# **Tanzania**

# Demographic and Health Survey 1996



Bureau of Statistics Planning Commission



Demographic and Health Surveys

Macro International Inc.

World Summit for Children J	potentia, Tangana 1990	
		Value
	BASIC INDICATORS	
Childhood mortality	Infant mortality rate Under-five mortality rate	88 per 1,000 137 per 1,000
Maternal mortality	Maternal mortality rate	529 per 100,000
Childhood undernutrition	Percent stunted Percent wasted Percent underweight	43.2 7.2 30.6
Clean water supply	Percent of households within 15 minutes of a safe water supply <sup>1</sup>	30.4
Sanitary excreta disposal	Percent of households with flush toilets or VIP latrines	2.8
Basic education	Percent of women 15-49 with completed primary education Percent of men 15-49 with completed primary education Percent of girls 6-12 attending school Percent of boys 6-12 attending school Percent of women 15-49 who are literate	51.7 60.5 39.6 36.5 65.4
Children in especially difficult situations	Percent of children who are orphans (both parents dead) Percent of children who do not live with their natural mother Percent of children who live in single adult households	0.6 19.4 6.1
	SUPPORTING INDICATORS	
Women's Health		
Birth spacing	Percent of births within 24 months of a previous birth	17.5
Safe motherhood	Percent of births with medical prenatal care Percent of births with prenatal care in first trimester Percent of births with medical assistance at delivery Percent of births in a medical facility Percent of hirths at high risk	89.3 11.1 46.7 46.5 57.9
Family planning	Contraceptive prevalence rate (any method, currently married women) Percent of currently married women with an unmet demand for family planning Percent of currently married women with an unmet need for family planning to avoid a high-risk hirth	18.4 23.9 19.8
Nutrition  Maternal nutrition	Percent of mothers with low BMI	9.2
Low birth weight	Percent of births at low birth weight (of those reporting numeric weight)	11.2
Breastfeeding	Percent of children under 4 months who are exclusively breastfed	38.5
Child Health		
Vaccinations	Percent of children whose mothers received tetanus toxoid vaccination during pregnancy Percent of children 12-23 months with measles vaccination Percent of children 12-23 months fully vaccinated	91.4 80.9 70.5
Diarrhea control	Percent of children with diarrhea in preceding 2 weeks who received oral rehydration therapy (sugar-salt-water solution)	50.4
Acute respiratory infection	Percent of children with acute respiratory infection in preceding 2 weeks who were seen by medical personnel	69.6

# Tanzania Demographic and Health Survey 1996

Bureau of Statistics Planning Commission Dar es Saalam, Tanzania

Macro International Inc. Calverton, Maryland USA

This report summarises the findings of the 1996 Tanzania Demographic and Health Survey (TDHS) conducted by the Bureau of Statistics, in collaboration with the Ministry of Health. Macro International Inc. provided technical assistance. Fundings for the TDHS were provided by the U.S. Agency for International Development (USAID) through the worldwide Demographic and Health Surveys programme.

The TDHS is part of the worldwide Demographic and Health Surveys (DHS) programme, which is designed to collect data on fertility, family planning, and maternal and child health.

Additional information about the TDHS may be obtained from the Bureau of Statistics, P.O. Box 796, Dar es Salaam, Tanzania (Telephone 051-111993). Additional information about the DHS programme may be obtained by writing to: DHS, Macro International Inc., 11785 Beltsville Drive, Suite 300, Calverton, MD 20705, USA (Telephone 301-572-0200; Fax 301-572-0999).

#### Recommended citation:

Bureau of Statistics [Tanzania] and Macro International Inc. 1997. *Tanzania Demographic and Health Survey 1996*. Calverton, Maryland: Bureau of Statistics and Macro International.

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#### **FOREWORD**

Similar to the 1991-92 Tanzania Demographic and Health Survey and the 1994 Tanzania Knowledge, Attitudes and Practices Survey (a subsample of the 1991-92 survey), the 1996 TDHS was a truly representative survey that utilised the sample frame and the same sample clusters that were covered in the first survey.

This report summarises basic information on fertility, mortality (infant, child, and maternal), contraceptive knowledge and use, and child bearing. It also looks at key maternal and child health indicators including the extent to which mothers utilise the available medical care during pregnancy and at the time of delivery, and for the young children, the immunisation coverage and the prevalence and treatment of malaria. Compared to the 1991-92 survey, the present survey was significantly expanded to cover areas on the sexual behaviour and awareness regarding AIDS. For the first time, data on maternal mortality and prevalence of female circumcision were collected and national estimates are presented in this report.

Before the 1991-92 survey, Tanzania had been relying on censuses as the principal source of demographic data. Vital registration which is a very important source of fertility and mortality information has been run on a small scale and could not be used to generate national estimates. Data on maternal and child health were obtained from health facility records alone and hence any information that could have been included from outside this source was not obtainable. These surveys represent a big step forward, which has enabled this country to collect high-quality data on demographic situations, family planning, and health.

The availability of data on a periodic basis provides policymakers, planners and analysts with the relevant information to monitor trends. The challenge that remains is to use the information collected in the two rounds of the TDHS as a basis for monitoring and improving the health status and reproductive child health service delivery programmes in Tanzania.

N.K. Mbalilaki GOVERNMENT STATISTICIAN

#### **ACKNOWLEDGMENTS**

The 1996 TDHS is another successful undertaking by the Bureau of Statistics. The successful completion of this volume is an indication of the dedication and commitment of various individuals and institutions to which the Bureau of Statistics will remain indebted. I would like to extend my thanks to the Family Planning Unit in the Ministry of Health for their total commitment in proving logistical support particularly female interviewers and transport. My sincere appreciation is extended to various Government departments that participated in the design of the questionnaires. Tanzania Food and Nutrition Centre (TFNC), UMATI, and Maternal and Child Health Unit in the Iringa Regional Hospital are also acknowledged for providing training services to the interviewers. To the nurses who worked tirelessly throughout the survey period, my sincere thanks for their very valuable participation in the survey. They left their homes and family to endure the difficult logistical and technical difficulties in the field. Likewise, I thank staff in the Census Office under the supervision of Mr. S.A.M. Ngallaba who supervised the entire work of the survey.

I wish to express my deep appreciation to USAID for their continuing financial support to the data collection efforts, and sincere gratitude to Dr. F.M. Mburu for his encouraging support in the project during the entire period of the survey.

The technical and material supports provided by Macro International Inc. is highly acknowledged. My special appreciation goes to Dr. Tulshi Saha, Demographic Expert and the country monitor for Tanzania, for his effort and contribution throughout the survey. I also thank Ms. Anne Cross, the regional coordinator, Dr. Alfredo Aliaga, who served as the sampling expert, and Ms. Jeanne Cushing, the data processing specialist.

I would like to thank the Project Statisticians: Ms. A. Chuwa, Ms. A Komba, Mr. S.M. Abud, Mr. I. Ruyobya, and Mr. I. Masanja for their contributions to this report.

This report would not have been completed without the services of Ms. A. Komba, Mr. P. Riwa, Mr. S. Ngallaba, Dr. F. Mburu, and Dr. Tulshi Saha who prepared the document in its final form.

The contribution of Government Officials at the national, regional, district, ward, and village levels for their vital role in ensuring the smooth and successful completion of the survey fieldwork is also appreciated. Last but not least, I wish to extend my sincere thanks to the women and men who agreed to give their time to attend to the interviews that were sometimes time consuming.

There are many who also put long hours to ensure the successful completion of this work; I thank them all for their valuable contributions.

N.K. Mbalilaki GOVERNMENT STATISTICIAN

#### SUMMARY OF FINDINGS

The 1996 Tanzania Demographic and Health Survey (TDHS) is a nationally representative survey of 8,120 women age 15-49 and 2,256 men age 15-59. The main purpose of the 1996 TDHS is to provide detailed information on fertility, family planning, infant and child mortality, maternal and child health and nutrition, knowledge and attitudes of AIDS, and female circumcision. The 1996 TDHS is the third national sample survey of its kind to be undertaken. The first survey was done in 1991-92, which was followed by the Tanzania Knowledge, Attitudes and Practices Survey (TKAPS) in 1994.

#### **Fertility**

#### **Fertility Trends**

TDHS data show that fertility in Tanzania may be starting to decline. The total fertility rate (TFR) has declined from the level of 6.3 births per woman that prevailed in 1989-92 to 5.8 births for the period 1993-1996. The crude birth rate (CBR) for the period 1993-1996 is 41 live births per 1,000 population, lower than those from the 1991-92 TDHS (43 live births per 1,000 population) and the 1988 Census (46 births).

#### **Fertility Differentials**

Some women are apparently leading the fertility decline. Fertility levels are much higher in rural areas (TFR 6.3 children) than in urban areas (4.1) on the mainland. Total fertility rates are lowest in the Coastal and Southern zones (4.9 children per woman) and higher in the Lake and Central zones (7.0 and 6.1 children per woman, respectively). Women who have received some secondary education have the lowest level of fertility, with a total fertility rate of 4.8 compared with a rate of 7.1 children per women from those with either no education or incomplete primary education, a difference of more than two children.

#### Age at First Birth

Childbearing begins early in Tanzania, with just under half of the women becoming mothers by the time they reach age 18 and more than two-thirds having had a child by the time they reach age 20. Twenty-six percent of women age 15-19 are already mothers or pregnant with their first child, with teenage childbearing more common among mainland women (26 percent) than Zanzibar women (17 percent). The Southern zone has the highest prevalence of teenage childbearing (35 percent) while the Coastal zone has the lowest level (23 percent).

#### **Birth Intervals**

The majority of Tanzanian children (83 percent) are born after a "safe" birth interval (24 or more months apart), with 43 percent born at least 35 months after a prior birth. Nevertheless, 17 percent of non-first births occur less than 24 months after the preceding birth, with 7 percent occurring less than 18 months since the previous birth. The overall median birth interval is 34 months.

#### **Fertility Preferences**

Survey data indicate that there is a strong desire for children and a preference for large families. Among those with six or more children, almost one in five women wants to have more children compared to 43 percent of men. Overall, women report a mean ideal number of children of 5.5, compared with 5.9 children for men; ideal family size is higher among currently married women and men (5.9 and 6.7,

respectively). Only 5 percent of women and men regard a two-child family as ideal. Despite high fertility preferences, the data show that there has been a decline in ideal family size among women in Tanzania, from an average of 6.1 children in 1991-92 to 5.5 in 1996.

#### **Unplanned Fertility**

Despite the increasing level of contraceptive use, the 1996 TDHS data show that unplanned pregnancies are still common. About one-fourth of the births in the three years prior to the survey were reported to be unplanned; 15 percent were mistimed (wanted later) and 9 percent were unwanted. If unwanted births could be eliminated altogether, the total fertility rate in Tanzania would be 5.1 births per woman instead of the actual level of 5.8.

#### **Family Planning**

#### Knowledge of Contraceptive Use

More than 80 percent of women and men know of at least one modern method for family planning. Knowledge of at least one method mentioned by both spouses is high (86 percent). Among women, the pill is the best known method (78 percent), while among men, the condom is the best known method (86 percent). Seventy-one percent of women and 67 percent of men know at least three modern methods. The proportion of all women who have heard of at least one modern method increased from 72 percent in 1991-92 to 77 percent in 1994 and to 83 percent in 1996.

#### Use of Contraception

Sixteen percent of all women in Tanzania are currently using a contraceptive method and 12 percent are using modem methods. The most widely used methods are the pill (5 percent) and injectables (4 percent). Current use among men is higher than among women. Twenty-two percent of men in Tanzania are currently using contraception, 14 percent using modern and 8 percent using traditional methods. Contraceptive use in 1996 has increased since the 1991-92 TDHS, from 10 to 16 percent of all women using any method and from 6 to 12 percent using modern methods. Injectables had the highest increase from less than 1 percent to 4 percent in the same time period. Among men, use of modern methods increased from 8 percent to 14 percent for the same period.

However, the 1996 TDHS data show a slight decline in the contraceptive use rate since the 1994 TKAPS (from 18 to 16 percent of all women), which is due to a decline in the use of traditional methods; use of modern methods has slightly increased since 1994.

#### Differentials in Family Planning Use

There are differences in current use between the mainland and Zanzibar and more notably by regions, educational levels, and number of living children. Use of modern family planning methods is lower in Zanzibar (8 percent) than on the mainland (12 percent). In the mainland, urban women are much more likely to be using modern contraceptive methods (24 percent) than rural women (8 percent). Levels of current use of modern family planning methods are highest in the Kilimanjaro, Coast, and Dar es Salaam regions (23-24 percent) and lowest in the Shinyanga, Kagera, and Mara regions (4-5 percent). Twenty-six to 30 percent of men in the Mbeya, Singida, Dar es Salaam, and Coast regions are using modern family planning methods, compared with only 1 to 5 percent in the Mwanza and Shinyanga regions. Women with some secondary and higher education are five times more likely to use modern methods than women with no education (23 vs. 5 percent). Greater contraceptive use was also found to be associated with increasing level of education for men. Contraceptive use in Tanzania rises with the number of living children.

#### **Sources of Contraceptives**

About three-fourths of women currently using modern contraceptives obtained the method from the public sector, including government and district hospitals (24 percent), government health centres (22 percent), and government dispensaries or parastatal facilities (28 percent). Private medical sources account for 18 percent of current users. Community-based (CBD) workers supply nearly 2 percent of modern methods.

#### Family Planning Messages

Sixty-one percent of men and 45 percent women report that they have heard or seen a family planning message on the radio or television in the previous six months. Younger respondents are more exposed to family planning messages through radio and television than older respondents. Access to the media is much higher in Zanzibar than on the mainland. The proportion of respondents who have been exposed to family planning messages on the radio or television varies across regions and is by far the highest among respondents in Dar es Salaam.

#### **Unmet Need for Family Planning**

Overall, 24 percent of currently married women have unmet need for family planning services—15 percent for spacing and 9 percent for limiting births. The unmet need for family planning among currently married women in Tanzania has declined from 30 percent in 1991-92 to 24 percent in 1996 and the total demand satisfied has increased from 26 percent to 44 percent during the same period.

#### Maternal And Child Health

#### **Childhood Mortality**

At current mortality levels, one in every seven children born in Tanzania will die before the fifth birthday, with two-thirds of the deaths occurring during the first year of life. Results from the 1996 TDHS suggest a marked decline in child mortality over the years. All of the mortality rates, with the exception of postneonatal mortality, have declined steadily over the 15 years before the survey, with an 18 percent decline in under-five mortality, a 24 percent decline in child mortality, and a 14 percent decline in infant mortality. However, the biggest improvement was made in neonatal mortality with a decline of 32 percent. There is evidence of a decline when mortality rates in the 1996 TDHS are compared with the 1991-92 TDHS. For example, the infant mortality rate has declined from 92 to 88 deaths per 1,000 births and under-five mortality has declined from 141 to 137.

Mortality is consistently lower in urban than rural areas. In the 10 years preceding the survey, infant mortality is about 14 percent lower and under-five mortality is 19 percent lower in urban than in rural areas on the mainland. There are considerable variations in mortality by zones. Infant mortality rates are the lowest (41 per 1,000 live births) in the Northern Highlands. With the exception of this zone, infant mortality is about 100 per 1,000 live births in all other zones. Children born to mothers with no education suffer the highest mortality. The under-five mortality of children born to mothers with incomplete primary education is 7 percent lower than that for children whose mothers have no education.

#### **Childhood Vaccination Coverage**

The 1996 TDHS results show that 71 percent of children age 12-23 months have received all of the recommended vaccinations, while only 3 percent have not received any vaccination. The remaining 26 percent of children were partially vaccinated. Vaccination coverage is higher in Zanzibar than in the mainland. Less than half of the children age 12-23 months were fully vaccinated in the Shinyanga region in comparison with 94 percent coverage in the Kilimanjaro region. Immunisation coverage improves substantially as mothers' level of education increases, from 58 percent for children whose mothers have no formal education to 77 percent for children whose mothers have completed primary education or higher.

#### Childhood Health

Diarrhoeal and respiratory illnesses are common causes of child death. In the two weeks before the survey, 14 percent of children suffered from diarrhoea and 13 percent were ill with acute respiratory infections (ARI). About 60 percent of children with diarrhoea and 70 percent of children with ARI were taken to a health facility. Of all children with diarrhoea, 48 percent were treated with a solution prepared from packets of oral rehydration salts (ORS), 3 percent received recommended home fluids (RHF), and 50 percent received either ORS or RHF. In addition, 57 percent of mothers reported that they increased the amount of fluids given to their children who had diarrhoea.

#### **Breastfeeding Practises**

The 1996 TDHS results suggest that breastfeeding is almost universally practised in Tanzania, with a median duration of 22 months. Data show that about 60 percent of the children were breastfed within an hour of birth and 88 percent in the first 24 hours after delivery. Though exclusive breastfeeding is recommended until 4-6 months of age, 77 percent of children age 4-5 months receive complementary foods.

#### **Childhood Nutritional Status**

Overall, 43 percent of Tanzanian children under five are classified as stunted (low height-for-age) and 18 percent are severely stunted. Seven percent of children under five are wasted (low weight-for-height); 1 percent are severely wasted. Comparison with the 1991-92 TDHS shows little change in chronic undernutrition or stunting or acute undernutrition or wasting.

#### Maternal Health Care

The results of the survey indicate very high utilisation of antenatal care in Tanzania for most pregnancies (97 percent). In most cases antenatal care was provided by a trained nurse or midwife (43 percent), or a health aide (40 percent). Doctors provided about 7 percent of antenatal care, while traditional birth attendants (TBAs) provided 8 percent of antenatal care. In Tanzania, almost all women (91 percent) received tetanus toxoid vaccination during pregnancy, with women receiving two or more doses of vaccine for almost three-fourths of births and only one dose of tetanus toxoid vaccine for 17 percent of births. Overall, 47 percent of births were delivered in a health facility, while about half of the births occurred at home. More than 40 percent of births were assisted by medically trained personnel.

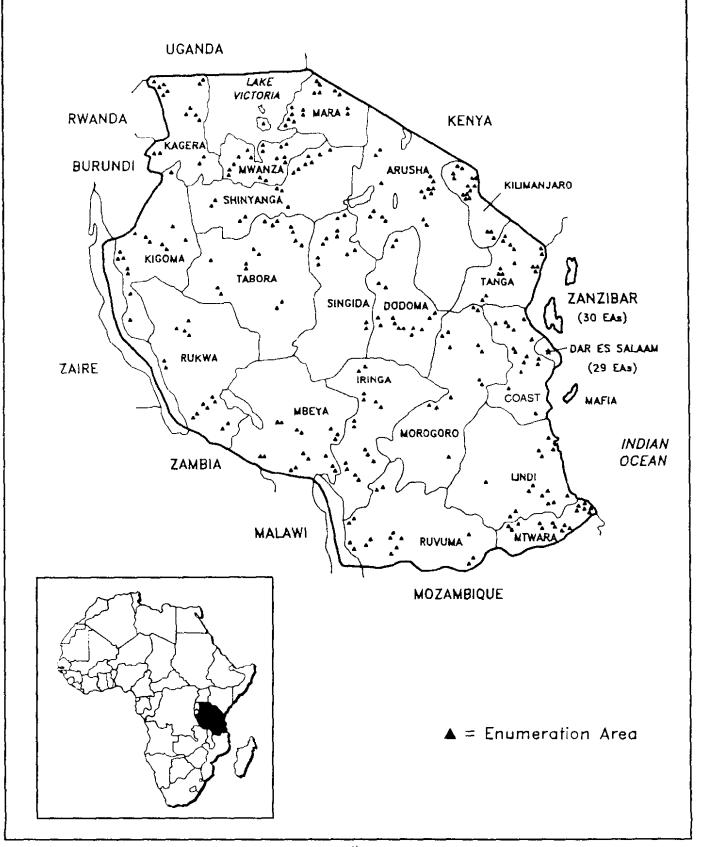
#### **AIDS**

Most women and men in Tanzania are aware of AIDS. Radio and friends or relatives are the main sources for knowledge of AIDS among both women and men. Thirty-nine percent of women and 55 percent of men cite use of condoms as a way to avoid AIDS. One-fourth say that having only one partner can help to prevent the spread of the disease, and 20 percent of women and 17 percent of men report that limiting the number of sexual partners can prevent AIDS. Twenty-nine percent of women and 41 percent of men say that they have no chance of being infected. Eighty-two percent of women and 91 percent of men reported changing their sexual behaviour to prevent getting AIDS.

#### **Female Circumcision**

The 1996 TDHS data show that 18 percent of women in Tanzania are circumcised. Younger women (age 15-19 years), women living in Zanzibar, and in urban areas on the mainland are less likely to be circumcised than other women. A higher proportion of women in the Arusha (81 percent), Dodoma (68 percent), and Mara (44 percent) regions are circumcised. About 7 percent of the eldest daughters of respondents were reported to have been circumcised.

## **TANZANIA**



#### CHAPTER 1

#### INTRODUCTION

#### 1.1 Geography, History, and the Economy

#### Geography

The United Republic of Tanzania is the largest country in East Africa, covering 940,000 square kilometres, 60,000 of which is inland water. Tanzania lies south of the Equator and borders eight countries: Kenya and Uganda to the north; Rwanda, Burundi, Zaire, and Zambia to the west; and Malawi and Mozambique to the south.

Tanzania has an abundance of inland water with several lakes and rivers. Lake Tanganyika runs along the western border and is Africa's deepest and longest freshwater lake, and the world's second deepest lake. Lake Victoria is the world's second largest lake and drains into the Nile River. The Rufiji river is Tanzania's largest river and drains into the Indian Ocean south of Dar es Salaam. Although there are many rivers, only the Rufiji and Kagera are navigable by vessels larger than canoes.

One of Tanzania's most distinctive geological features is the Great Rift Valley which was caused by faulting throughout eastern Africa and is associated with volcanic activity in the north-eastern regions of the country. Two branches of the Rift Valley run through Tanzania. The western branch holds Lakes Tanganyika, Rukwa, and Nyasa, while the eastern branch ends in northern Tanzania and includes Lakes Natron, Manyara, and Eyasi.

Except for a narrow belt of 900 square kilometres along the coast, most of Tanzania lies above 200 metres, and much of the country is higher than 1,000 metres above sea level. In the north, Mount Kilimanjaro rises to more than 5,000 metres with the highest peak, Kibo, reaching 5,895 metres above sea level. This is the highest point in Africa. In all, this shows that Tanzania has a diversity of landscape.

The main climatic feature for most of the country is the long dry spell from May to October, followed by a period of rainfall from November to April. The main rainy season along the coast and the areas around Mount Kilimanjaro is from March to May, with short rains between October and December. In the western part of the country, around Lake Victoria, rainfall is well distributed throughout the year, with the peak period between March and May.

Administratively, the mainland of Tanzania is divided into 20 regions and Zanzibar into 5 regions. Each region is subdivided into districts. To estimate geographic differentials for certain demographic characteristics, this report collapsed the administrative regions of mainland Tanzania into six ecological/geographical zones. This strategy allowed the necessary geographical comparisons to be made because it provided relatively large numbers of cases in each zone and thereby reduced sampling error. However, it should be noted that these "zones" do not conform to the administrative zones of the United Republic of Tanzania. The classification of regions into the zones is shown below:

Coastal Zone: Tanga, Morogoro, Coast, Dar es Salaam, and Zanzibar.

Northern Highland Zone: Arusha and Kilimanjaro.

Lake Zone: Tabora, Kigoma, Shinyanga, Kagera, Mwanza, and Mara.

Central Zone: Dodoma and Singida.

Southern Highland Zone: Iringa, Mbeya, and Rukwa.
Southern Zone: Lindi, Mtwara, and Ruvuma.

#### History

Tanzania the former Tanganyika, became independent of British colonial rule in December 1961. One year later, on December 9, 1962, it became a republic, severing all links with the British crown except for its membership in the Commonwealth. Zanzibar became independent on January 12, 1964, after the overthrow of the rule of the Sultanate. On April 26, 1964, Tanganyika and Zanzibar united to form the United Republic of Tanzania.

#### **Economy**

Tanzania has a mixed economy in which agriculture plays a key role. Agriculture which comprises crop, animal husbandry, forestry, fishery and hunting subsectors, contributes the largest share of any sector to the Gross Domestic Product (GDP).

The GDP increased by 3.9 percent in 1995 according to 1985 prices, compared with 3 percent recorded in 1994. However, this growth did not reach the targeted growth of 5 percent that was predicted in the 1995-98 Economic Recovery Programmes. The economic growth rate attained in 1995 is higher than the predicted population growth rate of 3 percent.

#### 1.2 Demographic Statistics

The 1967 population Census of Tanzania reported a total population of 12.3 million. According to the 1988 census, the population had increased to 23.1 million as shown in Table 1.1. Tanzania is still sparsely populated, though the population density is high in some parts of the country and has been increasing over time. In 1967, the average population density was 14 persons per square kilometre; by 1988 it had increased

to 26 persons per square kilometre. Although the population is still predominantly rural, the proportion of urban residents has been increasing steadily, increasing from 6 percent in 1967 to 18 percent in 1988. While crude death rates in Tanzania may be decreasing, the total fertility rate—among the highest in Africa—is beginning to decline.

Although many small-scale surveys have been conducted in the country, censuses and the 1991-92 Tanzania Demographic and Health Survey (TDHS) have been the main sources of national-level demographic statistics in Tanzania. Civil registration has never been used as a source of demographic statistics because its coverage is incomplete. Table 1.1 gives the demographic indices as compiled from the censuses since 1967.

Selected demographic indic	cators, Tanz	ania: 1967	7-1988			
	Census year					
Index	1967	1978	1988			
Population (millions)	12.3	17.5	23.1			
Intercensal growth rate	2.6	3.2	2.8			
Sex ratio	95.2	96.2	94.2			
Crude birth rate	47	49	46			
Total fertility rate	6.6	6.9	6.5			
Crude death rate	24	19	15			
Infant mortality rate	155	137	115			
Percent urban	6.4	13.8	18.3			
Density (pop/km <sup>2</sup> )	14	20	26			

#### 1.3 Population and Family Planning Policies and Programmes

#### **Population Policy**

The population of Tanzania has trebled from 7.7 million in 1948 to 23.1 million in 1988. It is estimated that the population increase is at present roughly more than 600,000 persons per year. It is, therefore, projected that by the year 2000, the population will be about 33 million on an assumption of a slight decline in fertility offset by the continued decline in mortality. However, the national economy did not grow significantly in the past decade due to various constraints, and therefore the resources available per head increased by 1 percent per annum between 1985 and 1991. During 1988-91, the economy grew at an average of 5.2 percent per year and the per capita income increased by 2 percent. However, in 1992-95, the economy grew at an average of 3.7 percent and the per capita income grew at an average of 0.8 percent per year. On the other hand, the population continued to grow at a high rate, the consequences of which are felt acutely and visibly in the public budgets for health, education, and related fields of human resource development. It is evident, therefore, that improvement in the quality and expansion of these services is unlikely to happen without controlling rapid population growth and strengthening the national economy.

It is against this background that Tanzania adopted the 1992 National Population Policy. The principal objective of the policy is to reinforce national development through developing available resources to improve the quality of life of its people. Special emphasis is placed on regulating the population growth rate, enhancing population quality, and improving the health and welfare of women and children. The primary concerns of the National Population Policy are to safeguard, as much as possible, the satisfaction of the basic needs of vulnerable groups in the population, and to develop human resources for current and future national socioeconomic progress. Since Tanzania was concerned with population and development issues before the adoption of an explicit population policy, the country has the tradition of taking population issues into account in its development plans.

With specific reference to family planning, the goals of the policy are to strengthen family planning services to promote the health and welfare of the family, the community and the nation, and eventually reduce the rate of population growth. Other specific objectives related to population regulation include making family planning services available to all who want them, encouraging every family to space births at least two years apart, and supporting family life education programmes for youth and family planning for men and women.

#### **Family Planning**

The Family Planning Association of Tanzania (UMATI) introduced family planning services to Tanzania in 1959. During the early years the services were mostly provided in few urban areas with little support from the government. With the expansion of UMATI in the early 70s, services were extended to cover more areas in the country. The government became actively involved in providing family planning services following the launching of the integrated Maternal and Child Health (MCH) programme in 1974. Currently, family planning services are provided by both governmental and nongovernmental organisations under the coordination of the Family Planning Unit (FPU) in the Ministry of Health. Clinical services are complemented by community-based services. A social marketing programme is being considered.

#### 1.4 Health Priorities and Programmes

The Tanzania government emphasises equity in the distribution of health services and views access to services as a basic human right. To respond to the worldwide efforts to attain the social goal of "Health to All" by the year 2000, Tanzania's health strategy focuses on the delivery of primary health care services. In

1991 a new Primary Health Care (PHC) strategy was developed by the Ministry of Health. The primary objective of the PHC focuses on strengthening district management capacity, multisectoral collaboration, and community involvement.

The government provides more than 60 percent of health services; the remainder is provided by nongovernmental organisations. The top of the extensive network of health facilities consists at the national level of four referral hospitals, one of which is the university teaching hospital. Most regions have a regional hospital and there are 183 hospitals in the country. At the divisional level, there are 291 health centres and at the ward level there are 3,286 dispensaries. At the village level, village health posts have been established, staffed with at least two village health workers. There are more than 5,550 village health workers in Tanzania.

#### 1.5 Objectives and Organisation of the 1996 Tanzania Demographic and Health Survey

The 1996 TDHS is the third national sample survey of its kind to be undertaken. The first survey was done in 1991-92 followed by the Tanzania Knowledge, Attitudes and Practices Survey (TKAPS) in 1994. In addition to most of the same questions included in these two surveys, the 1996 TDHS added more detailed questions on AIDS, maternal mortality, and female circumcision.

The general objectives of the 1996 TDHS are to:

- Provide national-level data that will allow the calculation of demographic rates, particularly fertility and childhood mortality rates
- Analyze the direct and indirect factors which determine the level and trends of fertility
- Measure the level of contraceptive knowledge and practice (of both women and men) by method, by urban-rural residence, and by region
- Collect reliable data on maternal and child health indicators; immunisation, prevalence, and treatment of diarrhoea and other diseases among children under age five; antenatal visits; assistance at delivery; and breastfeeding
- Assess the nutritional status of children under age five and their mothers by means of anthropometric measurements (weight and height), and child feeding practices
- Assess among women and men the prevailing level of specific knowledge and attitudes regarding AIDS and evaluate patterns of recent behaviour regarding condom use
- Measure maternal mortality and collect data on female circumcision.

#### **Survey Organisation**

The 1996 TDHS, like the previous similar surveys, involved various institutions and individuals. The Bureau of Statistics in the Planning Commission had the overall responsibility of running the survey while the Ministry of Health provided technical and logistical support.

Financial support was provided by the USAID and administered by Macro International Inc., which also rendered technical advice. The funds were used to meet expenses related to allowances for field personnel, data processing, anthropometric equipment, printing of questionnaires, fuel and maintenance of field vehicles, and dissemination of the survey results. The Government of Tanzania provided local professional staff, accommodation, transport, and other field logistics.

#### Sample Design

The TDHS sample was a three-stage design consisting of the same 357 enumeration areas (EAs) that were used in the 1991-92 TDHS (262 EAs in rural and 95 EAs in urban areas). The selection of EAs was made in two stages: first, wards/branches and then EAs within wards/branches were selected. Lists of all households were prepared for the selected EAs and, at the third sampling stage, households were selected from these lists. The TDHS was designed to provide estimates (based on the results of the Woman's Questionnaire) for the whole country, for urban and rural areas in the country, and groups of regions (zones). In addition, the sample will provide certain estimates for each of the 20 regions in the mainland and 2 subgroups in Zanzibar: Pemba Island and Ungaja. In most regions, one in every four households was selected for the men's survey, and in six regions (Dar es Salaam, Dodoma, Iringa, Kilimanjaro, Morogoro, and Shinyanga), men in every second household were selected for the interview. The sample of men was designed to provide estimates for the country as a whole and for urban and rural areas.

Unlike most other DHS surveys, households in Tanzania were selected from the household listing for each ward (or branch) on the basis of contiguity, beginning with a randomly selected start number. This selection process was used to minimise the difficulty encountered in moving from one selected household to another given the scattered nature of households.

#### Questionnaires

Three types of questionnaires were used during the survey. The Household Questionnaire was used to list the names of the household members and certain individual characteristics of all usual members of the household and visitors who had spent the previous night in the household. Certain basic information was collected on characteristics of each person listed, including relationship, age, sex, education, and place of residence. Furthermore, the Household Questionnaire collected information on characteristics relating to the household. These included the source of water, type of toilet facilities, materials used for the floor of the house, and ownership of various durable goods. However, the main purpose of the Household Questionnaire was to identify women and men who were eligible for the individual interview.

The Female Questionnaire was used to collect information from eligible women age 15-49. The topics covered in this questionnaire included the following:

- Background characteristics of the woman including age, education, residential history
- Reproductive history
- Knowledge and use of family planning methods
- Fertility preferences and attitudes about family planning
- Antenatal and delivery care
- Breastfeeding and weaning practices
- Vaccinations and health status of children under age five
- Marriage and sexual activity
- Husband's occupation and education
- Woman's employment, occupation, and earnings
- Awareness and behaviour regarding AIDS and other sexually transmitted diseases
- Maternal mortality
- Female circumcision
- Height and weight of children under five years and their mothers.

The Male Questionnaire was used to collect information from a subsample of men age 15-59, namely, those living in every fourth household except in Dar es Salaam, Dodoma, Kilimanjaro, Morogoro, Shinyanga, and Iringa regions where every second household was selected for the male interview. The Male Questionnaire collected much of the same information found in the Women's Questionnaire, but was shorter because it did

not contain questions on reproductive history and maternal and child health. All questionnaires were translated and printed in Kiswahili. The final versions of the English questionnaires are provided in Appendix F.

Before the design of the questionnaires could be finalised, a pretest was done in May-June, 1996 to assess the viability of the questions, the flow and logical sequence of the skip pattern, and the field organisation. It covered an area outside Dar es Salaam and took about a week to complete. Modifications to the questionnaires were then made based on lessons drawn from the exercise.

#### Training and Fieldwork

As in the 1991-92 TDHS, the need to find competent interviewers was the guiding factor in recruiting interviewers. The Ministry of Health was again requested to secure the services of trained nurses to be interviewers in the 1996 TDHS. For Zanzibar, a similar request was made to the Zanzibar Ministry of Health to provide nurses for the interview work.

The 1996 TDHS field staff consisted of eight teams, each composed of six female interviewers, one male interviewer, a field editor, a supervisor, and a driver. Sixty female nurses and 12 male nurses were recruited and 8 statisticians were selected as supervisors. After three weeks of intensive training, 50 female and 8 male interviewers were selected for the fieldwork. During training, a series of assessment tests were given to the class. These tests were graded and the results were used to select interviewers. Those who showed extra understanding of the questionnaires and were also able to detect errors in completed questionnaires were later chosen to be field editors. The list of persons who were involved in the survey is presented in Appendix E.

The training of field staff for the main survey was conducted over a three-week period in early July 1996, at the Vocational Training Institute (VETA) in Iringa. Permanent staff from the Bureau of Statistics and staff from Macro International conducted the training with the support of guest lecturers from the UMATI, MCH personnel from the Iringa regional hospital, and staff from the Tanzania Food and Nutrition Centre. Trial interviews were conducted in nearby villages and some parts of the city of Iringa. Computer operators participated in the training to acquaint themselves with the questionnaires. The training course consisted of instructions in interviewing techniques, field procedures, a detailed review of items on the questionnaires, training and practice in weighing and measuring children, mock interviews between participants in the classroom, and practice interviews with real respondents in areas in and around Iringa.

Supervisors and editors were trained exclusively for three days to discuss their duties and responsibilities. Emphasis was given to the importance of ensuring data quality. The supervisor was required to act as the leader of the field team and be responsible for the well-being and safety of team members, completion of the assigned workload, and maintenance of data quality. The duties and responsibilities of the editor were to monitor interviewer performance and take anthropometric measurements of children and women. Close supervision of the interviewers and editing of completed questionnaires were emphasised to ensure that data collection was accurate and complete.

The fieldwork for the main survey began in late July 1996 and lasted until November 1996. Women and men for the individual interviews were identified during the household interview. It was stressed that the household interview had to be done by an interviewer other than the one who would conduct the individual interview. This was intended to reduce the error due to the age shifting particularly among women or men at the youngest or oldest age groups. Team supervisors located the households and assigned them to the interviewers. Completed household and individual questionnaires were handed over to the field editors who checked them to ensure that all relevant questions were properly recorded, that the skip pattern instructions were followed, and that responses were internally consistent. Each team was instructed to complete the editing work and resolve all errors found in the questionnaires before the team left the cluster. Supervisors were required to ensure that all the selected households and eligible women and men in a cluster were interviewed, and that assignment sheets for the interviewers and supervisors were filled out completely and correctly. The questionnaires and the control sheets were dispatched to the head office in Dar es Salaam for data processing.

#### **Data Processing**

The data processing staff for the survey initially consisted of four clerks and one supervisor who were staff of the Bureau of Statistics. However, to speed up the data processing work, an additional four data processing staff were recruited.

