2000 AFGHANISTAN
Multiple Indicator Cluster Survey
(MICS2)
Vol. 1

Situation Analysis of Children and Women in the East of Afghanistan

September 2001

By

Afghanistan MICS2 Steering Committee

ICONS (Institution Consultancy Services), SHAIP Islamabad, Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH

UNICEF Afghanistan Country Office
NOTE: Definitions in This Report

East of Afghanistan

This is an arbitrary term used to represent the following areas covered by the survey in 2000:

*Eastern region (all provinces)*
- Nangarhar, Konar and Laghman provinces

*South-Eastern region (all provinces)*
- Ghazni, Paktika and Paktya provinces

*Two provinces of Central region*
- Logar and Wardak provinces

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**Eastern region**
- Nangarhar, Konar and Laghman provinces

**South-Eastern region**
- Ghazni, Paktika and Paktya provinces
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Foreword

Many people have contributed to the process of completing this report. We are especially thankful to Afghan people who took their time to respond to our numerous questions. We will always admire their perseverance and hard work against all odds, and we hope that this report will somehow benefit them. We are also grateful to our survey team members, particularly enumerators (see Appendix D), who worked hard to collect data in very difficult conditions. It is worth mentioning that the Central Statistics Office of the Islamic Emirate of Afghanistan extended support to the implementation of the survey in the field.

Special thanks are due to GTZ team. For data analysis, we are indebted to Rizwan Afzal who worked tirelessly to produce tables presented in this report. For overall coordination and report writing, we thank Simon Azariah for patiently working with M&E Officer until this report was finalized. We appreciate Aimé De Muynck for his technical advice.

We are grateful to Afghanistan MICS2 Steering Committee members who finalized the questionnaires and guided the survey. They are Shon Campbell, Anwarul Haq (Ibn Sina, Peshawar), Rahila Hashem (UNCHS, Islamabad), Carol le Duc (Swedish Committee for Afghanistan, Peshawar), Altaf Musani (WHO, Islamabad), Martin Rimmer (Oxford Policy Management, Islamabad), Andrew Ross (UNDP-ProMIS, Islamabad), and Shirazuddin Siddiqi (BBC, Peshawar). They made sure to put this survey in Afghan context, while ensuring international comparability.

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The scope of the current report is limited to the East of Afghanistan. We hope that we will be able to assess the situation of children and women in the rest of the country soon.

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Dr. Ehsanullah Tarin led the field team in Afghanistan, in addition to his contribution in selection and training of the field team members. He exhibited immense fortitude in face of all the hardships of field activity in Afghanistan. Dr. Iftikhar Elahi and Dr. Wassaf Syed assisted in selecting, training and leading the field team members and their efforts and resilience are highly appreciated. Special thanks are due to Mr. Omar Anwarzay and his team at ACBAR (Agency Coordinating Body for Afghan Relief) in Peshawar for their support throughout the survey.

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Mr. Rizwan Afzal and his team took care of the data entry and analysis process in Islamabad. Their professional support, pivotal to the development of this report, is highly appreciated.

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Executive Summary

The 2000 Afghanistan Multiple Indicator Cluster Survey (MICS2) is supposed to be a nationally representative survey of households, women, and children. The main objectives of the survey are to provide up-to-date information for assessing the situation of children and women in Afghanistan at the end of the decade and to furnish data needed for monitoring progress toward goals established at the World Summit for Children and as a basis for future action. However, due to internal socio-political issues in Afghanistan, only 22 clusters out of 97 have been surveyed (Appendix B).

The following results, thus, have been drawn from survey in 22 clusters in the East of Afghanistan, which fall in the following provinces grouped on regional basis:

<table>
<thead>
<tr>
<th>Region</th>
<th>Province</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern region (all provinces)</td>
<td>Nangarher</td>
</tr>
<tr>
<td></td>
<td>Konar</td>
</tr>
<tr>
<td></td>
<td>Laghman</td>
</tr>
<tr>
<td>South-Eastern region (all provinces)</td>
<td>Ghazni</td>
</tr>
<tr>
<td></td>
<td>Paktika</td>
</tr>
<tr>
<td></td>
<td>Paktya</td>
</tr>
<tr>
<td>Central region (partial)</td>
<td>Logar</td>
</tr>
<tr>
<td></td>
<td>Wardak</td>
</tr>
</tbody>
</table>

Incidentally all areas surveyed were rural and therefore the results do not speak of the urban conditions in East of Afghanistan.

