
3.22 Anti-malarial treatment of children under age 5	Children under age 5 years with fever in the last 2 weeks
[a] To calculate the weighted results of MICS Indicators 4.1 and 4.3, the household weight is multiplied by the number of household members in each household. Therefore the unweighted base population presented in the SE tables reflect the unweighted number of households, whereas the weighted numbers reflect the household population.	

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, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9129	0.0052	0.006	7.196	2.683	158,564	20,995	0.903	0.923
Use of improved sanitation	4.3	7.9	0.7775	0.0065	0.008	5.185	2.277	158,564	20,995	0.765	0.791
Primary school net attendance ratio (adjusted)	7.4	2.1	0.5776	0.0065	0.011	4.022	2.006	22,952	23,404	0.565	0.591
Women											
Contraceptive prevalence	5.3	5.3	0.3248	0.005	0.016	3.033	1.742	24,373	24,502	0.315	0.335
Unmet need	5.4	5.6	0.2079	0.0037	0.018	2.077	1.441	24,373	24,502	0.201	0.215
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.7433	0.0076	0.010	2.548	1.596	6,334	8,353	0.728	0.759
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.4414	0.0104	0.024	3.698	1.923	8,365	8,353	0.421	0.462
Skilled attendant at delivery	5.7	5.2	0.6855	0.0087	0.013	2.914	1.707	8,365	8,353	0.668	0.703
Literacy rate (young women)	7.1	2.3	0.5265	0.0101	0.019	6.000	2.450	14,499	14,536	0.506	0.547
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0061	0.0009	0.155	2.114	1.454	25,004	14,536	0.004	0.008
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2084	0.0060	0.029	4.439	2.107	20,079	20,040	0.196	0.220
Underweight prevalence (severe)	2.1b	1.8	0.0747	0.0046	0.061	6.050	2.460	20,079	20,040	0.066	0.084
Anti-malarial treatment of children under age 5	3.22	6.8	0.0137	0.0018	0.132	1.732	1.316	7,263	7,091	0.010	0.017

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, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9677	0.0047	0.005	4.489	2.119	.25,689	6,229	0.958	0.977
Use of improved sanitation	4.3	7.9	0.9073	0.0066	0.007	3.268	1.808	25,689	6,229	0.894	0.921
Primary school net attendance ratio (adjusted)	7.4	2.1	0.6865	0.0116	0.017	3.605	1.899	3,264	5,795	0.663	0.710
Women											
Contraceptive prevalence	5.3	5.3	0.4376	0.0099	0.023	2.730	1.652	4,006	6,878	0.418	0.457
Unmet need	5.4	5.6	0.1702	0.0070	0.041	2.362	1.537	4,006	6,878	0.156	0.184
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.8833	0.0103	0.012	2.364	1.538	1,190	2,280	0.863	0.904
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.6516	0.0157	0.024	2.480	1.575	1,334	2,280	0.620	0.683
Skilled attendant at delivery	5.7	5.2	0.8147	0.0110	0.013	1.825	1.351	1,334	2,280	0.793	0.837
Literacy rate (young women)	7.1	2.3	0.7301	0.0143	0.020	4.444	2.108	2,445	4,263	0.702	0.759
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0075	0.0018	0.239	1.832	1.354	4,131	4,263	0.004	0.011
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.1544	0.0069	0.044	1.920	1.386	3,075	5,330	0.141	0.168
Underweight prevalence (severe)	2.1b	1.8	0.0456	0.0039	0.085	1.821	1.349	3,075	5,330	0.038	0.053
Anti-malarial treatment of children under age 5	3.22	6.8	0.0168	0.0044	0.261	2.246	1.499	1,138	1,932	0.008	0.026

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, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9023	0.0062	0.007	6.462	2.542	132,875	14,766	0.890	0.915
Use of improved sanitation	4.3	7.9	0.7524	0.0078	0.010	4.816	2.195	132,875	14,766	0.737	0.768
Primary school net attendance ratio (adjusted)	7.4	2.1	0.5595	0.0072	0.013	3.712	1.927	19,689	17609	0.545	0.574
Women											
Contraceptive prevalence	5.3	5.3	0.3026	0.0059	0.020	2.953	1.719	20,367	17624	0.291	0.314
Unmet need	5.4	5.6	0.2154	0.0043	0.020	1.900	1.378	20,367	17624	0.207	0.224
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.7167	0.0089	0.012	2.375	1.541	5,145	6073	0.699	0.735
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.4015	0.0121	0.030	3.691	1.921	7,032	6073	0.377	0.426
Skilled attendant at delivery	5.7	5.2	0.6610	0.0102	0.015	2.802	1.674	7,032	6073	0.641	0.681
Literacy rate (young women)	7.1	2.3	0.4852	0.0118	0.024	5.712	2.390	1,254	10273	0.462	0.509
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0058	0.0011	0.185	2.033	1.426	20,873	10273	0.004	0.008
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2182	0.0069	0.032	4.161	2.040	17,005	14710	0.204	0.232
Underweight prevalence (severe)	2.1b	1.8	0.0800	0.0053	0.066	5.611	2.369	17,005	14710	0.069	0.091
Anti-malarial treatment of children under age 5	3.22	6.8	0.0132	0.0020	0.152	1.582	1.258	6,125	5159	0.009	0.017

Table SE.5: Sampling errors: Bannu division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9364	0.0161	0.017	6.678	2.584	10,565	1,535	0.904	0.969
Use of improved sanitation	4.3	7.9	0.8036	0.0179	0.022	3.108	1.763	10,565	1,535	0.768	0.839
Primary school net attendance ratio (adjusted)	7.4	2.1	0.4551	0.0197	0.043	3.194	1.787	1,727	2,046	0.416	0.495
Women											
Contraceptive prevalence	5.3	5.3	0.2782	0.0138	0.050	1.733	1.317	1,494	1,825	0.251	0.306
Unmet need	5.4	5.6	0.2476	0.0112	0.045	1.237	1.112	1,494	1,825	0.225	0.270
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.6298	0.0317	0.050	2.951	1.718	392	684	0.566	0.693
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.2324	0.0241	0.104	2.217	1.489	602	684	0.184	0.281
Skilled attendant at delivery	5.7	5.2	0.6384	0.0258	0.040	1.966	1.402	602	684	0.587	0.690
Literacy rate (young women)	7.1	2.3	0.3883	0.0398	0.103	7.692	2.773	929	1,152	0.309	0.468
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0074	0.0022	0.297	0.762	0.873	1,552	1,152	0.003	0.012
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.1993	0.0122	0.061	1.525	1.235	1,364	1,636	0.175	0.224
Underweight prevalence (severe)	2.1b	1.8	0.0515	0.0062	0.120	1.279	1.131	1,364	1,636	0.039	0.064
Anti-malarial treatment of children under age 5	3.22	6.8	0.0050	0.0029	0.580	1.019	1.009	505	608	-0.001	0.011

Table SE.6: Sampling errors: D.I. Khan division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.8795	0.0283	0.032	11.194	3.346	11,766	1,480	0.823	0.936
Use of improved sanitation	4.3	7.9	0.7606	0.0217	0.028	3.815	1.953	11,766	1,480	0.717	0.804
Primary school net attendance ratio (adjusted)	7.4	2.1	0.4169	0.0279	0.067	5.567	2.359	1,467	1,745	0.361	0.473
Women											
Contraceptive prevalence	5.3	5.3	0.1894	0.0153	0.081	2.809	1.676	1,778	1,846	0.159	0.220
Unmet need	5.4	5.6	0.2156	0.0097	0.045	1.023	1.011	1,778	1,846	0.196	0.235
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.6292	0.0230	0.037	1.602	1.266	428	705	0.583	0.675
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.1623	0.0122	0.075	0.773	0.879	684	705	0.138	0.187
Skilled attendant at delivery	5.7	5.2	0.5544	0.0327	0.059	3.039	1.743	684	705	0.489	0.620
Literacy rate (young women)	7.1	2.3	0.3202	0.0330	0.103	5.148	2.269	763	1,027	0.254	0.386
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0011	0.0008	0.708	0.558	0.747	1,843	1,027	-0.001	0.003
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2536	0.0210	0.083	4.184	2.046	1,786	1,804	0.212	0.296
Underweight prevalence (severe)	2.1b	1.8	0.1070	0.0145	0.135	3.949	1.987	1,786	1,804	0.078	0.136
Anti-malarial treatment of children under age 5	3.22	6.8	0.0093	0.0052	0.559	1.371	1.171	511	469	-0.001	0.020

Table SE.7: Sampling errors: Hazara division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

| | 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
Household members											
Use of improved drinking water sources	4.1	7.8	0.8192	0.0182	0.022	10.462	3.234	30,209	4,703	0.783	0.856
Use of improved sanitation	4.3	7.9	0.7435	0.0146	0.020	5.249	2.291	30,209	4,703	0.714	0.773
Primary school net attendance ratio (adjusted)	7.4	2.1	0.5854	0.0145	0.025	4.520	2.126	4,227	5,214	0.556	0.614
Women											
Contraceptive prevalence	5.3	5.3	0.2334	0.0094	0.040	2.672	1.634	4,808	5,369	0.215	0.252
Unmet need	5.4	5.6	0.2405	0.0075	0.031	1.632	1.277	4,808	5,369	0.226	0.256
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.6664	0.0182	0.027	2.489	1.578	1,024	1,674	0.630	0.703
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.3869	0.0207	0.053	3.015	1.736	1,507	1,674	0.346	0.428
Skilled attendant at delivery	5.7	5.2	0.5198	0.0215	0.041	3.110	1.764	1,507	1,674	0.477	0.563
Literacy rate (young women)	7.1	2.3	0.6203	0.0197	0.032	4.852	2.203	2,726	2,947	0.581	0.660
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0080	0.0025	0.318	2.384	1.544	4,932	2,947	0.003	0.013
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2243	0.0126	0.056	3.708	1.926	3,568	4,071	0.199	0.250
Underweight prevalence (severe)	2.1b	1.8	0.0864	0.0088	0.102	4.026	2.007	3,568	4,071	0.069	0.104
Anti-malarial treatment of children under age 5	3.22	6.8	0.0278	0.0063	0.228	2.391	1.546	1,518	1,613	0.015	0.040

Table SE.8: Sampling errors: Kohat division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

	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	Upper bound
										r - 2se	r + 2se
Household members											
Use of improved drinking water sources	4.1	7.8	0.8554	0.0220	0.026	8.271	2.876	10,837	2,120	0.811	0.899
Use of improved sanitation	4.3	7.9	0.6930	0.0162	0.023	2.621	1.619	10,837	2,120	0.661	0.725
Primary school net attendance ratio (adjusted)	7.4	2.1	0.6755	0.0151	0.022	2.420	1.556	1,467	2,321	0.645	0.706
Women											
Contraceptive prevalence	5.3	5.3	0.2860	0.0128	0.045	2.161	1.470	1,691	2,713	0.260	0.312
Unmet need	5.4	5.6	0.2280	0.0140	0.062	3.030	1.741	1,691	2,713	0.200	0.256
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.7753	0.0167	0.022	1.510	1.229	483	946	0.742	0.809
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.4780	0.0222	0.046	1.870	1.367	592	946	0.434	0.522
Skilled attendant at delivery	5.7	5.2	0.7947	0.0252	0.032	3.680	1.918	592	946	0.744	0.845
Literacy rate (young women)	7.1	2.3	0.5119	0.0337	0.066	7.732	2.781	1,086	1,707	0.445	0.579
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0073	0.0028	0.383	1.840	1.356	1,744	1,707	0.002	0.013
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.1374	0.0116	0.085	2.671	1.634	1,460	2,348	0.114	0.161
Underweight prevalence (severe)	2.1b	1.8	0.0425	0.0061	0.143	2.135	1.461	1,460	2,348	0.030	0.055
Anti-malarial treatment of children under age 5	3.22	6.8	0.0265	0.0067	0.254	1.627	1.276	577	924	0.013	0.040