All questionnaires for the TDHS were returned to the Bureau of Statistics for data processing, which consisted of office editing, coding of open-ended questions, data entry, and editing of computer-identified errors. All data were processed on microcomputers with a software programme developed for DHS surveys, called the Integrated System for Survey Analysis (ISSA). Data entry was 100 percent verified. Office editing and data processing activities were initiated immediately after the beginning of fieldwork and completed in mid-December, 1996.

#### **Response Rates**

A summary of response rates from the household and individual interviews is shown in Table 1.2. In all, 8,900 households were selected, out of which 8,141 were occupied. Of the households found, 7,969 were interviewed, representing a response rate of 98 percent. The shortfall between the selected and the interviewed

households was largely because many dwellings were either vacant or no competent respondents were present at the time of the visit.

In the interviewed households, 8,501 eligible women (i.e. women age 15-49) were identified for the individual interview, and 8,120 women were actually interviewed, yielding a response rate of 96 percent. In the subsample of households selected for the male interview, 2,658 eligible men (i.e., men age 15-59) were identified, 2,256 were interviewed, representing a response rate of 85 percent. The principal reason for nonresponse among both eligible men and women was the failure to find them at home despite repeated visits to the household. The lower response rates among men than women were due to the more frequent and longer absences of men.

Table 1.2 Results of the household and individual interviews	
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Number of households, number of interviews, and response rates, Tanzania 1996

	Resid	dence	
Result	Urban	Rural	Total
Household interviews	***		
Households sampled	2,228	6,672	8,900
Households occupied	1,989	6,152	8,141
Households interviewed	1,912	6,057	7,969
Household response rate	96.1	98.5	97.9
Individual interviews			
Number of eligible women Number of eligible women	2,186	6,315	8,501
interviewed	2,088	6,032	8,120
Eligible women response rate	95.5	95.5	95.5
Number of eligible men Number of eligible men	773	1,885	2,658
interviewed	616	1,640	2,256
Eligible men response rate	79.7	87.0	84.9

The response rates are lower in urban areas. One-member households are

more common in urban areas and are more difficult to interview because they keep their houses locked up most of the time. In urban settings, neighbours often do not know the whereabouts of such people.

#### **CHAPTER 2**

#### CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS

This chapter presents information on selected socioeconomic characteristics of the household population and the individual survey respondents, such as age, sex, marital status, urban-rural residence, and regional distribution. The chapter also considers the conditions surrounding the households in which the survey population live, including sources of drinking water, availability of electricity, sanitation facilities, building materials, and persons per sleeping room.

The 1996 TDHS collected information on individual socioeconomic characteristics of all usual residents and visitors who had spent the previous night preceding the survey interview. This was done by using a questionnaire which was completed for each household. A household was defined as a person or group of persons who live together and share a common source of food.

#### 2.1 Population by Age and Sex

Table 2.1 shows the distribution of the household population by five-year age groups, according to sex and urban-rural residence. As was observed in the censuses and the 1991-92 TDHS, the distribution conforms to the pattern typical of high-fertility populations, that is, a much higher proportion of the population is in the younger age groups than in the older age groups as clearly seen in the population pyramid (Figure 2.1). The slight irregular bulge of women at age 50-54 indicates that some women from ages 45-49 were shifted to the 50-54 age group, perhaps to reduce the workload of the interviewer. There is also an unusually large

Table 2.1 Household population by age, resider	nce, and sex			
Percent distribution of the de facto household p Tanzania 1996	ent distribution of the de facto household population by five-year age group, according to urban-rural residence and sex, zania 1996			
Urban	Rural	Total		

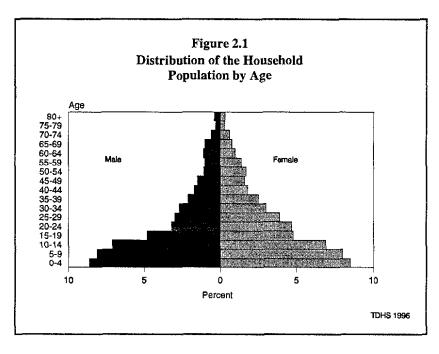
		Orban			100			Total		
Age group	Male	Female	Total	Male	Female	Total	Male	Female	Total	
0-4	16.4	13.8	15.1	18.1	17.1	17.6	17.8	16.4	17.1	
5-9	13.5	13.0	13.2	17.5	16.0	16.7	16.7	15.4	16.0	
10-14	12.6	13.1	12.8	1 <b>5</b> .3	13.5	14.4	14.8	13.4	14.1	
15-19	10.8	11.3	11.1	9.8	8.8	9.3	10.0	9.3	9.6	
20-24	9.4	12.2	10,8	5.9	8.2	7.1	6.6	9.0	7.8	
25-29	8.4	9.8	9.1	5.6	7.1	6.4	6.2	7.6	6.9	
30-34	6.6	6.3	6.4	5.2	5.6	5.4	5.5	5.8	5.6	
35-39	5.8	5.9	5.8	4.0	4.5	4.3	4.4	4.8	4.6	
40-44	4.4	3.5	3,9	3.3	3.5	3.4	3.5	3.5	3.5	
45-49	3.2	2.3	2.7	3.2	3.3	3. <b>2</b>	3.2	3.1	3.1	
50-54	2.0	2.4	2.2	2.2	3.4	2.9	2.2	3.2	2.7	
55-59	1.8	1.8	1.8	2.1	2.9	2.5	2.0	2.7	2.4	
60-64	2.1	1.7	1.9	2.4	2.0	2.2	2.3	2.0	2.1	
65-69	1.3	1.3	1.3	2.2	1.6	1.9	2.0	1.5	1.8	
70-74	0.9	0.7	0.8	1.3	1.2	1.2	1.2	1.1	1.1	
75-79	0.3	0.4	0.4	0.8	0.6	0.7	0.7	0.6	0.6	
80 +	0.3	0.5	0.4	0.9	0.7	0.8	0.8	0.7	0.7	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Number	3,690	3,876	7,567	14,775	15,931	30,714	18,464	19,807	38,281	

Note: Total includes 9 persons whose sex was not stated.

number of girls age 14 relative to the number age 15 (see Appendix Table C.1), which presumably is due to the same phenomenon. This pattern of age shifting has also been observed in other DHS surveys.

#### 2.2 Population by Age from Selected Sources

Table 2.2 shows that the population age structure is similar to that found in the 1967, 1978, and 1988 censuses as well as that observed in the 1991-92 TDHS. The proportion of the population under age 15 is about 47 percent and the population in age group 15-64 accounts for 49 percent,



with the remaining 4 percent above age 65. The population has a low median age of 16.4 years. A dependency ratio is also presented in Table 2.2. The age dependency ratio is the ratio of the total number of persons below age 15 years and age 65 and above divided by the number of persons age 15 to 64. This is simply an indicator of the dependency responsibility of adults in their productive years. In 1996, the dependency ratio is 106 which means that there are 106 persons less than 15 years old or more than 64 years of age in Tanzania for every 100 persons age 15-64.

#### 2.3 Household Composition

Information about the composition of households by sex of the head of the household and size of the household is presented in Table 2.3. This table also shows the percentage of households with foster children. The data show that 78 percent of the households in Tanzania are headed by men, which is higher than that found in the 1988 Census (70 percent), but lower than the 1991-92 TDHS figure (81 percent).

Households with one or two members constitute 21 percent of all households. This category of households is more common in

Table 2.2	Population by age from selected sources
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Percent distribution of the population by age group, according to selected sources, Tanzania 1967-1996

Age group	1967 Census	1978 Census	1988 Census	1991-92 TDHS	1994 TKAPS	1996 TDHS
<15	43.9	46.1	45.8	46.8	49.3	47.2
15-64	50.5	49.9	49.9	49.3	46.4	48.5
65+	5.6	4.0	4.3	3.9	4.3	4.3
Total	100.0	100.0	100.0	100.0	100.0	100.0
Median age Dependency ratio	U 98	U 100	U 100	16.4 103	15.4 115	16.4 106

Sources: Bureau of Statistics, 1967-1996 U = Unknown

urban areas (30 percent) than in rural areas (19 percent). Rural households are larger than urban households—the mean household size is 5.1 in rural areas and 4.3 in urban areas. The average household size is 4.9 persons which is higher than the 1988 Census figure of 4.2 (Bureau of Statistics, 1994).

About one in five households has foster children, that is, children under age 15 living in a household with neither their biological mother nor father present. Although figures show a slight decline in foster children (from 23.1 percent in 1991-92 to 21 percent in 1996), the proportion is still high. The high proportion of households with foster children certainly intensifies the economic burden on these households. With the current high prevalence of AIDS, the percentage of households with foster children in Tanzania is likely to rise.

#### 2.4 Fosterhood and Orphanhood

Information regarding fosterhood and orphanhood of children under 15 years of age is presented in Table 2.4. Sixty-three percent of children under 15 years of age are living with both parents, 18 percent are living with their mothers (but not with their fathers), 4 percent are living with their mothers) and 14 percent are living with neither their natural father nor natural mother. Of children under 15 years of age, 6 percent have lost their fathers and 3 percent have lost their mothers. Less than 1 percent of children have lost both their natural parents.

#### Table 2.3 Household composition

Percent distribution of households by sex of head of household, household size, and presence of foster children, according to urban-rural residence, Tanzania 1996

	Resid	dence	
Characteristic	Urban	Rural	Total
Household headship	<del></del>		
Male	76.7	78.7	78.2
Female	23.3	21.3	21.8
Number of usual members			
1	14.6	7.4	9.0
2	15.4	11.5	12.4
3	16.7	13.0	13.8
4	12.4	14.5	14.0
5	12.8	14.2	13.9
3 4 5 6 7 8	9.1	13.4	12.4
7	6.4	10.2	9.3
8	4.8	6.1	5.8
9+	7.8	9.7	9.3
Total	100.0	100.0	100.0
Mean size	4.3	5.1	4.9
Percentage of households with foster children	20.1	21.2	21.0

Note: Table is based on de jure members; i.e., usual residents.

Note: By convention, foster children are those who are not living with either biological parent. This includes orphans, i.e., children with both parents dead.

# 2.5 Educational Level of Household Population

In the three decades since independence, the education sector has expanded to reach most parts of the country and phenomenal growth has been recorded in both enrolment and the number of new institutions. For example, in 1970, a nationwide literacy programme was launched and in 1975 a national policy of Universal Primary Education was adopted. This programme gave every child the right to free primary education. In the mainland, primary education which includes seven years of schooling was made compulsory for all children 7 to 14 years of age in 1978. There are six years of secondary education. Entry into the fifth year of secondary education (Form V) is based on open competitive examination results. In Zanzibar, although education incorporates two stages, it differs slightly from the mainland system. Primary education begins at age 6-8 years and takes 8 years to complete. It is followed by two three-year cycles of secondary education.

In the 1996 TDHS, information on educational attainment was collected for every member of the household. Tables 2.5.1 and 2.5.2 show the percent distribution of the de facto female and male household population age six and over, respectively, by the highest level of education attended, and the median number of years of schooling completed, according to selected background characteristics.

Table 2.4 Fosterhood and orphanhood

Percent distribution of de jure children under age 15 by survival status of parents and child's living arrangements, according to child's age, sex, residence, and region, Tanzania 1996

	Living	with r	ring nother t father	with :	ring father mother			ing with parent		Missing			
Background characteristic	with both parents	Father alive	Father dead	Mother alive	Mother dead	Both alive	Father only alive	Mother only alive	Both dead	ation on father/ mother	Total	Number of children	
Age					-			·					
<2	74.1	19.1	1.6	0.5	0.1	3.0	0.2	0.1	0.0	1.2	100.0	3,932	
3-5	66.7	13.9	3.0	2.1	0.6	11.1	0.7	0.8	0.3	0.9	100.0	3,868	
6-9	61.3	11.8	4.1	3.6	1.1	12.5	1,2	1.9	0.7	1.6	100.0	4,892	
10-14	54.2	10.8	6.2	4.5	2.3	13.4	2.0	2.9	1.1	2.6	100.0	5,384	
Sex													
Male	63.2	13.6	3.8	3.1	1.3	10.1	1.1	1.6	0.6	1.6	100.0	9,110	
Female	63.1	13.5	4.1	2.6	1.0	10.6	1.1	1.5	0.6	1,8	100.0	8,962	
Residence													
Mainland	63.2	13.5	4.0	2.9	1.2	10.3	1.1	1.6	0.6	1.6	100.0	17,503	
Total urban	58.6	16.0	2.9	3.2	1.5	12.1	0.8	1.9	0.9	2.1	100.0	2,935	
Dar es Salaam city	61.0	13.3	2.4	3.2	1.3	11.1	1.3	2.1	1.3	3.2	100.0	787	
Other urban	57.7	17.0	3.1	3.2	1.6	12.5	0.7	1.8	0.8	1.7	100.0	2,148	
Total rural	64.1	13.0	4.2	2.8	1.1	9.9	1.2	1.5	0.6	1.6	100.0		
Zanzibar	60.8	15.7	2,6	2.9	0.2	13.5	0.6	1.4	0.4	1.9	100.0	573	
Pemba	64.0	15.7	3.4	2.6	0.3	10.3	1.3	0.8	0.1	1.5	100.0	269	
Unguja	58.1	15.6	1.9	3.0	0,1	16.3	0.0	1.9	0.7	2.2	100.0	305	
Region <sup>1</sup>													
Dodoma	63.0	14.6	5.0	2.3	1.9	9.0	1.4	2.0	0.0	0.9	100.0	803	
Arusha	74.8	9.8	4.5	1.2	0.8	6.2	0.9	0.9	0.4	0.5	100.0	1,466	
Kilimanjaro	54.5	20.6	2.6	1.5	0.5	14.5	1.1	1.8	0.4	2.7	100.0	843	
Tanga	62.9	15.6	3.4	3.9	1.0	8.4	1.5	0.9	0.5	2.0	100.0	948	
Morogoro	59.1	19.1	4.6	3.0	2.0	8.6	1.5	1.6	0.2	0.4	100.0	870	
Coast	53.5	21.8	1.7	4.2	0.7	11.0	1.3	1.5	1.2	3.3	100.0	344	
Dar es Salaam	61.8	11.8	2.7	3.1	1.3	11.1	1.3	2.0	1.4	3.3	100.0	952	
Lindi	47.0	21.0	3.1	5.3	2.4	14.9	1.0	2.8	0.4	2.1	100.0	404	
Mtwara	48.4	19.0	3.3	5.5	1.5	15.4	0.5	3.0	0.4	2.9	100.0	628	
Ruvuma	62.5	18.2	2.2	3.8	1.2	6.0	1.1	1.0	0.3	3.7	100.0	689	
Iringa	62.3	18.2	7.1	0.6	0.8	6.3	0.8	1.4	0.6	1.8	100.0	1,009	
Mbeya	60.7	11.5	6.4	3.6	1.8	11.6	2.8	0.7	0.2	0.8	100.0	929	
Singida	66.7	11.3	2.6	3.0	0.5	12.0	1.3	8.0	0.3	1.5	100,0	763	
Tabora	55.2	14.9	1.6	3.6	1.4	19.1	0.0	0.5	0.9	2.9	0.001	502	
Rukwa	68.9	14.1	2.1	3.0	1.4	7.9	0.9	1.5	0.0	0.4	100.0	571	
Kigoma	77.5	8.1	2.9	3.3	0.9	3.5	1.0	0.8	0.2	1.9	100.0	850	
Shinyanga	66,4	11.1	3.7	3.5	0.9	10.3	1.2	1.3	0.5	1.2	100.0	1,587	
Kagera	62.8	8.0	6.7	3.5	1.9	9.9	0.7	2.5	2.4	1.7	100.0	1,240	
Mwanza	67.4	10.2	1.7	1.4	0.4	14.7	1.4	1.6	0.8	0.4	100.0	1,425	
Mara	54.5	10.9	9.3	2.9	2.2	12.8	0.3	4.0	0.4	2.7	100.0	681	
Total	63.1	13.6	4.0	2.9	1.2	10.4	1.1	1.6	0.6	1.7	100.0	18,076	

Note: By convention, foster children are those who are not living with either biological parent. This includes orphans, i.e., children with both parents dead

both parents dead.

This table and subsequent tables show 20 regions from Mainland and do not include any region from Zanzibar. Dar es Salaam region includes Dar es Salaam city and rural areas in Dar es Salaam region.

Table 2.5.1 Educational level of the female household population

Percent distribution of the de facto female household population age six and over by highest level of education attended, and median number of years of schooling, according to selected background characteristics, Tanzania 1996

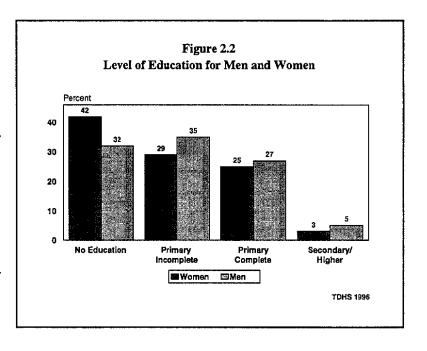
		Lev						
Background characteristic	No education	Primary incomplete		Some secondary and higher	Don't know/ missing	Total	Median years of schooling	Total numbe
Age						100.0		- 100
6-9	75.4	23.2	0.0	0.0	1.4	100.0	0.0	2,409
10-14	21.4	76.0	1.9	0.2	0.6	100.0	1.6	2,650
15-19	16.0	32.6	45.5	5.6	0.4	100.0	6.0	1,840
20-24	16.6	13.6	61.2	8.2	0.4	100.0	6.3	1,781
25-29	19.2	11.9	62.6	5.7	0.6	100.0	6.3	1,508
30-34	28.1	16.0	50.2	5.4	0.3	100.0	6.1	1,140
35-39	44.1	19.1	33.1	3.2	0.6	100.0	2.1	943
40-44	54.1	25.2	16.9	2.9	0.9	100.0	0.0	688
45-49	62.7	26.1	8.5	1.8	0.9	100.0	0.0	614
50-54	71.7	22.3 15.3	2.9 2.2	0.3	2.8	100.0	0.0	641
55-59	79.2		2.2	0.5	2.7	100.0	0.0	528
60-64	83.5	12.6	0.5	0.2	3.2	100.0	0.0	388
65+	88.1	6.9	1.2	0.0	3.8	0.001	0.0	761
Residence		• • •						
Mainland	41.7	29.0	25.8	2.6	1.1	100.0	1.2	15,417
Total urban	24.7	29.0	37.0	8.3	1.0	100.0	4.4	3,069
Dar es Salaam city	22.0	25.4	38.2	12.6	1.8	100.0	6.0	878
Other urban	25.8	30.5	36.5	6.6	0.6	100.0	3.9	12,191
_Total rural	45.9	29.0	23.0	1.1	1.1	0.001	0.2	2,348
Zanzibar	43.4	30.4	9.5	15.5	1.2	100.0	1.0	484
Pemba	49.6	32.6	6.5	10.4	0.9	100.0	0.0	200
Unguja	39.1	28.8	11.7	19.0	1.3	100.0	2.2	283
Region	46.6	24.0	06.5	2.2	2 =	4000		
Dodoma	46.6	24.9	25.7	2.3	0.5	100.0	0.0	741
Arusha	50.9	20.1	24.8	2.0	2.1	100.0	0.0	1,113
Kilimanjaro	21.5	40.1	31.9	5.7	0.8	100.0	3.7	819
Tanga	39.6	30.9	28.8	0.4	0.3	100.0	1.9	903
Morogoro	45.0	30.6	23.3	0.8	0.4	100.0	0.5	857
Coast	47.6	25.9	24.0	1.1	1.4	100.0	0.1	357
Dar es Salaam	23.5 40.8	25.8	37.8	11.2	1.7	100.0	5.6	1,019
Lindi	40.8 48.5	29.7 27.0	25.0 22.9	2.2 0.4	2.3 1.3	100.0	1.1	387 709
Mtwara	48.3 28.7	27.0 36.6	31.8	0.4 1.9		100.0	0.0 3.2	623
Ruvuma	28.7 42.9	30.6 31.7		1.9 3.1	1.1 0.5	100.0		
Iringa Mhaya	42.9 35.8	31.7	21.8 29.4	2.1	1.1	100.0	0.8	905
Mbeya Singida	33.8 44.1	31.0 29.7	29.4	1.8	1.1	100.0	2.1	858 604
Singida Tabara	44.1 44.4	29.7 25.4	23.4 26.1	2.1	1.1	100.0 100.0	0.6 0.4	476
Tabora Rukwa	50.5	25.4 28.4	20.1 19.1	1.7	0.3	100.0	0.4	470 460
=======================================	30.3 44.3	28.4 28.0	25.7	0.4	1.6	100.0	0.0 0.1	697
Kigoma	44.3 49.1	25.6	20.7	3.3	1.3	100.0	0.1	1,285
Shinyanga Kagara	42.4	30.7	25.0	3.3 1.0	0.9	100.0	0.0	965
Mwanza	49.7	28.4	19.6	2.0	0.3	100.0	0.0	1,123
Mara	36.7	33.5	28.1	0.9	0.9	100.0	1.7	517
Total .	41.7	29.0	25.3	3.0	1.1	100.0	1.2	15,901

Table 2.5.2 Educational level of the male household population

Percent distribution of the de facto male household population age six and over by highest level of education attended, and median number of years of schooling, according to selected background characteristics, Tanzania 1996

		Lev						
Background characteristic	No education	Primary incomplete		Some secondary and higher	Don't know/ missing	Total	Median years of schooling	Total number
Age								
6-9	79.1	19.0	0.0	0.0	1.9	100.0	0.0	2,462
10-14	23.4	74.7	1.2	0.1	0.6	100.0	1.1	2,729
15-19	9.9	47.9	36.9	5.0	0.3	100,0	5.3	1,853
20-24	9.3	15.4	61.3	13.3	0.7	100.0	6.4	1,223
25-29	10.8	11.2	66.1	11.3	0.5	100.0	6.4	1,143
30-34	11.2	12.0	66.0	10.4	0.4	100.0	6.4	1,018
35-39	16.6	17.3	54.7	10.5	0.9	100.0	6.3	810
40-44	21.7	31.4	34.4	11.7	0.7	100.0	4.2	641
45-49	26.9	34.2	28.3	9.6	1.0	100.0	3.7	589
50-54	29.8	45.8	17.2	6.6	0.6	100.0	3.3	407
55-59	39.8	41.9	11.2	5.5	1.6	100.0	2.6	378
60-64	52.1	36.5	7.4	1.5	2.5	100.0	0.0	427
65+	64.7	27.5	3.9	1.5	2.4	100.0	0.0	863
Residence								
Mainland	31.6	35.2	27.3	4.9	1.0	100.0	2.9	14,109
Total urban	18.7	31.2	35.3	13.8	1.0	100.0	5.7	2,831
Dar es Salaam city	14.6	26.3	38.6	18.3	2.2	100.0	6.2	904
Other urban	20.6	33.5	33.7	11.7	0.5	100,0	4.6	1,927
Total rural	34.8	36.2	25.3	2.7	1.0	100.0	2.1	11,278
Zanzibar	33.0	34.4	12.1	18.7	1.8	100.0	2.5	450
Pemba	41.9	36.2	7.9	13.3	0.7	100.0	0.7	187
Unguja	26.6	33.2	15.1	22.6	2.6	100.0	3.6	263
Region								
Dodoma	39.5	32.4	23.2	4.2	0.7	100.0	1.7	648
Arusha	40.3	27.1	26.5	4.5	1.7	100.0	1.4	1,038
Kilimanjaro	13.8	43.5	33.9	8.1	0.7	100.0	4.7	741
Tanga	27.6	41.0	28.9	1.5	1.0	100.0	3.1	796
Morogoro	34.2	35.8	26.3	3.1	0.6	100.0	2.9	704
Coast	33.4	33.8	26.6	4.7	1.5	100.0	2.5	313
Dar es Salaam	15.8	27.0	37.5	17.2	2.4	100.0	6.1	1,058
Lindi	36.3	36.1	23.1	3.1	1.5	100.0	2.4	367
Mtwara	35.7	39.0	23.2	1.3	0.8	100.0	1.9	590
Ruvuma	24.1	37.8	33.4	3.6	1.1	100.0	3.4	549
Iringa	36.1	36.3	24.1	3.1	0.3	100.0	2.2	710
Mbeya	29.6	33.0	30.0	7.1	0.3	100.0	3.4	817
Singida	37.1	35.2	23.8	2.5	1.4	100.0	1.5	552
Tabora	37.1	30.7	32.2	3.9	0.7	100.0	2.9	460
Rukwa Kigoma	34.9 35.6	33.8 34.6	29.0 26.8	2.2 2.4	0.0	100.0 100.0	2.8	440 616
Kigoma			26.8		0.6		2.2	616
Shinyanga	38.4	33.9	21.4	5.3	1.1	100.0	1.2	1,221
Kagera	28.8	38.3	26.2	5.5	1.2	100.0	2.5	931
Mwanza	35.5	38.I	23.7	2.1	0.5	100.0	2.1	1,076
Mara	26.7	42.0	26.9	2.9	1.5	100.0	2.6	481
Total	31.6	35.1	26.9	5.3	1.0	100.0	2.8	14,559

There is a strong differential in educational attainment between the sexes, especially as age increases. About 42 percent of women and 32 percent of men in Tanzania have never been to school (Figure 2.2). The proportions with no education increase with age. For example, the proportion of women who have never attended any formal schooling increases with age from 16 percent (age group 15-19) to 88 percent (age group 65 and over); for men, the proportion increases from 10 percent (age group 15-19) to 65 percent (age group 65 and over). Fifty-four percent of women and 62 percent of men have attained some primary education and only 3 percent of women and 5 percent of men have attained some secondary education. There are



more men with completed primary education than women at almost all age groups except the younger age groups (below 20 years). The median number of years of schooling is 1.2 for women and 2.8 for men.

Overall, educational attainment is higher in urban areas than in rural areas on the mainland. The proportion of women with no education in urban areas is lower (25 percent) than in rural areas (46 percent); among men, the proportion with no education in urban areas is 19 percent compared to 35 percent in rural areas. The percentage with primary and secondary education is higher for urban than for rural women and men.

In Zanzibar, the proportions of both males and females with no education are higher than those observed in the mainland. However, Zanzibar records the highest proportion of the population with secondary or higher education. This is due to the fact that compulsory primary education incorporates three years of secondary education.

The highest proportions of women with no education (above 40 percent) and men (above 35 percent) are concentrated in the Dodoma, Arusha, Lindi, Mtwara, Iringa, Singida, Kigoma, Shinyanga and Mwanza regions. Dar es Salaam and Kilimanjaro regions have the lowest proportions of male and female respondents with no education (below 20 and 25 percent, respectively).

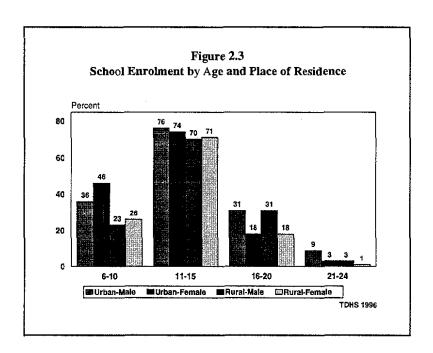
#### 2.6 School Enrolment

Table 2.6 and Figure 2.3 present the percentage of the de facto household population 6-24 years of age enrolled in schools by age, sex, and urban-rural residence. The school enrolment ratio is the number enrolled in a specific age group per hundred persons in that particular age group. As shown in this table, enrolment of children age 11-15 is higher than for children age 6-10 (71 vs. 27 percent) suggesting that many children start primary education after age 6 or 7. In age group 6-15 there is a remarkable urban-rural difference in enrolment with 45 percent of rural children and 57 percent of urban children enrolled. This is in contrast with enrolment ratios observed in the 1991-92 TDHS in which an urban-rural difference of 6 percent was recorded. Enrolment drops after age 15 with about 31 percent of male children and 18 percent of females age 16-20 years old, and 5 percent of males and 1 percent of females in their early 20s still in school.

Table 2.6 School enrolment

Percentage of the de facto household population age 6-24 years enrolled in school, by age, sex, and residence, Tanzania 1996

Male				Female		Total			
Age	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
6-10	36.3	23.0	25.1	45,9	26.0	29.5	41.2	24.5	27.3
11-15	76.3	70.3	71.3	73.9	70.6	71.2	75.1	70.4	71.3
Total 6-15	54.8	44.0	45.8	58.5	45.4	47.7	56.6	44.7	46.8
16-20	31.1	31.1	31.1	17.6	17.8	17.8	23.7	24.3	24.1
21-24	9.4	3.0	4.8	2.7	0.9	1.4	5.5	1.7	2.7



## 2.7 Housing Characteristics

To assess the economic and environmental conditions in which respondents live, women were asked questions about certain characteristics of their households, including electricity, sources of drinking water, time to water sources, type of toilet facility, floor materials, and number of rooms used for sleeping. Information on these characteristics is useful from a public health point of view, as well as indirectly in reflecting the household's socioeconomic status. This information on housing characteristics is given in Table 2.7.

Only 9 percent of households in Tanzania have electricity. Access to electricity is concentrated in urban areas where 36 percent of the households have electricity, compared to a mere 2 percent of rural households.

Table 2.7 Housing characteristics

Percent distribution of households by housing characteristics, according to residence, Tanzania 1996

		Residence	
Characteristic	Urban	Rural	Total
Electricity			
No	63.9	97.5	90.0
Yes	35.5	1.8	9.4
Missing/Don't know	0.7	0.6	0.6
Total	100.0	100.0	100.0
Source of drinking water			
Piped into residence	31.5	2.0	8.6
Public tap	46.3	23.1	28.3
Well in residence	0.8	1.3	1.2
Public well	13.6	31.6	27.6
Spring	1.8	15.1	12.1
River/stream	3.2	20.5	16.6
Pond/lake	1.1	4.5	3.7
Dam	0.0	1.0	0.8
Rainwater	0.0	0.1	0.1
Other	1.0	0.0	0.2
Missing/Don't know	0.6	0.7	0.7
Total	100.0	100.0	100.0
Time to water source			
(in minutes)	(2.6	21.5	20.7
<15 minutes	63.6	31.5	38.7
Median time to source	6.0	20.8	16.0
Sanitation facility			
Own flush toilet	3.6	0.5	1.2
Shared flush toilet	1.4	0.3	0.5
Traditional pit toilet	89.3	81.9	83.5
Vent. imp. pit latrine	3.3	0.4	1.1
No facility/bush	1.7	16.0	12.8
Missing/Don't know	0.7	0.9	0.8
Total	100.0	100.0	100.0
Floor material			
Earth/sand	35.4	90.6	78.2
Cement	63.4	8.5	20.8
Carpet/other	0.3	0.2	0.2
Missing/Don't know	0.9	0.7	0.8
Total	100.0	100.0	100.0

Table 2.7—Continued

Percent distribution of households by housing characteristics, according to residence, Tanzania 1996

		Residence	
Characteristic	Urban	Rural	Total
Persons per room			
1-2	65.0	56.6	58.5
3-4	27.0	28.9	28.5
5-6	5.2	9.0	8.1
7+	1.1	4.1	3.4
Missing/Don't know	1.7	1.3	1.4
Total	100.0	100.0	100.0
Mean number of persons			
per room	2.4	2.8	2.7
Level of houshold food consumption			
Always surplus	54.3	40.3	43.4
Sometimes deficit	39.2	52.0	49.2
Frequently deficit	3.3	4.9	4.5
Always deficit	2.3	2.0	2.1
Missing/Don't know	0.9	8,0	0.8
Total	100.0	100.0	100.0
Number of households	1,783	6,186	7,969

The source of drinking water is important because waterborne diseases, including diarrhoea and dysentery, are numerous in the country. Sources of water expected to be relatively free of these diseases are piped water, springs, and rainwater. Other sources like wells, rivers and streams, ponds and lakes, and gravity water are more likely to carry the bacteria that bring about these diseases. Table 2.7 shows that 37 percent of all households in Tanzania have access to piped water—78 percent of urban households and about 25 percent of rural households. About half of the rural households get their drinking water from wells and springs, while one-fourth use less safe sources such as rivers, ponds, and lakes. In urban

areas, 16 percent of households get their drinking water from wells and springs, but only 4 percent use less safe sources such as rivers, ponds, and lakes. In urban areas, 64 percent of the households have access to water within 15 minutes, compared to 32 percent of rural households.

Modern sanitation facilities are not yet available to large proportions of the households. The use of traditional pit toilets is still common in both urban and rural areas, accounting for about 89 percent of urban households and 82 percent of rural households. Households with no toilet facilities are more exposed to the risk of diseases such as dysentery, diarrhoea, and typhoid fever. Overall, about 13 percent of the households in

Tanzania have no toilet facilities. This problem is more common in rural areas, where 16 percent of the households have no toilet facilities, compared to 2 percent of households in urban areas.

The type of material used for the floor in these households is an indicator of the quality of housing as well as an indicator of health risk. Some flooring materials like earth and sand may pose a health problem because they may be breeding grounds for parasites such as ticks and jiggers and also may be a source of dust. They are also difficult to keep clean since they are not washable. Seventy-eight percent of Tanzanian households have floors made of earth or sand and only 21 percent are made of cement. One-third of households in urban areas and 91 percent of rural households have floors made of earth or sand. On the other hand, 63 percent of households in urban areas have cement floors, compared to only 9 percent of households in rural areas. In general, rural households have poorer quality floors than urban households.

Information on the number of rooms a household uses for sleeping was collected to determine the extent of crowding. On average, there are 2.7 persons per sleeping room, and this varies very slightly between urban and rural households.

In the 1996 TDHS, respondents were asked whether they thought their household was a surplus or deficit household in terms of food consumption. Forty-three percent of Tanzanian households indicated that they always have a surplus of food, while 56 percent of the households mentioned that they have food deficits. Food deficits are more common among rural than urban households (59 compared to 45 percent).

#### 2.8 Household Durable Goods

Respondents were asked about ownership of particular durable goods. Ownership of a radio and a television set is a measure of access to mass media; refrigerator ownership indicates the capacity for hygienic food storage; and ownership of a bicycle, motorcycle, or private car shows the means of transport available to the household. Information on ownership of these items is presented in Table 2.8.

The results indicate that 41 percent of households own a radio, compared to only 2 percent with a television. Both radio and television ownership is higher in urban than rural households. Bicycles are the most common means of transport owned by households; 25 percent of urban households and 34 percent of rural households own a bicycle. Only 1 percent of the households owns a car and most of them are located in urban areas. Half the rural households surveyed and 29 percent of urban households do not own any of the above durable goods.

Ownership of radios, televisions, and bicycles has increased since 1991-92. For example, the proportion of households with radios has increased from 33 to 41 percent and the proportion with bicycles has increased from 22 to

Table 2.8 Household durable goods
Percentage of households possessing various durable consumer goods, by residence, Tanzania 1996
Residence

	Resid	dence	
Characteristic	Urban	Rural	Total
Radio	65.4	33.8	40.9
Television	6.0	0.4	1.6
Refrigerator	7.5	0.4	2.0
Bicycle	25.0	33.8	31.9
Motorcycle	1.7	0.6	0.8
Private car	4.3	0.6	1.4
None of the above	29.4	50.3	45.6
Number of households	1,783	6,186	7,969

32 percent. The proportion of households with a television in urban areas has increased from a mere 1 percent in the 1991-92 TDHS to about 6 percent in 1996. The increase reflects the introduction of three television stations in the country during the period between the two surveys.

## 2.9 Background Characteristics of Respondents

Table 2.9 presents the percentage distribution of women and men by age, marital status, residence, level of education, and religion. Women and men were asked two questions to determine their ages, "In what month and year were you born?" and "How old were you at your last birthday?" Interviewers were trained in probing techniques for situations in which respondents were not able to state their ages or date of birth, and as a last resort, interviewers were trained to record their best estimate of the respondent's age. Results show that about 42 percent of women and 38 percent of men are in the age group 15-24, and 32 percent of women and 26 percent of men are in the 25-34 age group.

The vast majority of women and men live on the Mainland (97 percent), while only 3 percent live in Zanzibar. On the mainland, 22 percent of women and men live in urban areas, and three-fourths of women and men live in rural areas.

Data on marital status at the time of the survey show that 23 percent of women and 38 percent of men have never married, 67 percent of women and 57 percent of men were currently in unions, while 10 percent of women and 5 percent of men were divorced, separated, or widowed.

The proportion of women who have never attended school is more than twice that of men (29 vs. 14 percent). About 46 percent of women and 47 percent of men have completed primary education only, while 5 percent of women and 10 percent of men have gone beyond primary education.

Thirty-one percent of respondents are Moslems, an equal proportion are Catholics, one-fourth are Protestants, and 12 percent of women and 14 percent of men either adhere to traditional religions or have no religion.

## 2.10 Characteristics of Couples

Because the men who were interviewed individually in the TDHS were selected from the same house-holds in which women were interviewed, it is possible to match married men with their wives to form a sample of couples. The result does not exactly represent all married couples in Tanzania, since not all couples live together. Nevertheless, the sample of 1,125 couples can be viewed as a reasonable reflection of men and women who are living together. Table 2.10 presents the distribution of couples by age difference between spouses and level of education.

According to the 1996 TDHS, among 30 percent of Tanzanian couples, the husband is 0-4 years older than his wife, while among 38 percent of couples, the husband is 5-9 years older than his wife. Among only 3 percent of couples, the wife is older than her husband. On average, men are almost eight years older than their wives.