Infant and Under Five Mortality

- Distortions in the MICS2 data on deaths among children preclude obtaining estimates of very recent mortality rates. The data suggests that the infant mortality rate was 113 per 1000 and the under five mortality rate was 165 per 1000 around 1995.

Education

- Less than thirty percent of children of primary school age in East of Afghanistan are attending primary school. As a whole the ratio of females attending primary school is considerably lower than that of males.
- Less than one-third (30 percent) of the population over age 15 years is literate in the East of Afghanistan. Only 6 percent of females are literate as compared to 53 percent of males and the literacy rate generally declines with increasing age but increases slightly at the 65 years and above age group.

Water and Sanitation

- Fifty-seven percent of the population in Eastern region and 36 percent in South-Eastern region has access to safe drinking water. The condition of drinking water sources is particularly poor in the South-Eastern region where more than 70 percent of water sources are unprotected.
- Less than half of the population (Forty-two percent females and 34 percent males in the South-Eastern region; 40 percent females and 28 percent males in the Eastern region) is living in households with sanitary means of excreta disposal.

Child Malnutrition

- Ten percent of children under age five are wasted or too thin for their height. Due to small sample size and the age not being recorded properly, the measures of stunting and underweight are not very reliable.
Breastfeeding
- Of children aged under four months, approximately 33 percent in South-Eastern region and 22 percent in Eastern region are exclusively breastfed, a level considerably lower than recommended. At age 6-9 months, 65 percent of children in South-Eastern region and 45 percent of children in Eastern region are receiving breast milk and solid or semi-solid foods. By age 20-23 months, 33 percent in South-Eastern region and 27 percent in Eastern region continue to be breastfed.

Salt Iodization
- Ninety-eight percent of households in the East of Afghanistan do not have adequately iodized (15+ PPM) salt. This picture is homogenous in all the surveyed areas.

Vitamin A Supplementation
- In the East of Afghanistan, within the six months prior to MICS2, 26 percent of children aged 6-59 months received a high dose Vitamin A supplement. While only 1 percent received a dose prior to that time, approximately 71 percent had never received a supplement of high dose of Vitamin A.

Night Blindness
- Of children of age 24-59 months, less than 1 percent in the South-Eastern region and 1 percent in the Eastern region, are reported to be suffering from night blindness.

Immunization Coverage
- Of children aged 12-23 months 59 percent in the South-Eastern region and 89 percent in the Eastern region have received a BCG vaccination and the first dose of DPT has been given to 51 percent children in South-Eastern region and 86 percent children in Eastern region. The percentage declines for subsequent doses of DPT to 37 percent in South-Eastern region and 76 percent in Eastern region for the second dose, and 28 percent in South-Eastern region 61 percent in Eastern region and for the third dose.
- Similarly, 78 percent of children in South-Eastern region and 95 percent in Eastern region have received Polio 1 by age and this declines to 41 percent in South-Eastern region and 72 percent in Eastern region by the third dose. The coverage for measles vaccine is lower than for the other vaccines at 34 percent in South-Eastern region and 77 percent in Eastern region.
- Only 19 percent in South-Eastern region and 47 percent in Eastern region of children age 12-23 months have all eight recommended vaccinations. Male and female children are vaccinated at roughly the same rate.

Diarrhea
- Fifty percent of children under-five had an episode of diarrhea during the two weeks prior to the survey in the East of Afghanistan. Almost all of these children with diarrhea receive one or more of the recommended home treatments (i.e., were treated with ORS or RHF).
- Fifty percent in South-Eastern region and 26 percent in Eastern region, of under-five children with diarrhea, receive increased fluids and continue eating as recommended.
- The average number of episodes of diarrhea in children under five years of age is estimated to be 13 episodes per year per child, which is extremely high.