Table SE. 9: Sampling errors: Malakand division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

| | 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
Household members											
Use of improved drinking water sources	4.1	7.8	0.8940	0.0114	0.013	7.396	2.720	37,145	5,388	0.871	0.917
Use of improved sanitation	4.3	7.9	0.7438	0.0176	0.024	8.796	2.966	37,145	5,388	0.709	0.779
Primary school net attendance ratio (adjusted)	7.4	2.1	0.5429	0.0127	0.023	4.207	2.051	5,825	6,462	0.518	0.568
Women											
Contraceptive prevalence	5.3	5.3	0.3269	0.0090	0.028	2.399	1.549	5,890	6,529	0.309	0.345
Unmet need	5.4	5.6	0.2188	0.0066	0.030	1.674	1.294	5,890	6,529	0.206	0.232
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.7417	0.0132	0.018	2.061	1.436	1,513	2,258	0.715	0.768
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.4764	0.0165	0.035	2.472	1.572	1,996	2,258	0.443	0.509
Skilled attendant at delivery	5.7	5.2	0.7198	0.0155	0.022	2.704	1.645	1,996	2,258	0.689	0.751
Literacy rate (young women)	7.1	2.3	0.5121	0.0182	0.036	5.061	2.250	3,347	3,803	0.476	0.549
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0043	0.0014	0.328	1.759	1.326	5,987	3,803	0.002	0.007
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2303	0.0084	0.036	2.094	1.447	4,688	5,260	0.214	0.247
Underweight prevalence (severe)	2.1b	1.8	0.0799	0.0052	0.065	1.916	1.384	4,688	5,260	0.070	0.090
Anti-malarial treatment of children under age 5	3.22	6.8	0.0086	0.0026	0.302	1.338	1.157	1,566	1,695	0.003	0.014

Table SE.10: Sampling errors: Mardan division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

	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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9764	0.0053	0.005	2.337	1.529	19,425	1,958	0.966	0.987
Use of improved sanitation	4.3	7.9	0.7522	0.0147	0.020	2.267	1.506	19,425	1,958	0.723	0.782
Primary school net attendance ratio (adjusted)	7.4	2.1	0.6983	0.0161	0.023	2.292	1.514	2,525	1,855	0.666	0.731
Women											
Contraceptive prevalence	5.3	5.3	0.3726	0.0153	0.041	2.188	1.479	2,987	2,178	0.342	0.403
Unmet need	5.4	5.6	0.1923	0.0134	0.070	2.525	1.589	2,987	2,178	0.166	0.219
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.8283	0.0213	0.026	2.375	1.541		747	0.786	0.871
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.5028	0.0249	0.050	1.857	1.363	1,015	747	0.453	0.553
Skilled attendant at delivery	5.7	5.2	0.6971	0.0285	0.041	2.870	1.694	1,015	747	0.640	0.754
Literacy rate (young women)	7.1	2.3	0.5912	0.0200	0.034	2.277	1.509	1,889	1,375	0.551	0.631
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0092	0.0035	0.383	1.865	1.366	3.070	1,375	0.002	0.016
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.1671	0.0125	0.075	1.975	1.405	2,445	1,752	0.142	0.192
Underweight prevalence (severe)	2.1b	1.8	0.0477	0.0058	0.121	1.289	1.135	2,445	1,752	0.036	0.059
Anti-malarial treatment of children under age 5	3.22	6.8	0.0164	0.0053	0.321	0.985	0.992	797	573	0.006	0.027

Table SE.11: Sampling errors: Peshawar division

Standard errors, coefficients of variation, design effects (*deff*), square root of design effects (*deft*), and confidence intervals for selected indicators, Khyber Pakhtunkhwa, 2016-17.

| | 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
Household members											
Use of improved drinking water sources	4.1	7.8	0.9922	0.0020	0.002	1.948	1.396	38,616	3,811	0.988	0.996
Use of improved sanitation	4.3	7.9	0.8711	0.0113	0.013	4.367	2.090	38,616	3,811	0.849	0.894
Primary school net attendance ratio (adjusted)	7.4	2.1	0.6177	0.0131	0.021	2.734	1.653	5,406	3,761	0.592	0.644
Women											
Contraceptive prevalence	5.3	5.3	0.4401	0.0124	0.028	2.533	1.592	5,725	4,042	0.415	0.465
Unmet need	5.4	5.6	0.1589	0.0089	0.056	2.406	1.551	5,725	4,042	0.141	0.177
Antenatal care coverage (1+ times, skilled provider)	5.5a	5.5	0.8247	0.0188	0.023	3.258	1.805		1,339	0.787	0.862
Antenatal care coverage (4+ times, any provider)	5.5b	5.5	0.5659	0.0300	0.053	4.908	2.215	1,968	1,339	0.506	0.626
Skilled attendant at delivery	5.7	5.2	0.7989	0.0181	0.023	2.713	1.647	1,968	1,339	0.763	0.835
Literacy rate (young women)	7.1	2.3	0.5289	0.0267	0.051	7.243	2.691	3,581	2,525	0.476	0.582
Knowledge about HIV prevention (young women)	9.S1	6.3	0.0052	0.0021	0.401	2.108	1.452	5,876	2,525	0.001	0.009
Under-5s											
Underweight prevalence (moderate and severe)	2.1a	1.8	0.2036	0.0188	0.092	6.895	2.626	4,768	3,169	0.166	0.241
Underweight prevalence (severe)	2.1b	1.8	0.0793	0.0157	0.198	10.655	3.264	4,768	3,169	0.048	0.111
Anti-malarial treatment of children under age 5	3.22	6.8	0.0047	0.0026	0.549	1.730	1.315	1,789	1,209	-0.001	0.010

XX. Appendix E: Data quality tables

DQ.1: Age distribution of household population

Single-year age distribution of household population by sex, Khyber Pakhtunkhwa, 2016-17

	Males		Females			Males		Females	
	Number	Percent	Number	Percent		Number	Percent	Number	Percent
Age					**Age**				
0	2,292	2.9	2,248	2.8	45	712	0.9	685	0.9
1	2,093	2.6	1,951	2.5	46	527	0.7	532	0.7
2	2,045	2.6	1,933	2.4	47	541	0.7	933	1.2
3	2,380	3.0	2,246	2.8	48	550	0.7	426	0.5
4	1,961	2.5	1,915	2.4	49	525	0.7	455	0.6
5	2,554	3.2	2,367	3.0	50	734	0.9	842	1.1
6	2,396	3.0	2,432	3.1	51	494	0.6	604	0.8
7	2,470	3.1	2,285	2.9	52	582	0.7	793	1.0
8	2,458	3.1	2,519	3.2	53	405	0.5	410	0.5
9	1,969	2.5	1,851	2.3	54	457	0.6	377	0.5
10	2,451	3.1	2,169	2.7	55	520	0.7	506	0.6
11	1,908	2.4	1,876	2.4	56	385	0.5	365	0.5
12	2,393	3.0	2,159	2.7	57	395	0.5	553	0.7
13	1,914	2.4	2,156	2.7	58	404	0.5	336	0.4
14	2,071	2.6	2,051	2.6	59	443	0.6	352	0.4
15	1,994	2.5	1,676	2.1	60	701	0.9	526	0.7
16	1,891	2.4	1,756	2.2	61	373	0.5	400	0.5
17	1,685	2.1	1,500	1.9	62	428	0.5	410	0.5
18	1,946	2.5	1,990	2.5	63	280	0.4	251	0.3
19	1,511	1.9	1,262	1.6	64	303	0.4	283	0.4
20	1,646	2.1	1,710	2.2	65	421	0.5	351	0.4
21	1,163	1.5	1,097	1.4	66	289	0.4	224	0.3
22	1,473	1.9	1,457	1.8	67	344	0.4	351	0.4
23	1,230	1.6	1,153	1.5	68	227	0.3	183	0.2
24	1,135	1.4	1,240	1.6	69	237	0.3	210	0.3
25	1,272	1.6	1,762	2.2	70	380	0.5	291	0.4
26	1,103	1.4	1,348	1.7	71	215	0.3	125	0.2
27	1,120	1.4	1,457	1.8	72	185	0.2	198	0.2
28	1,087	1.4	1,346	1.7	73	123	0.2	75	0.1
29	989	1.2	1,099	1.4	74	121	0.2	70	0.1
30	1,296	1.6	1,398	1.8	75	134	0.2	101	0.1
31	850	1.1	892	1.1	76	113	0.1	87	0.1
32	976	1.2	1,206	1.5	77	110	0.1	100	0.1
33	730	0.9	721	0.9	78	64	0.1	46	0.1
34	713	0.9	754	0.9	79	85	0.1	41	0.1
35	1,053	1.3	1,140	1.4	80	124	0.2	111	0.1
36	742	0.9	758	1.0	81	69	0.1	29	0.0
37	686	0.9	1,069	1.3	82	62	0.1	56	0.1
38	665	0.8	691	0.9	83	25	0.0	21	0.0
39	561	0.7	627	0.8	84	19	0.0	12	0.0
40	855	1.1	800	1.0	85+	170	0.2	165	0.2
41	573	0.7	566	0.7					
42	573	0.7	920	1.2	DK/Missing	12	0.0	5	0.0
43	517	0.7	444	0.6					
44	507	0.6	489	0.6	Total		100.0		100.0

DQ.2: Age distribution of eligible and interviewed women

Household population of women, interviewed women age 10-54 years, and percentage of eligible women who were interviewed, by five-year age groups, Khyber Pakhtunkhwa, 2016-17

Age	Household population of women age 10-54 years — Number	Interviewed women age 15-49 years — Number	Interviewed women age 15-49 years — Percent	Percentage of eligible women interviewed (Completion rate)
10-14	10,411	na	na-	Na
15-19	8,184	7,928.5	21.8	96.9
20-24	6,658	6,465.8	17.8	97.1
25-29	7,011	6,839.1	18.8	97.5
30-34	4,971	4,855.6	13.3	97.7
35-39	4,285	4,216.7	11.6	98.4
40-44	3,218	3,152.2	8.7	97.9
45-49	3,030	2,956.3	8.1	97.6
50-54	3,026	na	na	Na
Total (15-49)	37,359	36,414.2	100.0	97.5
Ratio of 50-54 to 45-49 :	0.9987			

na: not applicable

Note: Age is based on household schedule

DQ.4: Age distribution of children in household and under-5 questionnaires

Household population of children age 0-7 years, children age 0-4 years whose mothers/caretakers were interviewed, and percentage of under-5 children whose mothers/caretakers were interviewed, by single years of age, Khyber Pakhtunkhwa, 2016-17

Age	Household population of children 0-7 years — Number	Under-5s with completed interviews — Number	Under-5s with completed interviews — Percent	Percentage of eligible under-5s with completed interviews (Completion rate)
0	4,539	4,430	21.5	97.6
1	4,044	3,970	19.2	98.2
2	3,978	3,899	18.9	98.0
3	4,626	4,557	22.1	98.5
4	3,875	3,784	18.3	97.6
5	4,921	na	na	na
6	4,829	na	na	na
7	4,755	na	na	na
Total (0-4)	21,063	20,639	100.0	98.0
Ratio of 5 to 4	1.2699	na	na	Na

na: not applicable

Age is based on household schedule

Table D. DQ.5: Birth date reporting: Household population

Percent distribution of household population by completeness of date of birth information, Khyber Pakhtunkhwa, 2016-17