Among 61 percent of couples, both spouses have at least some education. Among 22 percent of couples, the husband has some education and the wife has none, while the wife has some education and the husband none among only 6 percent of couples. Cases in which neither spouse has been to school make up 11 percent of all couples.

#### 2.11 Educational Level of Survey Respondents

Tables 2.11.1 and 2.11.2 show the percent distribution of female and male respondents by highest level of education attended, respectively, according to age, residence, and region. As mentioned before, men are generally better educated than women. While 29 percent of women age 15-49 have had no formal education, only 14 percent of men age 15-59 have had no schooling. The proportion of respondents who

Table 2.9 Background characteristics of respondents

Percent distribution of women and men by selected background characteristics, Tanzania 1996

		Women			Men		
-		Number	of women	<del></del>	Number	of men	
Background characteristic	Weighted percent	Weighted	Un- weighted	Weighted percent	Weighted	Un- weighted	
Age 15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59	21.3 20.6 17.7 13.8 10.9 8.4 7.2 NA NA	1,732 1,676 1,440 1,118 888 680 585 NA NA	1,729 1,694 1,415 1,415 1,135 896 670 581 NA NA	21.6 16.4 13.4 12.1 11.1 9.1 6.6 5.2 4.4	488 371 301 272 251 206 149 118 100	493 375 293 267 248 216 145 119 100	
Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar Pemba Unguja	97.1 22.3 6.9 15.4 74.7 2.9 1.1 1.8	7,881 1,811 563 1,248 6,070 239 92 148	7,479 1,853 666 1,187 5,626 641 295 346	96.9 22.6 7.6 15.0 74.4 3.1 1.2	2,187 509 171 338 1,678 69 28 41	2,148 579 272 307 1,569 108 54 54	
Region Dodoma Arusha Kilimanjaro Tanga Morogoro Coast Dar es Salaam Lindi Mtwara Ruvuma Iringa Mbeya Singida Tabora Rukwa Kigoma Shinyanga Kagera Mwanza Mara	4.4 7.28 5.00 8.23 4.48 5.5.8 3.23 4.34 8.57 3.23 4.34 8.71 3.23 4.34 8.71 3.23 8.34 8.71 8.71 8.71 8.71 8.71 8.71 8.71 8.71	355 589 390 464 408 159 646 187 355 305 466 473 283 225 242 351 686 467 573 257	315 469 393 398 377 277 764 318 441 466 389 314 394 198 353 367 375 284 310 277	4.29 5.38 4.20 5.42 2.85 4.26 5.16 5.12 8.12 8.12 8.12 8.12 8.12 8.12 8.12 8	96 156 119 108 95 45 191 54 96 82 100 137 80 82 71 95 45 100 137 80 82 71 95 46 64	140 94 195 75 143 62 304 71 101 102 137 72 84 54 78 70 164 69 78 55	
Marital status Never married Married Living together Widowed Divorced Not living together Missing	23.2 59.9 6.7 3.1 4.9 2.1 0.0	1,887 4,864 548 250 399 172 1	1,899 4,787 617 250 400 166	37.5 53.0 4.1 0.9 1.8 2.5 0.2	847 1,196 91 20 40 57 4	861 1,161 107 21 43 60 3	
Education No education Primary incomplete Primary complete Secondary+	28.5 20.1 46.0 5.4	2,316 1,630 3,732 441	2,241 1,636 3,685 558	13.5 29.4 47.2 9.8	304 664 1,066 222	292 654 1,059 251	
Currently attending school Yes No	6.6 93.0	534 7,552	553 7,532	10.4 88.9	235 2,006	238 2,004	
Religion Moslem Catholic Protestant Traditional/none Other Missing	31.2 31.4 25.4 11.7 0.1 0.2	2,531 2,546 2,065 951 7 20 8,120	3,200 2,418 1,792 682 7 21 8,120	30.8 31.0 23.9 13.3 0.4 0.6	694 698 538 300 10 15	839 693 491 211 10 12 2,256	

completed secondary education is higher among men than women. Education is inversely related to age; older women and men are generally less educated than younger women and men. The percentage of women with no education rises with age, from 16 percent in the 15-19 age group to 64 percent in the age group 45-49. This means that younger women have had better educational opportunities than older women. This is again reflected in the higher percentage of women in the age group 15-19 who completed primary education (46 percent), compared to women age 45-49 (8 percent).

Urban women and men in mainland Tanzania are much more likely than rural women and men to go to school. One-third of rural women age 15-49 have no education, compared to only 14 percent of urban women in the mainland. Conversely, 58 percent of urban women on the mainland have completed primary education and 13 percent have been to secondary school, while 44 percent of rural women completed primary education and only 2 percent have been to secondary school. Seven percent of urban men have no education compared with 16 percent of rural men.

As a result of the difference in the secondary education system between the mainland and Zanzibar, a higher proportion of women with some secondary education is observed in Zanzibar (33 percent) compared to the mainland (5 percent). The proportion of men with some secondary education is also higher in Zanzibar (32 percent) than in the mainland (9 percent).

Table 2.10 Differential of characteristics between spouses

Percent distribution of couples by differences between spouses in age and level of education, Tanzania 1996

Difference	Percent/	Number of		
between spouses	Years	couples		
Wife older	3.2	36		
Husband older by:				
0-4 years	29.8	335		
5-9 years	38.4	432		
10-14 years	17.5	196		
15 years +	11.1	125		
Mean age difference (years)				
1st wife	7.5	1,087		
2nd wife	(11.5)	38		
All wives	7.6	1,125		
Education (percent)				
Both husband and wife				
not educated	10.7	120		
Wife educated, husband not	5.8	65		
Husband educated, wife not	22.4	252		
Both husband and wife				
educated	61.1	688		
Total	100.0	1,125		

A comparison of regions shows that the Arusha, Shinyanga, Mwanza, and Rukwa regions have the highest proportions of women with no education, while the Kilimanjaro region has the lowest proportion of women with no education. The highest percentages of men who have no education are recorded in the Dodoma, Coast, and Shinyanga regions, while again Kilimanjaro recorded about 2 percent of men with no education. The proportion of women with secondary education is high in Dar es Salaam (16 percent) and Kilimanjaro (11 percent), but lowest in the Tanga, Mtwara, and Kigoma regions (less than 1 percent).

#### 2.12 Exposure to Mass Media

Women and men were asked how often they read newspapers and listen to the radio and watch television. This information is important to programme planners seeking to reach people with family planning and health messages through the media. Table 2.12 shows the percentage of female and male respondents exposed to different types of mass media by age, residence, region, and level of education.

Results show that 13 percent of women and 26 percent of men read newspapers or magazines weekly, while 44 percent of women and 68 percent of men listen to the radio at least once a week, and only 9 percent of women and 18 percent of men watch television at least once a week. Five percent of women and 12 percent of men have access to all three mass media. However, 55 percent of women and 29 percent of men do not use any of these mass media. Access to media is somewhat higher among younger respondents and among those

living in urban as opposed to rural areas. As expected, educated persons are more likely to read newspapers or magazines, watch television, and listen to the radio than less educated persons.

Table 2.11.1 Level of education; women

Percent distribution of women by the highest level of education attended, according to selected background characteristics, Tanzania 1996

Background characteristic	No edu- cation	Primary incomplete	Primary complete	Secondary+	Total	Number of women
Age						
15-19	16.4	32.3	45.9	5.5	100.0	1,732
20-24	17.5	13.4	60.5	8.6	100.0	1,676
25-29	18.8	11.8	63.3	6.0	100.0	1,440
30-34	28.3	15.7	50.5	5.5	100.0	1,118
35-39	45.7	18.9	32,4	2.9	100,0	888
40-44	54.7	25.8	16.8	2.6	100,0	680
45-49	63.7	26.8	7.6	1.8	100.0	585
Residence						
Mainland	28.5	20.1	46.9	4.6	100.0	7,881
Total urban	13.5	15.6	57.8	13.1	100.0	1,811
Dar es Salaam city	14.4	13.4	54.5	17.7	100.0	563
Other urban	13.1	16.7	59.3	11.0	100.0	1,248
Total rural	32.9	21.4	43.6	2.1	100.0	6,070
Zanzibar	30.9	20.7	15.2	33.2	100.0	239
Pemba	44.4	20.0	10.8	24.7	100.0	92
Unguja	22.5	21.1	17.9	38.4	100.0	148
Region						
Dodoma	30.5	16.5	48.6	4.4	100.0	355
Arusha	38.2	13.2	44.1	4.5	100.0	589
Kilimanjaro	7.4	19.6	61.8	11.2	0.001	390
Tanga	18.3	29.4	51.5	0.8	100.0	464
Morogoro	30.8	23.1	45.1	1.1	100.0	408
Coast	31.8	15.5	51.6	1.1	100.0	159
Dar es Salaam	15.7	13.5	54.7	16.1	100.0	646
Lindi	24.8	22.6	48.1	4.4	100.0	187
Mtwara	34.5	22.2	42.9	0.5	100.0	355
Ruvuma	13.7	22.7	60.3	3.2	100.0	305
Iringa	34.4	20.6	39.3	5.7	100.0	466
Mbeya	23.2 29.7	22.3	50.6	3.8	100.0	473
Singida	29.7 29.3	20.8	45.9 52.5	3.6	100.0	283
Tabora	29.3 35.4	13.6	52.5	4.5 2.3	100.0	225
Rukwa	33.4 31.9	26.3 18.5	36.0 48.8	0.8	100.0	242
Kigoma	31.9 43.2	18.5	48.8 33.9	0.8 5.9	100.0	351
Shinyanga Kagera	26.8	22.9	33.9 48.9	3. <del>9</del> 1.4	100.0 100.0	686 467
Kagera Mwanza	20.8 37.4	22.9	48.9 37.1	1.4 3.2	100.0	467 573
Mara	20.9	24.9	52.3	1.8	100.0	257
Total	28.5	20.1	46.0	5.4	100.0	8,120

Table 2.11.2 Level of education: men

Percent distribution of men by the highest level of education attended, according to selected background characteristics, Tanzania 1996

		Level	of educatio	n: men		
Background characteristic	No edu- cation	Primary incomplete	Primary complete	Secondary+	Total	Number of men
Age		4= 4				
15-19	9.2	47.4	37.3	6.1	100.0	488
20-24	7.6	15.3	64.1	13.0	100,0	371
25-29	8.2	12.3	68.3	11.1	100.0	301
30-34	8.1	15.4	66.5	9.9	100.0	272
35-39	16.9	17.3	56.4	9.4	100.0	251
40-44	19.4	36.6	29.0	15.1	100,0	206
45-49	22.6	41.7	25.5	10.3	100.0	149
50-54	28.2	55.0	9.9	6.8	100.0	118
55-59	35.2	<b>51</b> .1	8.3	5.4	100.0	100
Residence						
Mainland	13.5	29.4	48.0	9.1	100.0	2,187
Total urban	6.8	22.3	50.1	20.8	100.0	509
Dar es Salaam city	8.1	15.4	<b>5</b> 1.8	24.6	100.0	171
Other urban	6.2	25.8	49.2	18.8	100.0	338
Total rural	15.5	31.5	47.4	5.6	100.0	1.678
Zanzibar	13.4	31.5	22.9	32.1	100.0	69
Pemba	27.8	37.0	13.0	22.2	100.0	28
Unguja	3.7	27.8	29.6	38.9	100.0	41
Region						
Dodoma	22.1	29.3	41.4	7.1	100.0	96
Arusha	17.0	19.1	54.3	9.6	100.0	156
Kilimanjaro	1.5	24.1	60.5	13.8	100.0	119
Tanga	4.0	36.0	60.0	0.0	100.0	108
Morogoro	13.3	37.8	43.4	5.6	100.0	95
Coast	22.6	19.4	46.8	11.3	100.0	45
Dar es Salaam	8.2	15.8	51.3	24.7	100.0	191
Lindi	16.9	31.0	46.5	5.6	100.0	191 54
	10.9	51.5	36.6	3.0 1.0		96
Mtwara	5.9	30.4	59.8	3.9	100.0	
Ruvuma					100.0	82
Iringa	13.1	32.1	44.5	10.2	100.0	100
Mbeya	8.3	25.0	55.6	11.1	100.0	137
Singida	13.1	27.4	54.8	4.8	100.0	80
Tabora	11.1	24.1	51.9	13.0	100.0	82
Rukwa	19.2	37.2	38.5	5.1	100.0	71
Kigoma	18.6	28.6	47.1	5.7	100.0	95
Shinyanga	22.6	32.3	36.0	9.1	100.0	202
Kagera	14.5	27.5	47.8	10.1	100.0	139
Mwanza	17.9	35.9	42.3	3.8	100.0	176
Мага	9.1	36.4	41.8	12.7	100.0	64
<b>Total</b>	13.5	29.4	47.2	9.8	100.0	2,256

		Women					Men					
Background characteristic	No mass media	Read newspaper weekly	Watch television weekly	Listen to radio weekly	All three media	Number of women	No mass media	Read newspaper weekly	Watch television weekly	Listen to radio weekly	All three media	Number of men
Age 13-19		15.0		42.0			20.0					
15-19	54.1	15.2 16.7	10.2	43.0	5.8	1,732 1,676	30.9	23.7 33.1	19.9	66.2	12.6	488
20-24	47.7	16.7	11.7	49.9	6.2	1,0/6	23.2	33.1	25.5	74.3	18.0	371
25-29	52.2	15.1	10.1	45.9	6.0	1,440	23.7	30.1	23.4	<u>7</u> 2.7	16.3	301
30-34	55.6	11.8	7.9	42.1	3.8	1,118	26.2	29.8	17.6	71.8	12.2	272
35-39	56.5	9.3 7.9	6.4	42.3	3.9	888	30.3	22.5 29.8	15.3	68.3	11.6 10.9	251
40-44	60.1		4.7	39.0	1.3	680	28,8	29.8	16.0	66,8	10.9	206
45-49	68,7	5,3	3.8	30.3	1.5	585	31.7	20.7	11.4	67,2	7.8	149
50-54	NA	NA	NA	NA	NA	NĀ	41.9	ī3.1	3.5	<b>5</b> 7.6	24	118
55-59	NA	NA	NA	NA	NA	NA	50.0	14.0	2.6	45.9	1.9	100
Residence												
Mainland	55.5	13.0	8.1	42.5 73.6	4.6	7,881	30.1	25.3 63.6	16.5	67.3	11.4	2,187 509
Total urban	22.5	39.2	25.6	73.6	16.6	1,811	7.8	63.6	42.7	89.3	36.6	309
Dar es Salaam city	7.7	60.7	47.4	88.7	35.0	563	1.5	82.4	69.5	94.1	59.9	íží
Other urban	29.3	29.5	15.8	66.7	8.3	1,248	11.0	54.2	29.1	86.9	24.8	338
Total rural	65.3	5.2	2.8	33.3	1.0	6,070	36.9	13.7	8.6	60.6	3.8	1,678
Zanzibar	21.1	14.8	34.4	75.1	9.4	239	4.1	49.4	63,7	92.9	40.5	69
Pemba	29.2	6.4	18.6	68.5	1.7	92	7.4	24.1	18.5	90.7	7.4	28
Unguja	16.2	19.9	44.2	79.2	14.2	148	1.9	66.7	94.4	94.4	63.0	41
2 3	10.2	17.7	77.2	77.2	14.2	140	1.7	00.7	74.4	74.4	05.0	71
Region Dodoma	55.6	12.7	10.2	40.6	4.8	355	35.0	16.4	18.6	59.3	7.1	96
Arusha	58.0	15.6	7.9	39.9	4.5	589	41.5	28.7	19.1	57.4	16.0	156
Kilimanjaro	33.6	13.2	9.2	64.4	4.6	390	24.6	21.0	15.9	72.3	8,7	119
Tanga	61.6	5.0	8.8	36.2	2.0	464	41.3	14.7	13.3	57.3	10.7	108
Morogoro	62.9	10.9	5.8	36.6	3.4	408	45.5	18.2	14.0	50.3	5.6	05
	33.9	18.1	6.5	6 <b>5</b> .0	2.5	159	12.9	22.6	29.0	82.3	9.7	95 45
Coast	8.0	58.6	44.1	88.4	32.5	646		79.6	65.8	93.1	55.9	191
Dar es Salaam	49.7	20.0	44.1			187	2.0	19.7		85.9		54
Lindi	49.7	8.2 2.3	3.4	48.1 27.7	1.6	355	14.1	19.7	2.8	84.2	1.4	96
Mtwara	70.1	2.3	3.4	27.7	0.7		14.9	13.9	1.0	04.Z	0.0	90
Ruvuma	57.3	4.5 4.9	2.8 2.6	41.4	1.1	305	27.5	24.5	2.0	72.5	1.0	82
Iringa	70.7	4.9	2.6	28.8	0.8	466	48.2	12.4	2.9	48.9	1.5	100
Mbeya	54.1	12.4	1.6	42.4	1.0	473	31.9	25.0	6.9	66. <u>7</u>	5.6	137
Singida	65.2	12.4 9.9 9.1 5.1	3.8	31.5	1.3	283	35.7	16.7	11.9	60.7	3.6	80 82 71 95 202
Tabora	57.1	9.1	7.6	40.9	3.5	225 242	25.9	33.3	11.1	72.2	7.4	82
Rukwa	73.4	5.1	3.4	<b>2</b> 4.9	1.4	242	50.0	12.8	11.5	48.7	10.3	71
Kigoma	58.9	4.6	2.5	40,3	0.5	351	24.3	14.3	5.7	72.9	1.4	95
Shinyanga	69.1	9.1	4.0	<b>2</b> 9.6	2.9	686	47.0	21.3	9.1	52.4	8.5	202
Kagera	51.4	7. <b>7</b>	5.6	45.1	1.1	467	23.2	20.3	17.4	73.9	10.1	139
Mwanza	67.7	8.1	1.6	31.9	1.0	573	26.9	17.9	14.1	70.5	9.0	176
Mara	59.6	8.7	0.4	39.7	0.4	257	23.6	25.5	18.2	69.1	7.3	64
Education												
No education	76.3	0.2	2.3	23.2	0.1	2,316	60.8	2.4	5.9	37.5	0.8	304
Primary incomplete	61.1	$6.\overline{1}$	4.8	36.9	1.2	1,630	35.5	17.5	11.4	61.5	6.1	664
Primary complete	43.6	18.9	10.4	53.7	5.8	3,732	21.6	29.9	19.6	76.1	14.0	1.066
Secondary+	7.1	57.0	45.1	87.9	33.0	441	5.0	65.6	46.2	91.4	38.6	222
Ť	54.5	13.1	8.8	43.5	4.8	8,120	29.3	26.1	18.0	68.1	12.3	2,256
Total women/men	34.3	13.1	8.8	43.3	4.8	0,120	49.3	∠0.1	0.61	Un.I	14.3	2,230

## 2.13 Employment and Occupation

In the 1996 TDHS, information was collected from women regarding their current employment situation. Table 2.13 shows that 46 percent of women were unemployed; the proportion not working was higher among younger women and those residing in Zanzibar and the Mtwara region.

Women who reported to be working at the time of the survey were asked if they were working for pay, selling things, or working on a family farm or in a family business. Forty-eight percent reported being self-employed, with 39 percent working on a family farm, 17 percent engaged in the food processing business, and a small proportion selling wild products or engaged in crafts or skilled work. Fifteen percent of women combine agriculture with other economic activities of their own. Another 15 percent of women were working for others and 7 percent were working in agriculture jobs.

In the 1996 TDHS, men were asked to state their occupation or the kind of work they were mainly doing. Table 2.14 gives the percent distribution of men age 15-59 by current occupation according to background characteristics. Twelve percent of men were not working. Most men (64 percent) are occupied in agriculture and other related activities. About 3 percent are in a professional job, while an equal proportion are employed in sales or services, and 16 percent are in skilled or unskilled manual work.

As expected, employment in nonagricultural occupations is relatively more common among men in urban areas and among those with formal education. More than 60 percent of men on the mainland are employed in an agricultural occupation.

Table 2.13 Employment: women

Percentage of women in various employment categories, according to selected background characteristics, Tanzania 1996

				w	orking for s	elf			Working	for others			
	Not working	Any work	Agri- culture	Wild product	Food process- ing	Craft	Shop/ taxi	Agri- culture and any other	Any work	Agri- culture	Agri- culture self and other	Missing	Number of women
Age		20.0							40.5				1.722
15-19	62,3	30.0	23.5	1.4	9.3	2.0	0.4	7.1	19.7	9.9	3.5	0.0	1,732
20-24	47.5	47.1	36.7	1.6	15.9	3.1	1.5	12.5	14.3	5.8	2.7	0.1	1,676
25-29	42.7	52.8	42.8	1.8	17.5	4.6	1.8	16.1	12.2	4.7	2.5	0.0	1,440
30-34	40.3	53,6	41.6	2.3	20.3	4.0	2.4	16.7	14.0	5.4	1.6	0.3	1,118
35-39	35.9	58.2	46.3	3.2	25.0	4.1	0.9	20.8	14.8	5.6	2.0	0.0	888
40-44	35.0	60.3	50.6	2.5	24.7	4.1	0.6	20.9	11.5	6.6	1.7	0.1	680
45-49	40.2	56.4	48.2	2.4	20.1	3.5	0.5	17.3	9.4	5.5	2.5	0.0	585
Residence													
Mainland	45.7	48.6	39.1	1.9	17.7	3.3	1.2	14.7	14.6	6.6	2.6	0.1	7,881
Total urban	47.7	37.7	16,6	1.8	16.1	3.9	2.6	6.7	31.6	7.0	1.2	0.1	1,811
Dar es Salaam city	56.9	29.0	4.1	0.9	17.4	2.3	2.6	1.5	30.0	2.3	0.3	0.0	563
Other urban	43,5	41.6	22.3	2.1	15.5	4.6	2.6	9.0	32.2	9.1	1.6	0.1	1.248
Total rural	45.2	51.8	45.8	1.9	18.2	3.2	0.8	17.2	9.6	6.4	3.0	0.1	6,070
Zanzibar	53.7	41.2	24.6	5.6	6.8	7.8	1.2	6.9	11.0	2.8	0.3	0.0	239
Pemba	55.9	42.4	33.9	3.1	8.5	6.4	0.3	8.8	4.1	0.7	0.7	0.0	92
Unguja	52.3	40.5	18.8	7.2	5.8	8.7	1.7	5.8	15.3	4.0	0.0	0.0	148
Region													
Dodoma	42.2	51.1	41.6	3.8	26.0	4.1	1.6	21.9	14.3	7.0	0.6	0.0	355
Arusha	54.2	37.1	26.4	2.6	3.8	1.9	1.9	3.2	18.3	4.5	1.1	0.2	589
Kilimanjaro	46.3	41.0	33.6	0.8	3.8	2.3	1.3	1.8	28.5	14.8	2.3	0.5	390
Tanga	56.3	39.4	25.9	0.5	7.8	5.3	0.3	2.0	10.8	3.3	1.3	0.0	464
Morogoro	41.9	50.1	42.2	2.7	21.5	1.1	0.8	17.2	15.9	9.5	0.5	0.3	408
Coast	58.5	40.1	21.7	1.4	15.5	4.3	0.4	4.3	5.8	1.4	1.1	0.0	159
Dar es Salaam	57.2	30.0	3.8	1.4	17.3	2.4	2.5	1.3	27.2	2.2	0.3	0.0	646
Lindi	53.8	42.5	30.8	5.7	19.2	4.1	0.3	14.8	14.5	9.4	5.3	0.0	187
Mtwara	72.8	24,5	18.4	2.9	9.3	1.8	0.3	6.8	15.2	10.2	8.2	0.0	355
Ruvuma	49.6	45.7	36.9	1.7	29.2	1.8	1.3	24.0	18.9	12.0	7.7	0.0	305
												0.0	466
Iringa	31.9	59.6	56.0	1.5	42.9	5.9	1.8	44.5	23.1	11.1	5.4		
Mbeya	22.6	72.6	57.0	2.2	32.8	2.9	0.6	26.4	11.5	8.9	1.9	0.0	473
Singida	19.5	74.4	64.5	3.0	40.9	9.4	1.8	37.8	15.2	9.6	2.5	0.3	283
Tabora	54.5	41.4	33.3	1.0	21.7	4.0	2.0	19.2	13.1	9.1	5.1	0.0	225
Rukwa	34.3	64.3	59.8	1.1	32.3	1.1	0.8	31.2	12.2	10.8	8.5	0.0	242
Kigoma	55.3	43.9	37.6	1.6	11.4	2.5	1.1	11.4	6.8	5.2	4.1	0.0	351
Shinyanga	29.6	66.7	63.7	0.8	6.4	2.9	1.6	8.5	8.3	3.5	0.8	0.0	686
Kagera	46.1	52.1	44.7	3.5	14.4	3.2	1.1	13.4	8.5	3,2	3.2	0.4	467
Mwanza	48.1	47.7	43.5	0.0	12.3	2.9	1.0	12.9	9.0	2.9	0.3	0.0	573
Mara	56.7	41.9	39.4	2.9	11.9	6.5	0.7	17.7	3.2	2.5	0.4	0.0	257
Education													
No education	44.3	54.2	48.2	2.4	16.6	2.1	0.4	14.8	5.2	3.9	2.1	1.0	2,316
Primary incomplete	52.4	43.8	35.7	2.0	17.5	2.8	0.7	14.7	10.6	7.2	2.8	0.1	1,630
Primary complete	44.3	48.9	37.1	1.9	19.2	4.2	1.4	15.4	17.6	6.9	2.8	0.1	3,732
Secondary+	45.2	29.6	12.8	1.3	6.6	6.9	6.2	5.4	52.2	12.9	0.9	0.4	441
Total	46.0	48.3	38.7	2.0	17.4	3.5	1.2	14.5	14.5	6.5	2.5	0.1	8,120

Table 2.14 Occupation: men

Percent distribution of men by current occupation and type of nonagricultural employment, according to selected background characteristics, Tanzania 1996

		Occupation									
Background characteristic	Not currently employed	Agri- culture	Pro- fessional/ technical	Sales/ service	Skilled manual	Unskilled manual	Other	Missing	Total	Number of men	
Age											
15-19	45.2	39.5	0.7	0.9	4.1	4.9	3.6	1.2	100.0	488	
20-24	8.6	60.1	0.3	2.1	12.5	14.9	1.2	0.2	100.0	371	
25-29	1.6	71.6	2.4	2.7	10.9	9.9	0.7	0.2	100.0	301	
30-34	0.2	72.4	4.4	2.6	6.8	13.1	0.5	0.0	100.0	272	
35-39	0.0	70.7	7.7	6.6	8.4	5.7	0.6	0.3	100.0	251	
40-44	0.7	67.2	7.7	4.5	7.0	9.5	2.7	0.7	100.0	206	
45-49	0.0	74.8	4.1	4.4	9.1	7.1	0.5	0.0	100.0	149	
50-54	0.5	87.2	5.6	1.4	3.7	1.5	0.0	0.0	100.0	118	
55-59	0.0	88.8	1.2	1.9	4.2	1.9	0.0	1.9	100.0	100	
Residence											
Mainland	11.3	64.8	3.2	2.9	7.7	8.3	1.4	0.5	100.0	2,187	
Total urban	14.1	24.4	5.9	6.8	21.5	24.5	2.3	0.5	100.0	509	
Dar es Salaam city	13.6	4.0	6.6	12.5	25.0	33.5	3.3	1.5	100.0	171	
Other urban	14.3	34.7	5.6	3.9	19.8	19.9	1.9	0.0	100.0	338	
Total rural	10.4	77.0	2.4	1.7	3,5	3.4	1.1	0.5	100.0	1,678	
Zanzibar	19.6	44.5	4.1	0.0	11.5	15.9	3.3	1.1	100.0	69	
Education											
No education	1.4	89.8	0.2	1.7	1.8	3.3	1.2	0.6	100.0	304	
Primary incomplete	25.3	60.6	0.6	1.3	3.6	<b>5</b> .7	2.4	0.6	100.0	564	
Primary complete	3.7	67.5	2.4	3.6	10,9	10.7	0.7	0.4	100.0	1,066	
Secondary+	21.7	23.3	19.6	5.0	13,4	13.7	2.8	0.6	100.0	222	
Total	11.5	64.2	3.2	2.8	7.8	8.5	1.5	0.5	100.0	2,256	

#### CHAPTER 3

#### **FERTILITY**

A major objective of the 1996 TDHS was to estimate fertility levels, trends, and differentials. Like the 1991-92 TDHS, detailed information from all women on current, cumulative, and past levels of fertility was collected for the 1996 TDHS. Each woman age 15-49 was asked to provide information on the total number of sons and daughters to whom she had given birth who were living with her, the number living elsewhere, and the number who had died. She was then asked for each birth, the month and year of birth, name, sex, and survival status of the child and for those who died, age at death. This information was used to obtain various measures of fertility. It should be noted that the birth history method collects responses from surviving women and assumes that women's fertility does not differ significantly with survival status.

### 3.1 Current Fertility

Current fertility is important because of its direct relevance to population policies and programmes. The indices used to study current fertility include age-specific fertility rates (ASFR), the total fertility rate (TFR), the general fertility rate (GFR), and the crude birth rate (CBR). ASFRs are calculated by dividing the number of live births during a specified period to women in a particular age group at the time of the birth by the number of woman-years lived in that age group during the specified period. The TFR is five times the sum of the ASFRs and is considered as a useful means of summarizing the overall level of fertility. The TFR can

be interpreted as the number of children a woman would have at the end of her reproductive life if she experienced the current age-specific fertility. Other summary measures of fertility include the GFR which is the number of live births per 1,000 women of reproductive age and CBR which is the annual number of live births per 1,000 population.

Measures of current fertility are estimated for the three-year period preceding the survey, which corresponds roughly to 1993-1996. The choice of the estimation period is a compromise between providing the most recent information, avoiding problems of omission or displacement of births due to a recall lapse, and obtaining enough cases to reduce the sampling errors.

Table 3.1 presents several fertility measures including ASFRs, TFRs, CBR, GFR, for all of Tanzania, and for urban and rural areas. ASFRs by residence are shown also in Figure 3.1. The TFR indicates that if fertility were to remain constant at current levels, the average Tanzanian woman would bear 5.8 children in her lifetime, a decline from 6.3 in the 1991-92 TDHS. As seen in Table 3.1, Tanzanian women bear children early in the reproductive period. A Tanzanian woman would give birth to two children by age 25 and to more than three children by age 30.

Table 3.1 Current fertility

Age-specific and cumulative fertility rates and crude birth rate for the three years preceding the survey, by urban-rural residence, Tanzania 1996

	Resid	ence		
Age group	Urban	Rural	Total	
Age				
15-19	115	143	135	
20-24	183	288	260	
25-29	209	270	255	
30-34	138	239	217	
35-39	82	192	167	
40-44	41	97	87	
45-49	(54)	40	42	
TFR 15-49	4.11	6.34	5.82	
TFR 15-44	3.84	6.14	5.61	
General fertility rate	145	216	199	
Crude birth rate	36.3	41.9	40.8	

Note: Rates are for the period 1-36 months preceding the survey. Rates for age group 45-49 may be slightly biased due to truncation. Rates in parentheses are based on 125 to 249 women years of exposure.

TFR: Total fertility rate expressed per woman.

GFR: General fertility rate (births divided by number of women 15-49), expressed per 1,000 women.

CBR: Crude birth rate expressed per 1,000 population.

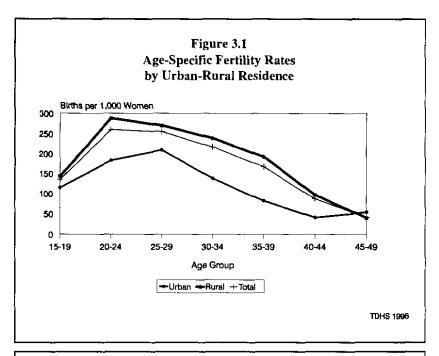
The childbearing peak occurs in the ages 20-29 when women have almost half their lifetime births. However, fertility declines sharply after the mid-30s, with the ASFRs being only 42 births per 1,000 women at age group 45-49 (see Figure 3.1).

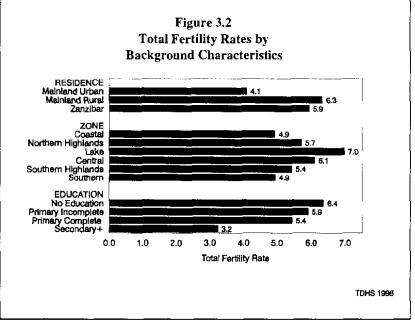
Fertility levels are much higher in rural areas (TFR of 6.3 children) than in urban areas (4.1). This pattern of fertility differentials by urban-rural residence is evident at every age but is more prominent at ages 30-34, 35-39, and 40-44.

The results show a GFR for the three-year period of 199 births per 1,000 women and a CBR of 41 live births per 1,000 population. The CBR is lower than those from the 1991-92 TDHS (43 live births per 1,000 population) and the 1988 Census (46 births per 1,000 population). However, it should be noted that the census estimates were obtained using indirect methods, thus part of the difference may be due to a difference in methodology.

#### 3.2 Fertility Differentials

Table 3.2 presents total fertility rates, percentage of women currently pregnant and the mean number of children ever born to women ages 40-49 years (completed fertility) for major





sub-groups of the population. The measure of completed fertility is vulnerable to understatement of parity by older women, most of whose births took place longer ago and who consequently may omit children who died young.

Various differentials in current fertility are notable from Table 3.2 and Figure 3.2.TFRs are lowest in the Coastal and Southern zones (4.9 children per woman). Southern Highlands and Northern Highlands zones have TFRs of 5.4 and 5.7 children per woman, respectively. The Lake and Central zones have the highest level of fertility (7.0 and 6.1 children per woman, respectively).

Women with secondary education have a total fertility rate of 3.2 children per woman, which is much less than that of other women. Women who have completed primary education have a total fertility of 5.4; women with incomplete primary education and women with no formal education have a total fertility rate of 5.9 and 6.4, respectively. The gap in fertility between women with no education and those with some secondary education has widened significantly in the five years between 1991-92 and 1996. In 1991-92, women who had never gone to school had an average of 2.3 children more than women who had attended secondary education. In 1996, the difference was 3.2 children.

Table 3.2 also allows a general assessment of trends in fertility over time among population subgroups. The comparison of completed fertility (mean number of children ever born) with the TFR provides an indicator of the direction and magnitude of fertility change in the country during the past 20-25 years. The results suggest that there has been a major decline in fertility (more prominent in urban areas) in the country during the period as shown by a TFR of 5.8 births, compared with a mean number of children ever born to women in their 40s (age 40-49) of 7.0 children. This decline is confirmed by looking at trends in TFRs obtained from previous surveys (see next section).

At the time of the survey, 10 percent of interviewed women reported that they were pregnant. This may be an underestimate of the true percent pregnant because many women at early stages of pregnancy will not yet know for sure that they are pregnant.

## 3.3 Fertility Trends

Table 3.3 examines trends in fertility in Tanzania by comparing the results of the 1996 TDHS with the earlier 1991-92 TDHS. This comparison is appropriate because the methods of data collection and rate calculation were identical in the two surveys. The TFR calculated from the 1991-92 TDHS was 6.3 children per woman, compared with 5.8 derived from the 1996 TDHS, showing a decline in fertility of 7 percent during the period between 1989-92 and 1993-96. Examination of changes in age-specific fertility rates in Figure 3.3 shows a roughly equal declines at all ages.

Table 3.2 Fertility by background characteristics

Total fertility rate for the three years preceding the survey, percentage currently pregnant and mean number of children ever born to women age 40-49, by selected background characteristics, Tanzania 1996

Background characteristic	Total fertility rate 15-49	Percentage currently pregnant 15-49	Mean number of children ever born to women age 40-49
Residence	· · · · · · · · · · · · · · · · · · ·	<del></del> -	
Mainland	5.81	9.74	6.95
Total urban	4.09	7.13	6.07
Dar es Salaam city	3.43	5.71	5.48
Other urban	4.36	7.77	6.28
Total Rural	6.33	10.52	7.13
Zanzibar	(5.93)	10.17	7.65
Zones			
Coastal	4.93	8.92	6.53
Northern Highlands	5.71	10.05	6.65
Lake	6.97	11.54	7.63
Central	6.10	9.45	6.90
Southern Highlands	5.42	9.17	6.80
Southern	4.94	6.95	6.55
Education			
No education	6.36	9.82	7.13
Primary incomplete	5.90	7.14	7.11
Primary complete	5.43	11.10	6.31
Secondary+	3.24	7.66	4.79
Total	5.82	9.75	6.97

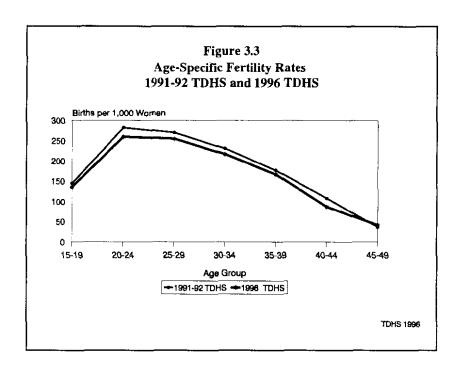
Note: Total fertility rates in parentheses are based on 500-999 women age 15-49.