Acute Respiratory Infection
- Eighteen percent of under five children had an acute respiratory infection in the East of Afghanistan in the two weeks prior to the survey. Approximately 68 percent of these children were taken to an appropriate healthcare provider.
IMCI Initiative
- In the East of Afghanistan 63 percent of under-five children were reported to have had diarrhea or some other illness in the two weeks preceding the MICS. Of these 45 percent children in South-Eastern region in contrast to only 23 percent in the Eastern region received increased fluids and continued eating as recommended under the IMCI programme.
- Seventy-two percent of mothers / caretakers in the East of Afghanistan know at least two of the signs for which a child should be taken immediately to a health facility.

Contraception
- Current use of contraception is reported by 2 percent of married women in South-Eastern region and 8 percent of married women in the Eastern region. The highest level of contraception though appears to be caused by lactational amenorrhea, 22 percent, which has not been included in either modern or traditional methods of contraception for this report as it because whether the women with lactational amenorrhea are consciously relying on the amenorrhea as a contraceptive mechanism or is it simply that they could not conceive due to the amenorrhea, has not been explored.

Prenatal Care
- A little more than half of the women with recent births in East of Afghanistan are protected against neonatal tetanus. 46 percent of these women have received two doses during the last three years. Women with some education are more likely to be protected against tetanus at 71 percent as compared to those who have no education at 55 percent.
- Sixty-four percent of women in the South-Eastern region and 43 percent in the Eastern region do not receive any type of prenatal care. Of the women who do receive prenatal care, 32 percent in the South-Eastern region and 41 percent in the Eastern region receive it from skilled personnel (doctor, nurse, midwife).

Assistance at Delivery
- A doctor, nurse, or midwife delivers only about 12 percent of births in the East of Afghanistan, while 65 percent of women in the South-Eastern region and 50 percent in the Eastern region are assisted by relatives or friends at their delivery.

Anemia
- Of women aged 12-49 years, 55 percent pregnant women in the South-Eastern region and 91 percent pregnant women in the Eastern region are anemic. In the same age group 83 percent non-pregnant women in the South-Eastern region and 95 percent non-pregnant women in the Eastern region are anaemic.

Birth Certification
- In the absence of a system for birth registration in Afghanistan, the birth certification done by the personnel attending at delivery has been explored. Births of only 2 percent of children in the South-Eastern region and 18 percent in the Eastern region, under five years of age have been certified.

Orphanhood and Living Arrangements of Children
- Ninety-four percent of children aged 0-14 are living with both parents in the East of Afghanistan. Children who are not living with a biological parent comprise 6 percent and children who have one or both parents dead amount to 4 percent of all children aged 0-14.
Child Labor

- About one percent of children aged 5-14 years engage in paid work. Less than one percent participate in unpaid work for someone other than a household member.
- Sixty-one percent of children engage in domestic tasks, such as cooking, fetching water, and caring for other children, for less than four hours a day, while 9 percent spend more than four hours a day on such tasks.

Disability

- About 2 percent of children under 18 years of age in the East of Afghanistan are found to have some kind of disability, in which physical disabilities are the highest at 91 percent in the South-Eastern region and 71 percent in the Eastern region. Seventy-three percent in the South-Eastern region and 65 percent in the Eastern region, of the children with disabilities received some kind of treatment at some point in their lives.

BBC Radio Listenership: ‘New Home, New Life’

- Sixty-four percent households in the South-Eastern region and 53 percent households in the Eastern region have transistor radios. Within the households with a radio, 67 percent of male adults in the South-Eastern region and 48 percent in the Eastern region listen to “New Home, New Life”, followed by female adults: 50 percent in the South-Eastern region and 38 percent in the Eastern region. For younger population 29 percent males and 22 percent of females listen to the programme in the East of Afghanistan. Also 16 percent children in the South-Eastern region and 13 percent children in the Eastern region listen to the BBC radio programmes.
## East of Afghanistan Summary Indicators

(Note: “Total East” includes South-Eastern and Eastern and partial Central regions)