	Completeness of reporting of month and year of birth					Number of household members
	Year and month of birth	Year of birth only	Month of birth only	Both missing	Total	
KP	95.5	4.5	0.0	0.0	100.0	158,564
Area of residence						
Urban	96.1	3.9	0.0	.0	100.0	25,689
Rural	95.4	4.6	.0	.0	100.0	132,875
Age						
0-4	99.4	.6	0.0	.0	100.0	21,063
5-14	99.0	1.0	0.0	.0	100.0	44,451
15-24	97.6	2.3	.0	.0	100.0	30,516
25-49	93.9	6.0	0.0	.0	100.0	42,238
50-64	85.1	14.8	0.0	.0	100.0	13,913
65-84	81.6	18.3	.0	.1	100.0	6,030
85+	75.2	24.1	0.0	.7	100.0	335
DK/missing	43.8	21.4	0.0	34.8	100.0	17
Division						
Bannu	91.9	8.1	0.0	.0	100.0	10,565
D.I. Khan	91.2	8.8	0.0	.0	100.0	11,766
Hazara	94.9	5.0	0.0	.2	100.0	30,209
Kohat	94.8	5.1	0.0	.0	100.0	10,837
Malakand	95.1	4.9	.0	.0	100.0	37,145
Mardan	95.0	5.0	.0	0.0	100.0	19,425
Peshawar	99.0	1.0	.0	0.0	100.0	38,616
District						
Abbottabad	97.8	2.1	0.0	0.0	100.0	7,545
Bannu	91.9	8.1	0.0	0.0	100.0	10,565
Batagram	94.7	5.3	0.0	0.0	100.0	2,880
Buner	99.1	0.9	0.0	0.0	100.0	4,276
Charsadda	99.9	0.1	0.0	0.0	100.0	9,290
Chitral	87.1	12.9	0.0	0.0	100.0	2,483
D.I.Khan	98.8	9.2	0.0	0.1	100.0	9,672
Hangu	97.6	2.4	0.0	0.0	100.0	2,500
Haripur	94.5	5.4	0.0	0.1	100.0	5,900
Karak	85.1	14.9	0.0	0.0	100.0	3,024
Kohat	94.8	5.1	0.0	0.0	100.0	10,837
Kohistan	83.8	15.1	0.0	1.1	100.0	4,435
Lakki Marwat	98.0	2.0	0.0	0.0	100.0	3,823
Lower Dir	99.9	0.1	0.0	0.0	100.0	6,468
Malakand Protected	99.5	0.5	0.0	0.0	100.0	4,042
Mansehra	99.6	0.4	0.0	0.0	100.0	8,247
Mardan	95.0	5.0	0.0	0.0	100.0	19,425
Nowshera	99.6	0.4	0.0	0.0	100.0	7,127
Peshawar	99.0	1.0	0.0	0.0	100.0	38,616
Shangla	91.5	8.4	0.0	0.1	100.0	3,091
Swabi	92.2	7.8	0.0	0.0	100.0	8,096
Swat	89.9	10.1	0.0	0.0	100.0	11,075
Tank	93.3	6.7	0.0	0.0	100.0	2,094
Tor Ghar	86.5	13.4	0.0	0.1	100.0	1,202
Upper Dir	99.1	0.9	0.0	0.0	100.0	5,710

Table D. DQ.6: Birth date and age reporting: Women

Percent distribution of women age 15-49 years by completeness of date of birth/age information, Khyber Pakhtunkhwa, 2016-17

	Completeness of reporting of date of birth and age						Number of women age 15-49 years
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Other/ DK/Missing	Total	
KP	95.2	4.7	0.0	0.1	0.0	100.0	36,703
Area of residence							
Urban	95.9	4.1	0.0	0.0	0.0	100.0	6,282
Rural	95.0	4.9	0.0	.1	.0	100.0	30,421
Division							
Bannu	88.8	11.2	0.0	0.0	0.0	100.0	2,361
D.I. Khan	88.9	11.0	0.0	0.0	.1	100.0	2,551
Hazara	95.2	4.5	0.0	.3	.0	100.0	6,965
Kohat	94.1	5.9	0.0	0.0	0.0	100.0	2,639
Malakand	94.2	5.7	0.0	0.0	.0	100.0	8,395
Mardan	96.1	3.9	0.0	0.0	0.0	100.0	4,633
Peshawar	99.3	.7	0.0	0.0	0.0	100.0	9,158
District							
Abbottabad	98.2	1.8	0.0	0.0	0.0	100.0	1,875
Bannu	88.8	11.2	0.0	0.0	0.0	100.0	2,361
Batagram	94.4	5.6	0.0	0.0	0.0	100.0	662
Buner	100.0	0.0	0.0	0.0	0.0	100.0	952
Charsadda	99.9	0.1	0.0	0.0	0.0	100.0	2,087
Chitral	88.1	11.9	0.0	0.0	0.0	100.0	607
D.I. Khan	88.9	11.0	0.0	0.0	0.1	100.0	2,551
Hangu	97.9	2.1	0.0	0.0	0.0	100.0	629
Haripur	94.9	5.0	0.0	0.0	0.2	100.0	1,468
Karak	80.6	19.4	0.0	0.0	0.0	100.0	700
Kohat	94.1	5.9	0.0	0.0	0.0	100.0	2,639
Kohistan	82.6	15.1	0.0	2.3	0.0	100.0	798
Lakki Marwat	97.9	2.1	0.0	0.0	0.0	100.0	849
Lower Dir	99.9	0.1	0.0	0.0	0.0	100.0	1,514
Malakand Protected Area	99.6	0.4	0.0	0.0	0.0	100.0	928
Mansehra	99.8	0.2	0.0	0.0	0.0	100.0	1,898
Mardan	96.1	3.9	0.0	0.0	0.0	100.0	4,633
Nowshera	99.9	0.1	0.0	0.0	0.0	100.0	1,714
Peshawar	99.3	0.7	0.0	0.0	0.0	100.0	9,158
Shangla	90.8	9.2	0.0	0.0	0.0	100.0	630
Swabi	94.2	5.8	0.0	0.0	0.0	100.0	1,952
Swat	86.6	13.4	0.0	0.0	0.0	100.0	2,529
Tank	92.4	7.6	0.0	0.0	0.0	100.0	469
Tor Ghar	83.6	16.3	0.0	0.2	0.0	100.0	263
Upper Dir	99.1	0.8	0.0	0.0	0.1	100.0	1,236

Table D. DQ.8: Birth date and age reporting: Under-5s

Percent distribution children under 5 by completeness of date of birth/age information, Khyber Pakhtunkhwa, 2016-17

| | Completeness of reporting of date of birth and age | | | | | | Number |
	Year and month of birth	Year of birth and age	Year of birth only	Age only	Other/ DK / Missing	Total	of under-5 children
KP	99.3	0.7	0.0	0.0	0.0	100.0	20,926
Area of residence							
Urban	99.8	.2	0.0	0.0	0.0	100.0	3,168
Rural	99.2	.7	0.0	.0	0.0	100.0	17,758
Division							
Bannu	99.9	.1	0.0	0.0	0.0	100.0	1,505
D.I. Khan	99.7	.3	0.0	0.0	0.0	100.0	1,827
Hazara	97.2	2.7	0.0	.1	0.0	100.0	3,921
Kohat	99.4	.6	0.0	0.0	0.0	100.0	1,492
Malakand	99.6	.4	0.0	0.0	0.0	100.0	4,846
Mardan	100.0	0.0	0.0	0.0	0.0	100.0	2,486
Peshawar	100.0	.0	0.0	0.0	0.0	100.0	4,849
District							
Abbottabad	99.9	0.1	0.0	0.0	0.0	100.0	882
Bannu	99.9	0.1	0.0	0.0	0.0	100.0	1,505
Batagram	100.0	0.0	0.0	0.0	0.0	100.0	442
Buner	100.0	0.0	0.0	0.0	0.0	100.0	570
Charsadda	99.9	0.1	0.0	0.0	0.0	100.0	1,081
Chitral	99.6	0.4	0.0	0.0	0.0	100.0	269
D.I. Khan	99.7	0.3	0.0	0.0	0.0	100.0	1,827
Hangu	100.0	0.0	0.0	0.0	0.0	100.0	380
Haripur	99.9	0.1	0.0	0.0	0.0	100.0	678
Karak	98.1	1.9	0.0	0.0	0.0	100.0	436
Kohat	99.4	0.6	0.0	0.0	0.0	100.0	1,492
Kohistan	85.1	14.3	0.0	0.6	0.0	100.0	669
Lakki Marwat	100.0	0.0	0.0	0.0	0.0	100.0	495
Lower Dir	100.0	0.0	0.0	0.0	0.0	100.0	816
Malakand Protected Area	100.0	0.0	0.0	0.0	0.0	100.0	525
Mansehra	100.0	0.0	0.0	0.0	0.0	100.0	1,071
Mardan	100.0	0.0	0.0	0.0	0.0	100.0	2,486
Nowshera	100.0	0.0	0.0	0.0	0.0	100.0	939
Peshawar	100.0	0.0	0.0	0.0	0.0	100.0	4,849
Shangla	96.6	3.4	0.0	0.0	0.0	100.0	417
Swabi	100.0	0.0	0.0	0.0	0.0	100.0	935
Swat	99.6	0.4	0.0	0.0	0.0	100.0	1,474
Tank	100.0	0.0	0.0	0.0	0.0	100.0	333
Tor Ghar	96.1	3.9	0.0	0.0	0.0	100.0	179
Upper Dir	100.0	0.0	0.0	0.0	0.0	100.0	774

Table D. DQ.9: Birth date reporting: Children, adolescents and young people

Percent distribution of children, adolescents and young people age 5-24 years by completeness of date of birth information, Khyber Pakhtunkhwa,*2016-17*

| | Completeness of reporting of month and year of birth | | | | | Number of children, adolescents and young people age 5-24 years |
	Year and month of birth	Year of birth only	Month of birth only	Both missing	Total	
KP	98.4	1.5	0.0	0.0	100.0	74,967
Area of residence					100.0	
Urban	98.8	1.2	0.0	.0	100.0	11,494
Rural	98.4	1.6	.0	.0	100.0	63,473
Division						
Bannu	97.9	2.1	0.0	0.0	100.0	5,154
D.I. Khan	97.7	2.3	0.0	.1	100.0	5,367
Hazara	96.5	3.3	0.0	.2	100.0	13,562
Kohat	98.3	1.6	0.0	.0	100.0	5,056
Malakand	98.2	1.8	.0	0.0	100.0	18,546
Mardan	99.6	.4	0.0	0.0	100.0	9,086
Peshawar	99.8	.2	0.0	0.0	100.0	18,197
District						
Abbottabad	99.7	0.3	0.0	0.0	100.0	3,105
Bannu	97.9	2.1	0.0	0.0	100.0	5,154
Batagram	99.6	0.4	0.0	0.0	100.0	1,446
Buner	100.0	0.0	0.0	0.0	100.0	2,137
Charsadda	100.0	0.0	0.0	0.0	100.0	4,432
Chitral	98.8	1.2	0.0	0.0	100.0	1,125
D.I. Khan	97.7	2.3	0.0	0.1	100.0	5,367
Hangu	99.7	0.3	0.0	0.0	100.0	1,231
Haripur	98.0	1.9	0.0	0.1	100.0	2,322
Karak	94.9	5.1	0.0	0.0	100.0	1,466
Kohat	98.3	1.6	0.0	0.0	100.0	5,056
Kohistan	85.7	13.3	0.0	1.0	100.0	2,428
Lakki Marwat	99.9	0.1	0.0	0.0	100.0	1,906
Lower Dir	100.0	0.0	0.0	0.0	100.0	3,400
Malakand Protected Area	99.9	0.1	0.0	0.0	100.0	1,925
Mansehra	100.0	0.0	0.0	0.0	100.0	3,693
Mardan	99.6	0.4	0.0	0.0	100.0	9,086
Nowshera	100.0	0.0	0.0	0.0	100.0	3,247
Peshawar	99.8	0.2	0.0	0.0	100.0	18,197
Shangla	94.1	5.9	0.1	0.0	100.0	1,585
Swabi	99.4	0.6	0.0	0.0	100.0	3,834
Swat	96.0	4.0	0.0	0.0	100.0	5,431
Tank	98.8	1.2	0.0	0.0	100.0	933
Tor Ghar	89.7	10.3	0.0	0.0	100.0	567
Upper Dir	99.9	0.1	0.0	0.0	100.0	2,942