<sup>1</sup>Rate for women age 15-49 years

Table 3.3 Trends in current fertility rates

Age specific fertility rates and total fertility rates, Tanzania, 1989-1996

	1991-92	1996
Age	TDHS	TDHS
group	1989-92	1993-96
15-19	144	135
20-24	282	260
25-29	270	255
30-34	231	217
35-39	177	167
40-44	108	87
45-49	37	42
Total fertility rate	6.25	5.82



A second way to analyze fertility trends is by using the 1996 TDHS data alone for successive five-year periods preceding the survey as given in Table 3.4. Because women age 50 and above were not interviewed in the survey, the rates are successively truncated as the number of years before the survey increases. According to the table, there has been a gradual decline in fertility during the past 20 years, e.g., the cumulative fertility of women ages 15-34 decreased from 5.4 to 4.3 during this period.

Table 3.5 gives fertility rates for ever-married women by duration since first marriage. Like the rates by age, these are also truncated as the duration and period before the survey increase. The data show that fertility rates among women married less than 10 years have not changed significantly over time, perhaps because newly married couples tend to start their families right after marriage.

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Age-specific fertility rates for five-year periods preceding the survey, by woman's age at the time, Tanzania 1996

	Numbe	er of years p	receding the	survey	
Woman's _ age	0-4	5-9	10-14	15-19	
15-19	130	151	153	174	
20-24	261	284	290	295	
25-29	258	278	302	299	
30-34	218	248	269	[305]	
35-39	174	202	[228]		
40-44	90	[148]	-	_	
45-49	[42]	-	-	-	
TFR 15-34	4.3	4.8	5.0	5.4	

Note: Age-specific fertility rates per 1,000 women. Estimates enclosed in brackets are truncated.

Table 3.5 Trends in fertility by marital status

Fertility rates for ever-married women by duration (years) since first marriage for five-year periods preceding the survey, Tanzania 1996

Marriage	Number of years preceding the survey									
duration	0-4	5-9	10-14	15-19						
0-4	319	347	342	356						
5-9	275	298	327	309						
10-14	242	276	290	304						
15-19	199	226	251	[261]						
20-24	139	190	[212]	-						
25-29	65	[116]		-						

Note: Fertility rates per 1,000 women. Estimates enclosed in brackets are truncated.

## 3.4 Retrospective Fertility

Measures of lifetime fertility reflect the accumulation of births over the past 30 years or so, and therefore have limited relevance to current fertility levels, especially if the country has experienced a decline in fertility. Information on lifetime fertility is useful for examining average family size across age groups as well as estimating levels of primary infertility. Lifetime fertility is also useful in understanding changes that have taken place in the age pattern of current fertility.

The percent distribution of women by age and number of children ever born is given in Table 3.6 for all women as well as for currently married women. The mean number of children ever born for all women is 3.1, which means that, on average, Tanzanian women age 15-49 had 3.1 births, while currently married women in Tanzania have on average 3.9 births. In contrast, women at the end of their reproductive life have given birth to an average of 7.3 children, of whom 5.8 survived. Therefore, women at the end of their reproductive period have lost one-fifth of their children to mortality. A comparison of the mean number of children ever born reported in the 1996 TDHS and the 1991-92 TDHS shows a decline in completed fertility over time at all ages except among women age 45-49 where it shows a slight increase.

Age	.ge		Nur	nber of	childre	n ever t	orn					Mean number of	Mean number of living	Number of	
group	0	1	2	3	4	5	6	7	8	9	10+	Total	CEB	children	women
			· ·				A	LL W	OMEN						
15-19	79.1	18.6	1.9	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.23	0,21	1,732
20-24	25.6	35.4	23.9	11.2	3.0	0.7	0.1	0.0	0.0	0.0	0.0	100.0	1.33	1.15	1,676
25-29	8.2	13.2	20.9	24.5	19.3	9.8	3.3	0.7	0.1	0.0	0.0	100.0	2.80	2.43	1,440
30-34	3.9	7.0	9.9	15.2	18.9	18.4	12.9	9.0	3.3	1.3	0.4	100.0	4.21	3.59	1,118
35-39	3.7	4.4	5.3	7.5	12.4	13.7	17.7	14.5	10.2	6.3	4.3	100.0	5.46	4.59	888
40-44	1.8	3.5	4.6	3.1	7.2	10.6	14.1	14.5	14.1	10.4	16.1	100.0	6.70	5.52	680
45-49	1.9	2.8	4.8	4.4	4.7	5.9	8.3	13.6	16.2	12.2	25.2	100.0	7.29	5.76	585
Total	24.8	15.6	11.7	10.2	8.9	7.2	6.1	5.1	3.9	2.6	3.7	100.0	3.09	2.58	8,120
•						CUR	RENTI	LY MA	RRIE	D WON	MEN				
15-19	42.5	49.2	6.9	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.67	0.60	401
20-24	13.9	35.9	29.9	14.9	4.3	1.0	0.2	0.0	0.0	0.0	0.0	100.0	1.63	1.41	1,131
25-29	4.9	10.5	20.7	26.4	21.7	10.9	3.9	0.8	0.1	0.0	0.0	100.0	3.03	2.62	1,184
30-34	2.4	5.6	9.0	14.5	19.5	19.5	13.7	10.1	3.8	1.5	0.4	100.0	4.44	3.80	947
35-39	3.1	4.1	5.2	6.8	11.8	13.3	17.8	15.2 15.3	11.1	6.5	5.2 17.5	100.0 100.0	5.62	4.75	740
40-44 45-49	1.2	3.1 2.0	4.2 3.5	3.2 4.1	6.8 3.8	10.6 5.4	12.8 8.0	13.5	14.7 16.9	10.6 11.7	17.5 28.8	100.0	6.87 7.63	5.65 6.07	561 447
<b>▼J~47</b>	1.2	<u>-</u>													• • • •
Total	8.2	15.5	14.3	13.1	11.7	9.4	7.7	6.8	5.1	3.2	5.0	100.0	3.94	3.31	5,411

The distribution of children ever born by age shows that early childbearing is quite common in Tanzania; 21 percent of all women age 15-19 have already had at least one birth.

The percent childless among women at the end of the reproductive period is an indirect measure of *primary infertility*—the proportion of women who are unable to bear children at all. Table 3.6 shows that primary sterility is low, about 2 percent. The incidence of primary sterility seems to have declined from about 4 percent in the 1991-92 TDHS to 2 percent in the 1996 TDHS.

#### 3.5 Birth Intervals

Information on the length of the birth interval provides insight into birth spacing patterns. Previous research has shown that short birth intervals are closely associated with poor health of children, especially during infancy. This is particularly true for babies born at an interval of less than 24 months. Thus, the study of birth intervals is important in understanding the health status of mothers, infants, and young children. Table 3.7 shows the distribution of births in the five years before the survey by the interval since previous birth, according to various demographic and background characteristics (first births have been excluded).

As with the 1991-92 TDHS, the 1996 TDHS indicates that most Tanzanian children (83 percent) are born after a "safe" hirth interval (24 or more months apart), with ahout 43 percent born at least 36 months after a prior birth. Nevertheless, 17 percent of non-first births occur less than 24 months after the preceding birth, with 7 percent occurring less than 18 months since the previous birth. The overall median birth interval is 34 months.

Expectedly, younger women tend to have shorter birth intervals than older women. On the other hand, there is no significant difference in median birth interval by birth order or sex of the previous child.

The survival status of the previous birth is strongly associated with the length of the preceding birth interval. The median birth interval is six months shorter for children whose previous sibling died compared with children whose previous sibling survived. Twenty-two percent of children whose preceding sibling died are born after an interval of less than 18 months, compared with only 4 percent among children whose preceding sibling survived.

The median birth interval in urban areas is four months longer than that for rural areas on the mainland. Thirteen percent of the births in urban areas occur at intervals which are "too short" (less than 24 months), compared with 18 percent of births in the rural areas. The percentage of births with an interval of four years or more is higher for urban than rural births (30 percent vs. 17 percent). Births in the Southern zone exhibit a higher median birth interval (38 months) than the other zones.

#### 3.6 Age at First Birth

The age at which childbearing starts has important consequences for the overall level of fertility and also the health and welfare of the mother and the child. Today, teenage pregnancy and motherhood are a major health and social concern. In some societies, postponement of first births due to an increase in age at marriage has contributed to overall fertility decline. However, in many societies, premarital childbearing is common.

Table 3.8 shows the percent distribution of women by age at first birth, according to current age at the time of the survey. The distribution is similar to that in the 1991-92 TDHS, and shows that the prevalence of early childbearing has declined slightly over time. While about 12 percent of older women (45-49) had their first birth before reaching age 15, only 3 percent of the younger women (20-24) did so. Among older women (45-49), 61 percent had their first birth before reaching age 20, compared to 52 percent of the young women (20-24). The median age at first birth has increased nearly one year across cohorts age 45-49 to 20-24.

Table 3.7 Birth intervals

Percent distribution of births in the five years preceding the survey by number of months since previous birth, according to demographic and socioeconomic characteristics, Tanzania 1996

Background	N	Sumber of m	onths since	previous bir	th		Median number of months since	Number of	
characteristic	7-17	18-23	24-35	36-47	48+	Total			
Age of mother									
15-19	16.3	23.5	34.3	24.7	1.3	100.0	26.2	44	
20-29	7.5	12.8	45.6	21.3	12.8	100.0	31.2	2,583	
30-39	5.6	9,2	36.0	26.0	23.2	100.0	35.8	2,174	
40 +	5.8	7.6	31.9	22.2	32.6	100.0	38.1	633	
Birth order									
2-3	6.6	11,7	39.7	23.2	18.8	100.0	33.4	2,264	
4-6	6.3	9.8	41.4	23.9	18.7	100.0	33.8	2,014	
7+	7.4	11.0	38.3	22.4	20.9	100.0	33.9	1,157	
Sex of prior birth									
Male	6.5	10.8	40.6	22.9	19.2	100.0	33,6	2,786	
Female	6.7	10.9	39.5	23.6	19.2	100.0	33.7	2,649	
Survival of prior birth									
Dead	22.0	14.1	31.2	15.8	17.0	100.0	28.1	755	
Living	4.1	10.3	41.5	24.5	19.6	100.0	34.2	4.680	
Residence									
Mainland	6,6	10.8	40.0	23.3	19.3	100.0	33.7	5,250	
Total urban	4.1	8.7	34.0	23.3	29.9	100.0	37.1	808	
Dar es Salaam city	1.2	8.2	33.7	22.4	34.5	100.0	39.1	215	
Other urban	5.2	8.9	34.1	23.6	28.2	100.0	36.6	592	
Total rural	7.1	11.2	41.1	23.3	17.4	100.0	33.1	4,442	
Zanzibar	7.1	11.6	42.1	23.5	15.7	100.0	33.3	185	
Zones									
Coastal	4.6	8.9	38.4	25.1	23.0	100.0	35.4	1,049	
Northern Highlands	7.3	12.5	34.3	25.1	20.8	100.0	34.3	654	
Lake	9.1	13.7	43.7	19.0	14.5	100.0	30.8	2,051	
Central	7.4	8.7	43.7 42.5	22.1	19.3	100.0	33.7	453	
	7.4 3.9	8.7 8.7	42.3	22.1 26.4		100.0	33.7 34.9	765	
Southern Highlands Southern	3.9	8.7 5.6	31.8	26.4 31,3	19.8 28.1	100.0	34.9 38.4	763 462	
Education									
	6.6	11.0	37.5	24,6	20.3	100.0	34.5	1,787	
No education	7.0		37.5 38.8	24.6 21.9	20.3	100.0	34.5 33.9	919	
Primary incomplete		11.0							
Primary complete	6.6	10.8	42.6	22.6	17.4	100.0	33.0	2,581	
Secondary+	6.1	8.8	34.6	26.7	23.8	100.0	36.2	147	
Total	6.6	10.8	40.1	23.3	19.2	100.0	33.7	5,435	

Note: First-order births are excluded. The interval for multiple births is the number of months since the preceding pregnancy that ended in a live birth.

Table 3.8 Age at first birth

Percent distribution of women 15-49 by age at first birth, according to current age, Tanzania 1996

Current age	Women with no	<del></del>							Median age at first	Number of
	births	<15	15-17	18-19	20-21	22-24	25+	Total	birth	women
15-19	79.1	1.1	12.4	7.4	NA	NA	NA	100.0	a	1,732
20-24	25.6	3.2	22.1	27.0	17.3	4.7	NA	100.0	19.8	1,676
25-29	8.2	4.2	24.1	30.1	19.0	10.9	3.5	100.0	19.4	1,440
30-34	3.9	6.8	<b>27</b> .3	25.0	17.0	13.9	6.3	100.0	19.2	1,118
35-39	3.7	8.2	31.7	22.6	16.0	10.7	7.1	100.0	18.9	888
40-44	1.8	10.4	33.4	24.8	13.5	9.1	7.0	100.0	18.5	680
45-49	1.9	11.6	27.4	22.3	12.5	13.2	11.1	100.0	19.0	585

NA = Not applicable.

<sup>a</sup> Omitted because less than 50 percent of the women in the age group 15-19 have had a birth by age 15.

To study differentials in age at first birth, Table 3.9 gives the median age at first birth for different subgroups of the population. There is little variation in age at first birth by urban and rural residence. The median age at first birth shows an inverse relationship with educational attainment, being as low as 18 years for women with no education or incomplete primary and increasing to 20 years for women with completed primary and 23 years for women with secondary or higher education.

Table 3.9 Median age at first birth by background characteristics

Median age at first birth among women 20-49 years, by current age and selected background characteristics, Tanzania 1996

Dookseaund			Acres	<b>A</b> = 0.0				
Background characteristic	20-24	25-29	39-34	35-39	40-44	45-49	Ages 20-49	Ages 25-49
Urban/Rural		<del></del>	<del></del>	·		·		<del></del> -
Urban	a	19.9	19.4	18.7	18.3	19.1	19.6	19.3
Rural	19.7	19.3	19.2	19.0	18.6	18.9	19.2	19.1
Education								
No education	18.6	18.8	17.8	18.5	18.3	18.7	18.5	18.4
Primary incomplete	18.6	19.2	17.9	18.1	17.9	19.0	18,4	18.4
Primary complete	19.9	19.5	19.9	19.7	19.8	20.5	19.8	19.7
Secondary+	b	23.7	22.8	22.1	22.1	22.3	b	23.0
Total	19.8	19.4	19.2	18.9	18.5	19.0	19.3	19.1

Omitted because less than 50 percent of the women in age group 20-24 had a birth by age 20.

b Omitted because less than 50 percent of the women in the age group 20-24 and 20-49 had a birth by age 20.

### 3.7 Teenage Pregnancy and Motherhood

The issue of fertility among women aged 15-19 is vital because teenage mothers and their children are at high risk for social and health problems. Children born to young mothers are more prone to illness and higher mortality during childhood than children born to older mothers.

Table 3.10 and Figure 3.4 present the proportion of women age 15-19 years who have begun childbearing, separating those who are already mothers from those who are pregnant with their first child. Overall, 26 percent of teenagers covered by this survey have already begun childbearing with 21 percent having had a child already and 5 percent carrying their first child. This represents a decline in teen childbearing—the 1991-92 TDHS showed that 23 percent of women 15-19 were already mothers and 6 percent were pregnant with their first child (Ngallaba et al., 1993:30). As expected, the percentage who have started the reproductive process increases with age, from 1 percent among the 15 year olds to 61 percent by age 19.

Table 3.10 further shows that overall teenage childbearing is higher among rural women (27 percent) than their urban counter-parts (24 percent) on the Mainland. This is true for both the proportion who are already mothers and the proportion who are pregnant with their first child. The Southern zone has the highest prevalence of teenage childbearing (35 percent) while the Coastal zone has the lowest level (23 percent).

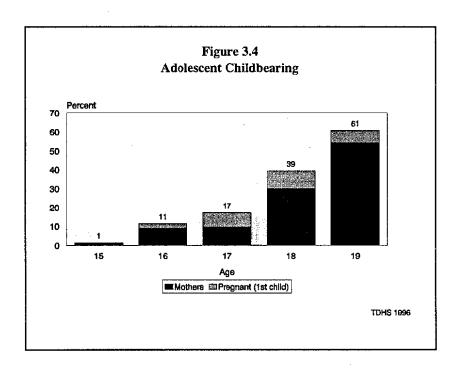


Table 3.10 Teenage pregnancy and motherhood

Percentage of women 15-19 who are mothers or pregnant with their first child, by selected background characteristics, Tanzania 1996

		tage of who are:	Percentage who have	
Background characteristic	Mothers	Pregnant with first child	begun child- bearing	Number of women
Age				
15	0.9	0.4	1.3	288
16	9.0	2.3	11.2	408
17	9.7	7.4	17.1	343
18	30.0	9.2	39.2	358
19	54.3	6.3	60.6	335
Residence				
Mainland	21.1	5.2	26.3	1,683
Total urban	19.6	4.6	24.2	393
Dar es Salaam city	19.3	4.7	24.0	127
Other urban	19.7	4.6	24.2	266
Total rural	21.6	5.3	27.0	1,290
Zanzibar	11.5	5.9	17.4	49
Zones				
Coastal	17.9	5.1	23.0	444
Northern Highlands	18.2	6.0	24.2	206
Lake	23.0	4.2	27.2	538
Central	22.5	4.8	27.3	125
Southern Highlands	18.7	5.2	23.9	247
Southern	26.9	8.8	34.8	173
Education				
No education	33.1	6.5	39.6	284
Primary incomplete	14.1	2.0	16.1	559
Primary complete	23.1	7.2	30.2	795
Secondary+	5.9	3.5	9.4	95
Total	20.9	5.2	26.1	1,732

#### **CHAPTER 4**

# FERTILITY REGULATION

Knowledge of family planning methods and sources to obtain them are necessary in deciding whether to adopt a contraceptive method and the choice of method to use. A positive attitude toward family planning affects use. This chapter presents data on contraceptive knowledge, attitudes, behaviour, and sources. While the focus is placed on women of reproductive age, some results from the men's survey will also be presented, since men play an important role in the realisation of reproductive goals.

## 4.1 Knowledge of Family Planning Methods

Information about knowledge of family planning methods was obtained in two ways in the 1996 TDHS. Respondents were first asked to name ways or methods by which a couple could delay or avoid pregnancy. When a respondent failed to mention a particular method spontaneously, the interviewer described the method and asked if the respondent knew it. Information was collected for eight modern methods: the pill, IUD, injectables, Norplant, vaginal methods (foam, jelly, or diaphragm), condom, and female and male sterilisation, and three traditional methods: the calendar (rhythm) method, mucus method, and withdrawal. In addition, provision was made in the questionnaire to record any other methods named spontaneously by respondents. Both prompted and unprompted knowledge are combined in the report.

Table 4.1 shows the percentage of all women and men, currently married women and men, and sexually active unmarried women and men, and women with no sexual experience who know specific contraceptive methods. Almost all of the women who have heard of any method have heard of a modern method, while about half of the women have heard of a traditional or folk method. Results show that 84 percent of women age 15-49 have heard of at least one method of family planning. The level is higher among currently married women (88 percent). The most commonly recognised methods in Tanzania are the pills (78 percent), condoms (72 percent), injectables (71 percent), female sterilisation (61 percent), and IUD (49 percent). Only 31 percent of all women know of diaphragm/foam/jelly, and about one-fourth know of male sterilisation and implants (Norplant). Of the traditional methods, similar proportions of women have knowledge of withdrawal and calendar or mucus methods (recognised by 31 to 32 percent of women, respectively).

Knowledge of family planning methods is higher among men than women. Almost 90 percent of all men interviewed know of at least one method. The difference in knowledge between men and women is especially notable for male sterilisation and condom: 35 percent of men compared with 25 percent of women know of male sterilisation and 86 percent of men compared with 72 percent of women know about condoms. While women are generally more likely than men to know the methods used by women, it is surprising to note that the proportion of men who know of the calendar or mucus method is higher than among women (45 vs. 31 percent). Overall, knowledge of contraceptive methods is higher among married respondents. Seventy-one percent of women and 67 percent of men know of at least these modern methods (Table 4.1). On average, women and men know of five methods, four of which are modern methods.

Table 4.2 shows the correspondence between the contraceptive knowledge of husbands and wives for the 1,125 couples interviewed in the TDHS sample. Knowledge of at least one method by both spouses is high (86 percent). For couples where only one partner knows of a method, husbands are more likely to know the method than their wives; exceptions are the pill, IUD, injectables, implants and folk methods, which wives are more likely to know about than their husbands.

Table 4.1 Knowledge of contraceptive methods

Percentage of all women, of currently married women, and of sexually active unmarried women and of women with no sexual experience, and the percentage of all men 15-59, of currently married men, and of sexually active unmarried men who know specific contraceptive methods, Tanzania 1996

		Women who	know meth	od	Men who know method					
Contraceptive method	All women	Currently married women	Sexually active unmarried women	No sexual experience	All	Currently married men	Sexually active unmarried men			
Any method	84.2	88.5	85.5	55.1	89.2	93.4	90.8			
Any modern method Pill IUD Injectables Diaphragm/foam/jelly Condom Female sterilisation Male sterilisation Implant	83.6 78.4 48.8 70.8 30.7 72.2 60.7 24.8 23.5	87.7 84.0 52.8 76.8 34.2 75.2 66.2 27.6 25.4	85.2 79.5 55.7 72.1 32.0 78.9 63.8 24.8 29.5	55.1 41.4 17.8 31.0 8.5 45.6 25.8 8.0 7.7	88.8 71.1 34.9 55.6 35.3 85.8 63.3 35.1 17.0	92.8 82.2 43.8 67.1 42.5 89.8 74.7 42.9 21.4	90.8 66.6 32.1 52.2 33.8 89.8 58.9 32.7 17.6			
Any traditional/folk method Calendar/mucus Withdrawal Abstinence Other	47.0 30.7 31.6 0.3 12.6	51.8 32.1 36.3 0.3 14.8	50.3 35.9 29.2 0.0 12.1	14.4 12.1 6.2 0.1 1.4	56.1 45.2 42.5 0.4 6.2	69.1 56.4 52.6 0.5 9.3	55.0 42.4 43.9 0.2 2.8			
Number of respondents Mean number of methods known	8,120 5.0	5,411 5.4	671 5.3	1,048 2.1	2,256 5.1	1,288 6.1	355 4.9			
Percent knowing three or more modern methods Mean number of modern methods known	70.9 4.1	76.6 4.4	73.5 4.4	31.9 1.9	66.8 4.0	78.2 4.6	64.3 3.8			

Table 4.2 Knowledge of contraceptive methods among couples

Percent distribution of couples by contraceptive knowledge, according to specific methods, Tanzania, 1996

Contraceptive method	Both know method	Only husband knows method	Only wife knows method	Neither knows method	Total
Any method	86.3	7.3	3.9	2.5	100.0
Any modern method	85.6	7.7	3.8	3.0	100.0
Pill	74.6	8.2	10.2	7.0	100.0
IUD	29.7	14.8	22.4	33.1	100.0
Injectables	59.0	8.8	19.5	12.7	100.0
Diaphragm/foam/jelly	18.0	24.8	15.5	41.8	-100.0
Condom	71.8	18.5	4.0	5.7	100.0
Female sterilisation	56.4	18.6	12.5	12.5	100.0
Male sterilisation	16.9	27.3	15.5	44.3	100.0
Implant	10.1	11.4	14.7	63.8	100.0
Any traditional/folk method	44.2	25.9	10.2	19.7	100.0
Calendar/mucus	23.4	34.0	9.1	33.5	-100.0
Withdrawal	25.8	26.7	13.1	34.4	100.0
Abstinence	0.0	0.5	0.4	99.1	100.0
Other	3.6	5.9	10.6	79.9	100.0

Note: Table is based on 1,125 couples.

Table 4.3 presents the percentage of all respondents who know any method or any modern method according to background characteristics. Knowledge of contraceptive methods is highest among women 20-34, urban women, women in the Dar es Salaam, Coast, Lindi, Tabora, and Mbeya regions, and among women with completed primary or secondary education. Similar patterns are also observed for men.

### 4.2 Trends in Contraceptive Knowledge

There has been some increase over time in the proportion of women and men who have heard of methods of family planning (Figure 4.1). The proportion of all women who have heard of at least one method has increased from 74 percent in 1991-92, to 80 percent in 1994 and to 84 percent in 1996. The proportion who have heard of a modern method increased from 72 percent in 1991-92 to 77 percent in 1994 and to 83 percent in 1996. Knowledge of specific methods has increased even more dramatically. For example, in 1991-92, only 40 percent of women had heard of the injectable contraceptive; by 1996, this figure had increased to 71 percent. Similarly, the proportion of women who know of condoms grew from 51 percent of married women in 1991-92 to 72 percent in 1996.

### 4.3 Ever Use of Family Planning Methods

All women and men interviewed in the 1996 TDHS who said that they had heard of a method of family planning were asked if they had ever used that method. Ever use of family planning methods thus refers to use of a method at any time with no distinction between past and current use. Table 4.4.1 shows the percentage of women who have ever used family planning, according to method and age. Modern methods have been more frequently used (23 percent) than traditional/folk methods (15 percent). The modern methods commonly used by women are pills (15 percent), condoms (7 percent), and injectables (6 percent); while traditional methods frequently used are withdrawal (9 percent) and calendar/mucus (8 percent). Ever use of contraception is higher for sexually active unmarried women than currently married women.

Table 4.4.2 shows that ever use of contraception among men is almost equal for modern (26 percent) and traditional methods (24 percent). The most frequently used methods among men are condoms (18 percent), calendar/mucus (17 percent), and withdrawal (14 percent). Ever use of modern methods is higher for sexually active unmarried men than currently married men (36 vs. 29 percent). This is due to the higher use of condoms by unmarried men than married men (35 vs. 16 percent).

As with contraceptive knowledge, ever use of modern contraceptive methods has increased moderately since 1991-92. In 1991-92, 14 percent of all women had ever used any modern method, compared to 21 percent in 1994 and 23 percent in 1996. Increases in ever use were greatest for injectables. Among men, ever use of modern methods increased from 24 to 26 percent during 1994-96.

Table 4.3 Knowledge of contraceptive methods by background characteristics

Percentage of women and men who know at least one contraceptive method and at least one modern method by selected background characteristics, Tanzania 1996

		Women	Men					
Background characteristic	Know any method	Know modern method	Number of women	Know any method	Know modern method	Numbe of men		
Age	- <u></u>							
15-19	65.5	65,4	1,732	76.3	76.3	488		
20-24	91.1	90.8	1,676	91.9	91.9	371		
25-29	92.5	92.1	1,440	96.0	95.5	301		
30-34	91.2	91.0	1,118	95.7	94.4	272		
35-39	88.5	87.6	888	93.9	93.9	251		
40-45	85.8	84.7	680	96.2	96.2	206		
45-49	77.1	74.6	585	88.5	88.5	149		
50-54	NA	NA	NA	91.1	89.7	118		
55-59	NA	NA	NA	77.1	75.2	100		
Residence								
Mainland	84.0	83.4	7,881	89.2	88.8	2,187		
Total urban	93.9	93.9	1,811	95.8	95.8	509		
Dar es Salaam city	95.9	95.9	563	98.2	98.2	171		
Other urban	93.0	92.9	1,248	94.6	94.6	338		
Total rural	81.0	80.2	6,070	87.2	86.7	1,678		
Zanzibar	90.8	90.7	239	90.4	90.4	69		
Pemba	86.8	86.8	92	92.6	92.6	28		
Unguja	93.4	93.1	148	88.9	88.9	41		
Region								
Dodoma	85.1	84.4	355	87.9	87.9	96		
Arusha	62.3	59.7	589	74.5	71.3	156		
Kilimanjaro	86.3	86.3	390	80.0	80.0	119		
Tanga	78.9	78.9	464	74.7	74.7	108		
Morogoro	86.7	86.5	408	87.4	87.4	95		
Coast	95.3	94.2	159	93.5	93.5	45		
Dar es Salaam	96.1	96.1	646	98.0	98.0	191		
Lindi	92.1	91.5	187	98.6	98.6	54		
Mtwara	87.5	86.4	355	98.0	98.0	96		
Ruvuma	89.7	89.5	305	91.2	91.2	82		
Iringa	81.0	80.5	466	87.6	87.6	100		
Mbeya	90,1	89.5	473	98.6	98.6	137		
Singida	83.2	81.7	283	96.4	95.2	80		
Tabora	90.4	90.4	225	98.1	98.1	82		
Rukwa	82.2	81.6	242	96.2	94.9	71		
Kigoma	86.6	86.4	351	94.3	94.3	95		
Shinyanga	73.9	73.6	686	82.3	82.3	202		
Kagera	73.9 88.4	73.0 87.0	467	82.3 97.1	95.7	139		
	84.2	84.2	573		95.7 85.9	176		
Mwanza Mara	84.2 84.1	84.2 84.1	257	85.9 78.2	78.2	64		
Education								
No education	72.4	<b>7</b> 0.7	2,316	78.4	<b>7</b> 6.7	304		
Primary incomplete	78.6	78.3	1,630	82.5	82.2	664		
Primary complete	92.5	92.4	3,732	94.5	94.3	1,066		
Secondary+	96.6	96.6	441	99.1	99.1	222		

Table 4.4.1 Ever use of contraception: women

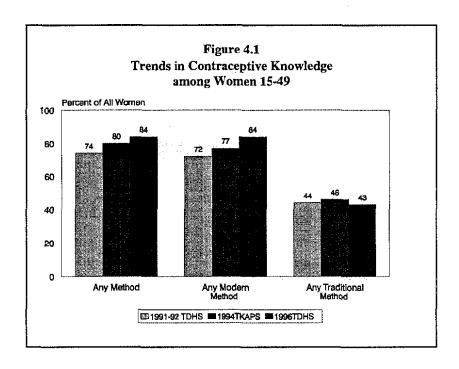
Percentage of all women, of currently married women, and of sexually active unmarried women who have ever used any contraceptive method, by specific method and age, Tanzania 1996

					Ma	odern meth	nd		7									
	Anv	Any		Any modern meth-			In-	Dia- phragm/ foam/	Con-	Female steri- lisa-	Male steri- lisa-		Any tradi- tional/ folk	Cal- endar/	With- draw-	Absti-		Number of
Age	method	od	Pill	IUD	ables	jelly	dom	tion	tion	Implant	method	mucus	al	nence	Other	wome		
						· · · -	ALI	WOME	N						_			
15-19	8.7	5.9	2.7	0.4	0.7	0.1	3.5	0.0	0.0	0.0	3.8	2.6	1.6	0.0	0.2	1,732		
20-24	35.6	25.5	15.3	1.1	5.4	0.2	10.7	0.1	0.0	0.1	17.8	9.0	11.0	0.1	1.5	1,676		
25-29	40.3	29.3	21.1	1.6	7.9	0.2	8.9	0.2	0.1	0.0	19.4	8.8	12.0	0.1	2.4	1,440		
30-34	40.2	29.4	21.8	2.5	9.2	0.8	8.3	0.8	0.0	0.1	20.0	10.3	12.3	0.0	1.8	1,118		
35-39	38.1	30.4	21.6	3.2	10.1	0.4	6.7	3.0	0.0	0.2	20.1	9.0	12.4	0.2	3.2	888		
40-44	35.3	26.7	17.2	2.7	9.9	0.8	5.0	6.7	0.1	0.0	16.8	7.5	10.8	0.1	2.7	680		
45-49	26.9	17.0	9.9	1.5	5.0	0.3	1.9	5.2	0.0	0.0	15.9	6.5	9.5	0.2	3.1	585		
Total	30.9	22.5	15.0	1.6	6.2	0.3	7.0	1.4	0.0	0.0	15.4	7.5	9.4	0.1	1.8	8,120		
		<del> </del>			=	CURRE	NTLY	MARRIE	D WO	MEN								
15-19	15.9	9.9	5.7	1.2	1.1	0.2	5.0	0.2	0.0	0.0	8.1	4.9	3.7	0.0	0.6	401		
20-24	36.2	25.6	15.9	1.3	6.0	0.2	8.8	0.1	0.0	0.1	18.9	8.7	12.3	0.1	1.7	1,131		
25-29	41.8	30.1	21.8	1.7	8.8	0.2	8.7	0.2	0.0	0.0	20.6	8.9	13.0	0.1	2.5	1,184		
30-34	38.3	28.3	21.4	2.7	8.5	0.9	6.4	1.0	0.0	0.1	19.1	9.1	12.0	0.0	2.0	947		
35-3 <del>9</del>	38.3	30.2	20.4	3.3	10.1	0.5	5.8	3.3	0.0	0.1	19.9	7.8	12.7	0.2	3.6	740		
40-44	34.7	25.5	15.3	2.8	10.2	0.8	4.3	7.1	0.2	0.0	17.7	7.9	11.3	0.2	2.8	561		
45-49	26.0	15.2	9.0	1.4	5.0	0.3	0.3	5.2	0.0	0.0	16.2	6.8	9.9	0.2	2.9	447		
Total	35.6	25.6	17.4	2.1	7.6	0.4	6.5	1.9	0.0	0.1	18.3	8.2	11.5	0.1	2.3	5,411		
					SE	XUALLY	ACTIV	E UNMA	RRED	WOMEN								
Total	40.1	34.1	21.6	1.9	6.4	0.5	18.4	0.6	0.1	0.1	14.3	8.9	8.1	0.0	1.2	671		

Table 4.4.2 Ever use of contraception: men

Percentage of all men, of currently married men, and of sexually active unmarried men who have ever used any contraceptive method, by specific method and age, Tanzania 1996

					Mada	athord		Traditional/folk method							
				<del></del>	Мочеп	n method Dia-	<del></del> .	Female	<del></del>	Any tradi-					
Age	Any method	Any modem method	Pill	IUD	In- ject- ables	phragm/ foam/ jelly	hragm/ foam/ Con-	steri- lisa- tion	Implant	tional folk method	Cal- endar/ mucus	With- draw- al	Absti- nence	Other	Number of men
			-			1	ALL ME	EN							
15-19	11.7	10.2	0.4	0.0	0.1	0.9	10.0	0.0	0.0	3.7	1.5	2.6	0.0	0.0	488
20-24	38.0	28.9	5.6	0.0	1.2	0.6	26.8	0.0	0.2	19.3	13.9	9.6	0.0	0.8	371
25-29	51.2	32.2	9.5	0.2	5.2	0.6	26.6	0.0	0.0	33.1	24.1	19.0	0.0	1.2	301
30-34	53.8	37.2	16.3	2.3	6.1	0.0	25.7	0.0	0.0	37.2	26.5	23.3	0.3	0.6	272
35-39	53.7	35.2	17.2	2.7	7.9	0.0	20.5	0.8	0.0	36.5	25.0	20.0	0.3	2.4	251
40-44	47.3	31.1	19.9	1.3	5.5	0.7	14.3	4.0	0.6	31.8	19.0	22.5	0.6	1.5	206
45-49	37.6	20.3	13.4	1.7	7.6	0.4	8.1	0.4	0.0	27.8	17.1	12.5	1.6	3.3	149
50-54	40.3	20.3	7.5	1.6	5.2	0.0	9.6	2.7	0.0	31.3	25.8	14.2	0.5	3.1	118
55-59	29.7	13.1	7.8	0.0	0.9	0.0	5.5	2.1	0.0	24.3	14.2	9.2	0.0	5.5	100
Total	38.3	25.5	9.6	0.9	3.9	0.5	18.1	0.7	0.1	24.4	16,7	13.7	0.2	1.4	2,256
					С	URRENT	LY MA	RRIED	MEN						
15-19	*	*	*	*	*	*	*	*	*	*	*	*	*	*	6
20-24	51.2	26.5	11.9	0.0	1.5	0.7	22.2	0.0	0.7	37. <b>7</b>	26.6	17.5	0.0	1.0	91
25-29	52.3	25.9	10.5	0.3	4.8	1.0	17.4	0.0	0.0	37.4	28.7	19.5	0.0	1.8	196
30-34	55.6	37.5	17.0	2.0	6.9	0.0	24.5	0.0	0.0	39.9	28.8	24.6	0.3	0.7	232
35-39	54.7	35.5	18.4	2.9	8.6	0.0	19.5	0.9	0.0	37.9	26.2	20.6	0.3	2.6	230
40-44	48.2	31.1	21.1	1.4	5.9	0.3	13.2	4.3	0.7	33.2	20.1	23.4	0.6	1.6	194
45-49	39.2	20.4	14.6	1.8	8.2	0.4	7.2	0.5	0.0	30.2	18.6	13.6	1.7	3.5	137
50- <b>54</b>	41.7	20.4	8.0	1.7	5.5	0.0	9.0	2.9	0.0	32.1		13.9	0.6	3.4	110
55-59	31.6	13.3	8.7	0.0	1.0	0.0	4.8	2,4	0.0	26.4	15.1	9.6	0.0	6.1	90
Total	48.7	28.6	14.8	1.5	5.9	0.3	16.1	1.3	0.1	35.2	24.5	19.2	0.4	2.3	1,288
					SEXUA	ALLY AC	TIVE U	NMARI	RIED MEI	1					
 Total	40.7	36.0	4.2	0.4	2.7	1.7	35.2	0,0	0.0	17.4	11.8	11.5	0.0	0.4	355



### 4.4 Current Use of Family Planning

The level of current use of family planning is one of the indicators most frequently used to assess the success of family planning programme activities. It is widely used as a measure in the analysis of the determinants of fertility. This section focuses on the levels and differentials in family planning use with particular emphasis on the method mix among users. Trends in family planning use in Tanzania are also described. Information on the service providers from which users obtained methods is also presented.