<table>
<thead>
<tr>
<th>World Summit for Children Indicators</th>
<th>South-Eastern</th>
<th>Eastern</th>
<th>Total East</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under-five mortality rate</td>
<td></td>
<td></td>
<td>165 per 1000</td>
</tr>
<tr>
<td>Infant mortality rate</td>
<td></td>
<td></td>
<td>113 per 1000</td>
</tr>
<tr>
<td>Underweight prevalence</td>
<td>-3SD: 13.2%</td>
<td>-3SD: 13.9%</td>
<td>-3SD: 13.6%</td>
</tr>
<tr>
<td></td>
<td>-2SD: 42.9%</td>
<td>-2SD: 43.2%</td>
<td>-2SD: 41.2%</td>
</tr>
<tr>
<td>Stunting prevalence</td>
<td>-3SD: 22.8%</td>
<td>-3SD: 27.7%</td>
<td>-3SD: 24.6%</td>
</tr>
<tr>
<td></td>
<td>-2SD: 40.6%</td>
<td>-2SD: 46.6%</td>
<td>-2SD: 42.5%</td>
</tr>
<tr>
<td>Wasting prevalence</td>
<td>-3SD: 1.4%</td>
<td>-3SD: 10.1%</td>
<td>-3SD: 1.9%</td>
</tr>
<tr>
<td></td>
<td>-2SD: 9.1%</td>
<td>-2SD: 27.7%</td>
<td>-2SD: 9.9%</td>
</tr>
<tr>
<td>Use of safe drinking water</td>
<td>35.9%</td>
<td>56.5%</td>
<td>42.8%</td>
</tr>
<tr>
<td>Use of sanitary means of excreta disposal</td>
<td>Females: 42.1%</td>
<td>Females: 40.2%</td>
<td>Females: 48.4%</td>
</tr>
<tr>
<td></td>
<td>Males: 34.0%</td>
<td>Males: 27.5%</td>
<td>Males: 39.0%</td>
</tr>
<tr>
<td>Children reaching grade five</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Net primary school attendance rate</td>
<td>34.2%</td>
<td>26.8%</td>
<td>29.7%</td>
</tr>
<tr>
<td></td>
<td>(Female: 10.5%, Male: 56.4%)</td>
<td>(Female: 16.9%, Male: 36.1%)</td>
<td>(Female: 11.8%, Male: 46.6%)</td>
</tr>
<tr>
<td>Literacy rate</td>
<td>27.5%</td>
<td>31.8%</td>
<td>29.8%</td>
</tr>
<tr>
<td></td>
<td>(Female: 3.3%, Male: 50.9%)</td>
<td>(Female: 9.0%, Male: 53.1%)</td>
<td>(Female: 5.7%, Male: 52.6%)</td>
</tr>
<tr>
<td>Total child disability rate</td>
<td>1.4%</td>
<td>1.8%</td>
<td>1.5%</td>
</tr>
<tr>
<td>Contraceptive prevalence</td>
<td>2.2%</td>
<td>8.4%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Prenatal care</td>
<td>31.6%</td>
<td>40.9%</td>
<td>36.9%</td>
</tr>
<tr>
<td>Childbirth care</td>
<td>9.6%</td>
<td>12.7%</td>
<td>12.4%</td>
</tr>
<tr>
<td>Iron-deficiency anemia</td>
<td>Pregnant: 55.4%, Non-pregnant: 82.7%</td>
<td>Pregnant: 91.4%, Non-pregnant: 94.6%</td>
<td>Pregnant: 71.4%, Non-pregnant: 88.7%</td>
</tr>
<tr>
<td>Iodized salt consumption</td>
<td>0.6%</td>
<td>2.3%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Health Indicator</td>
<td>South-Eastern</td>
<td>Eastern</td>
<td>Total East</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>---------------</td>
<td>---------</td>
<td>------------</td>
</tr>
<tr>
<td>Children receiving Vitamin A supplementation</td>
<td>26.5%</td>
<td>26.1%</td>
<td>26.0%</td>
</tr>
<tr>
<td>Children with night blindness</td>
<td>0.4%</td>
<td>1.0%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Exclusive breastfeeding rate</td>
<td>32.7%</td>
<td>21.7%</td>
<td>30.6%</td>
</tr>
<tr>
<td>Timely complementary feeding rate</td>
<td>64.9%</td>
<td>44.7%</td>
<td>53.8%</td>
</tr>
<tr>
<td>Continued breastfeeding rate</td>
<td>80.6% (12-15)</td>
<td>87.5% (12-15)</td>
<td>86.3% (12-15)</td>
</tr>
<tr>
<td>DPT immunization coverage</td>
<td>27.7%</td>
<td>60.9%</td>
<td>45.3%</td>
</tr>
<tr>
<td>Measles immunization coverage</td>
<td>33.7%</td>
<td>77.2%</td>
<td>57.0%</td>
</tr>
<tr>
<td>Polio immunization coverage</td>
<td>41.0%</td>
<td>71.7%</td>
<td>57.8%</td>
</tr>
<tr>