Table DQ.10: Birth date reporting: First and last births

Percent distribution of first and last births to women age 15-49 years by completeness of date of birth, Khyber Pakhtunkhwa, 2016-17

	Completeness of reporting of date of birth										
	Date of first birth						Date of last birth				
	Year and month of birth	Year of birth only	Completed years since first birth only	DK/ Other/ Missing	Total	Number of first births	Year and month of birth	Year of birth only	DK/ Other/ Missing	Total	Number of last births
KP	97.3	1.7	0.6	0.5	100.0	21,843	99.2	0.5	0.3	100.0	18,640
Area of residence											
Urban	97.9	1.5	.4	.2	100.0	3,659	99.7	.3	.1	100.0	3,088
Rural	97.1	1.7	.6	.5	100.0	18,185	99.1	.5	.4	100.0	15,552
Division											
Bannu	97.8	1.6	0.0	.6	100.0	1,358	99.9	.0	.1	100.0	1,159
D.I. Khan	95.2	3.7	.2	.9	100.0	1,581	99.3	.6	.1	100.0	1,344
Hazara	94.7	2.4	2.6	.3	100.0	4,165	97.7	1.9	.5	100.0	3,514
Kohat	98.0	1.3	0.0	.7	100.0	1,529	99.5	.5	0.0	100.0	1,293
Malakand	96.5	2.6	.3	.5	100.0	5,293	99.2	.3	.5	100.0	4,516
Mardan	98.9	.3	0.0	.8	100.0	2,684	99.8	0.0	.2	100.0	2,298
Peshawar	99.4	.4	0.0	.1	100.0	5,233	99.8	0.0	.2	100.0	4,516
District											
Abbottabad	98.4	1.1	0.4	0.1	100.0	1,034	100.0	0.0	0.0	100.0	856
Bannu	97.8	1.6	0.0	0.6	100.0	1,358	99.9	0.0	0.1	100.0	1,159
Batagram	94.5	5.0	0.3	0.1	100.0	450	100.0	0.0	0.0	100.0	377
Buner	99.8	0.2	0.0	0.0	100.0	606	99.6	0.0	0.4	100.0	528
Charsadda	99.6	0.1	0.0	0.3	100.0	1,197	100.0	0.0	0.0	100.0	1,019
Chitral	97.6	1.8	0.0	0.6	100.0	370	99.7	0.3	0.0	100.0	306
D.I. Khan	95.2	3.7	0.2	0.9	100.0	1,581	99.3	0.6	0.1	100.0	1,344
Hangu	99.1	0.3	0.0	0.6	100.0	372	99.9	0.1	0.0	100.0	324
Haripur	96.0	2.4	1.3	0.2	100.0	838	99.5	0.4	0.1	100.0	686
Karak	94.8	4.1	0.0	1.1	100.0	402	98.1	1.9	0.0	100.0	331
Kohat	98.0	1.3	0.0	0.7	100.0	1,529	99.5	0.5	0.0	100.0	1,293
Kohistan	79.0	4.6	14.8	1.5	100.0	591	86.8	10.7	2.5	100.0	542
Lakki Marwat	99.5	0.1	0.0	0.4	100.0	459	100.0	0.0	0.0	100.0	402
Lower Dir	99.7	0.1	0.0	0.2	100.0	929	100.0	0.0	0.0	100.0	798
Malakand Protected Area	99.7	0.2	0.0	0.1	100.0	580	100.0	0.0	0.0	100.0	492
Mansehra	99.7	0.2	0.2	0.0	100.0	1,080	99.8	0.0	0.2	100.0	911
Mardan	98.9	0.3	0.0	0.8	100.0	2,684	99.8	0.0	0.2	100.0	2,298
Nowshera	99.3	0.3	0.0	0.4	100.0	1,001	100.0	0.0	0.0	100.0	872
Peshawar	99.4	0.4	0.0	0.1	100.0	5,233	99.8	0.0	0.2	100.0	4,516
Shangla	92.0	7.2	0.2	0.6	100.0	461	98.7	1.1	0.2	100.0	393
Swabi	99.4	0.1	0.0	0.4	100.0	1,117	99.8	0.0	0.2	100.0	971
Swat	91.8	5.9	1.1	1.3	100.0	1,619	97.8	0.6	1.6	100.0	1,384
Tank	96.2	2.7	0.0	1.1	100.0	282	99.9	0.1	0.0	100.0	231
Tor Ghar	89.9	9.3	0.2	0.6	100.0	172	95.6	3.6	0.8	100.0	141
Upper Dir	99.9	0.1	0.0	0.0	100.0	728	100.0	0.0	0.0	100.0	615

DQ11: Completeness of reporting

Percentage of observations that are missing information for selected questions and indicators, Khyber Pakhtunkhwa, 2016-17

Questionnaire and type of missing information	Reference group	Percent with missing/incomplete information[a]	Number of cases
Household			
Salt test result	All households interviewed that have salt	.2	20,995
Starting time of interview	All households interviewed	.0	20,995
Ending time of interview	All households interviewed	.0	20,995
Women			
Date of first marriage	All ever married women age 15-49	6.0	25,005
Only month			
Both month and year		2.3	25,005
Age at first marriage	All ever married women age 15-49 with year of first marriage not known	1.0	25,005
Starting time of interview	All women interviewed	.0	36,703
Ending time of interview	All women interviewed	.0	36,703
Under-5			
Starting time of interview	All under-5 children	0.0	20,926
Ending time of interview	All under-5 children	0.0	20,926

[a] Includes "Don't know" responses

DQ.12: Completeness of information for anthropometric indicators: Underweight

Percent distribution of children under 5 by completeness of information on date of birth and weight, Khyber Pakhtunkhwa, 2016-17

	Valid weight and date of birth	**Reason for exclusion from analysis**				Total	Percent of children excluded from analysis	Number of children under 5
		Weight not measured	Incomplete date of birth	Weight not measured and incomplete date of birth	Flagged cases (outliers)			
KP	96.0	2.9	.6	.1	.4	100.0	4.0	20,926.0
Age								
<6 months	95.5	3.0	.2	.1	1.2	100.0	4.5	2,204.7
6-11 months	96.4	2.5	.3	0.0	.8	100.0	3.6	2,226.2
12-23 months	97.0	2.0	.6	.1	.4	100.0	3.0	4,049.1
24-35 months	96.4	2.4	.7	.1	.4	100.0	3.6	3,925.6
36-47 months	95.5	3.6	.7	.0	.1	100.0	4.5	4,618.1
48-59 months	95.0	3.9	1.0	.1	.1	100.0	5.0	3,902.2

DQ.13: Completeness of information for anthropometric indicators: Stunting

Percent distribution of children under 5 by completeness of information on date of birth and length or height, Khyber Pakhtunkhwa, 2016-17

	Valid length/height and date of birth	**Reason for exclusion from analysis**				Total	Percent of children excluded from analysis	Number of children under 5
		Length/Height not measured	Incomplete date of birth	Length/Height not measured incomplete date of birth	Flagged cases (outliers)			
KP	93.3	3.3	.6	.1	2.7	100.0	6.7	20,926
Age								
<6 months	90.6	3.3	.2	.1	5.8	100.0	9.4	2,205
6-11 months	92.6	2.9	.3	0.0	4.2	100.0	7.4	2,226
12-23 months	94.1	2.2	.6	.1	3.1	100.0	5.9	4,049
24-35 months	93.4	3.0	.7	.1	2.8	100.0	6.6	3,926
36-47 months	93.9	4.0	.7	.0	1.4	100.0	6.1	4,618
48-59 months	93.7	4.0	1.0	.1	1.2	100.0	6.3	3,902

DQ.14: Completeness of information for anthropometric indicators: Wasting

Percent distribution of children under-5 by completeness of information on weight and length or height, Khyber Pakhtunkhwa, 2016-17

	Valid weight and length/height	Reason for exclusion from analysis				Total	Percent of children excluded from analysis	Number of children under-5
		Weight not measured	Length/Height not measured	Weight and length/height not measured	Flagged cases (outliers)			
KP	93.7	.1	.4	2.9	2.9	100.0	6.3	20,926
Age								
<6 months	85.2	.3	.6	2.8	11.2	100.0	14.8	2,205
6-11 months	93.4	0.0	.4	2.5	3.8	100.0	6.6	2,226
12-23 months	95.2	.1	.3	2.0	2.4	100.0	4.8	4,049
24-35 months	94.9	.0	.7	2.4	1.9	100.0	5.1	3,926
36-47 months	94.8	.0	.5	3.6	1.1	100.0	5.2	4,618
48-59 months	94.6	.1	.3	3.8	1.2	100.0	5.4	3,902

DQ.15: Heaping in anthropometric measurements

Distribution of weight and height/length measurements by digits reported for the decimal points, Khyber Pakhtunkhwa, 2016-17

	Weight		Height or length	
	Number	Percent	Number	Percent
KP	20,301	100.0	20,320	100.0
Digits				
0	2,170	10.7	4,160	20.5
1	1,921	9.5	1,579	7.8
2	2,626	12.9	3,564	17.5
3	2,142	10.6	2,744	13.5
4	1,831	9.0	1,758	8.6
5	2,247	11.1	2,617	12.9
6	1,835	9.0	1,260	6.2
7	1,661	8.2	960	4.7
8	2,104	10.4	719	3.5
9	1,764	8.7	961	4.7
0 or 5	4,417	21.8	6,776	33.3

Table D. DQ:16: Observation of birth certificates

Percent distribution of children under 5 by presence of birth certificates, and percentage of birth certificates seen, Khyber Pakhtunkhwa, 2016-17