Sixteen percent of all women in Tanzania are currently using a contraceptive method and 12 percent are using modern methods (Table 4.5.1). The most widely used methods are the pills (5 percent) and injectables (4 percent). Female sterilisation and condoms are used by 1 percent of women. About 2 percent of women each use the calendar/mucus method or withdrawal. The use of contraception increases with age, reaching a peak at age 30-44 among all women. The pill is the most commonly used method among women under 35, while injectables is the most common method among women 35-39. Female sterilisation tends to be used by older women (women in their 40s).

Current contraceptive use among men is slightly higher than among women (Table 4.5.2). Twenty-two percent of men in Tanzania are currently using contraception, 14 percent using modern and 8 percent using traditional methods. The condom is the method most used by men (7 percent), followed by the calendar/mucus method (6 percent). The use of traditional methods is proportionately higher for men than women. The major difference in contraceptive use reported by men and women is higher use of the calendar/mucus method and of condoms by men.

Current use of contraception is higher among the sexually active unmarried population than among all women and men. Condom use among sexually active unmarried respondents is notably higher especially among men (22 vs. 7 percent). In fact, condom use accounts for 86 percent of all use among sexually active unmarried men. This suggests that the intention of premarital contraceptive use involves more than pregnancy prevention and probably indicates motivation to avoid sexually transmitted diseases, especially human immunodeficiency virus (HIV).

Table 4.5.1 Current use of contraception: women

Percentage of all women, of currently married women, and of sexually active unmarried women who are currently using a contraceptive method, by specific method, according to age, Tanzania 1996

	Any method			Modern	method	Modern method Traditional/folk method									
Age		Any modern meth- od	Pill	IUD	In- ject- ables	Con- dom	Female sterili- sation	Any trad, or folk method	Cal- endar/ mucus	With- draw- al	Absti- nence	Other methods	Not cur- rently using		Number of Women
				_		A	LL WON	1EN	· .						
15-19	4.7	3.1	1.3	0.2	0.6	1.0	0.0	1.6	1.1	0.4	0.0	0.0	95.3	100.0	1.732
20-24	18.0	13.0	6.6	0.3	3.8	2.2	0.1	4.9	2.1	2.7	0.0	1.0	82.0	100.0	1,676
25-29	19.8	14.4	8.1	0.4	4.2	1.6	0.2	5.3	2.7	2.2	0.0	0.4	80.2	100.0	1,440
30-34	21.0	14.8	6.2	1.0	5.9	0.9	0.8	6.1	2.8	2.9	0.0	0.4	79.0	100.0	1,118
35-39	21.1	15.8	4.6	1.1	6.2	0.7	3.0	5.3	2.6	1.9	0.0	0.7	78.9	100.0	888
40-44	20.7	15.9	3.0	0.3	4.8	0.1	6.7	4.7	1.9	1.7	0.1	0.9	79.3	100.0	680
45-49	12.8	9.9	1.5	0.7	1.9	0.7	5.2	2.8	0.8	1.2	0.0	0.8	87.2	100.0	585
Total	16.1	11.7	4.8	0.5	3.7	1.3	1.4	4.3	2.1	1.9	0.0	0.4	83.9	100.0	8,120
					CUR	RENTL	Y MARI	RIED WO	OMEN						
15-19	7.4	4.4	2.2	0.5	0.8	0.7	0.2	3.0	1.6	1.4	0.0	0.0	92.6	100.0	401
20-24	18.0	12.7	6.9	0.4	4.0	1.2	0.1	5.3	1.5	3.6	0.0	0.2	82.0	100.0	1,131
25-29	19.9	14.5	8.0	0.3	4.6	1.3	0.2	5.4	2.6	2.5	0.0	0.3	80.1	100.0	1,184
30-34	20.2	14.0	6.1	1.2	5.3	0.3	1.0	6.2	2.4	3.3	0.0	0.4	79.8	100.0	947
35-39	21.2	15.9	4.3	0.9	6.6	0.7	3.3	5.2	2.2	2.1	0.0	0.9	78.8	100.0	740
40-44	22.1	17.1	3.5	0.4	5.1	0.8	7.1	5.0	2.0	2.1	0.2	0.7	77.9	100.0	561
45-49	12.6	9.2	1.5	0.3	2.3	0.0	5.2	3.4	1.0	1.6	0.0	0.8	87.4	100.0	447
Total	18.4	13.3	5.5	0.6	4.5	0.8	1.9	5.1	2.0	2.6	0.0	0.4	81.6	100.0	5,411
				SI	LIAUXE	Y ACT	TVE UN	MARRIE	D WOM	1EN					
Total	26.2	21,4	9.5	1.0	3.8	6.3	0.6	4.8	4.0	0.5	0.0	0.2	73.8	100.0	671

Some women are more likely to use contraception than others (see Table 4.6.1 and Figure 4.2). There are differences in the level of current use between the mainland and Zanzibar and more notably by regions, educational levels, and number of living children. Use of modern family planning methods is lower in Zanzibar (8 percent) than on the mainland (12 percent). Between the two islands, use of modern family planning methods is slightly higher in Unguja (9 percent) than Pemba (6 percent). In the mainland, urban women are much more likely to be using modern contraceptive methods (24 percent) than rural women (8 percent). Levels of current use of modern family planning methods are highest in the Kilimanjaro, Coast, and Dar es Salaam regions (23-24 percent) and lowest in the Shinyanga, Kagera, and Mara Regions (4-5 percent). Current use of modern family planning methods is less than 10 percent in 6 regions and more than 10 percent in 14 regions.

Education is clearly related to the use of family planning. Women with some secondary and higher education are five times more likely to use modern methods than women without education (23 vs. 5 percent). The educational differentials are similar for any method use.

As expected, contraceptive use rises with the number of living children. The percentage of women using any modern family planning method increases rapidly from 3 percent among women with no children to 16 percent among those with three or more children. The results show that few women in Tanzania adopt contraception until after they have had at least one child.

Table 4.5.2 Current use of contraception: men

Percentage of all men, of currently married men, and of sexually active unmarried men who are currently using a contraceptive method, by specific method, according to age, Tanzania 1996

	Any method			Modem	method				Traditio	nal/folk	method				
Age		Any	Any modern meth- od	Pill	IUD	In- ject- ables	Coл- dom	Female sterili- sation	Any trad, or folk method	Cal- endar/ mucus	With- draw- al	Absti- nence	Other methods	Not cur- rently using	Total
							ALL ME	EN .					***		
15-19	7,3	6.6	0.0	0.0	0.0	6.6	0.0	0.7	0.4	0.3	0.0	0.0	92.7	100.0	488
20-24	19.9	15.0	2.3	0.0	0.3	12.2	0.0	4.9	3.7	1.0	0.0	0.2	80.1	100.0	371
25-29	27.7	15.5	4.1	0.2	1.1	10.1	0.0	12.1	7.8	3.9	0.0	0.5	72.3	100.0	30
30-34	33.9	20.3	6.8	0.5	3.8	9.1	0.0	13.6	9.2	4.2	0.3	0.0	66.1	100.0	272
35-39	37.6	20.4	6.9	0.5	4.7	7.5	8.0	17.2	11.1	4.9	0.6	0.6	62.4	100.0	251
40-44	26.8	16.9	7.4	0.6	2.4	2.4	3.7	9.8	6.1	3.7	0.0	0.0	73.2	100.0	206
45-49	22.7	13.6	5.4	0.8	3.3	3.6	0.4	9.1	5.7	1.2	0.4	1.8	77.3	100.0	149
50-54	20.7	10.2	1.5	0.0	2.5	3.5	2.7	10.6	6.8	2.7	0.5	0.5	79.3	100.0	118
55-59	12.3	7.2	5.1	0.0	0.0	0.0	2.1	5.0	3.8	1.2	0.0	0.0	87.7	100.0	100
Total	22.4	14.0	3.9	0.2	1.8	7.3	0.7	8.4	5.5	2.4	0.2	0.3	77.6	100.0	2,256
					CL	IRRENT	LY MA	RRIED I	MEN						
15-19	*	*	*	*	*	•	*	*	*	*	*	*		100.0	
20-24	27.1	14.8	7.3	0.0	0.0	7.5	0.0	12.3	11.7	0.7	0.0	0.0	72.9	100.0	91
25-29	30.0	12.1	6.3	0.3	1.7	3.8	0.0	17.8	11.5	5.6	0.0	0.7	70.0	100.0	196
30-34	35.4	19.7	7.7	0.6	4.5	6.9	0.0	15.7	10.8	4.6	0.3	0.0	64.6	100,0	
35-39	39.1	21.0	7.5	0.5	5.1	7.0	0.9	18.0	11.8	4.9	0.6	0.7	60.9	100.0	230
40-44	28.4	17.9	7.9	0.6	2.6	2.6	4.0	10.4	6.5	3.9	0.0	0.0	71.6	100.0	194
45-49	24.2	14.3	5,9	0.9	3.6	3.4	0.5	9.9	6.2	1.3	0.4	1.9	75.8	100.0	
50-54	20.9	9.5	1.6	0.0	2.6	2.4	2.9	11.3	7.3	2.9	0.6	0.6	79.1	100.0	110
55-59	13.7	8.1	5.7	0.0	0.0	0.0	2.4	5.6	4.2	1.4	0.0	0.0	86.3	100.0	90
Total	29.4	15.8	6.6	0.4	3.0	4.6	1.2	13.6	9.2	3.7	0.3	0.5	70.6	100.0	1,288
					SEXUA	LLY AC	TIVE U	NMARR	IED ME	in					
Total	25.2	22.5	0.5	0.0	0.2	21.6	0.0	2,8	1.4	1.2	0.0	0.2	74.8	100.0	355

Table 4.6.2 shows the percent distribution of all men age 15-59 by the contraceptive method currently used, according to background characteristics. The differentials in contraceptive use by men resemble those among women. Men in urban areas are more likely to use contraception, especially modern methods, than their counterparts in rural areas on the mainland. There are quite large differences in the use of contraceptives among men in the various regions on the mainland. For example, 26 to 30 percent of men in the Mbeya, Singida, Dar es Salaam, and Coast regions are using modern family planning methods, compared with only 1 to 5 percent in the Mwanza and Shinyanga regions. Greater contraceptive use was found to be associated with increasing level of education. Use of modern contraceptive methods increases from 4 percent among men with no formal education to 28 percent among those with at least some secondary education.

Table 4.6.1 Current use of contraception by background characteristics: women

Percent distribution of all women by contraceptive method currently used, according to selected background characteristics, Tanzania 1996

				Modern	method			1	raditional	folk metho	od			
Background characteristic	Any method	Any modern method	Pill	IUD	In- ject- ables	Con- dom	Female steri- lisa- tion	Any trad. or folk method	Cal- endar/ mucus	With- drawal	Other methods	Not cur- rently using	Total	Number of women
Residence	·		<del></del>	<del></del>						<del></del>				
Mainland	16.2	11.9	4.8	0.5	3.7	1.3	1.4	4.4	2.1	1.9	0.4	83.8	100.0	7,881
Total urban	29.0	23.7	9.0	1.2	7.4	3.5	2.4	5.3	3.9	1.1	0.3	71.0	0.001	1,811
Dar es Salaam ci	ity 30.8	23.9	8.3	2.0	6.3	4.4	2.6	6.9	5.1	1.5	0.3	69.2	100.0	563
Other urban	28.2	23.6	9.3	0.8	7.8	3.1	2.4	4.6	3.4	0.9	0.4	71.8	100.0	1,248
Total rural	12.4	8.3	3.6	0.3	2.6	0.7	1.2	4.1	1.5	2.2	0.4	87.6	100.0	6,070
Zanzibar	9.9	7.9	3.8	0.2	2.6	0.3	t.1	1.9	1.2	0.4	0.4	90.1	100.0	239
Pemba	7.1	5.8	2.0	0.0	2.0	0.3	1.4	1.4	0.7	0.7	0.0	92.9	0.001	97
Unguja	11.6	9.2	4.9	0.3	2.9	0.3	0.9	2.3	1.4	0.3	0.6	88.4	100.0	148
Region														
Dodoma	13.0	11.4	5.1	0.6	4.4	0.3	1.0	1.6	1.0	0.6	0.0	87.0	100.0	35.
Arusha	17.3	11.3	4.3	1.3	2.6	1.3	1.9	6.0	1.9	3.8	0.2	82.7	0.001	589
Kilimanjaro	37.7	23.7	8.1	2.5	4.6	2.5	5.6	14.0	7.4	6.1	0.5	62.3	100.0	390
Tanga	22.4	12.6	5.0	0.3	4.8	1.8	0.8	9.8	2.5	6.3	0.1	77.6	100.0	464
Morogoro	16.2	13.3	6.6	0.0	4.8	1.1	0.8	2.9	1.6	0.8	0.5	83.8	0.001	408
Coast	26.7	23.5	9.4	0.4	9.4	2.5	1.4	3.2	1.1	1.8	0.4	73.3	100.0	159
Dar es Salaam	29.8	23.0	8.4	2.0	6.3	3.8	2.2	6.8	5.2	1.3	0.3	70.2	100.0	646
Lindi	18.6	15.7	8.8	0.3	3.8	1.3	1.6	2.8	2.2	0.0	0.6	81.4	100.0	187
Mtwara	13.2	11.3	5.9	0.0	3.4	0.7	1.4	1.8	0.5	0.2	1.1	86.8	100.0	355
Ruvuma	18.5	15.2	7.5	0.0	4.5	1.7	1.5	3.2	1.9	0.4	0.9	81.5	100.0	305
Iringa	$\Pi A$	7.7	4.1	0.3	1.8	0.8	8.0	3.3	1.5	1.3	0.5	88.9	100.0	466
Mbeya	18,8	11.5	5.4	0.0	3.5	0.1	1.6	7.3	0.6	6.1	0.6	81.2	100.0	473
Singida	14.2	12.9	5.3	0.3	5.6	0.8	1.0	1.3	0.5	0.8	0.0	85.8	100.0	283
Tabora	16.7	11,1	4.5	0.0	4.5	1.0	1.0	5.6	5.6	0.0	0.0	83.3	100.0	225
Rukwa	13.3	7.6	4.0	0.0	2.3	0.3	1.1	5.7	0.3	4.5	0.8	86.7	100.0	242
Kigoma	13.6	10.4	3.3	0.3	4.4	0.3	1.9	3.3	2.7	0.3	0.0	86.4	100.0	351
Shinyanga	4.3	4.0	0.8	0.3	1.3	0.3	1.3	0.3	0.0	0.3	0.0	95.7	100.0	686
Kagera	9.5	5.3	2.5	0.0	1.1	0.7	1.1	4.2	2.8	1.1	0.4	90.5	100.0	467
Mwanza	9.4	8.4	2.3	0.0	3.2	2.6	0.3	1.0	1.0	0.0	0.0	90.6	100.0	573
Мага	6.9	5.4	1.4	0.0	3.6	0.4	0.0	1.4	0.7	0.4	0.4	93.1	100.0	257
Education														
No education	6.8	4.7	1.6	0.0	1.9	0.2	0.9	2.1	0.5	1.2	0.4	93.2	0.001	2,316
Primary incomplet		9.6	3.8	0.3	2.7	0.7	2.2	2.9	0.9	1.5	0.5	87.5	100.0	1,630
Primary complete	21.5	15.7	6.8	0.7	5.1	1.7	1.3	5.9	2.9	2.6	0.4	78.5	100.0	3,732
Secondary+	31.5	23.1	8.0	2.1	4.5	5.5	2.8	8.4	7.4	1.0	0.0	68.5	100.0	441
No. of living childr	en													
0	3.9	2.5	0.8	0.0	0.1	1.4	0.0	1.5	1.4	0,1	0.0	96.1	100.0	2,197
Ĭ	17.0	12.6	7.2	0.6	2.8	1.7	0.2	4.3	2.3	2.0	0.0	83.0	100.0	1,36
2	21.2	15.0	7.5	0.7	4.7	1.5	0.5	6.2	3.1	2.6	0.5	78.8	100.0	1,065
3	22.3	16.3	7.6	0.1	5.0	1.7	0.8	6.0	2.2	3.1	0.7	77.7	100.0	94
4+	21.6	16.2	4.7	0.6	6.3	0.7	3.9	5.3	2.0	2.6	0.7	78.4	100.0	2,54
Total	16.1	11.7	4.8	0.5	3.7	1.3	1.4	4.3	1.2	1.9	0.4	83.9	100.0	8,120

Table 4.6.2 Current use of contraception by background characteristics: men

Percent distribution of all men by contraceptive method currently used, according to selected background characteristics, Tanzania 1996

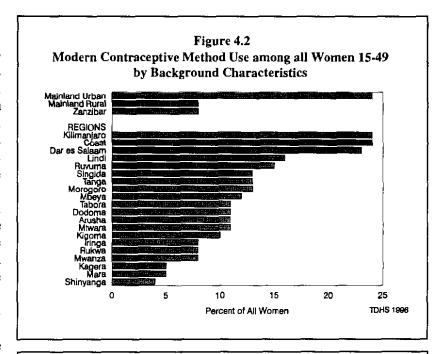
				Modern	method			7	Traditional	folk metho	od			
Background characteristic	Any method	Any modern method	Pill	מעו	In- ject- ables	Con- dom	Female steri- lisa- tion	Any trad. or folk method	Cal- endar/ mucus	With- drawal	Other methods	Not cur- rently using	Total	Number of men
Residence									_					
Mainland	2 <b>2</b> .6	14.2	3.9	0.3	1.7	7.5	0.7	8.4	5.6	2.4	0.3	77.4	100,0	2,187
Total urban	29.6	23.9	5.2	0.6	1.6	15.2	1.0	5.7	4.2	1.3	0.1	70.4	100.0	509
Dar es Salaam c	ity 32.0	27.2	5.1	1.1	2.2	16.9	1.5	4.8	3.3	1.1	0.4	68.0	100.0	171
Other urban	28.4	22.2	5.2	0.4	1.3	14.4	0.7	6.2	4.7	1.3	0.0	71.6	100.0	338
Total rural	20.5	11.3	3.4	0.1	1.8	5.2	0.6	9.3	6.0	2.8	0.4	79.5	100.0	1,678
Zanzibar	14.0	7.0	4.1	0.0	1.9	1.1	0.0	7.0	4.8	2.2	0.0	86.0	100.0	69
Pemba	7.4	3.7	1.9	0.0	1.9	0.0	0.0	3.7	3.7	0.0	0.0	92.6	100.0	28
Unguja	18.5	9.3	5.6	0.0	1.9	1.9	0.0	9.3	5.6	3.7	0.0	81.5	100.0	41
Region														
Dodoma	16.4	13.6	2.9	0.0	1.4	9.3	0.0	2.9	1.4	0.7	0.0	83.6	100.0	<del>96</del>
Arusha	20,2	10.6	3.2	0.0	1.1	4.3	2.1	9.6	4.3	5.3	0.0	79.8	100.0	156
Kilimanjaro	26.7	15.4	3.1	1.5	1.5	8.2	1.0	11.3	4.6	5.6	0.0	73.3	100.0	119
Tanga -	28.0	17.3	4.0	0.0	1.3	12.0	0.0	10.7	4.0	6.7	0.0	72.0	100.0	108
Morogoro	17.5	13.3	4.9	0.7	1.4	5.6	0.0	4.2	0.7	2. i	1.4	82.5	0.001	95
Coast	30.6	25.8	9.7	0.0	4.8	11.3	0.0	4.8	1.6	3.2	0.0	69.4	100.0	45
Dar es Salaam	31.9	27.0	5.3	1.0	2.3	16.4	1.6	4.9	3.3	1.0	0.7	68.1	100.0	191
Lindi	22.5	16.9	5.6	0.0	4.2	7.0	0.0	5.6	2.8	0.0	1.4	77.5	100.0	54
Mtwara	14.9	12.9	10.9	0.0	1.0	1.0	0.0	2.0	0.0	2.0	0.0	85.1	100.0	96
Ruvuma	29.4	19.6	12.7	0.0	2.9	2.9	1.0	9.8	6.9	2.0	1.0	70.6	100.0	82
Iringa	16.8	10.9	2.2	0.0	0.7	5.8	2.2	5.8	1.5	3.6	0.0	83.2	100.0	100
Mbeya	38.9	30.6	1.4	0.0	4.2	25,0	0.0	8.3	2.8	4.2	J.4	61.1	100.0	137
Singida	36.9	29.8	4.8	0.0	4.8	19.0	1.2	7.1	4.8	1.2	1.2	63.1	100.0	80
Tabora	16.7	5.6	1.9	0.0	1.9	1.9	0.0	11.1	11.1	0.0	0.0	83.3	100.0	82
Rukwa	52.6	17.9	5.1	0.0	3.8	7.7	1.3	34.6	23.1	11.5	0.0	47.4	100.0	71
Kigoma	32.9	10.0	5.7	0.0	2.9	1.4	0.0	22.9	22.9	0.0	0.0	67.1	100.0	95
Shinyanga	6.1	4.9	0.6	0.6	0.0	3.0	0.6	1.2	0.6	0.6	0.0	93.9	100.0	202
Kagera	27.5	7.2	4.3	0.0	0.0	1.4	1.4	20.3	20.3	0.0	0.0	72.5	100.0	139
Mwanza	1.3	1.3	0.0	0.0	0.0	1.3	0.0	0.0	0.0	0.0	0.0	98.7	100.0	176
Mara	14,5	7.3	0.0	0.0	1.8	5.5	0.0	7.3	5.5	1.8	0.0	85.5	100.0	64
Education														
No education	12.5	4.4	1.0	0.0	0.5	2.4	0,5	8.1	6.3	1.8	0.0	87.5	0.001	304
Primary incomplet		6.8	1.7	0.1	0.9	3.5	0,6	5.1	3.4	1.2	0.2	88.2	100.0	664
Primary complete	28.5	18.4	5.8	0.2	2.7	9,3	0.3	10.1	6.4	3.0	0,5	71.5	100.0	1,066
Secondary+	38.3	27.6	5.3	1.1	1.8	16.0	3.2	10.7	6.8	3.9	0.0	61.7	100.0	222
No. of living childr	en													
0	10.9	9.2	0.4	0.0	0.1	8.7	0.0	1.7	1.0	0.6	0.1	89.1	100.0	974
i	27.0	16.8	3.9	0.3	1.3	11.1	0.3	10.2	6.9	2.3	0.6	73.0	100.0	228
2	27.6	15.2	5.9	1.5	ijĴ	6.7	0.0	12.4	7.7	4.7	0.0	72.4	100.0	206
3	42.8	26.0	11.6	0.0	3.2	10.4	0.7	16.8	13.4	3.4	0.0	57.2	100.0	188
4+	30.2	16.2	6.1	0,3	4.2	3.4	2.1	14.1	8.8	4.1	0.7	69.8	100.0	661
Total	22.4	14.0	3.9	0.2	1.8	7.3	0.7	8.4	5.5	2,4	0.3	77.6	100.0	2,256

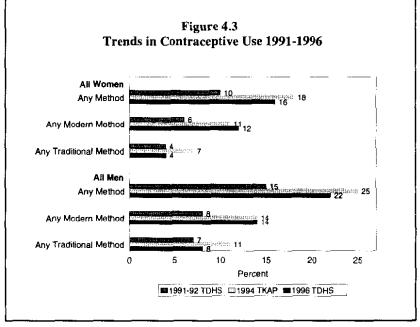
## Trends in Contraceptive Use

Contraceptive use in 1996 has increased since the 1991-92 TDHS from 10 to 16 percent of all women using any method and from 6 to 12 percent using modern methods (Figure 4.3). Injectables had the highest increase from less than 1 percent to 4 percent in the same time period. Among men, use of modern methods increased from 8 percent to 14 percent for the same period of time. However, the 1996 TDHS data show a slight decline in the contraceptive use rate since the 1994 Tanzania Knowledge, Attitudes and Practices Survey (TKAPS) (from 18 to 16 percent of all women) which is due to a decline in the use of traditional methods; use of modern methods has slightly increased since 1994. Thus, it appears as if use of modern methods of contraception increased rapidly between 1991-92 and 1994 and has leveled off since then.

# 4.5 Number of Children at First Use of Family Planning

Family planning methods may be used for either spacing births or limiting family size. The 1996 TDHS included questions on the number of children the woman had when she first used contraception. These data enable an examination of the cohort changes





in the timing of adopting contraceptive use. Table 4.7 shows the distribution of ever-married women and the number of children the women had when they first used contraception, according to age group.

The results indicate that Tanzanian women are adopting family planning at an earlier stage of the family building process than before. Younger women report first use at lower parity than older women. For example, older (age 40-49) ever-married women reported first using contraception after having a median of 3.3-3.5 births, compared with about one living child among the youngest women (under age 30). This pattern may also be a reflection of a recent increase in the availability of family planning services.

Table 4.7 Number of children at first use of contraception

Percent distribution of ever-married women by number of living children at the time of first use of contraception, and median number of children at first use, according to current age, Tanzania 1996

Current	Never used contra-			er of living first use of					Median number of children at first	Number of
age	ception	0	1	2	3	4+	Missing	Total	use	women
15-19	83.8	3.7	11.8	0.5	0.0	0.0	0.2	100.0	0.4	441
20-24	62.5	6.1	22.2	6.7	1.8	0.3	0.4	100.0	0.6	1,266
25-29	<b>59</b> .3	2.9	16.1	11.9	6.0	3.5	0.3	100.0	1.1	1,334
30-34	60.5	1.1	13.6	9.4	5.7	9.1	0.6	100.0	1.5	1,067
35-39	61.9	0.6	8.4	7.3	7.1	14.2	0.4	100.0	2.4	873
40-44	65.0	1.0	4.0	5.9	4.7	19.4	0.1	100.0	3.5	670
45-49	73.0	0.4	5.5	3.5	3.2	13.9	0.5	100.0	3.3	582
Total	64.2	2.5	13.3	7.5	4.4	7.7	0.4	100.0	1.3	6,233

## 4.6 Effect of Breastfeeding on Conception

Information on knowledge of the contraceptive effect of breastfeeding as perceived by women is shown in Table 4.8. Twenty-seven percent of currently married Tanzanian women believe that breastfeeding increases the chance of a woman becoming pregnant. Fourteen percent correctly report that breastfeeding can reduce the risk of pregnancy, while 12 percent say that it depends on the situation. Differentials in knowledge of the contraceptive effect of breastfeeding by age group and place of residence are not large. Large differentials are observed by regions. For example 29 percent of currently married women in the Kagera region correctly reported that breastfeeding can reduce the risk of pregnancy, compared with only 2 percent in the Ruvuma region.

Only 8 percent of currently married women have used breastfeeding in the past to avoid pregnancy and 4 percent are currently relying on breastfeeding as a contraceptive method. Five percent of women meet the criteria for use of the lactational amenorrhoeic method (LAM)<sup>1</sup> of family planning.

## 4.7 Sources of Family Planning Methods

Women who reported using a modern method of contraception at the time of the survey were asked where they obtained the method the last time. It is likely that some women may misreport the type of place where they obtained the method, since the distinction between hospitals, clinics, and sometimes between public and private sources may not be clear to them. Table 4.9 and Figure 4.4 show that overall family planning users in Tanzania are more likely to obtain their methods from the public sector than from a private provider. About three-fourths of women currently using modern contraceptives obtained the method from the public sector, including government and districts hospitals (24 percent), government health centres (22 percent), and government dispensaries or parastatal facilities (28 percent).

<sup>&</sup>lt;sup>1</sup>LAM users are women who are breastfeeding a child under six months of age, are still postpartum amenorrhoeic, and are not feeding the child anything but breast milk and plain water.

Table 4.8 Perceived contraceptive effect of breastfeeding

Percent distribution of currently married women by perceived risk of pregnancy associated with breastfeeding and percentage who rely on breastfeeding to avoid pregnancy, and percentage who meet lactational amenorrhoeic method (LAM) criteria, according to selected background characteristics, Tanzania 1996

			ed risk of p d with brea					Reliand breastfa to av pregna	eding oid	Meet	Number of women
Background characteristic	Un- changed	In- creased	De- creased	Depends	Don't know	Missing	Total	Previ- ously	Cur- rently	LAM criteria	
Age			·· — — ·								
15-19	12.7	17.9	6.9	5.0	57.2	0.2	100.0	2.3	1.7	8.2	401
20-24	17.4	27.6	13.3	9.7	32.0	0.1	100.0	4.9	2.6	6.6	1,131
25-29	19,5	29.6	15.0	10.6	25.2	0.1	100.0	8.1	4.4	5.8	1,184
30-34	17.5	28.8	16.1	15.2	22.5	0.0	100.0	9.6	4.8	5.0	947
35-39	18.7	27.2	14.7	15.6	23.7	0.0	100.0	10.1	5.2	3.3	740
40-44	16.8	24.2	17.5	13.1	28.0	0.4	100.0	12.3	3.3	1.1	561
45-49	13.2	28.6	13.9	15.6	28.5	0.2	100.0	8.1	1.3	1.2	447
Residence											
Mainland	16.9	27.2	14.6	12.3	28.8	0.1	100.0	8.1	3.7	4.8	5,245
Total urban	23.7	29.7	10.9	11.8	23.8	0.1	100.0	6.1	2.7	2.3	1,073
Dar es Salaam city	36.6	20.9	10.0	7. <b>7</b>	24.6	0.2	100.0	5.2	2.2	0.7	340
Other urban	17.7	33.8	11.3	13.7	23.5	0.0	100.0	6.6	3.0	3.1	733
Total rural	15.2	26.6	15.6	12.5	30.1	0.1	100.0	8.6	4.0	5.4	4,172
Zanzibar	28.8	27.5	6.0	6.9	30.8	0.0	100.0	3.4	1.4	5.5	166
Region											
Dodoma	17.9	20.5	16.6	17.0	27.9	0.0	100.0	13.1	7.0	5.7	258
Arusha	11.8	10.3	15.0	15.0	48.0	0.0	100.0	6.2	1.9	6.2	403
Kilimanjaro	13.9	14.8	15.7	20.6	34.5	0.4	100.0	8.5	2.2	4.9	221
	9.1	15.3	10.7	15.7	48.8	0.4	100.0	3.7	0.4	3.7	282
Tanga	15.2	26.2	8.0	17.3		0.0	100.0	3.4	1.3	3.8	257
Morogoro Coast	40.4	19.3	6.4	5.3	33.3 28.7	0.0	100.0	3.5	1.3	1.8	237 98
Dar es Salaam	38.6	20.6	9.1	7.8	23.7	0.2	100.0	5.1	2.1	1.5	399
Lindi	24.8	28.1	7.6	5.7	33.8	0.0	100.0	2.4	1.4	3.8	123
Mtwara	19.5	37.0	6.5	8.1	28.9	0.0	100.0	0.0	0.0	5.2	248
Ruvuma	17.6	31.3	2.2	9.3	39.3	0.3	100.0	0.6	0.3	2.6	205
Iringa	15.2	26.3	8.2	18.1	32.1	0.0	100.0	4.9	3.3	5.8	291
Mbeya	12.8	46.9	9.5	5.2	25.6	0.0	100.0	7.1	1.9	3.3	318
Singida	13.0	30.4	14.1	8.9	33.7	0.0	100.0	11.1	3.7	4.8	194
Tabora	15.9	23.9	19.6	10.9	29.0	0.7	100.0	16.7	7.2	5.1	157
Rukwa	6.2	39.4	11.6	19.3	23.6	0.0	100.0	15.1	6.9	5.0	177
Kigoma	13.9	14.3	20.9	12.7	37.3	0.8	100.0	16.8	11.1	7.8	233
Shinyanga	14.2	37.4	27.2	8.7	12.6	0.0	100.0	12.2	4.7	6.3	464
Kagera	15.6	19.0	29.3	17.1	19.0	0.0	100.0	17.1	8.3	6.3	337
Mwanza	14.0	42.1	18.7	7.9	17.3	0.0	100.0	5.6	4.7	5.1	395
Mara	20.3	37.1	13.7	15.7	13.2	0.0	100.0	7.1	3.6	4.1	183
Education											
No education	13.0	24.4	14.4	11.9	36.1	0.2	100.0	8.4	3.9	4.6	1,829
Primary incomplete	17.1	25.7	16.7	12.7	27.7	0.1	0.001	10.0	4.7	4.4	920
Primary complete	19.2	29.5	13.5	12.2	25.5	0.1	100.0	7.1	3.2	5.3	2,462
Secondary +	33.6	30.9	13.8	11.4	10.4	0.0	100.0	5.7	2.0	2.1	200
Total	17.3	27.2	14.4	12.2	28.9	0.1	100.0	8.0	3.6	4.8	5,411

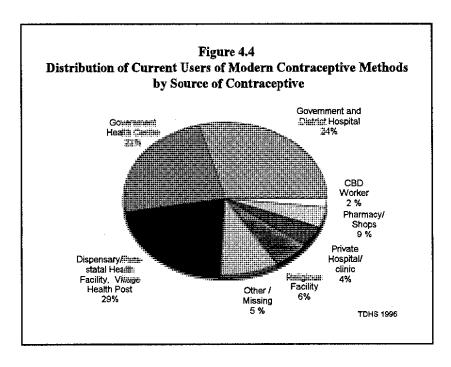
Table 4.9 Source of supply for modern contraceptive methods

Percent distribution of women currently using modern contraceptive methods by most recent source of the method, according to specific methods, Tanzania 1996

		Con	traceptive m	ethod		
Source of supply	Pill	IUD	Inject- ables	Condom	Female sterili- sation	All modern methods
Public	77.4	90.8	88.4	22.8	68.4	74.2
Government hospital	2.7	14.6	6.1	0.3	37.6	8.3
District hospital	11.7	35.5	16.0	10.9	22.0	15.4
Health centre	25.5	28.6	28.6	4.6	3.7	21.6
Dispensary/parastatal facility	35.9	12.2	36.6	6.5	5.1	28.0
Village health post	1. <b>5</b>	0.0	1.1	0.5	0.0	1.0
Medical private	17.9	5.0	8.4	36.4	28.1	17.7
Religious organisation facility	4.0	5.0	1.5	3.8	23.8	5.7
Private hospital/clinic	4.7	0.0	5.9	0.0	4.3	4.3
Pharmacy/medical store	6.6	0.0	0,0	29.3	0.0	5.9
CBD worker	2.6	0.0	1.1	3.4	0.0	1.8
Other private	2.0	2.1	1.7	30.8	0.7	4.9
Shop/kiosk	0.8	0.0	0.4	24.7	0.0	3.2
Church	0.3	0.0	0.0	0.8	0.0	0.2
Friends/relatives	0.4	0.0	0.0	4.6	0.0	0.7
Other	0.5	2.1	1.2	0.7	0.7	0.9
Don't know	0.3	0.0	0,0	2.0	0.0	0.3
Not stated	2.4	2.1	1.6	8.0	2.7	2.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of users	389	40	298	105	116	954

CBD = Community-based distribution.

Note: The total includes 3 implant users, one diaphragm/foam/jelly user, and one male sterilisation user.



Private medical sources account for 18 percent of current users. Community-based distribution (CBD) workers supply nearly 2 percent of modern methods. The source of family planning methods varies according to the type of method used. The public sector is the principal source of the pill, IUD, injectables, and female sterilisation, while the private sector is the principal source for condom users; more than half of the condom users reported obtaining condoms from pharmacies and shops. There is little change in the sources of contraception since the 1991-92 TDHS.

## 4.8 Intention to Use Family Planning Among Nonusers

An important indicator of the changing demand for family planning is the extent to which nonusers of contraception intend to use family planning in the future. Respondents who were not using contraception at the time of the survey were asked if they intended to use family planning methods in the future. The results are presented in Table 4.10.

Almost half (48 percent) of women nonusers say they intend to use family planning at some time in the future, with 33 percent saying they intend to use in the next 12 months and 13 percent saying they intend to use later. Thirty-eight percent of women say that they do not intend to use, while 13 percent are unsure about their intention to use. Men are more likely than women to intend to use contraception in future. Fifty-six percent of men who are not using a method say that they intend to use family planning in the future (see last column in Table 4.10).

Table 4.10	Future use of	f contraception
120104.10	ruture use o.	COMMACCOMON

Percent distribution of all women and men who are not using a contraceptive method by intention to use in the future, according to number of living children, Tanzania 1996

		Numbe	er of living c	hildren <sup>1</sup>			Total men
Future intentions	0	1	2	3	4+	Total women	
Intend to use in next 12 months	18.9	42.8	40.0	36.7	36.0	33.0	26.2
Intend to use later	21.1	13.9	10.1	11.7	6.7	12.9	26.8
Unsure as to timing	2.6	1.6	1.1	1.6	1.7	1.8	3.2
Unsure as to intention	27.0	10.4	8.6	8.5	6.4	13.4	13.7
Do not intend to use	30.2	30.6	39.7	40.9	48.3	38.3	29.0
Missing	0.2	0.6	0.5	0.7	1.0	0.6	1.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women/men	1,905	1,179	874	758	2,100	6,816	1,751

The proportion of nonusers intending to use, and especially the timing of use, varies with the number of living children. For example, the proportion of women who intend to use within the next 12 months is much lower among childless women (19 percent) than among those with one child (43 percent). The proportion who do not intend to use at all is higher among women with four or more children (48 percent) than among women with one child (31 percent).