<td>Tuberculosis immunization coverage</td>
<td>59.0%</td>
<td>89.1%</td>
<td>78.0%</td>
</tr>
<tr>
<td>Children protected against neonatal tetanus</td>
<td>57.0%</td>
<td>54.5%</td>
<td>55.5%</td>
</tr>
<tr>
<td>ORT use</td>
<td>99.1%</td>
<td>99.1%</td>
<td>99.1%</td>
</tr>
<tr>
<td>Home management of diarrhea</td>
<td>49.1%</td>
<td>25.5%</td>
<td>39.6%</td>
</tr>
<tr>
<td>Care seeking for acute respiratory infections</td>
<td>62.4%</td>
<td>75.6%</td>
<td>67.5%</td>
</tr>
<tr>
<td><strong>Indicators for Monitoring Children’s Rights, 2000</strong></td>
<td>South-Eastern</td>
<td>Eastern</td>
<td>Total East</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>---------------</td>
<td>--------</td>
<td>-----------</td>
</tr>
<tr>
<td>Birth certification</td>
<td>Proportion of under-five children whose births are reported certified by birth attendants</td>
<td>2.1%</td>
<td>17.6%</td>
</tr>
<tr>
<td>Children’s living arrangements</td>
<td>Proportion of children aged 0-14 years in households not living with a biological parent</td>
<td>7.7%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Orphans in household</td>
<td>Proportion of children aged 0-14 years who are orphans living in households</td>
<td>Both parents dead: 0.3 % Father only dead: 3.1%</td>
<td>Both parents dead: 0.3 % Father only dead: 2.7%</td>
</tr>
<tr>
<td>Child labor</td>
<td>Proportion of children aged 5-14 years who are currently working</td>
<td>21.9%</td>
<td>20.9%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Indicators for Monitoring IMCI, 2000</strong></th>
<th>South-Eastern</th>
<th>Eastern</th>
<th>Total East</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home management of illness</td>
<td>Proportion of under-five children reported ill during the last 2 weeks who received increased fluids and continued feeding</td>
<td>45.3%</td>
<td>23.1%</td>
</tr>
<tr>
<td>Care seeking knowledge</td>
<td>Proportion of caretakers of under-five children who know at least 2 signs for seeking care immediately</td>
<td>71.9%</td>
<td>79.0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Other Indicators, 2000</strong></th>
<th>South-Eastern</th>
<th>Eastern</th>
<th>Total East</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radio availability</td>
<td>Proportion of households that have a radio</td>
<td>64.2%</td>
<td>53.1%</td>
</tr>
<tr>
<td>BBC “New Home, New Life” listeners</td>
<td>Proportion of male adults who have access to a radio and listen to the BBC programme</td>
<td>66.7%</td>
<td>48.1%</td>
</tr>
<tr>
<td></td>
<td>Proportion of female adults who have access to a radio and listen to the BBC programme</td>
<td>49.8%</td>
<td>37.6%</td>
</tr>
<tr>
<td></td>
<td>Proportion of male youngsters who have access to a radio and listen to the BBC programme</td>
<td>28.7%</td>
<td>26.3%</td>
</tr>
<tr>
<td></td>
<td>Proportion of female youngsters who have access to a radio and listen to the BBC programme</td>
<td>19.0%</td>
<td>20.1%</td>
</tr>
<tr>
<td></td>
<td>Proportion of children who have access to a radio and listen to the BBC programme</td>
<td>15.9%</td>
<td>13.0%</td>
</tr>
<tr>
<td></td>
<td>Proportion of households with a radio in which nobody listens to the BBC programme</td>
<td>30.2%</td>
<td>48.9%</td>
</tr>
</tbody>
</table>

1 In the absence of a formal birth registration mechanism in Afghanistan, the presence or absence of birth certification has been estimated