	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 age 5
	Seen by the interviewer (1)	Not seen by the interviewer (2)					
KP	8.7	4.8	86.0	0.5	100.0	64.2	20,926
Area of residence							
Urban	13.9	7.8	77.8	.5	100.0	64.1	3,168
Rural	7.7	4.3	87.4	.5	100.0	64.3	17,758
Child's Age							
0-5 months	4.8	3.0	91.8	.4	100.0	61.8	2,205
6-11 months	6.6	3.7	89.2	.4	100.0	63.9	2,226
12-23 months	8.3	4.9	86.3	.5	100.0	62.6	4,049
24-35 months	9.1	5.0	85.2	.6	100.0	64.4	3,926
36-47 months	9.9	6.0	83.5	.6	100.0	62.4	4,618
48-59 months	10.5	4.8	84.3	.5	100.0	68.6	3,902
Division							
Bannu	3.2	3.1	93.5	.2	100.0	50.8	1,505
D.I. Khan	1.9	2.0	93.4	2.7	100.0	48.4	1,827
Hazara	11.5	8.1	79.8	.5	100.0	58.7	3,921
Kohat	18.7	3.9	77.1	.2	100.0	82.7	1,492
Malakand	6.8	4.1	88.7	.3	100.0	62.4	4,846
Mardan	6.5	3.6	89.6	.3	100.0	64.4	2,486
Peshawar	10.4	5.4	84.0	.1	100.0	65.9	4,849
District							
Abbottabad	15.1	21.7	62.9	0.3	100.0	41.0	882
Bannu	3.2	3.1	93.5	0.2	100.0	50.8	1,505
Batagram	1.3	3.4	95.0	0.4	100.0	28.4	442
Buner	2.1	1.6	96.3	0.0	100.0	57.0	570
Charsadda	4.6	7.0	88.4	0.1	100.0	39.8	1,081
Chitral	21.6	12.9	65.1	0.4	100.0	62.7	269
D.I.Khan	2.2	2.3	92.8	2.7	100.0	49.8	1,495
Hangu	9.7	2.2	87.1	0.9	100.0	81.4	380
Haripur	32.9	10.0	56.9	0.1	100.0	76.7	678
Karak	6.3	1.7	91.9	0.0	100.0	78.4	436
Kohat	18.7	3.9	77.1	0.2	100.0	82.7	1,492
Kohistan	0.0	1.4	97.0	1.6	100.0	0.0	669
Lakki Marwat	4.6	1.1	94.3	0.0	100.0	80.6	495
Lower Dir	6.0	7.3	86.5	0.2	100.0	45.3	816
Malakand Protected	6.0	7.6	86.0	0.4	100.0	44.2	525
Mansehra	8.3	2.9	88.4	0.4	100.0	74.1	1,071
Mardan	6.5	3.6	89.6	0.3	100.0	64.4	2,486
Nowshera	14.4	4.3	81.0	0.2	100.0	76.9	939
Peshawar	10.4	5.4	84.0	0.1	100.0	65.9	4,849
Shangla	0.2	2.1	96.2	1.5	100.0	7.6	417
Swabi	5.3	6.2	87.6	0.9	100.0	46.2	935
Swat	11.2	2.4	86.2	0.2	100.0	82.2	1,474
Tank	0.3	0.9	96.2	2.7	100.0	24.2	333
Tor Ghar	0.8	2.2	97.0	0.0	100.0	25.9	179
Upper Dir	1.8	1.5	96.4	0.3	100.0	55.1	774

Table D. DQ.17: Observation of vaccination cards

Percent distribution of children age 0-35 months by presence of a vaccination card, and the percentage of vaccination cards seen by the interviewers, Khyber Pakhtunkhwa, 2016-17

	Child does not have vaccination card		Child has vaccination card				Percentage of vaccination cards seen by the interviewer (1)/(1+2)*100	Number of children age 0-35 months
	Had vaccination card previously	Never had vaccination card	Seen by the interviewer (1)	Not seen by the interviewer (2)	DK/ Missing	Total		
KP	9.8	24.9	44.5	20.5	0.2	100.0	68.4	12,406
Area of residence								
Urban	10.8	10.0	51.9	27.1	.3	100.0	65.7	1,903
Rural	9.7	27.6	43.1	19.3	.2	100.0	69.1	10,503
Child's Age								
0-5 months	3.8	32.6	52.0	11.5	.0	100.0	81.9	2,205
6-11 months	6.8	22.1	57.3	13.7	.0	100.0	80.7	2,226
12-23 months	9.8	21.1	48.7	20.4	.1	100.0	70.5	4,049
24-35 months	15.0	26.2	28.6	29.6	.6	100.0	49.2	3,926
Division								
Bannu	6.6	70.6	16.5	6.1	.1	100.0	72.9	888
D.I. Khan	16.7	42.4	19.0	21.6	.2	100.0	46.8	1,074
Hazara	8.0	29.1	42.3	20.4	.1	100.0	67.5	2,314
Kohat	9.7	37.6	31.8	20.6	.3	100.0	60.7	876
Malakand	7.9	20.0	52.5	19.3	.3	100.0	73.1	2,930
Mardan	7.4	7.6	61.3	23.2	.4	100.0	72.5	1,505
Peshawar	13.1	10.9	51.4	24.5	.2	100.0	67.7	2,820
District								
Abbottabad	10.0	4.1	44.7	41.3	0.0	100.0	52.0	544
Bannu	6.6	70.6	16.5	6.1	0.1	100.0	72.9	888
Batagram	7.8	49.5	31.8	10.8	0.1	100.0	74.6	253
Buner	14.9	28.8	52.0	4.0	0.3	100.0	92.9	350
Charsadda	21.0	11.7	42.9	24.4	0.0	100.0	63.8	655
Chitral	7.2	8.5	67.9	16.5	0.0	100.0	80.5	169
D.I.Khan	16.9	41.7	19.4	21.8	0.2	100.0	47.0	877
Hangu	11.1	45.4	33.3	9.5	0.7	100.0	77.8	228
Haripur	5.5	5.5	69.4	19.3	0.3	100.0	78.3	415
Karak	3.3	35.7	17.3	43.2	0.4	100.0	28.6	256

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Kohat	9.7	37.6	31.8	20.6	0.3	100.0	60.7	876
Kohistan	4.5	83.2	0.3	11.6	0.5	100.0	2.2	340
Lakki Marwat	2.5	84.5	8.2	4.4	0.4	100.0	65.2	281
Lower Dir	7.5	18.8	55.7	18.0	0.0	100.0	75.6	491
Malakand Protected Area	14.0	11.0	52.9	22.0	0.2	100.0	70.6	325
Mansehra	10.9	18.8	55.8	14.4	0.0	100.0	79.4	653
Mardan	7.4	7.6	61.3	23.2	0.4	100.0	72.5	1,505
Nowshera	11.7	15.8	65.1	7.4	0.0	100.0	89.7	552
Peshawar	13.1	10.9	51.4	24.5	0.2	100.0	67.7	2,820
Shangla	6.3	36.4	8.9	46.6	1.8	100.0	16.1	230
Swabi	12.5	11.4	56.1	19.2	0.7	100.0	74.5	556
Swat	5.0	13.5	64.3	16.9	0.3	100.0	79.2	890
Tank	16.0	45.3	17.6	21.0	0.2	100.0	45.6	197
Tor Ghar	1.9	89.6	2.6	5.7	0.2	100.0	31.5	108
Upper Dir	5.6	29.2	42.7	22.5	0.0	100.0	65.5	475

Table D. DQ.18: Observation of women's health cards

Percent distribution of women with a live birth in the last 2 years by presence of a health card, and the percentage of health cards seen by the interviewers, Khyber Pakhtunkhwa, 2016-17

| | Woman does not have health card | Woman has health card | | DK/ Missing | Total | Percent 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)				
KP	54.7	17.6	25.7	2.0	100.0	40.7	8,365
Area of residence							
Urban	38.0	25.1	34.2	2.7	100.0	42.3	1,334
Rural	57.9	16.2	24.0	1.9	100.0	40.2	7,032
Child's Age							
15-24 months	50.5	20.6	27.2	1.7	100.0	43.1	2,502
25-34 months	55.7	17.2	25.0	2.1	100.0	40.8	4,405
35-49 months	59.0	13.7	25.1	2.2	100.0	35.3	1,459
Division							
Bannu	83.4	3.1	12.7	.8	100.0	19.5	602
D.I. Khan	66.9	2.9	29.1	1.1	100.0	8.9	684
Hazara	66.8	12.0	18.9	2.3	100.0	38.8	1,507
Kohat	59.0	13.4	25.4	2.3	100.0	34.6	592
Malakand	48.7	24.4	24.5	2.3	100.0	50.0	1,996
Mardan	37.8	22.9	37.5	1.8	100.0	38.0	1,015
Peshawar	46.0	23.1	28.8	2.1	100.0	44.4	1,968
District							
Abbottabad	41.1	24.7	33.5	0.6	100.0	42.5	364
Bannu	83.4	3.1	12.7	0.8	100.0	19.5	602
Batagram	82.3	4.3	10.8	2.5	100.0	28.6	183
Buner	36.0	27.0	35.3	1.7	100.0	43.3	243
Charsadda	48.5	20.7	29.2	1.6	100.0	41.4	454
Chitral	55.7	10.9	29.2	4.1	100.0	27.2	127
D.I. Khan	66.9	2.9	29.1	1.1	100.0	8.9	684
Hangu	54.0	13.5	30.2	2.3	100.0	30.9	149
Haripur	57.9	12.6	26.7	2.7	100.0	32.1	256
Karak	68.7	6.2	24.3	0.8	100.0	20.4	168
Kohat	59.0	13.4	25.4	2.3	100.0	34.6	592
Kohistan	92.4	0.4	1.5	5.7	100.0	21.1	179
Lakki Marwat	90.6	2.7	5.9	0.8	100.0	31.9	190
Lower Dir	66.5	10.9	18.6	3.9	100.0	37.0	336
Malakand Protected Area	33.3	26.1	39.7	0.9	100.0	39.7	213
Mansehra	72.3	10.7	15.0	2.0	100.0	41.6	453
Mardan	37.8	22.9	37.5	1.8	100.0	38.0	1,015
Nowshera	57.9	21.4	17.8	2.9	100.0	54.7	384
Peshawar	46.0	23.1	28.8	2.1	100.0	44.4	1,968
Shangla	86.3	2.6	7.5	3.6	100.0	25.5	150
Swabi	46.3	14.1	36.8	2.8	100.0	27.8	389
Swat	34.4	48.6	15.6	1.5	100.0	75.7	614
Tank	68.9	5.8	23.3	2.1	100.0	19.8	125
Tor Ghar	92.0	1.2	5.0	1.8	100.0	19.6	71
Upper Dir	57.5	4.6	35.5	2.4	100.0	11.5	314

Table D. DQ.19: Observation of places for handwashing

Percentage of places for handwashing observed by the interviewers in all interviewed households, Khyber Pakhtunkhwa, 2016-17