### 4.9 Reasons for Nonuse

Table 4.11 presents the main reasons for not using family planning given by currently married women and men who do not intend to use contraception in the future. Desire for more children was the most important reason for nonuse among women (23 percent) and men (25 percent) followed by opposition to contraception by the individual.

Table 4.11 Reasons for not using contraception

Percent distribution of all women and men who are not using a contraceptive method and who do not intend to use in the future, by main reason for not intending to use, according to age, Tanzania 1996

		Women			Men	
Reason	A	ge		-	Age	
for not using contraception	<30	30-49	Total	<30	30-49	Total
Not married	19.2	1.0	8.9	40.9	3.0	15.9
Want children	26.1	20.8	23.1	18.8	28.6	25.2
Side effects	5.0	3.9	4.3	1.6	1.8	1.7
Health concerns	0.8	1.7	1.3	0.5	1.1	0.9
Interferes with body	1.0	3.1	2.2	0.0	0.0	0.0
No method known	10.6	9.5	10.0	12.7	9.3	10.5
No source known	0.7	1.1	0.9	1.7	2.3	2.1
Lack of access	0.2	0.1	0.1	0.0	0.2	0.1
Costs too much	0.1	0.0	0.0	0.0	0.0	0.0
Religion	2.1	1.9	2.0	1.9	3.3	2.8
Respondent opposed	15.2	21.4	18.7	11.1	16.1	14.4
Partner opposed	5.6	4.4	4.9	0.0	0.0	0.0
Others opposed	0.1	0.4	0.3	0.0	0.0	0.0
Infrequent sex	1.2	2.9	2.2	0.4	6.2	4.2
Menopausal/hysterectomy	0.0	18.1	10.3	0.0	19.0	12.5
Subfecund/infecund	0.8	1.6	1.3	0.0	1.1	0.7
Inconvenient	0.4	0.7	0.5	8.0	0.5	0.6
Other	6.5	5.8	6.1	2.8	3.9	3.5
Don't know/Missing	3.9	1.1	2.3	6.8	0.5	2.7
Not stated	0.5	0.6	0.6	0.0	3.2	2.1
Total	100.0	100.0	0.001	100.0	100.0	100.0
Number of women/men	1,125	1,483	2,608	173	335	509

Ten percent of men and women do not intend to use any method due to lack of knowledge about family planning methods. Younger women and older men are more likely than older women and younger men to cite desire for more children as the main reason for not intending to use. Another important reason cited by nonusers age 30 years and older is menopause and hysterectomy.

## 4.10 Preferred Method of Contraception for Future Use

Nonusers who indicated their intention to use family planning methods in the future were asked which method they would prefer to use. One-third of the women say they prefer to use the pill, and just over one-third say they prefer injectables (Table 4.12). Sterilisation is the third method preferred by women adopting family planning in the future. Women who intend to use in the next 12 months have similar method preferences as women who intend to use after 12 months.

## 4.11 Exposure to Family Planning Messages in the Electronic Media

Radio and television are major potential sources of information about family planning. To assess the effectiveness of such media for the dissemination of family planning information, all female and male respondents in the survey were asked if they had heard or seen messages about family planning on the radio or on television during the six months preceding the interview.

Table 4.13 shows that a higher proportion of men than women are exposed to the major electronic media. Sixty-one percent of men and 45 percent women report that they have heard or seen a family planning message on the radio or television in the previous six months. Radio is by far the more prominent of the two media; less than 1 percent of respondents had seen a family planning message on the television.

Younger respondents are more exposed to family planning messages through radio and television than older respondents. A sharp contrast in access to family planning messages is observed between urban and rural residence on the mainland; 64 percent of rural women and 46 percent of rural men have not been reached through the electronic media in the past six months, compared to 28 percent of

Table 4.12 Preferred method of contraception for future use

Percent distribution of all women who are not using a contraceptive method but who intend to use in the future by preferred method, according to timing of intended use, Tanzania 1996

	Timir	g of intende	ed use	
Preferred method of contraception	In next 12 months	After 12 months	Unsure when	All women
Pill	34.3	33.5	25.7	33.8
IUD	2.9	2.2	0.0	2.6
Injectables	38.4	30.3	27.0	35.7
Diaphragm/foam/jelly	0.2	0.2	0.0	0.2
Condom	2.1	1.9	1.3	2.0
Female sterilisation	5.3	3.1	4.5	4.7
Implant	1.7	1.8	2.6	1.8
Calendar/mucus	1.5	2.2	2.9	1.8
Withdrawal	0.9	0.4	0.0	0.7
Other method (Folk)	2.1	2.4	3.5	2.2
Missing	10.6	22.0	32.5	14.5
Total	100.0	100.0	100.0	100.0
Number of women	2,248	882	126	3,256

urban women and 22 percent of urban men. Access to the media is much higher in Zanzibar than on the mainland. The proportion of respondents who have been exposed to family planning messages on the radio or television varies across regions and is by far the highest among respondents in Dar es Salaam. Education of respondents is closely correlated with media exposure. Seventy-six percent of women and 68 percent of men with no formal schooling have not heard or seen a family planning messages on the radio or television, compared with 19 percent of women and 9 percent of men with some secondary or higher education.

# 4.12 Acceptability of Media Messages on Family Planning

To determine the level of acceptability of dissemination of family planning information through the media, women and men interviewed in the 1996 TDHS were asked whether they thought it was acceptable for family planning information to be provided on the radio or television. Overall, 76 percent of women and 86 percent of men feel it is acceptable to use radio or television to disseminate family planning information (Table 4.14).

Urban respondents are more likely to accept the electronic media as a vehicle for family planning information than their rural counterparts. The acceptability of family planning messages on electronic media is higher for women living in the Dar es Salaam, Coast, and Kilimanjaro regions and for men living in the Mwanza, Rukwa, and Mbeya regions. Women and men who have attained higher levels of education are much more likely to accept family planning messages on the radio or on television than those with no education.

Table 4.13 Heard about family planning on radio and television

Percent distribution of women and men by whether they heard a radio and/or television message about family planning in the six months preceding the interview, according to selected background characteristics, Tanzania 1996

				Heard	about fan	nily plannir	ing on radio or television						
	<u> </u>		Wo	men			·		<u> </u>	Men			
Background characteristic	Heard on neither	Radio only	Tele- vision only	Heard on both	Total	Number of women	Heard on neither	Radio only	Tele- vision only	Heard on both	Total	Number of men	
Age			<del></del>		<del>,</del>			· ·		<u></u>			
15-19	62.9	31.4	0.2	5.4	100.0	1,732	53.1	40.4	0.2	6.2	100.0	488	
20-24	45.5	46.8	0.5	7.1	100.0	1,676	31.7	54.9	0.0	12.9	100.0	371	
25-29	50.6	42.8	0.3	6.2	100.0	1,440	31.4	55.9	0.9	11.7	100.0	301	
30-34	49.2	46.0	0.2	4.4	100.0	1,118	32.9	55.8	0.5	10.8	100.0	272	
35-39	52.8	42.0	0.3	4.9	100.0	888	31.0	57.5	0.0	11.5	100.0	251	
40-44	60.1	36.6	0.3	3.1	100.0	680	3 <b>5</b> .4	57.3	0.0	6.5	100.0	206	
45-49	72.8	24.8	0.1	2.4	100.0	585	44.9	45.4	0.4	7.5	100.0	149	
50-54	NA	NA	NA	NA	NA	NA	40.6	57.7	0.0	1.7	100.0	118	
55-59	NA	NA	NA	NA	NA	NA	60.5	38.2	0.7	0.6	100.0	100	
Residence													
Mainland	55.3	39.8	0.2	4.5	100.0	7,881	40.2	51.9	0.3	7.4	100.0	2,187	
Total urban	28.0	58.1	0.6	13.2	100.0	1,811	22.2	57.9	0.4	19.2	100.0	509	
Dar es Salaam city	14.7	54.2	1.1	29,6	100.0	563	19.5	39.0	1,1	40.1	100.0	171	
Other urban	34.0	59.8	0.3	5.8	100.0	1,248	23.6	67.5	0.0	8.6	100.0	338	
Total rural	63.5	34,4	0.1	2.0	100.0	6,070	45.7	50.0	0.2	3.8	100.0	1,678	
Zanzibar	32.1	35.6	2.3	29.8	100.0	239	10.0	32.6	0.7	54.5	100.0	69	
Pemba	38.3	41.4	0.3	19.7	100.0	92	5.6	77.8	1.9	14.8	100.0	28	
Unguja	28.3	32.1	3.5	36.1	100.0	148	13.0	1.9	0.0	81.5	100.0	41	
Ongaju	20.5	22.1	5.5	20.1	100.0	110	1510		0.0	01.5	100.0		
Region	51.4	45 1	0.0	2.5	100.0	255	41.4	50.7	0.7	<b>7</b> t	100.0	٥c	
Dodoma	51.4	45.1	0.0	3.5	100.0	355	41.4	50.7	0.7	7.1	100.0	96	
Arusha	58.0	39.0	0.2	2.8	100.0	589	42.6	51.1	0.0	6.4	100,0	156	
<u>K</u> ilimanjaro	33.3	63.1	0.0	3.6	100.0	390	32.8	58.5	0.0	8.2	100.0	119	
Tanga	46.0	47.5	0.3	6.3	100.0	464	33.3	61.3	0.0	5.3	100.0	108	
Morogoro	45.9	51.2	0.0	2.7	100.0	408	41.3	54.5	0.0	3.5	100.0	95	
Coast	36.5	60.3	0.4	2.9	100.0	159	33,9	58.1	3.2	4.8	100.0	45	
Dar es Salaam	15.4	55.8	1.0	27.4	100.0	646	18.1	41.8	1.0	38.8	100.0	191	
Lindi	50.9	45.6	0.0	3.5	100.0	187	18,3	74.6	0.0	7.0	100.0	54	
Mtwara	59.2	40.4	0.0	0.5	100.0	355	29.7	67.3	0.0	3.0	100.0	96	
Ruvuma	57.1	41.8	0.0	1.1	100.0	305	29.4	68.6	0.0	1.0	100.0	82	
Iringa	69.9	29.8	0.0	0.3	100.0	466	49.6	49.6	0.0	0.7	100.0	100	
Mbeya	58.6	38.9	0.6	1.9	100.0	473	37.5	61.1	0.0	1.4	100.0	137	
Singida	63.2	33.8	0.8	2.3	100.0	283	33.3	58.3	0.0	8.3	100.0	80	
Tabora	59.1	37.9	0.0	3.0	100.0	225	44.4	51.9	0.0	3.7	100.0	82	
Rukwa	76.5	21.8	0.0	1.7	100.0	242	42.3	53.8	0.0	1.3	100.0	71	
	63.2	34.3	0.0	1.6	100.0	351	51,4	47.1	0.0	1.3	100.0	95	
Kigoma													
Shinyanga	69.9	25.9	0.0	4.3	100.0	686	65.2	30.5	0.0	3.7	100.0	202	
Kagera	65.5	31.3	0.4	2.8	100.0	467	39.1	47.8	1.4	11.6	100.0	139	
Mwanza	70.0	29.4	0.0	0.6	100.0	573	51.3	47.4	0.0	1.3	100.0	176	
Mara	61.7	36.5	0.4	1.4	100.0	257	43.6	54.5	0.0	1.8	100.0	64	
Education						_			_				
No education	75.9	22.5	0.1	1.5	100.0	2,316	67.7	29.1	0.2	2.7	100.0	304	
Primary incomplete	60.7	36.2	0.1	2.9	100.0	1,630	49.1	45.9	0.0	4.2	100.0	664	
Primary complete	43.0	50.8	0.4	5.7	100.0	3,732	31.3	59.0	0.5	9.1	100.0	1,066	
Secondary+	18.5	49.9	0.9	30.4	100.0	441	9.3	60.9	0.3	29.5	100.0	222	
Total	54.6	39.7	0.3	5.3	100.0	8,120	39,3	51.3	0.3	8.8	100.0	2,256	

Table 4.14 Acceptability of media messages on family planning

Percent distribution of women and men by acceptability of messages about family planning on the radio or television, by selected background characteristics, Tanzania 1996

		,	юсершын	ty or rain	ty pramming	messages on	radio oi t	CICVISION		
	<del> </del>		Women					Men		
	-	Not		<del>,</del> -	Number		Not			Number
Background characteristic	Accept- able	accept- able	Unsure	Total	of women	Aecept- able	accept- able	Unsure	Total	of men
Age										
15-19	70.0	7.0	23.0	100.0	1,732	79.7	3.5	16.8	100.0	488
20-24	83.3	5.2	11.5	100.0	1,676	89.7	4.9	5.5	100.0	371
25-29	80.0	7.2	12.8	100.0	1,440	92.4	3.8	3.8	100.0	301
30-34	78.4	6.9	14.7	100.0	1,118	89.3	6.3	4.4	100.0	272
35-39	75.6	8.1	16.3	100.0	888	89.9	5.1	5.0	100.0	251
40-44	72.7	7.8	19.4	100.0	680	84.8	8.9	6.2	100.0	206
45-49	63.4	7.2	29.4	100.0	585	82.5	6.4	11.1	100.0	149
50-54	NA	NA	NA	NA	NA	90.0	6.6	3.4	100.0	118
55-59	NA	NA	NA	NA	NA	70.9	11.3	17.9	0.001	100
Residence										
Mainland	75.9	6.6	17.5	100.0	7,881	86.1	5.4	8.5	0.001	2,187
Total urban	90.9	3.7	5.4	100.0	1,811	90.3	6.7	3.0	100.0	509
Dar es Salaam city	95.8	3.0	1.2	100.0	563	86.0	11.0	2.9	100.0	171
Other urban	88.7	4.0	7.3	100.0	1,248	92.4	4.6	3.0	100.0	338
Total rural	71.4	7.5	21.1	100.0	6,070	84.8	5.0	10.2	100.0	1,678
Zanzibar	81.5	14.6	3.9	100.0	239	88.2	7.0	4.8	100.0	69
Pemba	73.6	22.4	4.1	100.0	92	92.6	3.7	3.7	100.0	28
Unguja	86.4	9.8	3.8	100.0	148	85.2	9.3	5.6	100.0	41
Region										
Dodoma	67.6	7.3	25.1	100.0	355	75.0	10.0	15.0	100.0	96
Arusha	61.8	11.5	26.7	100.0	589	73.4	9.6	17.0	100.0	156
Kilimanjaro	90.1	4.3	5.6	100.0	390	87.7	3.1	9.2	100.0	119
Tanga	82.4	3.8	13.8	100.0	464	74.7	5.3	20.0	100.0	108
Morogoro	77.2	2.7	20.2	100.0	408	86.0	4.2	9,8	100.0	95
Coast	90.6	6.9	2.5	100.0	159	87.1	3.2	9.7	100.0	45
Dar es Salaam	95.4	3.3	1.3	100.0	646	86.8	10.2	3.0	100.0	191
Lindi	86.2	9.1	4.7	100.0	187	91.5	4.2	4.2	100.0	54
Mtwara	77.8	14.5	7.7	100.0	355	91.1	7.9	1.0	100.0	96
Ruvuma	78.1	10.3	11.6	0.001	305	81.4	7.8	10.8	100.0	82
Iringa	66.8	4.1	29.0	100.0	466	73.0	5.8	21.2	100.0	100
Mbeya	77.4	2.5	20.1	100.0	473	95.8	4.2	0.0	100.0	137
Singida	70.6	7.9	21.6	100.0	283	82.1	14.3	3.6	100.0	80
Tabora	70.2	12.6	17.2	100.0	225	92.6	0.0	7.4	100.0	80 82
Rukwa	68.0	7.9	24.1	100.0	242					
	63.2	7.4	24.1 29.4	100.0	351	96.2 87.1	2.6	1.3	100.0	71 95
Kigoma Shinyanga	76.5	4.0	29.4 19.5	100.0	551 686	87.1 86.0	1.4	11.4 7.9	100.0	
Shinyanga Kagara	76.3 71.8			100.0			6.1		100.0	202
Kagera Mwanza	71.8 72.9	8.1	20.1		467 573	85.5	0.0	14.5	100.0	139
Mara	74.4	6.1 9.4	21.0 16.2	100.0 100.0	5 <b>7</b> 3 257	98.7 90.9	0.0 7.3	1.3 1.8	100.0	176 64
Education										
No education	58.0	11.0	31.1	100.0	2,316	71.7	10.5	17.7	100.0	304
Primary incomplete	73.3	6.5	20.2	100.0	1,630	81.5	5.7	12.9	100.0	664
Primary complete	86.1	4.9	9.0	100.0	3,732	91.4	4.0	4.6	100.0	
Secondary +	95.7	3.1	1.2	100.0	441	94.4	4.9	0.6	100.0	222
Total	76.0	6.9	17.1	100.0	8,120	86.1	5.5	8.4	100.0	2,256

## 4.13 Exposure to Family Planning Messages Through the Print Media

Female respondents were asked if they had been exposed to a family planning message through a newspaper or magazine article, a poster, or a billboard during the six months preceding the interview. The results are presented in Table 4.15. Only 30 percent of the women reported that they had been exposed to family planning information through print media. The most commonly reported source of a family planning message in the print media was posters (22 percent), and newspapers/magazines (21 percent), followed by billboards (19 percent).

Women in rural areas were less likely to have been exposed to family planning messages from print media (newspapers, magazines, posters, and billboards) than their urban counterparts (21 vs. 57 percent) on the mainland. Women living in the Dar es Salaam region are more likely to have seen a family planning message in the print media than women in other regions. The proportion of women exposed to messages in any print media increases directly with educational level, from 8 percent among women with no formal education to 73 percent among women with at least some secondary education.

## 4.14 Contact of Nonusers with Family Planning Providers

Family planning field workers who are largely based in rural areas are expected to visit women and men of reproductive age who are not using modern family planning methods to discuss the options and when indicated, motivate them to adopt a method of family planning. Health facility and extension workers are also expected to visit or discuss and motivate families for family planning while providing other health services. To get an indication of the frequency of such visits or discussions, women were asked whether they had been visited by a family planning field worker within the previous 12 months. Table 4.16 shows that only 3 percent of nonusers were visited by a family planning field worker during the 12 months preceding the survey.

To get an insight into the level of "missed opportunities"—i.e., contacts between nonusers and health workers which were not utilised to motivate nonusers to adopt family planning—nonusers were also asked whether they had visited a health facility in the past 12 months and whether anyone at the health facility had discussed family planning with them during their visit. Of the 38 percent of women who visited a health facility in the previous 12 months, 29 percent (11 percent of all nonusers) said that someone at the facility spoke to them about family planning.

Overall, 87 percent of nonusers were neither visited by a family planning worker nor discussed family planning with a health facility staff in the 12 months preceding the survey. This represents a large pool of potential users of family planning that could be targeted for family planning counselling. To reach these women, a vigorous outreach programme is needed and all health workers should be sensitised to discuss the issues of fertility preferences and the option of family planning whenever the opportunity arises.

## 4.15 Attitudes Toward Family Planning

Use of effective contraceptive methods is facilitated when couples have a positive attitude toward family planning. Attitudinal data were collected by asking currently married women whether they approve of couples using family planning and what they perceive as their husband's attitude toward family planning. This information is useful in the formulation of family planning policies, since it indicates the extent to which further education and publicity are needed to gain or increase acceptance of family planning. Widespread disapproval of contraception acts as a barrier to adoption of methods.

Table 4.15 Family planning messages in print

Percentage of women who received a message about family planning through the print media in the six months preceding the interview, according to selected background characteristics, Tanzania 1996

	Ту	NT			
Background characteristic	Any	Newspaper/ magazine	Poster	Billboard	Number of women
Age	<u></u>				
15-19	25.8	20.0	17.9	15.5	1,732
20-24	<b>37.</b> 7	27.2	28.1	23.7	1,676
25-29	31.7	23.1	25.1	21.7	1,440
30-34	32.8	23.3	24.6	19.4	1,118
35-39	30.4	20.1	22.6	18.4	888
40-44	23.7	14.5	20.2	15.1	680
45-49	12.3	8.4	9.2	8.6	585
Residence					
Mainland	29.5	21.1	22.1	18.5	7,881
Total urban	56.5	44.8	44.4	39.4	1,811
Dar es Salaam city	70.6	59.0	57.8	45.5	563
Other urban	50.1	38.3	38.4	36.7	1,248
Total rural	21.4	14.1	15.5	12.3	6,070
Zanzibar	34.2	24.8	26.4	21.0	239
Pemba	20.3	16.3	11.5	11.9	92
Unguja	42.8	30.1	35.5	26.6	148
Region					
Dodoma	34.6	25.1	29.2	19.4	355
Arusha	32.0	27.1	23.7	19.0	589
Kilimanjaro	41.0	34.9	21.6	21.9	390
Tanga	33,4	29.1	16.8	19.3	464
Morogoro	26.3	19.4	23.1	18.0	408
Coast	28.2	21.3	19.9	17.0	159
Dar es Salaam	69.6	56.8	57.2	43.3	646
Lindi	35.5	19.2	31.8	29.9	187
Mtwara	21.5	11.1	18.4	19.7	355
Ruvuma	18.0	10.7	14.4	19.7	305
Iringa	13.4	8.7	9.0	7.2	303 466
Mbeya	24.8	12.4	21.7	22.6	473
Singida	31.5	12.4	26.1	22.6 25.6	473 283
Tabora	25.8	19.5	21.2	23. <b>0</b> 8.1	283 225
Rukwa	12.5	5.7	10.8	12.7	242
	21.5				
Kigoma Shinyanga		10.9	18.8	11.4	351
Shinyanga	24.8 23.9	20.5	14.9	12.8	686
Kagera		12.7	21.5	10.2	467
Mwanza Mara	22.3 21.7	14.2 15.5	14.2 13.4	12.3 13.0	573 257
Education					
No education	8.3	3.3	6.2	A 1	2216
Primary incomplete			6.3	4.1	2,316
	21.9	13.0	16.8	12.8	1,630
Primary complete	41.0	30.6	30.3	25.4	3,732
Secondary+	73.4	65.6	58.3	58.9	441
Fotal	29.6	21.2	22.3	18.6	8,120

Table 4.16 Contact of nonusers with family planning providers

Percent distribution of nonusers by whether they were visited by a family planning (FP) field worker or spoke with a health facility staff member about family planning methods during the 12 months preceding the interview, according to background characteristics, Tanzania 1996

		isited by fa ming field			isited by faing field w					
		sited facility	Did not		ited facility	Did not			No FP	
Background characteristic	Dis- cussed FP	Did not discuss FP	visit health facility	Dis- cussed FP	Did not discuss FP	visit health facility	Missing	Total	services or information provided	Number of nonusers
Age	<del></del>	<del></del>			·	<del></del> -	<del></del>			
15-19	0.1	0.7	0.6	2.8	25.3	70.3	0.3	100.0	95.6	1,651
20-24	1.2	0.8	1.4	11.9	30.1	54.4	0.2	100.0	84.5	1,375
25-29	1.8	0.9	1.6	17.5	28.6	49.2	0.4	100.0	77.8	1,156
30-34		1.5	1.6	17.3	25.6	56.3		100.0	82.0	
35-39	2.3 1.9	0.7	0.4	12.0	23.6 24.4	30.3 59.9	0.0 0.6		82.0 84.3	883 701
33-39 40-44	1.9	0.7	1.3	8.0	24.4 20.8			100.0	84.3 88.0	
40- <del>44</del> 45-49	0.6	0.6	1.5	5.1	19.8	67.3 72.3	0.3 0.1	100.0 100.0	92.1	539 511
Residence										
Mainland	1.3	0.8	1.1	10.0	25.8	60.8	0.3	100.0	86.6	6,600
Total u <del>rb</del> an	2.1	1.6	2.1	11.8	32.7	49.6	0.2	100.0	82.3	1,286
Dar es Salaam city	2.4	2.2	2.0	11.9	38.8	42.5	0.2	100.0	81.3	390
Other urban	1.9	1.3	2.1	11.7	30.0	52.6	0.2	100.0	82.6	896
Total rural	1.1	0.6	0.8	9.6	24.1	63.6	0.3	100.0	87.7	5,314
Zanzibar	1.1	2.1	3,9	8.0	33.1	51.3	0.5	100.0	84.5	216
Pemba	2.2	1.8	3.3	7.7	22.3	62.4	0.4	100.0	84.7	85
Unguja	0.3	2.3	4.2	8.2	40.2	44.1	0.7	100.0	84.3	131
Region										
Dodoma	0.7	0.4	0.0	12.4	18.6	67.9	0.0	100.0	86.5	308
Arusha	1.3	1.3	1.0	8.5	29.9	57.2	0.8	100.0	87.1	487
Kilimanjaro	1.2	0.8	3.7	10.6	26.1	57.6	0.0	100.0	83.7	243
Tanga	1.3	0.3	2.9	14.2	23.6	57.6	0.0	100.0	81.2	360
Morogoro	1.3	0.3	1.6	14.6	22.8	59.5	0.0	100.0	82.3	342
Coast	5.4	1.5	2.5	21.2	23.2	45.3	1.0	100.0	68.5	117
Dar es Salaam	2.1	1.9	1.7	12.9	38.1	43.1	0.4	100.0	81.2	453
Lindi	1.2	0.4	0.0	10.0	33.6	54.4	0.4	100.0	88.0	152
Mtwara	1.0	0.5	0.3	8.1	37.1	53.0	0.0	100.0	90.1	309
Ruvuma	1.1	1.3	0.3	12.6	28.4	56.1	0.3	100.0	84.5	249
Iringa	2,3	0.3	0.9	11.8	16.8	67.9	0.0	100.0	84.7	415
Mbeya	1.2	0.0	0.4	11.8	23.1	63.5	0.0	100.0	86.7	384
Singida	1.5	1.2	1.2	8.3	28.1	59.5	0.3	100.0	87.6	243
Tabora	0.0	2.4	0.6	8.5	19.4	68.5	0.6	100.0	87.9	188
Rukwa	1.3	1.0	1.0	7.5	27,8	61.1	0.3	100.0	88.9	209
Kigoma	0.0	0.9	0.9	8.8	20.5	67.8	0.9	100.0	88.3	303
Shinyanga	0.6	0.6	0.3	4.7	24.5	69.1	0.3	100.0	93.6	656
Kagera	1.6	1.2	0.8	8.2	23.7	64.2	0.4	100.0	87.9	423
Mwanza	0.7	0.0	1.1	8.5	23.1	66.5	0.0	100.0	89.7	519
Mara	1.9	1.6	1.6	7.0	29.8	58.1	0.0	100.0	88.0	240
Education										
No education	0.8	0.5	0.8	6.4	20.5	70.8	0.2	100.0	91.3	2,159
Primary incomplete	1.1	0.9	0.9	8.7	23.4	64.9	0.2	100.0	88.3	1,427
Primary complete	1.6	1.0	1.4	13.2	30.1	52.4	0.3	100.0	82.5	2,928
Secondary+	1.0	1.8	2.5	10.2	38.1	45.6	0.7	100.0	83.7	302
Total	1.2	0.8	1.2	9.9	26.0	60.5	0.3	100.0	86.5	6,816

Table 4.17 shows that approval of family planning in Tanzania is higher among currently married women (78 percent) than men (51 percent). Only 48 percent of women reported that both they and their husbands approve of family planning, while 10 percent say that both they and their husbands disapprove and 17 percent did not know their husband's opinion. Among couples in which the wife reports a difference of opinion, the husbands were more likely to disapprove (15 percent compared with 1 percent).

The likelihood that a woman will report that both she and her husband approve of family planning is higher among women in their 20s and 30s and declines among women age 45-49. Couples in urban areas (62 percent) are more likely to jointly approve of family planning than those in rural areas (45 percent). Approval by both husband and wife was highest in the Tanga and Coast regions (more than 60 percent) and lowest in the Mara region (31 percent). Less educated women are more likely than more educated women to disapprove of family planning and are also likely to say that their spouse disapproves or they do not know their spouse's views.

The fact that both women and men in the same household were interviewed provides an opportunity to link responses obtained from currently married women with those obtained independently from their husbands. Table 4.18 shows the percent distribution of 1,125 couples by both spouses' approval of family planning, according to the age difference between husband and wife and couple's education. The table indicates that 65 percent of couples are in agreement about family planning. Husbands and wives differ on approval of family planning in only 20 percent of cases. Fifty-nine percent of couples reported that they both approve of family planning and only 6 percent of the couples both disapprove. Generally, an age difference of less than 15 years between husband and wife does not change the likelihood that either approves or disapproves of family planning; however joint approval of family planning is lower among couples in which the husband is 15 or more years older than his wife. Couples are more likely to approve of family planning when both spouses are educated.

Because both men and women interviewed in the 1996 TDHS were asked whether they approved of family planning and, if married, whether they thought their spouse approved of family planning, it is possible to examine the extent to which wives and husbands report accurately on their spouse's attitude. Table 4.19 shows the percent distribution of couples by husband's and wife's actual attitude toward family planning, according to their spouse's perception of their attitude. When husbands and wives report that their spouses approve of family planning, they are generally accurate. For example, in 88 percent of the couples in which the wife reported that her husband approved of family planning, the husband also said he approved. Similarly, for 78 percent of couples in which the husband said his wife approved of family planning, she also said she approved. However, when husbands and wives reported that their spouse disapproved of family planning, in 60 percent of cases the opposite was true, and in about 30 percent of cases, the spouse did disapprove of family

planning. Any conclusion from these data that there is considerable lack of communication between spouses and attitudes toward family planning should be taken with caution. It is also likely that at least some respondents report more favourable attitudes toward family planning than they in fact hold, perhaps in an attempt to please the interviewer or to appear more sophisticated.

### 4.16 Knowledge of Family Planning Logo

The family planning programme recently developed a logo—a Green Star—to promote utilisation of family planning services. Over the past few years the programme has launched Green Star logo campaigns throughout the country. To measure the success of the campaigns, respondents in the 1996 TDHS were asked if they had seen or heard about the Green Star, sources of that information, and their understanding of the logo. Tables 4.20.1 and 4.20.2 show that 36 percent of women and 38 percent of men know the Green Star. Among those who know the Green Star, about 80 percent know that it is related to family planning. Most women learned about the Green Star from the radio (57 percent) and clinics (54 percent).

Table 4.17 Wives' perceptions of their husbands' attitudes toward family planning

Percent distribution of currently married non-sterilised women who know of a contraceptive method by wife's attitude toward family planning and wife's perception of ber husband's attitude toward family planning, according to selected background characteristics, Tanzania 1996

		Wife a	pproves	Wife dis	approves								
Background characteristic	Both approve	Husband disap- proves	Husband's attitude un- known	Husband approves	Husband's attitude un- known	Both disap- prove	Wife unsure	Missing	Total	Wife approves	Husbani approves		
Age									<u> </u>				
15-19	44.6	10.2	24.0	0.3	5.1	8.3	7.5	0.0	100.0	78.9	45.3	320	
20-24	53.7	15.4	13.7	1.4	2.8	7.5	5.3	0.3	100.0	83.0	56.3	1,025	
25-29	51.7	15.1	12.9	1.2	2.6	10.6	5.8	0.1	100.0	79.7	53.3	1,093	
30-34	47.3	17.7	12.9	1.9	3.3	10.4	6.5	0.1	100.0	78.0	49.9	853	
35-39	48.1	15.2	13.3	1.1	2.8	12.0	7.5	0.0	100.0	76.6	49.9	630	
40-44	46.1	15.2	13.6	0.7	4.7	10.3	9.1	0.2	100.0	75.1	47.4	437	
45-49	30.9	15.3	14.0	1.7	6.1	14.1	17.7	0.2	100.0	60.4	34.4	327	
Residence													
Mainland	48.5	15.1	14.2	1.3	3.4	9.9	7.5	1.0	0.001	78.0	50.6	4,529	
Total urban	62.2	15.2	11.1	0.7	2.4	5.3	3.1	0.1	100.0	88.6	63,4	1,010	
Dar es Salaam city	61.3	17.4	9.5	0.3	1.8	5.3	4.2	0.3	100.0	88.4	61.6	321	
Other urban	62.6	14.2	11.9	0.8	2.6	5.3	2.6	0.0	100.0	88.7	64.3	689	
Total rural	44.6	15.1	15.1	1.4	3.7	11.2	8.7	0.2	100.0	74.9	46.9	3,519	
Zanzibar	45.4	20.6	9.0	1,5	4.0	17.2	2.3	0.0	100.0	75.0	47.5	156	
Region													
Dodoma	43.4	18.5	6.8	3.9	2.9	15.1	8.8	0.5	100.0	69.3	48.3	231	
Arusha	59.1	10.5	7.7	2.8	3.9	8.3	7.7	0.0	100.0	77.3	63.5	227	
Kilimanjaro	76.8	8.8	4.6	0.0	3.1	2.1	4.6	0.0	100.0	90.2	78.4	193	
Tanga	62.2	12.9	14.4	1.4	1.0	4.3	3.8	0.0	100.0	89.5	64.6	243	
Morogoro	49.1	13.1	20.3	0.5	3.2	5.9	7.7	0.5	100.0	82.9	49.5	241	
Coast	61.2	15.2	10.9	1.2	2.4	4.2	4.8	0.0	100.0	87.3	62.4	95	
Dar es Salaam	58.9	16.3	10.9	0.4	1.6	6.7	4.9	0.2	100.0	86.4	59.4	379	
Lindi	48.7	21.1	13.6	2.5	5.0	5.5	3.5	0.0	100.0	83.4	51.3	117	
Mtwara	46.8	14.4	17.3	1.8	7.9	3.6	7.6	0.7	100.0	78.8	48.9	224	
Ruvuma	52.7	16.0	11.6	0.3	5.1	8.8	5.1	0.7	0.001	80.6	54.i	193	
Iringa	36.6	17.6	20.4	1.4	4.6	5.6	13.9	0.0	100.0	74.5	38.9	259	
Mbeya	52.8	19.1	18.1	0.0	3.0	2.5	4.5	0.0	100.0	89.9	53.3	300	
Singida	50.4	9.8	12.5	0.4	3.1	10.7	12.9	0.0	100.0	72.8	51.B	161	
Tabora	41.9	9.7	16.9	0.8	9.7	12.1	8.9	0.0	100.0	68.5	44.4	141	
Rukwa	38.7	12.6	27.9	0.0	4.5	6.3	9.9	0.0	100.0	79.3	39.2	152	
Kigoma	45.0	10.9	18.6	1.8	5.9	7.3	10.0	0.5	100.0	75.0	48.6	210	
Shinyanga	40.1	13.5	13.5	0.0	1.0	19.3	12.5	0.0	100.0	67.2	41.1	351	
Kagera	46.8	16.1	18.3	1.1	2.2	19.3	3.2	0.0	100.0	81.2	41.1	306	
Mwanza	34.9	17.2	12.9	1.1	2.2	22.6	8.6	0.0	100.0	65.1	37.1	344	
Mara	30.5	27.7	5.1	5.1	2.2	24.3	4.5	0.0	100.0	63.3	37.1	164	
Education													
No education	29.1	15.7	16.9	1.3	6.2	17.1	13.5	0.1	100.0	61.9	31 P	1 262	
	46.6	16.7	14.8		2.2	10.9					31.B	1,363	
Primary incomplete				1.0			7.8	0.1	100.0	78.2	48.3	802	
Primary complete	57.9	15.1	12.8	1.4	2.4	6.3	4.0	0.1	100.0	85.8	59.B	2,521	
Secondary+	77.8	9.7	5.8	0.6	1.3	3.8	0.7	0.4	100.0	93.8	78.4	190	
Total	48.4	15.3	14.0	1.3	3.4	10.1	7.3	0.1	100.0	<i>7</i> 7.9	50.5	4,686	

<sup>&</sup>lt;sup>1</sup> Includes women who are unsure about their own attitude, but know their husbands' attitudes

Table 4.18 Attitudes of couples toward family planning

Percent distribution of couples by approval of family planning, according to age difference between spouses and level of education, Tanzania 1996

Age difference/ education	Both approve	Both disap- prove	Wife approves, husband dis- approves	Husband approves, wife dis- approves	Don't know/ Missing	Total	Percent in agree- ment	Number
Wife older	(73.0)	(0.0)	(9.3)	(13.7)	(4.0)	100.0	(73.0)	36
Husband older by:								
0-4 years	61.7	3.8	9.2	9.7	15.7	100.0	65.5	335
5-9 years	60.4	4.1	8.5	11.1	15.9	100.0	64.6	432
10-14 years	58.4	10.0	10.6	7.5	13.4	100.0	68.4	196
15 or more years	43.8	11.3	16.5	7.6	20.8	100.0	55.1	125
Education								
Neither educated	. 18.3	22.4	15.6	11.7	31.9	100.0	40.7	120
Wife educated,								
husband not	37.6	3.0	20.5	17.5	21.3	100.0	40.6	65
Husband educated,								
wife not	46.5	7.9	6.1	14.7	24.8	100.0	54.4	252
Both educated	72.8	2.2	9.4	6.8	8.8	100.0	75.0	688
Total	59.0	5.7	10.0	9.7	15.6	100.0	64.7	1,125

Note: Figures in parentheses are based on 25-49 respondents.