	Observation of places for handwashing: Observed	Place for handwashing not in dwelling	No permission to see	Other reason	Total	Number of households interviewed
KP	92.7	7.1	0.2	0.0	100	20,995
Area of residence						
Urban	96.3	3.4	.3	0.0	100.0	3,672
Rural	91.9	7.9	.2	0.0	100.0	17,323
Wealth index quintile						
Poorest	85.9	13.5	.6	0.0	100.0	4,136
Second	90.3	9.5	.2	0.0	100.0	4,138
Middle	93.1	6.8	.1	0.0	100.0	4,120
Fourth	95.7	4.3	.0	0.0	100.0	4,255
Richest	98.0	1.8	.2	0.0	100.0	4,345
Division						
Bannu	93.2	6.6	.1	0.0	100.0	1,195
D.I. Khan	94.0	5.8	.1	0.0	100.0	1,352
Hazara	93.8	5.7	.5	0.0	100.0	4,336
Kohat	73.2	26.7	.1	0.0	100.0	1,411
Malakand	92.8	7.0	.2	0.0	100.0	4,799
Mardan	97.0	2.8	.1	0.0	100.0	2,646
Peshawar	94.2	5.7	.2	0.0	100.0	5,256
District						
Abbottabad	98.3	1.6	0.1	0.0	100	1,216
Bannu	93.2	6.6	0.1	0.0	100	1,195
Batagram	95.4	4.2	0.4	0.0	100	361
Buner	91.8	8.2	0.0	0.0	100	542
Charsadda	99.3	0.6	0.1	0.0	100	1,221
Chitral	94.7	2.5	2.6	0.0	100	386
D.I. Khan	94.0	5.8	0.1	0.0	100	1,352
Hangu	98.1	1.7	0.2	0.0	100	256
Haripur	96.1	3.8	0.0	0.0	100	905
Karak	11.8	88.2	0.0	0.0	100	402
Kohat	73.2	26.7	0.1	0.0	100	1,411
Kohistan	90.2	6.1	3.7	0.0	100	447
Lakki Marwat	92.2	7.8	0.0	0.0	100	476
Lower Dir	88.2	11.8	0.0	0.0	100	862
Malakand Protected Area	99.6	0.4	0.0	0.0	100	473
Mansehra	93.5	6.5	0.0	0.0	100	1,246
Mardan	97.0	2.8	0.1	0.0	100	2,646
Nowshera	99.2	0.6	0.2	0.0	100	1,039
Peshawar	94.2	5.7	0.2	0.0	100	5,256
Shangla	98.5	1.5	0.0	0.0	100	465
Swabi	99.6	0.4	0.0	0.0	100	1,194
Swat	97.5	2.5	0.0	0.0	100	1,409
Tank	96.9	2.6	0.2	0.0	100	255
Tor Ghar	56.1	43.0	0.9	0.0	100	161
Upper Dir	79.6	20.4	0.0	0.0	100	662

DQ.20: Presence of mother in the household and the person interviewed for the under-5 questionnaire

Distribution of children under five by whether the mother lives in the same household, and the person who was interviewed for the under-5 questionnaire, Khyber Pakhtunkhwa, *2016-17*

	Mother in the household	Mother not in the household			
		Father interviewed	Other adult female interviewed	Total	Number of children under 5
Total	99.4	.0	.6	100.0	21,063
Age					
0	99.4	0.0	.6	100.0	4,539
1	99.6	.0	.4	100.0	4,044
2	99.4	.0	.6	100.0	3,978
3	99.2	.0	.8	100.0	4,626
4	99.2	.0	.8	100.0	3,875

Table D. DQ.21: Selection of children age 1-17 years for the child labour and child discipline modules

Percent distribution of households by the number of children age 1-17 years, and the percentage of households with at least two children age 1-17 years where correct selection of one child for the child labour and child discipline modules was performed, Khyber Pakhtunkhwa, 2016-17

	Number of children age 1-17 years					Percentage of households where correct selection was performed	Number of households with 2 or more children age 1-17 years
	None	One	Two or more	Total	Number of households		
KP	11.1	12.2	76.8	100.0	20,995	98.6	16,122
Area of residence							
Urban	14.6	15.1	70.3	100.0	3672	98.8	2582
Rural	10.3	11.5	78.2	100.0	17323	98.6	13,540
Wealth index quintile							
Poorest	8.7	9.6	81.7	100.0	4136	98.8	3,381
Second	10.4	9.9	79.8	100.0	4138	98.4	3,301
Middle	10.7	11.5	77.9	100.0	4120	98.7	3,208
Fourth	10.9	14.0	75.2	100.0	4255	98.5	3,199
Richest	14.5	15.7	69.8	100.0	4345	98.7	3,033
Division							
Bannu	8.4	8.9	82.7	100.0	1195	97.8	987
D.I. Khan	10.0	11.6	78.3	100.0	1352	98.1	1,059
Hazara	14.4	15.0	70.6	100.0	4336	98.6	3,060
Kohat	13.0	10.4	76.6	100.0	1411	98.8	1,081
Malakand	7.2	9.5	83.3	100.0	4799	98.6	3,996
Mardan	12.0	13.6	74.5	100.0	2646	98.9	1,970
Peshawar	11.6	12.9	75.5	100.0	5256	98.8	3,968
District							
Abbottabad	19.9	17.5	62.6	100	1,216	98.2	761
Bannu	8.4	8.9	82.7	100	1,195	97.8	987
Batagram	6.2	9.1	84.7	100	361	98.0	306
Buner	6.6	11.1	82.3	100	542	98.0	446
Charsadda	13.6	10.2	76.3	100	1,221	99.6	931
Chitral	10.7	16.5	72.8	100	386	98.3	281
D.I.Khan	9.9	11.5	78.6	100.0	1097	98.2	863
Hangu	4.9	8.3	86.8	100	256	97.5	223
Haripur	19.7	18.9	61.3	100	905	98.9	555
Karak	14.4	7.3	78.3	100	402	99.1	314
Kohat	13.0	10.4	76.6	100	1,411	98.8	1,081
Kohistan	2.4	1.4	96.2	100	447	98.0	430
Lakki Marwat	10.9	9.9	79.2	100	476	97.7	377
Lower Dir	6.7	7.0	86.3	100	862	98.7	744
Malakand Protected	7.6	8.8	83.6	100	473	98.5	395
Mansehra	12.9	16.7	70.4	100	1,246	99.5	878
Mardan	12.0	13.6	74.5	100	2,646	98.9	1,970
Nowshera	14.8	12.6	72.6	100	1,039	98.7	754
Peshawar	11.6	12.9	75.5	100	5,256	98.8	3,968
Shangla	8.9	12.2	78.8	100	465	98.8	367
Swabi	14.1	14.4	71.6	100	1,194	98.9	854
Swat	6.3	9.7	84.0	100	1,409	98.7	1,183
Tank	10.5	12.3	77.2	100	255	97.5	197
Tor Ghar	7.0	11.9	81.1	100	161	98.3	130
Upper Dir	6.6	5.8	87.5	100	662	98.8	580

DQ.22: School attendance by single age

Distribution of household population age 5-24 years by educational level and grade attended in the current (or most recent) school year, Khyber Pakhtunkhwa, *2016-17*

								Currently attending								
								Middle School Grade			Martric Grade		Above Martric Grade			Number of household members
	Not attending school	Preschool	Primary school Grade											DK/ Missing	Total	
Age at beginning of school year			1	2	3	4	5	1	2	3	1	2				
5	42.7	33.8	16.8	5.7	.8	.1	0.0	.0	0.0	0.0	.1	0.0	0.0	0.0	100.0	4,745
6	27.5	22.6	24.6	19.0	4.9	1.0	.3	.1	0.0	0.0	.0	0.0	0.0	0.0	100.0	4,842
7	22.8	11.0	18.4	26.2	15.9	4.4	1.0	.2	.0	.0	0.0	0.0	0.0	0.0	100.0	4,843
8	18.2	5.2	11.4	23.4	23.6	13.0	3.9	.8	.2	.2	0.0	0.0	.0	.0	100.0	3,951
9	21.0	2.5	5.7	14.5	19.2	19.6	13.5	3.4	.5	.1	.0	.0	.0	0.0	100.0	4,572
10	19.9	1.3	3.0	8.7	13.6	19.4	19.3	10.1	3.5	1.0	.2	.0	.0	0.0	100.0	3,906
11	25.1	.4	1.3	3.7	7.6	12.9	17.2	15.7	11.1	4.5	.3	.1	.0	0.0	100.0	4,465
12	30.3	.0	.6	1.5	4.1	6.8	11.9	12.5	16.0	12.0	3.3	.7	.1	.0	100.0	4,148
13	35.1	.1	.3	.7	1.9	2.9	6.6	9.0	11.9	16.2	11.3	3.9	.2	.0	100.0	4,042
14	38.4	.1	.3	.3	.8	1.5	3.7	4.7	7.2	12.7	16.2	12.8	1.3	.1	100.0	3,755
15	46.8	0.0	.1	.1	.3	1.1	1.3	2.9	4.2	8.3	11.7	17.0	6.2	.0	100.0	3,552
16	49.8	0.0	.1	.1	.0	.2	.8	.9	2.4	4.9	6.8	15.9	18.1	.0	100.0	3,219
17	63.8	0.0	.1	.0	.2	.1	.4	.6	1.2	2.1	3.8	7.1	20.6	0.0	100.0	3,822
18	67.6	.1	0.0	.0	.0	.2	.1	.5	.5	1.1	1.9	4.2	23.8	0.0	100.0	3,021
19	78.0	0.0	0.0	.0	0.0	.1	.1	.2	.3	.3	1.4	2.1	17.5	0.0	100.0	3,213
20	79.4	0.0	0.0	.0	0.0	.1	0.0	.0	.1	.6	.4	1.2	18.3	0.0	100.0	2,422
21	86.1	.0	0.0	0.0	.0	0.0	.1	.0	0.0	.3	.3	.9	12.2	0.0	100.0	2,853
22	88.0	.0	0.0	.0	0.0	0.0	0.0	0.0	.0	.0	.1	.8	10.9	.0	100.0	2,506
23	92.1	.3	0.0	0.0	0.0	0.0	0.0	0.0	.0	0.0	.3	.3	6.9	0.0	100.0	2,341
24	91.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	.3	8.5	0.0	100.0	409

*Levels and grades are adapted to the system in Khyber Pakhtunkhwa.*

Age at the beginning of the school year is calculated from dates of birth of household members (If included, HL5) or by rejuvenating household members based on the date of the survey, the date of start of the school year, and completed age at the time of survey. Levels and grades refer to the current school year, or the most recent school year if data collection was completed between school years (ED6).

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, Khyber Pakhtunkhwa, *2016-17*

	Children Ever Born			Children Living			Children Deceased			
	Sons	Daughters	Sex ratio at birth	Sons	Daughters	Sex ratio	Sons	Daughters	Sex ratio	Number of women
KPI	46063	42961	1.07	42744	40031	1.07	3320	2931	1.13	36,703
Age										
15-19	405	375	1.08	385	361	1.06	20	13	1.51	7,984
20-24	2471	2340	1.06	2309	2206	1.05	162	134	1.21	6,515
25-29	7066	6595	1.07	6584	6219	1.06	482	376	1.28	6,897
30-34	8460	7925	1.07	7896	7426	1.06	564	499	1.13	4,899
35-39	9857	9098	1.08	9203	8533	1.08	654	565	1.16	4,252
40-44	8527	8080	1.06	7859	7497	1.05	668	583	1.15	3,173
45-49	9278	8550	1.09	8508	7788	1.09	770	762	1.01	2,983