Table 4.19 Spouses' actual and perceived attitudes toward family planning

Percent distribution of couples by husband's and wife's actual attitude towards family planning according to their spouse's perception of their attitude, Tanzania 1996

	Spous towar	<u>-</u>			
Perception	Approves	Disap- approves	Unsure	Total	Number
Wife's perception of husband's attitude					
Approves	87.7	8.6	3.7	100.0	547
Disapproves	61.2	32.4	6.4	100.0	302
Don't know	70.1	18.0	11.9	100.0	276
Total	76.3	17.3	6.4	100.0	1,125
Husband's perception of wife's attitude					
Approves	78.1	12.6	9.3	100.0	751
Disapproves	60.0	28.4	11.5	100.0	158
Don't know	63.5	21.8	14.8	100.0	216
Total	72.7	16.6	10.7	100.0	1,125

Table 4.20.1 Green Star logo - family planning symbol: women

Percentage of women who know the Green Star logo, and of those, the percentage who can describe logo meaning, and the percentage who cited various sources where they heard of Green Star, by selected background characteristics, Tanzania 1996

	<b>V</b> -0111	Gree	whether en Star lo planning	go is			Sc	ource of k	mowledge	of Gree	n Star lo	go		Numb
Background characteristic	Know Green Star	Yes	Nο	Don't know	Total	Bill- board	Bus	Poster	Leaflet	Radio	Clinic sign	Service provider	Other	of
Age														
15-19	29.5	70.3	0.7	29.0	100.0	21.7	5.9	19.8	10.4	59.8	35.9	10.8	2.2	1,73
20-24	45.0	82.9	1.2	15.9	100.0	20.7	3.2	15.6	8.0	56.3	58.5	19.5	1.3	1,67
25-29	42.0	83.8	1.0	15.2	100.0	23.9	3.6	15.9	8.7	49.4	61.1	23.5	1.4	1,44
30-34	37.5	89.4	0.4	10.2	100.0	25.5	5.2	15.3	11.6	58.6	58.4	22.8	1.3	1,11
35-39	36.4	83.4	1.7	15.0	100.0	22.2	6.9	16.7	10.5	60.4	54.8	25.0	2.1	88
40-44	27.6	85.2	0.5	14.3	100.0	20.9	3.7	16.1	9.2	54.9	56.7	25.3	1.2	68
45-49	20.5	77.3	0.0	22.7	100.0	16.4	1.9	8.5	2.9	66.6	39.4	22.7	0.0	58
Residence														
Mainland	36.4	82.1	0.9	17.0	100.0	22.5	4.5	16.4	9.3	56.6	54.2	20.6	1.4	7,88
Total urban	68.5	86.9	0.8	12.3	100.0	28.5	4.0	17.0	9.5	68,2	53.6	18.2	1.4	1,81
Dar es Salaam city	82.1	85.7	1.3	13.0	100.0	34.6	5.1	15.4	6.0	85.6	46.4	6.8	2.2	56
Other urban	62.3	87.6	0.6	11.8	100.0	24.8	3.3	18.0	11.6	57.9	57.9	25.0	0.9	1,24
Total rural	26.9	78.4	0.9	20.7	100.0	17.9	4,9	15.9	9.1	47,7	54,7	22,4	1.4	6,0
Zanzibar	21.2	63.9	4.3	31.8	100.0	9.0	0.6	7.5	5.4	59.2	29.0	8.8	7.3	23
Pemba	12.5	59.5	18.9	21.6	100.0	2.7	2.7	10.8	5.4	64.9	35.1	5.4	2.7	9
Unguja	26.6	65.2	0.0	34.8	100.0	10.9	0.0	6.5	5,4	57.6	27.2	9.8	8.7	14
Zones														
Coastol	60.6	83.2	8.0	16.0	100.0	22.5	3.3	11.1	5.1	69.2	45.6	17.4	1.5	1,9
Northern Highlands	35.0	85.4	1.5	13.2	100.0	17.5	3.1	10.1	9.9	62.2	55.9	12.9	1.3	9
Lake	20.7	83.6	2.0	14.4	100.0	26.5	6.5	25.8	14.8	31.1	65.5	26.6	1.1	2,5
Central	30.8	77.9	0.0	22.1	100.0	28.5	2.8	18.0	8.5	58.0	47.7	20.3	1.9	6
Southern Highlands	23.4	77.2	0.5	22.2	100.0	23.5	1.6	25.7	4.6	45.3	58.6	27.4	0.4	1,1
Southern	49.0	77.3	1.0	22.5	100.0	16.2	8.9	16.1	16.4	56.2	59.5	22.4	2.7	8
Education														
No education	15.4	71.5	0.5	28.0	100.0	11.4	3.8	9.5	4.6	54.0	49.4	19.5	0.9	2,3
Primary incomplete	28.3	75.5	0.5	24.0	100.0	17.6	4.0	12.1	5.0	52.2	47.0	18.7	1.7	1,6
Primary complete	47.8	83.7	1.0	15.2	100.0	21.9	4.7	16.5	9.8	55.6	56.8	21.7	1.4	3,7
Secondary+	72.4	91.4	1.4	7.3	100.0	42.6	4.6	28.4	17.2	71.2	51.4	16.6	2.8	4
No. of living children1														
0	32.2	74.0	0.7	25.3	100,0	23.3	4.9	18.1	8.8	66.9	31.8	8.2	2.3	1,9
1	46.9	82.5	1.0	16.5	100.0	21.6	4.6	16.0	8.8	57.9	57.3	21.1	1.0	1,4
2	41.8	85.0	1.6	13.4	100.0	26.4	5.6	16.5	10.2	55.4	61.4	23.9	1.4	1,1
3	36.1	86.4	1.2	12.4	100.0	21,0	3.3	16.2	9,9	53.3	62.7	25.6	1.5	9
4	38.1	84.2	0.8	14.9	100.0	23.0	3.7	13.4	10.4	51.6	63.7	26.2	1.6	7
5	32.5	83.9	0.0	16.1	100.0	20.2	4.2	14.0	7.7	45.0	63.4	28.4	0.9	6
6+	24.9	82.6	0.6	16.8	100.0	17.2	3.5	16.5	8.6	50.3	54.6	22.4	1.6	1,2
Total	36.0	81.8	0.9	17.3	100.0	22,2	4.4	16.2	9.2	56.6	53.8	20.4	1.5	8,1

Table 4.20.2 Green Star logo - family planning symbol: men

Percentage of men who know the Green Star logo, and of those, the percentage who can describe logo meaning, and the percentage who cited various sources where they heard of Green Star, by selected background characteristics, Tanzania 1996

	V=0:	Know whether Green Green Star logo is family planning related				Se	ource of k	mowledge	e of Gree	n Star lo	go		Niver -	
Background characteristic	Know Green Star	Yes	No	Don't know	Total	Bill- board	Bus	Poster	Leaflet	Radio	Clinic sign	Service provider		Numbe of men
Age	20.0	70.1	-	20.0	100.0	20.5	2.5	22.0	10.6	70.0	201			400
15-19	29.0	79.1	0.0	20.9	100.0	30.5	3.7	22.2	13.6	70.9	20.1	5.6	3.9	488
20-24	42.5	83.2	1.1	15.7	100.0	34.8	5.0	26.5	12.3	70.7	25.1	7.5	4.9	371
25-29	45.9	81.5	0.0	18.5	100.0	39.7	8.6	25.1	11.9	77.9	28.8	9.5	3.6	301
30-34	42.2	82.4	0.0	17.6	100.0	33.4	14.9	21.1	13.2	79.2	19.1	8.8	4.6	272
35-39	45.6	79.0	0.0	21.0	100.0	33.0	8.6	17.1	19.3	60.9	24.4	8.3	0.6	251
40-44	39.7	83.6	0.6	15.8	100.0	33.9	7.7	26.0	12.8	74.0	23.1	6.5	2.5	206
45-49	32.4	73.5	0.0	26.5	100.0	32.2	1.3	22.4	13.5	58.0	32.0	2.8	1.3	149
50-54	22.9	67.8	0.0	32.2	100.0	31.8	0.0	22.7	15.2	57.1	15.2	0.0	5.6	118
55-59	22.1	66.8	0.0	33.2	100.0	35.7	0.0	14.9	0.0	78.7	16.1	0.0	0.0	100
Residence														
Mainland	38.0	79.9	0.2	19.9	100.0	33.9	6.8	22.6	13.4	71.2	23.8	7.0	3.4	2,187
Total urban	66.4	82.7	0.0	17.3	100.0	41.5	9.9	25.3	15.3	73.6	19.3	7.1	4.9	509
Dar es Salaam city	83.8	84.2	0.0	15.8	100.0	46.9	17.1	22.8	16.7	78.5	7.9	3.1	7.9	171
Other urban	57.5	81.7	0.0	18.3	100.0	37.4	4.6	27.2	14.2	70.1	27.8	0.01	2.6	338
Total rural	29.3	77.9	0.3	21.7	100.0	28.6	4.7	20.8	12.1	69.4	26.8	6.9	2.4	1,678
Zanzibar	22.5	93.3	3.3	3.3	100.0	49.3	16.4	32.7	14.7	68.9	16.4	8.2	0.0	69
Pemba	14.8	75.0	12.5	12.5	100.0	75.0	25.0	12.5	0.0	75.0	25.0	12.5	0.0	28
Unguja	27.8	100.0	0.0	0.0	100.0	40.0	13.3	40.0	20.0	66.7	13.3	6.7	0.0	41
Zones														
Coastal	58.0	83.4	0.2	16.4	100.0	33.9	10.1	20.4	13.3	75.6	13.0	7.9	5.2	508
Northern Highlands	34.1	88.9	1.8	9.4	100.0	22.6	7.3	10.8	20.8	70.9	32.9	6.3	0.6	275
Lake	25.9	82.5	0.0	17.5	100.0	47.3	7.8	27.4	18.5	62.0	28.4	6.8	2.2	757
Central	29.3	68.8	0.0	31.2	100.0	19.0	1.9	18.8	6.9	73.3	17.2	7.1	2.6	176
Southern Highlands	31.1	62.4	0.0	37.6	100.0	43.7	4.0	24.8	11.0	68.8	31.6	0.8	3.1	309
Southern	49.1	80.5	0.0	19.5	100.0	20.5	2.1	31.5	3.7	76.4	31.5	10.7	3.4	231
Education														
No education	13.5	57.6	0.0	42.4	100.0	12.5	7.6	14,4	7.7	55.1	11.8	2.3	3.1	304
Primary incomplete	23.1	68.7	0.0	31.3	100.0	25.8	1.6	15.1	8.2	71.5	21.2	8.1	1.0	664
Primary complete	45.4	80.7	0.3	18.9	100.0	33.1	4.8	21.6	12.9	70.9	25.4	7.5	2.9	1,066
Secondary+	75.7	94.5	0.3	5.2	100.0	50.2	17.8	35.4	21.1	75.3	23.6	5.8	6.9	222
No. of living children <sup>1</sup>														
0	34.6	82.2	0.0	17.8	100.0	34.4	6.6	23.8	13.4	71.9	21.7	6.5	4.0	974
1	46.5	75.3	0.0	24.7	100.0	40.7	11.3	20.4	16.4	68.9	21.3	9.7	3.6	228
2	47.1	80.0	1.7	18.2	100.0	37.8	7.6	32.8	14.5	81.8	25.5	8.5	4.1	206
3	44.1	79.9	0.0	20.1	100.0	28.4	6.9	20.4	8.0	74.0	27.0	5.5	1.8	188
4	39.3	75.9	0.8	23.3	100.0	22.7	9.3	18.8	13.9	56.1	31.7	6.2	4.3	158
5	29.8	69.0	0.0	31.0	100.0	21.1	4.8	13.1	12.6	74.2	26.5	12.1	2.0	127
6+	32.8	84.5	0.0	15.5	100.0	38.6	3.5	21.0	13.6	67.1	22.2	4.6	1.7	375
Total	37.5	80.1	0.3	19.6	100.0	34.1	7.0	22.8	13.4	71.1	23.6	7.0	3.4	2,256

It is interesting to note that the billboards erected during the recent campaigns were a source of knowledge for 22 percent of the women. Sixteen percent learned about the Green Star from a poster. Most men on the other hand learned about the Green Star from the radio (71 percent) and billboards (34 percent).

Urban women and men are more likely than rural residents to have correct knowledge of the Green Star family planning logo. Similarly, residents in the Coast zone are more likely to have been exposed to the family planning logo than those in other zones. Education is also related to knowledge of the logo; more than 70 percent of women and men with secondary or more education have seen or heard of the logo, compared with 15 percent or less of those with no education.

# 4.17 Exposure to Family Planning Drama

Recently a number of radio drama programmes have been launched to promote family planning messages in Tanzania. As a measure of success of the radio campaigns, respondents in the survey were asked to mention the radio programmes they had listened to in the last six months. Table 4.21 shows that in general more men (43 percent) than women (29 percent) have listened to any of the family planning dramas on the radio. Two radio programmes Zinduka and Twende na Wakati are equally popular among men and women. Ukweli Kuhusu Maisha has the lowest percentage of listeners among the three programmes. As expected, respondents from urban areas are more likely to be exposed to radio drama than their rural counterparts. Listenership to any radio programme is positively associated with levels of education of both men and women.

## 4.18 Knowledge of "Salama" Condoms

Women and men respondents in the TDHS 1996 were asked if they had ever heard of a condom called "Salama", the brand that is sold through the social marketing programme. Results in Table 4.22 show that more men (65 percent) than women (43 percent) are aware of "Salama" condoms. Awareness of the "Salama" brand varies considerably across regions of the country. Among women the highest levels of awareness are found in the Dar es Salaam (84 percent) and Coast (72 percent) regions and lowest levels of knowledge are found in the Iringa (24 percent) region. Differentials by region among men are much lower. Highest levels of awareness are found in Dar es Salaam (92 percent), Coast (84 percent), and Mtwara (82 percent) regions and the lowest levels of knowledge among men are found in Kagera and Mara (46 percent) regions. Awareness of "Salama" condoms increases with educational levels.

Table 4.21 Exposure to family planning drama

Percentage of all women and men who have listened to family planning drama on the radio during the last 6 months, by selected background characteristics, Tanzania 1996

			Wor	nen			Men						
Background characteristic	Zinduka	Twenda Na Wakati	Ukweli Kuhusu Maisha	Other	Any drama	Number of women	Zinduka	Twenda Na Wakati	Ukweli Kuhusu Maisha	Other	Any drama	Numbe of men	
Age			<del></del>					····					
15-19	23.5	21.4	13.7	8.6	27.7	1,732	29.5	25.3	14.3	9.8	35.0	488	
20-24	31.1	28.2	20.0	11.4	36.5	1,676	45.4	43.3	31.6	19.2	53.8	371	
25-29	27.6	26.3	19.2	10.1	31.4	1,440	50.6	46.3	30.9	20.8	57.9	301	
30-34	26.8	25.3	17.4	11.4	30.0	1,118	50.5	48.1	31.6	19.3	55.5	272	
35-39	22.9	21.4	17.2	11.5	25.6	888	44.7	43.7	34.5	21.2	51.1	251	
40-44	18.0	17.8	12.6	5.4	21.2	680	37.2	40.0	30.0	14.3	44.2	206	
45-49	10.4	9.4	6.0	3.2	11.4	585	34.4	32.4	22.0	13.5	39.6	149	
50-54	NA	NA	NA	NA	NA	NA	25.4	26.3	17.8	7.5	32.2	118	
55-59	NA	NA	NA	NA	NA	NA	15.8	15.2	9.5	4.5	15.8	100	
Residence													
Mainland	24.6	22.9	16.3	9.4	28.3	7,881	39.6	37.4	25.7	15.8	45.7	2,187	
Total urban	53.3	50.9	34.4	20.9	58.8	1,811	58.4	54.0	36.3	26.8	66.2	509	
Dar es Salaam city	73.0	71.5	48.0	35.9	79.4	563	69.1	63.2	39.7	43.7	76.1	171	
Other urban	44.4	41.6	28.2	14.1	49.6	1,248	52.9	49.3	34.6	18.2	61.2	338	
Total rural	16.1	14.6	10.9	6.0	19.2	6,070	33.9	32.4	22.4	12.4	39.5	1,678	
Zanzibar	28.7	27.2	13.4	13.4	36.4	239	31.7	32.1	24.0	8.1	40.6	69	
Regional zones													
Coastal	45.4	42.7	28.8	20.5	49.0	1,916	52.7	47.4	31.9	27.9	58.7	508	
Northern Highlands	28.2	25.4	20.2	5.8	31.2	979	35.6	35.9	24.0	23.5	45.2	275	
Lake	10.0	9.7	8.6	4.5	14.8	2,559	27.6	26.8	20.1	11.1	33.2	757	
Central	23.8	24.6	15.0	6.4	29.0	638	39.4	39.1	26.6	7.7	49.5	176	
Southern Highlands	16.1	14.7	8.2	4.0	18.7	1,181	36.3	35.3	23.2	4.7	39.8	309	
Southern	31.4	26.4	18.2	14.0	34.1	847	56.9	52.3	34.0	13.6	62,2	231	
Education													
No education	9.1	7.7	5.2	3,8	10.3	2,316	17.4	17.7	10.4	6.0	22.3	304	
Primary incomplete	18,4	16.7	11.6	6.3	21.1	1,630	27.4	26.0	18.7	10.7	32.0	664	
Primary complete	33.6	31.4	22.8	12.5	38.8	3,732	48.6	45.3	31.4	20.1	55.9	1,066	
Secondary+	55,8	55.8	35.7	25.7	64.9	441	60.7	59.3	39.3	20.8	68.4	222	
Total	24,8	23.0	16.2	9.5	28.5	8,120	39.4	37.3	25.6	15.5	45.6	2,256	

Table 4.22 Knowledge of "Salama" condom

Percentage of women and men who have heard of "Salama" condom, by selected background characteristics, Tanzania 1996

	Wome	n	Men	
Deal and		Number		Number
Background characteristic	Percentage	of women	Percentage	of men
Residence				
Mainland	43.2	7,881	65.1	2,187
Total urban	73.3	1,811	87.2	509
Dar es Salaam city	84.7	563	92.6	171
Other urban	68.2	1,248	84.5	338
Total rural	34.1	6,070	58.4	1,678
Zanzibar	23.4	239	48.2	69
Region				
Dodoma	42.9	355	57.9	96
Arusha	40.1	589	60.6	156
Kilimanjaro	55.2	390	66.7	119
Tanga	47.0	464	72.0	108
Могодого	36.3	408	59.4	95
Coast	72.2	159	83.9	45
Dar es Salaam	84.3	646	92.1	191
Lindi	56.3	187	80.3	54
Мtwara	36.7	355	82.2	96
Ruvuma	37.6	305	71.6	82
Iringa	24.4	466	54.0	100
Mbeya	43.0	473	73.6	137
Singida	36.3	283	58.3	80
Tabora	42.9	225	57.4	82
Rukwa	28.0	242	65.4	71
Kigoma	27.5	351	47.1	95
Shinyanga	36.3	686	59.1	202
Kagera	38.7	467	46.4	139
Mwanza	34.5	573	64.1	176
Mara	44.0	257	45.5	64
Education				
No education	22.2	2,316	42.0	304
Primary incomplete	37.1	1,630	53.6	664
Primary complete	53.1	3,732	73.7	1,066
Secondary +	80.7	441	84.4	222
Marital status				
Never	45.9	1,887	66.4	847
Currently married	41.1	5,411	63.3	1,288
Past marriage	44.5	822	66.4	117
Total	42.6	8,120	64.6	2,256

# **CHAPTER 5**

## PROXIMATE DETERMINANTS OF FERTILITY

This chapter addresses the principal factors other than contraception that affect a woman's risk of becoming pregnant and thus helps to determine the fertility level in Tanzania. These factors are marriage (including consensual union) and sexual intercourse, postpartum amenorrhoea and abstinence from sexual relations, and termination of exposure to pregnancy. Marriage and the beginning of sexual activity signal the onset of women's exposure to the risk of childbearing; postpartum amenorrhoea and abstinence affect the interval between births. These factors determine the length and pace of reproductive activity and are, therefore, important in understanding fertility.

### 5.1 Current Marital Status

The report defines marriage to include informal as well as formal unions. Informal unions are those in which a man and woman stay together intending to have a lasting relationship, even if a formal civil or religious ceremony has not yet occurred. Although shown separately in Table 5.1, the categories of "married" and "living together" are combined in all other tables and referred to as "currently married." Respondents who are currently married, widowed, divorced, or no longer living together (separated) are called "ever married."

			Current m	arital status					Marka
Age	Never married	Married	Living together	Widowed	Divorced	Not living together	Missing	Total	Number of women/mer
		<u></u> -		WOMEN		·····			<u></u>
15-19	74.6	20.1	3.0	0.1	1.2	0.9	0.0	100.0	
20-24	24.5	59.4	8.1	1.2	4.6	2.3	0.0	100.0	
25-29	7.4	74.7	7.6	1.5	6.5	2.5	0,0	100.0	
30-34	4.5	75.4	9.3	3.5	4.9	2.5	0.0	100.0	
35-39	1.7	75.3	8.0	5.3	8.0	1.7	0.0	100.0	888
40-44	1.4	75.4	7.1	8.2	5.6	2.3	0.0	100.0	
45-49	0.7	71.8	4.6	11.1	7.6	4.0	0.2	100.0	585
Total	23.2	59.9	6.7	3.1	4.9	2.1	0.0	100.0	8,120
				MEN					
15-19	96.6	1.1	0.1	0.3	0.6	0.7	0.5	100.0	488
20-24	70.5	20.6	3.9	1.1	0.2	3.4	0.3	100.0	
25-29	26.9	57.9	7.2	8.0	3.2	3.9	0.0	100.0	
30-34	6.1	80.4	5.0	1.2	3.4	3.9	0.0	100.0	
35-39	3.5	86.1	5.6	0.5	1.4	2.8	0.0	100.0	
40-44	1.7	88.1	6.4	0.7	1.6	1.6	0.0	100.0	
45-49	2.9	88.9	3.1	2.2	1.9	1.1	0.0	100.0	
50-54	0.0	90.2	3.4	1.2	3.8	1.4	0.0	100.0	
55-59	0.0	85.0	4.9	2.0	3.4	4.7	0.0	100.0	100
Total	37.5	53.0	4.1	0.9	1.8	2.5	0.2	100.0	2,256

The distribution of women according to their marital status is shown in the upper panel of Table 5.1. The data show that 23 percent of women of childbearing age in Tanzania have never married, 67 percent either are currently married or living with a man, and 10 percent are widowed, divorced, or separated. The proportion of women who have never married declines sharply with age, from 75 percent among teenagers (age 15-19) to less than 2 percent among women age 35 and older. The universality of marriage in Tanzania is evident in these data and was also observed in the 1991-92 TDHS and 1994 TKAPS.

The proportion of women who are currently married increases with age until age group 40-44 and is relatively constant among women age 25-44, after which it declines because of the increasing levels of widowhood. The proportions widowed increase with age, while the proportions divorced and those who are no longer living with a man show no clear age pattern. Overall, more marital disruption among women is due to divorce and separation than to widowhood.

The lower panel of Table 5.1 shows that 38 percent of men age 15-59 have never been married, 57 percent are currently married, and 5 percent are widowed, divorced, or separated. Men tend to marry at older ages than women and 14 percent more men than women have never been married. The proportion never married among teenage males is 97 percent, but decreases to 3 percent at ages 45-49.

# 5.2 Sexual Relationships Among Unmarried Women

Table 5.2 presents information about the sexual relationships of women who are not currently married or living with a man. This information is important for the study of sexual relationships, adolescent pregnancy, and risk factors relating to AIDS and other sexually transmitted diseases. In this report, nonmarital sexual relationships include those of both never-married and formerly married women with either regular or occasional partners.

Data show that among women who are not currently married, 19 percent are never-married women with a regular sexual partner and 12 percent are formerly married women who have a regular partner. Four percent consist of never married and formally married women who have an occasional partner. Almost half of the women who are not currently married are women who never married and have no sexual partners, while 16 percent were previously married and have no sexual partners. These figures show that the prevalence of nonmarital sexual relationships is not high in Tanzania. About two-thirds of women currently unmarried do not have sexual partners.

The prevalence of nonmarital sexual relationships is higher (56 percent) in the age group 25-29. Nonmarital sex is more common in urban areas than rural areas (44 vs. 33 percent) on the mainland. The prevalence of these relationships is relatively high in the Southern zone (51 percent) and lowest in the Southern Highland zone (29 percent).

# 5.3 Polygyny

The extent of polygyny in Tanzania was measured by asking all currently married female respondents the questions: "Does your husband/partner have any other wives besides yourself?" and if so, "How many cowives do you have?" Currently married male respondents were asked, "How many wives do you have?" The proportion of currently married respondents who were in polygynous unions according to age groups and selected background characteristics is shown in Table 5.3 and Figure 5.1.

Table 5.2 Sexual relationships of non-married women

Percent distribution of women who are not currently married or living with a man by type of current sexual relationships, according to selected background characteristics, Tanzania 1996

	No	ever-married	women	Formerly	married wor	en			N7
Age	Regular partner	Occasional partner	No partner	Regular partner	Occasional partner	No partner	Missing	Total	Number of women
Age									
15-19	18.8	3.0	75.2	1.1	0.4	1.5	0.1	100.0	1,331
20-24	31.9	2.4	41.0	10.5	2.3	11.7	0.1	100,0	545
25-29	19.8	1.4	20.2	31.1	3.6	24.0	0.0	100.0	256
30-34	14.3	0.7	14.4	29.8	2.4	38.3	0.0	100.0	171
35-39	4.9	0.0	5.2	42.5	5.1	42.3	0.0	100.0	149
40-44	2.6	0.8	4.6	29.9	3.0	59.1	0.0	100.0	119
45-49	0.9	0.0	2.0	24.4	3.0	68.8	0.9	100.0	138
Residence									
Mainland	19.3	2.2	47.9	12.6	1.7	16.1	0.1	100.0	2.636
Total urban	25.1	2.8	43.9	13.7	2.2	12.1	0.2	100.0	738
Dar es Salaam city	27.7	3.0	46.6	11.0	1.9	9.8	0.0	100.0	223
Other urban	24.0	2.7	42.7	14.9	2.3	13.1	0.2	100.0	515
Total rural	17.1	2.0	49.5	12.2	1.5	17.6	0.1	100.0	1,897
Zanzibar	1,7	0.0	72,4	3.4	1.2	20.8	0.4	100.0	73
Zones									
Coastal	19.4	3.0	48.2	12.4	2.0	14.9	0.0	100.0	714
Northern Highlands	21.0	1.0	55.4	8.2	0.7	13.3	0.4	100.0	355
Lake	17.8	0.6	48.0	14.6	0.8	18.0	Ŏ.1	100.0	789
Central	15.0	2.0	51.8	13.7	0.8	16.7	0.0	100.0	186
Southern Highlands	15.3	2.2	55.9	9.0	2,3	15.4	0.0	100.0	394
Southern	25.3	6.1	29.6	15.0	4.8	18.9	0.2	100.0	271
Education									
None	13.3	1.8	29.0	19.1	3.5	33.0	0.3	100.0	488
Primary incomplete	12.3	3.1	60.5	10.0	1.3	12.8	0.0	100.0	710
Primary complete	22.7	2.0	47.7	12.6	1.5	13.5	0.0	100.0	1,270
Secondary +	28.9	1.3	57.9	4.6	0.4	6.3	0.6	100.0	241
Total	18.8	2.2	48.6	12.4	1.7	16.2	0.1	100.0	2,709

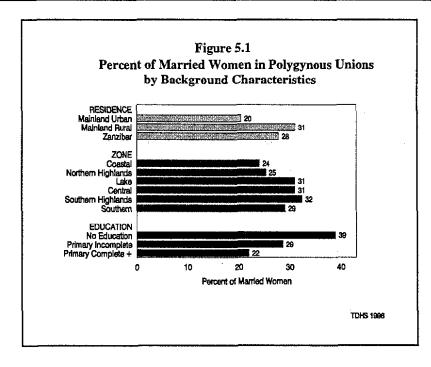


Table 5.3 Polygyny

Percentage of currently married women age 15-49 years and of currently married men 15-59 years in a polygynous union, by age and selected background characteristics, Tanzania 1996

Background			Age	Age of respondent									
characteristic	15-19	20-24	25-29	30-34	35-39	40-44	45-49	women 15-49	men 15-59				
Residence													
Mainland	21.4	20.2	27.3	30.8	35.6	35.4	37.8	28.8	14.8				
Total urban	13.2	12.1	18.8	23.5	28.6	28.5	27.7	20.4	12.7				
Dar es Salaam city	10.3	8.8	22.2	17.9	29.0	25.0	30.8	18.9	7.6				
Other urban	14.7	13.9	17.5	26.2	28.4	29.9	27.0	21.1	15.0				
Total rural	23.3	22.5	29.9	32.5	37.6	36.8	39.3	31.0	15.4				
Zanzibar	38.1	19.2	27.5	26.2	26.4	35.8	4 <b>6</b> .7	27.8	21.3				
Zone													
Coastal	14.6	12.0	26.4	22.7	31.2	30.4	42.6	24.0	12.6				
Northern Highlands	27.0	20.6	25.8	27.1	33.3	22.6	17.5	25.3	13.1				
Lake	23.5	25.3	26.9	35.8	37.8	37.7	36.7	31.0	16.7				
Central	24.1	21.7	31.3	33.2	36.2	34.0	38.2	31.0	12.4				
Southern Highlands	29.7	18.8	26.2	36.1	42.3	43.2	43.1	32.4	16.8				
Southern	13.7	21.3	31.7	26.3	30.3	40.4	42.4	29.1	15.5				
Education													
No education	29.9	32.8	35.4	43.6	41.9	39.8	41.2	38.9	20.0				
Primary incomplete	23,3	22.8	32.6	25.0	31.7	31.0	33.0	28.6	17.1				
Primary complete+	16.9	15.7	24.1	24.8	28.4	28.2	27.9	21.9	12.5				
Women 15-49	21.8	20.1	27.3	30.6	35.3	35.4	38.0	28.8	NA				
Men 15-59	*	0.7	13.5	9.9	13.2	17.8	23.0	NA	15.0				

Note: An asterisk indicates that a figure is based on fewer than 25 respondents and has been suppressed. For men in the age group 50-59, 23.1 percent are in a polygynous union.

NA = Not applicable.

Overall, 29 percent of married women and 15 percent of all men are in polygynous unions. The practice of polygyny increases with age among women from 22 percent among teenagers to 38 percent among those age 45-49. Overall, older women are more likely to be in polygynous unions than younger women, reflecting either a genuine trend away from polygyny among younger couples or a life-cycle effect. The proportion of rural women and men in polygynous unions is higher than that for urban women and men on the mainland. The proportion of women in polygynous unions is slightly higher on the mainland than in Zanzibar (29 vs. 28 percent), whereas the proportion of men in polygynous unions is higher in Zanzibar than on the mainland (21 vs. 15 percent). The highest level of polygynous unions is found in the Southern Highland zone.

There is an inverse relationship between education and polygyny. The proportion of currently married women in a polygynous union decreases from 39 percent among women with no formal education to 22 percent among those who have completed primary education.

Table 5.4 shows that 71 percent of currently married women have no other co-wives. Of the 29 percent of women who are in polygynous unions, the majority have only one co-wife (18 percent of all currently married women), while 10 percent report having two or more co-wives. The Arusha, Mbeya, and Shinyanga regions have the highest proportion of currently married women with more than one co-wife. Not only is polygyny more common among less educated women, but the propensity for those in polygynous unions to have more than one co-wife is less common among less educated women. The proportion of men in polygynous unions is much lower (12 percent having two wives and 2 percent having three or more wives) than that of women.

Table 5.4 Number of co-wives

Percent distribution of currently married women by number of co-wives and men by number of wives, according to background characteristics, Tanzania 1996

				Women			Men						
Destructed	Num	ber of co-	wives			Number	Nu	mber of v	vives			Number	
Background characteristic	0	1	2+	Missing	Total	of women	1	2	3+	Missing	Total	of men	
Age													
15-19	78.2	9.7	11.2	0.9	100.0	401	*	*	*	*	100.0	6	
20-24	79.9	12.2	6.7	1.2	100.0	1,131	99,3	0.0	0.0	0.7	100.0	91	
25-29	72.7	17.7	8.8	0.8	100.0	1,184	86.5	10.6	0.6	2.2	100.0	196	
30-34	69.4	20.2	10.0	0.4	100.0	947	90.1	8.3	1.1	0.5	100.0	232	
35-39	64.7	24.0	10.6	0.7	100.0	740	86.8	12.1	1.1	0.0	100.0	230	
40-44	64.6	24.3	10,8	0.3	100.0	561	82.2	14.9	1.6	1.4	100.0	194	
45-49	62.0	22.3	15.2	0.5	100.0	447	77.0	16.6	6.0	0.4	100.0	137	
50-54	NA	NA	NA	NA	NA	NA	76.2	17.6	6.2	0.0	100.0	110	
55-59	NA	NA	NA	NA	NA	NA	77.8	14.0	5.6	2.6	100.0	90	
Residence													
Mainland	71.2	18.4	9.8	0.7	100.0	5,245	85.2	11.6	2.3	0.9	100.0	1,253	
Total urban	79.6	14.6	5.2	0.6	100.0	1,073	87.3	9.1	2.3	1.3	100.0	260	
Dar es Salaam city	81.1	10.9	6.7	1.2	100.0	340	92,4	3.0	1.5	3.0	100.0	83	
Other urban	78.9	16.3	4.5	0.3	100.0	733	85.0	11.9	2.7	0.5	100.0	177	
Total rural	69.0	19.3	11.0	0.7	100.0	4,172	84.6	12.2	2.3	0.9	100.0	992	
Zanzibar	72.2	18.2	7.3	2.2	100.0	166	78.7	19.8	1.5	0.0	0.001	35	
Region													
Dodoma	71.6	18.3	9.6	0.4	100.0	258	86.7	9.3	2.7	1.3	100.0	51	
Arusha	66.7	15.9	16.8	0.6	100.0	403	83.6	9.1	5.5	1.8	100.0	92	
Kilimanjaro	89.2	9.9	0.9	0.0	100.0	221	92.2	4.4	1.1	2.2	100.0	55	
Tanga	72.3	21.5	5.4	0.8	100.0	282	(88.4)	(11.6)	(0.0)	(0.0)	100.0	62	
Могодого	72.6	20.3	6.8	0.4	100.0	257	81.7	`15.9	2.4	`0,0	100.0	54	
Coast	78.9	13.5	7.6	0.0	100.0	98	(90.3)	(9.7)	(0.0)	(0.0)	100.0	22	
Dar es Salaam	81.6	10.2	7.2	1.1	100.0	399	92.7	2.7	2.0	2.7	100.0	94	
Lindi	68.1	19.5	9.5	2.9	100.0	123	(76.1)	(21.7)	(2.2)	(0.0)	100.0	35	
Mtwara	72.1	19.2	8.1	0.6	100.0	248	87.5	12.5	`0.Ó	0.0	100.0	61	
Ruvuma	71.2	24.0	4.2	0.6	100.0	205	86.6	10.4	1.5	1.5	100.0	54	
Iringa	63.4	24.7	11.9	0.0	100.0	291	78.7	17.5	3.7	0.0	100.0	59	
Mbeya	72.0	12.3	15.6	0.0	100.0	318	(85.4)	(9.8)	(4.9)	(0.0)	100.0	78	
Singida	65,6	20.7	12.6	1.1	100.0	194	88.5	9.6	1.9	0.0	100.0	50	
Tabora	72.5	17.4	10.1	0.0	100.0	157	*	*	*	*	100.0	32	
Rukwa	66.8	24.3	8.9	0.0	100.0	177	85.2	14.8	0.0	0.0	100.0	49	
Kigoma	70.5	23.8	4.5	1.2	100.0	233	(85.7)	(10.2)	(2.0)	(2.0)	100.0	67	
Shinyanga	62.2	22.0	15.4	0.4	100.0	464	77.1	18.8	4.2	0.0	100.0	118	
Kagera	71.7	15.6	9.8	2.9	100.0	337	(86.7)	(6.7)	(4.4)	(2.2)	100.0	90	
Mwanza	71.5	19.2	9.3	0.0	100.0	395	(81.8)	(18.2)	(0.0)	(0.0)	100.0	99	
Mara	70.6	18.8	10.7	0.0	100.0	183	(88.9)	(11.1)	(0.0)	(0.0)	100.0	32	
Education													
No education	61.1	24.1	14.1	0.7	100.0	1,829	80.0	15.9	3.2	0.9	100.0	213	
Primary incomplete	71.4	19.1	8.6	0.9	100.0	920	82.9	12.6	3.7	0.9	100.0	342	
Primary complete +	78.1	14.1	7.2	0.6	100.0	2,662	87.5	10.2	1.4	0.9	100.0	733	
Total	71.2	18.3	9.7	0.7	100.0	5,411	85.0	11.8	2.3	0.9		1,288	

Note: Figures in parentheses are based on 25 to 49 respondents; an asterisk indicates that a figure is based on fewer than 25 respondents and has been suppressed.