Figure DQ.1: **Household population by single ages, KP-MICS, 2016-17**
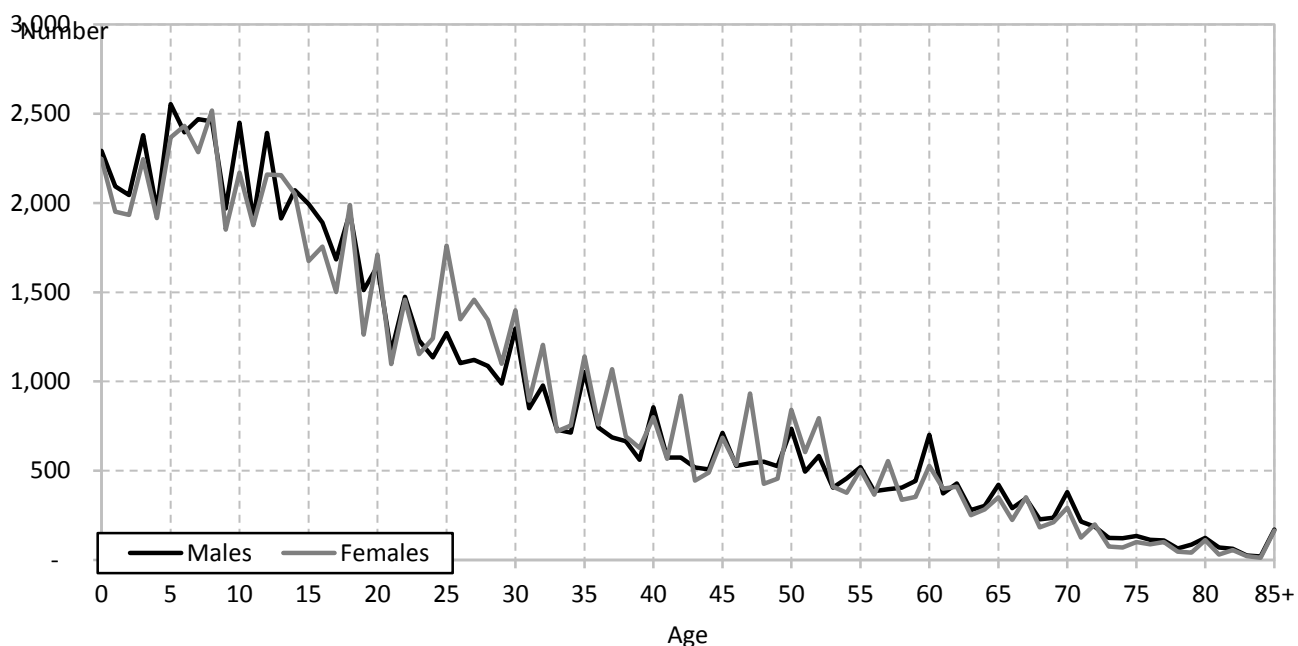
Note: The figure excludes ## household members with unknown age and/or sex

Figure DQ.2: **Weight and height/length measurements by digits reported for the decimal points, KP-MICS, 2016-17**
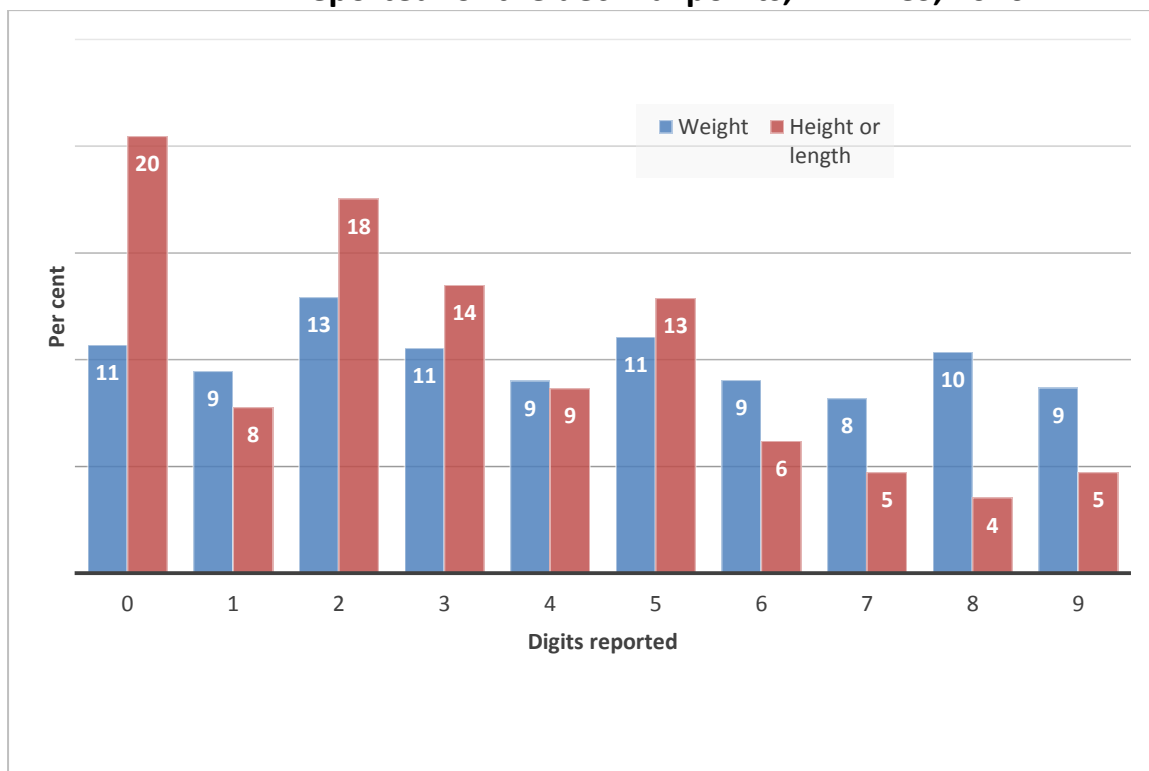
XXI. Appendix F: KP-MICS, 2016-17 Indicators: numerators and denominators

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
1. MORTALITY [78]					
1.2	Infant mortality rate	CM	Probability of dying between birth and the first birthday		4.2/3.2.1
1.5	Under-five mortality rate	CM	Probability of dying between birth and the fifth birthday		4.1/---
2. NUTRITION					
2.1a 2.1b	Underweight prevalence	AN	Number of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median weight for age of the WHO standard	Total number of children under age 5	1.8/---
2.2a 2.2b	Stunting prevalence	AN	Number of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median height for age of the WHO standard	Total number of children under age 5	---/2.2.1
2.3a 2.3b	Wasting prevalence	AN	Number of children under age 5 who fall below (a) minus two standard deviations (moderate and severe) (b) minus three standard deviations (severe) of the median weight for height of the WHO standard	Total number of children under age 5	-----/2.2.1

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[76] Some indicators are constructed by using questions in several modules in the MICS questionnaires. In such cases, only the module(s) which contains most of the necessary information is indicated.

[77] Millennium Development Goals (MDG) indicators, effective 15 January 2008 - http://mdgs.un.org/unsd/mdg/Host.aspx?Content=Indicators/OfficialList.htm, accessed 10 June 2013.

[78] The indicators are estimated indirectly (using the Fertility module only).

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
2.3a 2.3b	Wasting prevalence	AN	Number of children under age 5 who fall below (c) minus two standard deviations (moderate and severe) (d) minus three standard deviations (severe) of the median weight for height of the WHO standard	Total number of children under age 5	-----/2.2,2
2.4	Overweight prevalence	AN	Number of children under age 5 who are above two standard deviations of the median weight for height of the WHO standard	Total number of children under age 5	-----/2.2,2
2.5	Children ever breastfed	MN	Number of women with a live birth in the last 2 years who breastfed their last live-born child at any time	Total number of women with a live birth in the last 2 years	
2.6	Early initiation of breastfeeding	MN	Number of women with a live birth in the last 2 years who put their last newborn to the breast within one hour of birth	Total number of women with a live birth in the last 2 years	
2.7	Exclusive breastfeeding under 6 months	BD	Number of infants under 6 months of age who are exclusively breastfed[79]	Total number of infants under 6 months of age	
2.8	Predominant breastfeeding under 6 months	BD	Number of infants under 6 months of age who received breast milk as the predominant source of nourishment[80] during the previous day	Total number of infants under 6 months of age	
2.9	Continued breastfeeding at 1 year	BD	Number of children age 12-15 months who received breast milk during the previous day	Total number of children age 12-15 months	

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

[80] *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)*

MICS INDICATOR		Module[76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
2.10	Continued breastfeeding at 2 years	BD	Number of children age 20-23 months who received breast milk during the previous day	Total number of children age 20-23 months	
2.11	Duration of breastfeeding	BD	The age in months when 50 percent of children age 0-35 months did not receive breast milk during the previous day		
2.12	Age-appropriate breastfeeding	BD	Number of children age 0-23 months appropriately fed[81] during the previous day	Total number of children age 0-23 months	
2.13	Introduction of solid, semi-solid or soft foods	BD	Number of infants age 6-8 months who received solid, semisolid or soft foods during the previous day	Total number of infants age 6-8 months	
2.14	Milk feeding frequency for non-breastfed children	BD	Number of non-breastfed children age 6-23 months who received at least 2 milk feedings during the previous day	Total number of non-breastfed children age 6-23 months	
2.15	Minimum meal frequency	BD	Number of children age 6-23 months who received solid, semisolid and soft foods (plus milk feeds for non-breastfed children) the minimum number of times[82] or more during the previous day	Total number of children age 6-23 months	
2.16	Minimum dietary diversity	BD	Number of children age 6-23 months who received foods from 4 or more food groups[83] during the previous day	Total number of children age 6-23 months	
2.17a 2.17b	Minimum acceptable diet	BD	(a) Number of breastfed children age 6–23 months who had at least the minimum dietary diversity and the minimum meal frequency during the previous day	(a) Number of breastfed children age 6–23 months	

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[81] *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*

[82] *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*

[83] *The indicator is based on consumption of any amount of food from at least 4 out of the 7 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*

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
			(b) Number of non-breastfed children age 6–23 months who received at least 2 milk feedings and had at least the minimum dietary diversity not including milk feeds and the minimum meal frequency during the previous day	(b) Number of non-breastfed children age 6–23 months	
2.18	Bottle feeding	BD	Number of children age 0-23 months who were fed with a bottle during the previous day	Total number of children age 0-23 months	
2.19	Iodized salt consumption	SI	Number of households with salt testing 15 parts per million or more of iodate	Total number of households in which salt was tested or where there was no salt	
2.20	Low-birthweight infants	MN	Number of most recent live births in the last 2 years weighing below 2,500 grams at birth	Total number of most recent live births in the last 2 years	
2.21	Children's vitamin A supplementation	NU	Number of children who received vitamin during the last six months	Total number of children age 6-59 months	
3. CHILD HEALTH					
3.1	Tuberculosis immunization coverage	IM	Number of children age 12-23 months who received BCG vaccine by their first birthday	Total number of children age 12-23 months	
3.2	Polio immunization coverage	IM	Number of children age 12-23 months who received the third dose of OPV vaccine (OPV3) by their first birthday	Total number of children age 12-23 months	

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
3.3	Diphtheria, pertussis and tetanus (DPT) / PENTA/ Hepatitis B/ Haemophilus influenzae type B (Hib) immunization coverage	IM	Number of children age 12-23 months who received the third dose of DPT / PENTA vaccine (DPT3 / PENTA 3)/ Hepatitis B vaccine (HepB3)/ Hib vaccine (Hib3) by their first birthday	Total number of children age 12-23 months	
3.4	Measles immunization coverage[9]	IM	Number of children age 12-23 months who received measles vaccine by their first birthday	Total number of children age 12-23 months	4.3/---
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 age 12-23 months	
3.9	Neonatal tetanus protection	MN	Number of women age 15-49 years with a live birth in the last 2 years who were given at least two doses of tetanus toxoid vaccine within the appropriate interval10 prior to the most recent birth	Total number of women age 15-49 years with a live birth in the last 2 years	
3.10	Care-seeking for diarrhoea	CA	Number of children under age 5 with diarrhoea in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	Total number of children under age 5 with diarrhoea in the last 2 weeks	
3.11	Diarrhoea treatment with oral rehydration salts (ORS) and zinc	CA	Number of children under age 5 with diarrhoea in the last 2 weeks who received ORS and zinc	Total number of children under age 5 with diarrhoea in the last 2 weeks	
3.12	Diarrhoea treatment with oral rehydration therapy (ORT) and continued feeding	CA	Number of children under age 5 with diarrhoea in the last 2 weeks who received ORT (ORS packet, pre-packaged ORS fluid, 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 last 2 weeks	

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
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	
3.20	Care-seeking for fever	CA	Number of children under age 5 with fever in the last 2 weeks for whom advice or treatment was sought from a health facility or provider	Total number of children under age 5 with fever in the last 2 weeks	
3.22	Anti-malarial treatment of children under age 5	CA	Number of children under age 5 with fever in the last 2 weeks who received any antimalarial treatment	Total number of children under age 5 with fever in the last 2 weeks	6.8/---
3.23	Treatment with Artemisinin-based Combination Therapy (ACT) among children who received anti-malarial treatment	CA	Number of children under age 5 with fever in the last 2 weeks who received ACT (or other first-line treatment according to national policy)	Total number of children under age 5 with fever in the last 2 weeks who received any anti-malarial drugs	
3.25	Intermittent preventive treatment for malaria during pregnancy	MN	Number of women age 15-49 years who received three or more doses of SP/Fansidar, at least one of which was received during an ANC visit, to prevent malaria during their last pregnancy that led to a live birth in the last 2 years	Total number of women age 15-49 years with a live birth in the last 2 years	

4	WATER AND SANITATION

	MICS INDICATOR	Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
4.1	Use of improved drinking water sources	WS	Number of household members using improved sources of drinking water	Total number of household members	7.8 /6.1.1
4.2	Water treatment	WS	Number of household members in households 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	- 7.9/6.2.1
4.4	Safe disposal of child's faeces	CA	Number of children age 0-2 years whose last stools were disposed of safely	Total number of children age 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	-----/6.2.1
5	**REPRODUCTIVE HEALTH**				
5.S1	Contents of antenatal care (All four)	MN	Number of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured, weight measured and gave urine and blood samples during the last pregnancy that led to a live birth	Total number of women age 15-49 years with a live birth in the last 2 years	

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
5.S2	Care provided by Lady Health Worker (LHW)	RH	Number of women ever married aged 15–49 years who have given birth in the previous 2 years and were visited by a Lady Health Worker (LHW) in the last month	Total number of women surveyed ever married aged 15–49 years	
5.1	Adolescent birth rate[84]	CM	Age-specific fertility rate for women age 15-19 years		5.4/3.7.2
5.2	Early childbearing	CM	Number of women age 20-24 years who had at least one live birth before age 18	Total number of women age 20-24 years	
5.3	Contraceptive prevalence rate	CP	Number of women age 15-49 years currently married who are using (or whose husband is using) a (modern or traditional) contraceptive method	Total number of women age 15-49 years who are currently married	5.3/---
5.4	Unmet need[12]	UN	Number of women age 15-49 years who are currently married 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 age 15-49 years who are currently married	- 5.6/13.7.1
5.5a 5.5b	Antenatal care coverage	MN	Number of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth (a) at least once by skilled health personnel (b) at least four times by any provider	Total number of women age 15-49 years with a live birth in the last 2 years	5.5/---
5.6	Content of antenatal care	MN	Number of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples during the last pregnancy that led to a live birth	Total number of women age 15-49 years with a live birth in the last 2 years	

[84] *Tthe rate refers to the last one year* [12] *See the MICS tabulation plan for a detailed description*

	MICS INDICATOR	Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
5.7	Skilled attendant at delivery	MN	Number of women age 15-49 years with a live birth in the last 2 years who were attended by skilled health personnel during their most recent live birth	Total number of women age 15-49 years with a live birth in the last 2 years	5.2/3.1.2
5.8	Institutional deliveries	MN	Number of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered in a health facility	Total number of women age 15-49 years with a live birth in the last 2 years	
5.9	Caesarean section	MN	Number of women age 15-49 years whose most recent live birth in the last 2 years was delivered by caesarean section	Total number of women age 15-49 years with a live birth in the last 2 years	
5.10	Post-partum stay in health facility	PN	Number of women age 15-49 years who stayed in the health facility for 12 hours or more after the delivery of their most recent live birth in the last 2 years	Total number of women age 15-49 years with a live birth in the last 2 years	
5.11	Post-natal health check for the newborn	PN	Number of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery	Total number of last live births in the last 2 years	
5.12	Post-natal health check for the mother	PN	Number of women age 15-49 years who received a health check while in facility or at home following delivery, or a postnatal care visit within 2 days after delivery of their most recent live birth in the last 2 years	Total number of women age 15-49 years with a live birth in the last 2 years	

6	CHILD DEVELOPMENT				
6.1	Attendance to early childhood education	EC	Number of children age 36-59 months who are attending an early childhood education programme	Total number of children age 36-59 months	

	MICS INDICATOR	Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
6.2	Support for learning	EC	Number of children age 36-59 months with whom an adult has engaged in four or more activities to promote learning and school readiness in the last 3 days	Total number of children age 36-59 months	
6.3	Father's support for learning	EC	Number of children age 36-59 months whose father has engaged in four or more activities to promote learning and school readiness in the last 3 days	Total number of children age 36-59 months	
6.4	Mother's support for learning	EC	Number of children age 36-59 months whose mother has engaged in four or more activities to promote learning and school readiness in the last 3 days	Total number of children age 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 last week	Total number of children under age 5	
6.8	Early child development index	EC	Number of children age 36-59 months who are developmentally on track in literacy-numeracy, physical, social emotional, and learning domains	Total number of children age 36-59 months	-----/4.2.1
7	**LITERACY AND EDUCATION**				
7.S1	Literacy rate 10+ *(Reported)*	HL	Number of household members age 10 years or older where it is reported that they are able to both read & write with	Total household members age 10 year or older surveyed	

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
			understanding in any language excluding Quranic reading, if this was the only response		
7.S2	Literacy rate 15+ *(Reported)*	HL	Number of household members age 15 years or older where it is reported that they are able to both read & write with understanding in any language excluding quranic reading, if this was the only response.	Total household members age 15 year or older surveyed	
7.S3	Literacy rate 15-24 Years *(Reported)*	HL	Number of household members' age 15-24 years where it is reported that they are able to both read & write with understanding in any language excluding quranic reading, if this was the only response.	Total household members age 15-24 years or older surveyed	
7.S4	Government school attendance rate (Primary)	ED	Number of children aged 5-9 years attending Government primary schools	Total number of children aged 5-9 years attending primary schools	
7.1	Literacy rate among young women	WB	Number of women age 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 age 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	2.1/---

MICS INDICATOR		Module 76	Numerator	Denominator	MDG/SDG Indicator Reference[77]
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	
7.6	Children reaching last grade of primary	ED	Proportion of children entering the first grade of primary school who eventually reach last grade		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	
7.9	Gender parity index (primary school)	ED	Primary school net attendance ratio (adjusted) for girls	Primary school net attendance ratio (adjusted) for boys	3.1/4.5.1
7.10	Gender parity index (secondary school)	ED	Secondary school net attendance ratio (adjusted) for girls	Secondary school net attendance ratio (adjusted) for boys	3.1/---

8   CHILD PROTECTION

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
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 age 5-17 years who are involved in child labour[85]	Total number of children age 5-17 years	------/8.7.1
8.3	Violent discipline	CD	Number of children age 1-14 years who experienced psychological aggression or physical punishment during the last one month	Total number of children age 1-14 years	------/16.1.1
8.4	Marriage before age 15	MA	Number of women age 15-49 years who were first married age 15	Total number of women age 15-49 years	------/5.3.1
8.5	Marriage before age 18	MA	Number of women age 20-49 years who were first married before age 18	Total number of women age 20-49 years	------/5.3.1
8.6	Young women age 15-19 years currently married	MA	Number of women age 15-19 years who are married	Total number of women age 15-19 years	
8.8a 8.8b	Spousal age difference	MA	Number of women who are married and whose spouse is 10 or more years older, (a) among women age 15-19 years, (b) among women age 20-24 years	Total number of women who are married (a) age 15-19 years, (b) age 20-24 years	

[85] 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. See the MICS tabulation plan for more detailed information on thresholds and classifications [14] Using condoms and limiting sex to one faithful, uninfected husband

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
8.12	Attitudes towards domestic violence	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 age 15-49 years	
8.14	Prevalence of children with one or both parents dead	HL	Number of children age 0-17 years with one or both biological parents dead	Total number of children age 0-17 years	
8.15	Children with at least one parent living abroad	HL	Number of children 0-17 years with at least one biological parent living abroad	Total number of children 0-17 years	
9	**HIV/AIDS[86]**				
9.S1	Knowledge about HIV prevention among young women	HA	Number of women ever married age 15-24 years who correctly identify ways of preventing the sexual transmission of HIV[14], and who reject major misconceptions about HIV transmission	Total number of women ever married age 15-24 years	
9.S2	Knowledge of mother-to-child transmission of HIV	HA	Number of women ever married age 15-49 years who correctly identify all three means[87] of mother-to-child transmission of HIV	Total number of women ever married age 15-49 years	

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[86] All questions in this module were asked from Ever-married women age 15-49 years ONLY

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

MICS INDICATOR		Module 76	Numerator	Denominator	MDG/SDG Indicator Reference 77
9.S3	Accepting attitudes towards people living with HIV	HA	Number of women ever married age 15-49 years expressing accepting attitudes on all four questions[88] toward people living with HIV	Total number of women ever married age 15-49 years who have heard of HIV	
9.S4	Women who know where to be tested for HIV	HA	Number of women ever married age 15-49 years who state knowledge of a place to be tested for HIV	Total number of women ever married age 15-49 years	
9.S5	Women who have been tested for HIV and know the results	HA	Number of women ever married age 15-49 years who have been tested for HIV in the last 12 months and who know their results	Total number of women ever married age 15-49 years	
9.S7	HIV counselling during antenatal care	HA	Number of women ever married age 15-49 years who had a live birth in the last 2 years and received antenatal care during the pregnancy of their most recent birth, reporting that they received counselling on HIV during antenatal care	Total number of women ever married age 15-49 years who had a live birth in the last 2 years	
9.S8	HIV testing during antenatal care	HA	Number of women age 15-49 years who had a live birth in the last 2 years and received antenatal care during the pregnancy of their most recent birth, reporting that they were offered and accepted an HIV test during antenatal care and received their results	Total number of women age 15-49 years who had a live birth in the last 2 years	
10	ACCESS TO MASS MEDIA AND USE OF INFORMATION/COMMUNICATION TECHNOLOGY				

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[88] *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*

MICS INDICATOR		Module [76]	Numerator	Denominator	MDG/SDG Indicator Reference[77]
10.1	Exposure to mass media	MT	Number of women age 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 age 15-49 years	
10.2	Use of computers	MT	Number of young women age 15-24 years who used a computer during the last 12 months	Total number of women age 15-24 years	
10.3	Use of internet	MT	Number of young women age 15-24 who used the internet during the last 12 months	Total number of women age 15-24 years	
11	**SUBJECTIVE WELL-BEING**				
11.1	Life satisfaction	LS	Number of women age 15-24 years who are very or somewhat satisfied with their life, overall	Total number of women age 15-24 years	
11.2	Happiness	LS	Number of women age 15-24 years who are very or somewhat happy	Total number of women age 15-24 years	
11.3	Perception of a better life	LS	Number of women age 15-24 years whose life improved during the last one year, and who expect that their life will be better after one year	Total number of women age 15-24 years	------/5.b.1
15.	**POVERTY**				
15.1	Multidimensional Poverty		Proportion of men, women and children of all ages living in poverty in all its dimensions, by selected measures of multidimensional poverty.	SDG 1.2.2	------/1.2.2