NA = not applicable

# 5.4 Age at First Marriage

Marriage is highly associated with fertility, especially in societies with low levels of contraceptive use. Women who marry early will, on average, have longer exposure to reproductive risk. Therefore, early marriage tends to lead to early childbearing and subsequently high fertility levels. The percentage of women and men ever married by specific ages and the median age at first marriage according to current age is shown in Table 5.5.

			,	WOMEN				
			entage who urried by exa	Percentage who had never	Median age at first	Number of		
Current age	15	18	20	22	25	married	marriage	women
15-19	3.9	NA	NA	NA	NA	74.6	a	1,732
20-24	7.3	38.1	60.3	NA	NA	24.5	19.0	1,676
25-29	8.3	40.0	63.2	77. <b>7</b>	88.0	7.4	18.7	1,440
30-34	12.8	44.7	63.5	76.9	8 <b>6</b> .6	4.5	18.5	1,118
35-39	18.2	53.6	70.3	82.0	89.9	1.7	17.6	888
40-44	18.9	56.8	74.7	85.2	90.4	1.4	17.4	680
45-49	22.2	52.7	70.1	82.0	90.0	0.7	17.7	585
Women 20-49	12.6	45.2	65.3	<b>7</b> 7.7	85.2	9.3	18.4	6,387
Women 25-49	14.5	47.7	67.1	80.0	88.6	3.9	18.2	4,711
				MEN			101	
			entage who			Percentage	Median	
		first ma	arried by exa	ect age:		who had never	age at	Number of
Current age	20	22	25	28	30	married	marriage	men
25-29	15.3	28.4	56.7	NA	NA	26.9	24.4	301
30-34	13,3	28.4	54.6	76.9	86.9	6.1	24.4	372
35-39	9.5	23.6	47.7	69.0	82.7	3.5	25.3	251
40-44	13.4	24.7	55.2	68.4	76.4	1.7	24.5	206
45-49	17.7	32.1	52.4	70.6	78.5	2.9	24.6	149
50-54	20.3	30.7	54.4	74.3	84.5	0.0	24.0	118
55-59	10.7	30.0	38.9	52.5	58.6	0.0	27.6	100
Men 25-59	13.9	27.7	52.5	70.5	78.5	8.2	24.7	1,397

The median age at first marriage for women in Tanzania has risen steadily from less than 18 years among women age 45-49 to 19 years among women age 20-24 (representing recent marital patterns). The proportion of women married by age 15 declined from 22 percent among those age 45-49 to only 4 percent among women age 15-19 years. Overall, two-thirds of Tanzanian women currently age 25-49 were married by age 20. Between 1991-92 and 1996, the median age at first marriage increased from 17.9 to 18.2 among women age 25-49.

Men enter first union at a much later age than women; the median age at first marriage among men 25-59 is 25 years, compared with 18 years for women 25-49. Only 14 percent of men are married by age 20, compared with 67 percent of women age 25-49. By age 25, which is the median age at first marriage for men, 89 percent of women have married.

Table 5.6 shows median ages at first marriage for women age 20-49 and 25-49, and men 30-59 by selected background characteristics. It can be seen that in most age groups, urban women marry later than their rural counterparts. The median age at first marriage among women age 25-49 on the mainland is 2.4 years higher than that of Zanzibar.

There is a strong relationship between female education and median age at first marriage. The median age at first marriage for women age 25-49 with no formal education is 17.0 years, compared with 19.3 years for those with completed primary or higher education. Median age at first marriage for men 30-59 is about one year higher on the mainland than in Zanzibar. The median age at first marriage for men is higher in the Northern Highland zone than in other zones.

Table 5.6 Median age at first marriage

Median age at first marriage among women age 20-49 years, by current age and selected background characteristics, and among men age 30-59 years by selected background characteristics, Tanzania 1996

Dookground			Curre	nt age			Women	Women Me	
Background characteristic	20-24	25-29	30-34	35-39	40-44	45-49	age 20-49	age 25-49	age 30-59
Residence					······································		- ·		
Mainland	19.1	18.8	18.7	17.7	17.5	17.8	18.5	18.3	24.8
Total urban	a	19.8	19.1	17.6	17.4	18.4	19.2	18.7	25.6
Dar es Salaam city	a	19.7	19.5	17.9	18.3	16.5	19.3	18.8	27.6
Other urban	a	20.0	19.1	17.4	17.2	18. <del>9</del>	19.2	18.7	24.8
Total rural	18.7	18.6	18.5	17.7	17.5	17. <b>7</b>	18.3	18.2	24.7
Zanzibar	18.7	18.1	15.8	15.7	14.6	15.0	16.8	15.9	23.9
Zones									
Coastal	19.1	19.0	17.7	17.4	16.9	16.8	18.2	17.9	25.4
Northern Highlands	a	19.9	20.2	18.9	18.9	19.2	19.8	19.5	26.2
Lake	18.6	18.6	18.6	17.3	17.6	17.3	18.3	18.2	24.8
Central	19.0	19.3	18.6	17.3	16.9	18.2	18.4	18.3	24.2
Southern Highlands	19.4	18.8	19.2	17.0	17.3	17.6	18.5	18.2	24.0
Southern	18.7	17.9	18.1	18.1	16.7	18.0	18.1	17.9	23.8
Education									
No education	17.4	18.0	16.6	16.8	17.1	17.0	17.1	17.0	24.8
Primary incomplete	17.7	18.3	17.6	16.7	16.8	17.8	17.5	17.4	24.5
Primary complete+	19.7	19.0	19.7	19.4	19.5	20.6	19.5	19.3	25.0
Total	19.0	18.7	18.5	17.6	17.4	17.7	18.4	18.2	24.8

<sup>&</sup>lt;sup>a</sup> Omitted because less than 50 percent of women in the age groups 20-24 were first married by age 20.

## 5.5 Age at First Sexual Intercourse

Age at first marriage is often used as a proxy for the onset of women's exposure to the risk of pregnancy. However, since some women are sexually active before marriage, the age at which women initiate sexual intercourse more precisely marks the beginning of their exposure to reproductive risk.

The 1996 TDHS collected data on the age at which men and women had their first sexual encounters. As the upper panel of Table 5.7 shows, the median age at first intercourse of Tanzanian women age 20-49 is 16.9, about one and half years lower than the median age at first marriage (18.4 years, Table 5.5). By age 15, 19 percent of women have had sexual intercourse, and by age 18, 62 percent of women have had sexual intercourse, whereas only 45 percent have married by this age. Unlike age at first marriage, the median age at first intercourse has not changed over the various age groups of women.

Percentage of women and percentage of men who had first sexual intercourse by select exact ages, and median age at first intercourse, according to current age, Tanzania 1996 Percentage who had Percentage Median Number first intercourse by exact age: who age at of never had first women/ 15 18 20 22 25 Current age intercourse intercourse men WOMEN 1,732 15-19 NA 12.3 NA NA NA 51.5 a 14.5 57.5 77.1 20-24 NA NA 7.4 b 1,676 1,440 89.7 25-29 18.8 62.0 79.9 86.3 1.5 16.9 30-34 18.9 61.7 77.1 84.7 87.8 16.9 1,118 0.6 35-39 67.6 81.7 86.7 89.1 22.8 0.216.4 888 40-44 20.6 67.7 80.3 88.0 0.0 16.5 680 86.8 45-49 24.1 63.1 78.7 85.2 88.6 0.216.6 585 Women 20-49 18.9 62.2 78.9 85.8 88.2 2.4 16.9 6,388 Women 25-49 20.5 63.9 79.5 85.9 88.8 0.7 16.7 4,712 MEN 15-19 10.4 NA NA 58.9 488 NA NA

NA

91.8

83.0

87.8

90.3

90.7

80.0

82.1

87.3

NA

97.1

89.6

91.3

94.4

95.8

88.3

85.0

92.5

13.0

17

1.0

1.4

0.0

0.0

0.0

0.0

8.0

17.8

17.6

18.1

18.2

18.1

18.1

18.4

19.2

18.1

371

301

272

251

206

149

118

100

1,397

NA = Not applicable.

20-24

25-29

30-34

35-39

40-44

45-49

50-54

55-59

Men 25-59

Table 5.7 Age at first sexual intercourse

10.2

14.1

8.9

9.8

6.0

7.7

6.0

6.3

9.2

52.0

56.3

48.6

47,4

47.9

47.7

42.7

32.3

48.2

Omitted because less than 50 percent of women in the age group 20 to 24 were first married by age 20.

76.9

82.3

72.6

76.8

73.4

74.5

70.0

56.8

74.4

More than half of the teenage women have never had sexual intercourse. However, this proportion falls dramatically to only 7 percent among women age 20-24 and by age group 40-49 almost all women have been sexually active.

Overall, women become sexually active earlier than men. The median age at first sex for men age 25-59 is 18.1 years, compared with 16.7 years for women age 25-49. Although men enter marriage six years later than women on average, they start sexual relations only one year later than women. Unlike women, the median age at first intercourse among men may be declining slightly over time, from 19.2 years among those age 55-59 to 17.8 among those age 20-24.

Omitted because less than 50 percent of respondents in the age group 15 to 19 were first married by age 15.

Table 5.8 shows differentials in the median age at first sexual intercourse by background characteristics for women age 20-49 years and men age 25-59. With respect to the place of residence, rural women on the mainland generally start sexual relations 16 months (1.3 years) earlier than urban women, especially those in Dar es Salaam (which has the highest median age at first sex). Women with secondary or higher education generally initiate sexual relations four years later, than those with no formal education.

Background			Current age Women					Women	Men
characteristic	20-24	25-29	30-34	35-39	40-44	45-49	age 20-49	age 25-49	age 25-59
Residence	· · · · · · · · · · · · · · · · · · ·						···		
Mainland	17.4	16.9	17.0	16.4	16.5	16.7	16.9	1 <b>6.7</b>	18.1
Total urban	17.7	17.8	17.7	16,9	16.8	17.2	1 <b>7.5</b>	17.4	17.9
Dar es Salaam city	17.8	18.2	18.2	18.1	17.8	17.8	18.0	18.1	17.9
Other urban	17.6	17.6	17.5	16.6	16.7	16.8	17,3	17.0	18.0
Total rural	17.3	16.7	16.8	16.2	16.4	16.6	16.7	1 <b>6.6</b>	18.1
Zanzibar	19.2	18.2	16.3	15.5	14.7	15.1	17.1	16.2	20.5
Education									
No education	15.9	16.1	15.9	15.9	16.0	16.2	16.0	16.0	18.2
Primary incomplete	16.5	16.2	16.4	16.0	16.5	17.0	16.4	16.4	18.2
Primary complete	17.7	17.0	17.7	17.3	18.2	18.8	17.5	17.4	17.8
Secondary+	19.9	20.1	19,3	19.0	16.9	18.0	19.7	19.5	18.6

## 5.6 Recent Sexual Activity

In societies where contraceptive use is low, the chance of becoming pregnant is closely related to the frequency of sexual intercourse. Thus, information on recent sexual activity further refines the measure of exposure to pregnancy. Although the 1996 TDHS data show that the majority of women have had sexual intercourse, not all those who have ever had sex are currently sexually active. Men and women were asked how long ago their last sexual activity occurred.

Tables 5.9.1 and 5.9.2 give data on levels of sexual activity of women and men in the four weeks before the survey by background characteristics. Fifty-six percent of women 15-49 were sexually active in the four weeks preceding the survey, while 14 percent were practicing postpartum abstinence, 16 percent were abstaining for reasons other than recent delivery and 13 percent had never had sexual intercourse.

Recent sexual activity is lower among younger women as well as those who have never married; only 20 percent of unmarried women have had sexual intercourse in the four weeks before the survey. The proportion of sexually active women is higher on the mainland than in Zanzibar. The proportion of sexually active is higher in urban areas than rural areas, while among the regions the proportion varies between 31 percent (Iringa region) and 70 percent (Mwanza region). The proportion of women who are sexually active in the four weeks before the survey are highest among women with no education. Not surprising, women who are using a contraceptive method are more likely to be sexually active than those who are not.

Table 5.9.1 Recent sexual activity: women

Percent distribution of women by sexual activity in the four weeks preceding the survey, and among those not sexually active, the length of time they have been abstaining and whether postpartum or not postpartum, according to selected background characteristics and contraceptive method currently used, Tanzania 1996

		Not sexually active in past four weeks		<del></del>		···	<del></del>		
Background characteristic/ contraceptive	Sexually active in past		ining	Absta (not pos	ining	Never had			Number of
method	4 weeks	0-1 years	2+ years	0-1 years	2+ years	sex	Missing	Total	women
Age									
15-19	28.2	8.4	0.4	8.0	2.7	51.5	0.8	100.0	1,732
20-24	58.3	15.7	1.6	11.8	3.6	7.4	1.7	100.0	1,676
25-29	66.9	15.2	2.3	10.3	2.8	1.5	0.9	100.0	1,440
30-34 35-39	65.0 63.3	15.2 11.7	2.5 3.1	11.7 15.1	3.5 4.9	0.6 0.2	1.5 1.7	100.0 100.0	1,118 888
40-44	64.3	8.7	3.1	14.2	8.4	0.0	1.3	100.0	680
45-49	63.7	2.5	1.6	15.4	15.3	0.2	1.2	100.0	585
Devention of surion (see									
Duration of union (year Never married	19.7	6.8	1.3	10.1	5.7	55.6	0.9	100.0	1,887
0-4	67.8	17.5	1.1	10.1	1.9	0.0	1.6	100.0	1,453
5-9	68.2	15.9	1.8	11.2	1.8	0.0	1.1	100.0	1,357
10-14	67.7	14.6	2.8	10.2	3.0	0.0	1.7	100.0	1,047
15-19	65.9	13.9	2.5	12.8	3.7	0.0	1.2	100.0	817
20-24	62.5	10.7	3.5	15.4	6.5	0.0	1.4	100.0	731 524
25-29 30+	65.9 <b>6</b> 4.7	5.5 1.2	1.9 0.6	13.8 16.7	11.4 15.8	$0.0 \\ 0.0$	1.6 1.0	100.0 100.0	524 304
107	04.7	1.2	0.0	10.7	15.0	0.0	1.0	100.0	304
Residence									
Mainland	56.0	12.0	1.9	11.5	4.6	12.6	1.3	100.0	7,881
Total urban	58.7	9.5	0.7	11.7	6.0	12.2	1.1	100.0	1,811
Dar es Salaam city Other urban	62.9 56.8	7,4 10.5	0.5 0.8	9.5 12.8	6.0 6.1	12.6 12.0	1.2 1.1	100.0 100.0	563 1,248
Total rural	55.2	10.3	2.3	11.4	4.2	12.8	1.1	100.0	6,070
Zanzibar	48.2	10.6	0.4	13.8	4.4	21.9	0.7	100.0	239
Region Dodoma	45.7	17.5	4.8	16.8	4.1	9.2	1.9	100.0	355
Arusha	47.8	17.5	4.1	10.8	3.8	13.2	1.9	100.0	589
Kilimanjaro	51.1	7.9	0.8	13.7	5.3	20.1	1.0	100.0	390
Tanga	56.5	7.8	0.8	10.8	4.0	18.1	2.0	100.0	464
Morogoro	52.8	16.2	1.3	13.3	5.6	10.3	0.5	100.0	408
Coast	58.1	11.2	0.4	13.0	3.2	13.0	1.1	100.0	159
Dar es Salaam	62.4	8.5	0.4	9.6	5.8	12.0	1.3	100.0	646
Lindi Mtwara	56.9 51.7	19.5 22.7	3.1 3.6	11.3 11.6	2.8 3.9	5.3 5.7	0.9 0.9	100.0 100.0	187 355
Ruvuma	56.0	20.8	2.4	9.0	3.9	7.1	1.5	100.0	305 305
Iringa	31.4	19.0	6.4	15.2	8.5	18.5	1.0	100.0	466
Mbeya	54.8	14.0	1.6	7.6	6.1	14.6	1.3	100.0	473
Singida	46.4	16.2	1.3	14.5	4.1	16.0	1.5	100.0	283
Tabora	64.6	12.1	0.5	10.6	5.1	6.6	0.5	100.0	225
Rukwa	59.5	9.6	1.1	17.0	2.0	10.2	0.6	100.0	242
Kigoma Shinyanga	56.1 64.0	7.9 5.3	1.6 0.8	6.5	5.2	20.2	2.5 1.6	100.0	351 686
Kagera	64.0 66.5	5.3 4.6	0.3	10.9 8.8	4.3 4.2	13.1 13.7	1.6 1.4	100.0 100.0	686 467
Mwanza	70.0	6.8	0.3	11.0	3.9	7.4	0.6	100.0	573
Mara	63.2	8.7	2.9	11.9	4.0	9.0	0.4	100.0	257
Education									
No education	60.4	13.0	2.5	12.8	5.3	4.6	1.3	100.0	2,316
Primary incomplete	50.4	8.6	1.6	9.6	5.0	23.9	1,0	100.0	1,630
Primary complete	56.6	13.5	1.7	11.1	3.8	12.0	1.4	100.0	3,73 <b>2</b>
Secondary+	44.6	6.6	0.8	16.1	7.0	23.7	1.1	100.0	441
Contraceptive method									
No method	51.5	13.6	2.0	11.3	5.0	15.3	1.3	100.0	6,816
Modern method Traditional/folk	80.5	3.3	1.0	11.6	2.3	0.1	1.2	100.0	954
method	72.1	4.9	0.8	16.1	3.9	0.3	1.8	100.0	350
	55.8								
Total	JJ.8	12.0	1.9	11.5	4.6	12.9	1.3	100.0	8,120

Table 5.9.2 Recent sexual activity: men

Percent distribution of men by sexual activity in the four weeks preceding the survey, according to selected background characteristics and contraceptive method currently used, Tanzania 1996

Background characteristic/ contraceptive method	Sexually active in past 4 weeks	Not sexually active in past 4 weeks	Never had sex	Total	Number of men
Age			40.0	100.0	
15-19	26.9	14.1	58.9	100.0	488
20-24	53.2	33.8	13.0	100.0	371
25-29 30-34	71.5 69.8	26.8 29.2	1.7 1.0	100.0 100.0	301 272
35-39	77.5	21.1	1.4	100.0	251
40-44	79.7	20.3	0.0	100.0	206
45-49	73.9	26.1	0.0	100.0	149
50-54	73.7	26.3	0.0	100.0	118
55-59	72.0	28.0	0.0	100.0	100
Marital Status					
Never married	36.1	23.1	40.8	100.0	847
Polygynous union	86.5	13.5	0.0	100.0	181
Monogamous union	76.8	23.2	0.0	100.0	1,107
Formally married	39.8	60.2	0.0	100.0	117
Residence	61.1	24.2	14.7	100.0	2 107
Mainland Total urban	61.1 59.7	24.2 28.3	14.7 12.0	100.0 100.0	2,187 509
Dar es Salaam city	56.6	28.3 33.8	9.6	100.0	171
Other urban	61.2	25.6	13.2	100.0	338
Total rural	61.5	22.9	15.5	100.0	1,678
Zanzibar	37.1	26.3	36.6	100.0	69
Region			_		
Dodoma	57.1	25.7	17.1	100.0	.96
Arusha	62.8	19.1	18.1	100.0	156
Kilimanjaro Tanga	58.5 73.3	30.3 14.7	11.3 12.0	100.0 100.0	119 108
Tanga Morogoro	60.8	26.6	12.6	100.0	95
Coast	54.8	29.0	16.1	100.0	45
Dar es Salaam	57.2	32.6	10.2	100.0	191
Lindi	62.0	25.4	12.7	100.0	54
Mtwara	56.4	30.7	12.9	100.0	96
Ruvuma	56.9	29.4	13.7	100.0	82
Iringa Mharia	46.7 76.4	33.6	19.7	100.0	100
Mbeya Singida	76.4 65.5	9.7 22.6	13.9 11.9	100.0 100.0	137 80
Singida Tabora	57.4	22.6 29.6	13.0	100.0	80 82
Rukwa	75.6	7.7	16.7	100.0	71
Kigoma	68.6	22.9	8.6	100.0	95
Shinyanga	65.2	17.7	17.1	100.0	202
Kagera	59.4	27.5	13.0	100.0	139
Mwanza Mara	50.0 58.2	28.2 23.6	21.8 18.2	100.0 100.0	176 64
				. 50.0	U-F
Education No education	64.5	22.5	13.0	100.0	304
Primary incomplete	51.5	21.0	27.5	100.0	504 664
Primary complete	64.9	25.3	9.8	100.0	1,066
Secondary +	59.4	31.7	8.9	100.0	222
Contraceptive method					
No method	54.0	26.1	19.8	100.0	1,751
Modern method	83.2	16.8	0.0	0.001	315
Traditional/ folk method	80.9	19.1	0.0	100.0	190
	-5.7		5.5	-0.0	

The proportion of women who have been postpartum abstaining for less than two years decline at older ages and at longer marital durations. Women in rural areas on the mainland and those who are not using any form of contraception are more likely to be postpartum abstaining. Abstinence unrelated to childbirth is observed to be higher among women between the ages of 35 and 49 years and women married more than 20 years. There are substantial differences in level of abstinence unrelated to childbirth among regions, ranging from 12 percent (Kigoma and Ruvuma) to 24 percent (Iringa).

Sixty percent of the men interviewed were sexually active in the four weeks preceding the survey, while 15 percent had never had sex and the remaining 24 percent had had sex but not recently (Table 5.9.2). The likelihood of sexual activity increases with age to 80 percent among men age 40-44 and declines thereafter. As expected, sexual activity is higher among men in polygynous unions (87 percent) than among men in monogamous unions (77 percent). About 40 percent of the formerly married men and 36 percent of the unmarried men were sexually active in the four weeks preceding the survey.

## 5.7 Postpartum Amenorrhoea, Abstinence, and Insusceptibility

For women who are not using contraceptives, exposure to the risk of pregnancy in the period following a birth is influenced by two factors; breastfeeding and sexual abstinence. Postpartum protection conception can be prolonged by breastfeeding through its effect on the length of amenorrhoea (the period after birth prior to the return of menstruation). Protection can also be prolonged by delaying the resumptions of sexual relations. Women are considered insusceptible if they are not exposed to the risk of pregnancy, either because they are amenorrhoeic or still abstaining from sex following a birth. The percentages of women who gave birth in the three years before the survey and who are still amenorrhoeic, abstaining insusceptible are presented in Table The data are grouped in 5.10. intervals of two months to minimise fluctuations in the estimates. The estimates of median and mean duration are also shown.

Within the first two months after birth, nearly all women are insusceptible to the risk of pregnancy. The period of postpartum

Table 5.10 Postpartum amenorrhoea, abstinence, and insusceptibility

Percentage of births in the three years preceding the survey for which mothers are postpartum amenorrhoeic, abstaining and insusceptible, by number of months since birth, and median and mean durations, Tanzania 1996

Months since birth	Amenor- rhoeic	Abstaining	Insus- ceptible	Number of births
<2	93.9	92.0	98.7	206
2-3	85.5	62.8	90.6	247
4-5	72.5	52.9	81.8	253
6-7	73.2	49.9	85.9	256
8-9	64.4	32.6	70.9	240
10-11	57.9	31.3	64.8	253
12-13	46.5	24.3	57.6	277
14-15	41.9	26.3	51.7	257
16-17	39.9	25.8	48.7	223
18-19	33.1	20.6	44.2	267
20-21	20.7	14.6	30.4	219
22-23	14.8	15.5	25.3	213
24-25	12.7	13.4	18.9	230
26-27	10.5	13.1	19.3	204
28-29	10.8	9.9	17.6	229
30-31	8.9	5.5	12.6	212
32-33	7.3	3.4	9.7	209
34-35	4.5	4.1	7.1	217
Total	40.0	28.1	47.8	4,214
Median	12.1	5.6	15.7	-
Mean	14.3	10.3	17.0	-
Prevalence/incidence mean	14.2	10.0	17.0	-

<sup>&</sup>lt;sup>1</sup> The prevalence-incidence mean is defined as the number of children whose mothers are amenorrhoeic (prevalence) divided by the average number of births per month (incidence).

amenorrhoea is considerably longer than the period of abstinence and is a major determinant of postpartum insusceptibility to pregnancy. By 6-7 months following birth, 86 percent of the women are still insusceptible, while 50 percent are still abstaining from sexual relations. The table shows that Tanzanian women are

insusceptible to the risk of pregnancy—either due to amenorrhoea or to abstinence—for a median period to 16 months. The proportion of women experiencing postpartum insusceptibility falls from 99 percent in the period less than two months after birth to 65 percent at 10-11 months and to 25 percent among women who had a birth 22-23 months before to the survey.

The median durations of postpartum amenorrhoea, abstinence, and insusceptibility are presented in Table 5.11 by various background characteristics. Women age 30 or older have a much longer median duration of postpartum amenorrhoea (17 months) than women under 30 (11 months); a similar pattern is observed postpartum insusceptibility by age. Rural mothers on the mainland wait longer than urban mothers for their menstrual periods to return after birth (13 months vs. 9 months). Postpartum amenorrhoea is inversely related to mother's education; decreases from 16 months for women with no education to

Table 5.11 Median duration of postpartum insusceptibility by background characteristics

Median number of months of postpartum amenorrhoea, postpartum abstinence, and postpartum insusceptibility, by selected background characteristics, Tanzania 1996

	Median	Number			
Background characteristic	Amenor- rhoea	Abtinence	Insuscep- tibility	of births	
Age					
<30	10.5	5.4	13.3	2,665	
30+	16.8	6.0	19.1	1,549	
Residence					
Mainland	12.1	5.6	15.9	4,088	
Total urban	8.6	6.0	11.8	709	
Dar es Salaam city	6.7	6.8	8.3	199	
Other urban	9.8	5.6	14.8	510	
Total rural	13.0	5.5	16.4	3,379	
Zanzibar	12.8	3.8	13.8	126	
Education					
No education	16.0	7.0	18.2	1,215	
Primary incomplete	11.6	4.2	13.7	685	
Primary complete	11.2	5.6	14.7	2,166	
Secondary +	5.6	4.9	6.5	148	
Total	12.1	5.6	15.7	4,214	

about 11 months for those with at least primary education. Women with no education have a median period of insusceptibility of 18 months, compared with 14 for those who have completed primary education.

## 5.8 Termination of Exposure to Pregnancy

The onset of infertility with increasing age reduces the proportion of women who are exposed to the risk of pregnancy. Although the onset of infecundity is difficult to determine, there are ways of estimating its effect on the population. Table 5.12 presents data on menopause.

A woman is considered menopausal if she is not pregnant, not amenorrhoeic, and either declared herself as being menopausal or did not have a menstrual period for six or more months before the survey. As expected, the proportion of menopausal women rises with age, particularly among women age 44 years or older. It rises from 8 percent among those age 42-43 years to 44 percent in the age group 48-49.

Table 5.12 Termination of exposure to the risk of pregnancy

Indicators of menopause among women age 30-49, by age, Tanzania 1996

	Menopause <sup>1</sup>					
Age	Percent	Number				
30-34	1.5	1,118				
35-39	2.3	888				
40-41	6.7	291				
42-43	8.3	260				
44-45	16.1	295				
46-47	33.6	188				
48-49	43.9	231				
Total	8.9	3,271				

<sup>&</sup>lt;sup>1</sup> Percentage of all women who are not pregnant, not postpartum amenorrhoeic and whose last menstrual period occurred six or more months preceding the survey.

#### **CHAPTER 6**

### FERTILITY PREFERENCES

A number of questions were included in the 1996 TDHS to ascertain fertility preferences. Women who were not pregnant or were unsure of their status were asked whether they would like to have (a/another) child and if so, after how long a period of time. Similarly, pregnant women were asked whether they would like to have another child after the one they were expecting and if so, when. Women were also asked how many children they would want in total if they could start afresh. Since men's preferences presumably affect fertility, the male questionnaire also included questions on fertility preferences.

The data on fertility preferences produce an indication of the direction that future fertility will take, as well as an assessment of the need for family planning. If the necessary family planning services are available, accessible, and affordable, it is assumed that individuals and couples will act in such a way as to achieve their preferred family size. Of course, individuals may not always be able to act on their preferences due to other pressures, particularly the preferences of their spouse.

## **6.1** Reproductive Preferences

Future reproductive preferences among women and men according to the number of living children are shown in Table 6.1. Although 60 percent of women and 74 percent of men say that they want more children, 33 percent of women and 39 percent of men say they want to wait two or more years before having their next child and thus can be considered as potential contraception users for the purpose of spacing (Figure 6.1).

Twenty-two percent of women and 24 percent of men say they want another child soon, while 15 percent of women and 21 percent of men are either unsure about whether they want another child or want another but are undecided on the timing of the next birth. Twenty-six percent of women and 13 percent of men say they want no more children and can be considered potential contraceptive users for the purpose of limiting their family size. A small proportion (3 percent of women and 1 percent of men) believe they cannot have any more children.

As expected, the proportion of women who want to stop childbearing rises with the number of living children, from 7 percent of childless women to more than 60 percent of women with six or more children (Figure 6.2). Among men, the proportion who want to stop childbearing similarly rises with the number of living children from less than 3 percent for men without children to more than 40 percent of men with six or more children.

For those who want to space (i.e., those who want another child later), the pattern is different. Seventeen percent of childless women want to postpone having a child, compared to 53 percent of those with one child. Thereafter, as the number of living children rises, the desire to space children increases markedly. For instance, the proportion of women who want to space their next birth declines steadily to a low of about 12 percent among women with six or more children. A similar pattern is displayed by men. Thirty-five percent of childless men want to postpone having a child, compared to 57 percent of those with one child. Thereafter, the proportion of men who want to space declines steadily to a low of 25 percent. This pattern confirms that most individuals want to space their children, and at higher parities, prefer to stop childbearing altogether.

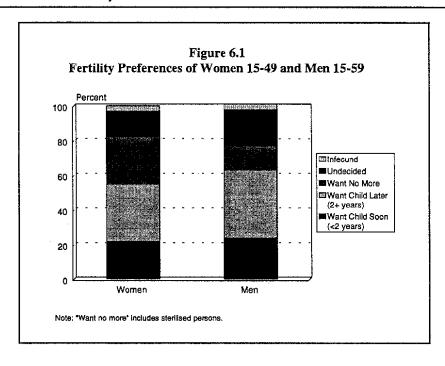
As expected, the desire to have a child soon, that is, within two years of the time of interview, also declines as the number of children increases. While 30 percent of childless women want to have a child soon,

Table 6.1 Fertility preferences by number of living children

Percent distribution of women and men by desire for more children, according to number of living children, Tanzania 1996

			Numbe	r of living cl	hildren <sup>1</sup>			
Desire for children	0	1	. 2	3	4	5	6+	Total
			WOME	٧				
Have another soon <sup>2</sup>	30.3	27.0	26.7	22.7	14.8	7.9	6.8	21.5
Have another later <sup>3</sup>	17.3	52.6	49.2	45.0	35.9	29.8	11.8	32.9
Have another, undecided when	19.0	3.6	2.0	1.3	1.0	1.8	0.4	6.0
Undecided	24.8	3.6	3.0	4.4	6.7	3,4	3.8	9.1
Want no more	6.7	10.9	16.4	23.8	36.7	48.9	63.6	25.6
Sterilised	0.0	0.2	0.5	0.8	2.3	2.9	5.2	1.4
Declared infecund	1.8	1.8	2,3	2.1	2.4	5.2	7.9	3.2
Missing	0.1	0.2	0.0	0.0	0.2	0.1	0.5	0.6
Total	100.0	100.0	100,0	100.0	100.0	100.0	100.0	100.0
Number of women	1,991	1,411	1,100	969	784	607	1,257	8,120
			MEN				,	
Have another soon <sup>2</sup>	20.9	34.0	30.9	27.1	33.5	22.1	17.6	24.0
Have another later <sup>3</sup>	34.5	56.7	56.0	52.8	46.1	34.4	24.7	39.4
Have another, undecided when	20.9	3.6	5.5	3.0	2.2	3.1	0.6	10.6
Undecided	20.4	1.9	2.2	1.6	2.9	1.7	6.0	10.7
Want no more	2.4	2.8	4.1	14.0	12.9	32.7	43.1	12.8
Sterilised	0.0	0.3	0.0	0.7	0.0	0.6	3.5	0.7
Declared infecund	0.6	0.6	0.6	0.8	1.4	4.7	3.7	1.4
Missing	0.3	0.0	0.8	0.0	1.0	0.6	0.7	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of men	974	228	206	188	158	127	375	2,256

Want to delay next birth for two or more years.

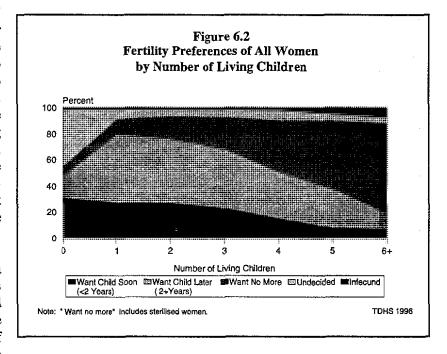


Includes current pregnancy.

Want next birth within two years.

the proportion decreases to 7 percent for women with six or children. Twenty-one more percent of childless men want to have a child within the next two years. This proportion decreases steadily to 18 percent for those with six or more children. Among those with six or more children, 19 percent of women want to have more children compared to 43 percent of men, suggesting that men are considerably more pronatalist than women.

A comparison with data from the 1991-92 TDHS indicates that there has been a downward trend in the desire for more children. The proportion of married women who want no

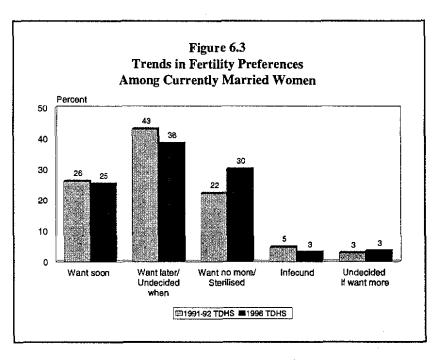


more children increased from 21 percent to 28 percent (Figure 6.3)<sup>1</sup>. Among married women with six or more children, the proportion who want to have another child declined from 28 percent in 1991-92 to 20 percent in 1996.

Table 6.2 presents the distribution of all women by reproductive preferences according to age. The desire to have another child soon increases from 14 percent for women age 15-19 to 28 percent for those ages

25-29 and then decreases progressively with age. Overall, the proportion of women who a desire to limit express childbearing increases as the age of the woman increases. Likewise, the proportion of women who declare themselves infecund is less than 1 percent at the youngest four age groups; however, it increases to 27 percent among all women age 45-49 years.

Table 6.3 shows the extent to which couples agree on the desire for more children. Generally speaking, there is substantial agreement between couples. In 60 percent of couples, both spouses want more children,



<sup>&</sup>lt;sup>1</sup> To be comparable with tables from the 1991-92 TDHS, the proportions are based on currently married women.

and in 12 percent of couples, neither wants more children; only 18 percent of couples disagree in their fertility desires. The proportion of couples in which the husband wants more children and his wife does not (14 percent) is almost three times the proportion in which the wife wants more and her husband does not (5 percent). Agreement among couples who have children is highest when they have between one and three children, with only 14 percent expressing different desires; disagreement is highest among couples with four to six children. Not surprisingly, as the number of living children increases, the proportion of couples who want more children declines and the proportion who want no more children increases. Moreover, as the number of children increases, disagreement between couples rises with husbands more likely than wives to want more children.

Table 6.2 Fertility preferences by age

Percent distribution of women by desire for more children, according to age, Tanzania 1996

	Age of woman								
Desire for children	15-19	20-24	25-29	30-34	35-39	40-44	45-49	Total	
Have another soon <sup>1</sup>	14.4	24.4	27.8	26.1	23.8	18.5	10.1	21.5	
Have another later <sup>2</sup>	32.3	51.7	45.7	33.3	18.1	5.3	3.7	32.9	
Have another, undecided when	17.4	5.9	2.7	2.3	1.5	1.0	0.6	6.0	
Undecided	25.0	6.2	4.4	5.2	4.9	3.6	2.5	9.1	
Want no more	10.1	11.5	19.0	31.4	45.7	57.1	50.3	25.6	
Sterilised	0.0	0.1	0.2	0.8	3.0	6.8	5.2	1.4	
Declared infecund	0.6	0.3	0.1	0.8	2.7	7.5	26.9	3.2	
Missing	0.2	0.0	0.0	0.2	0.3	0.3	0.8	0.2	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Number of women	1,732	1,676	1,440	1,118	888	680	585	8,120	

Want next birth within two years.

<sup>&</sup>lt;sup>2</sup> Want to delay next birth for two or more years.

Table 6.3 Desire	for more children	en among monogamous	couples
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Percent distribution of monogamously married couples by desire for more children, according to number of living children, Tanzania 1996

Number of living children	Both want more	Husband more/ wife no more	Wife more/ husband no more	Both want no more	Husband/ wife infecund	One or both undecided/ missing	Total	Number of couples
Same number				,				
0	96.1	0.0	0.0	0.0	0.0	3.9	100.0	53
1-3	77.8	10.5	3.8	2.9	1.5	3.5	100.0	297
4-6	42.0	18.9	7.6	15.1	4.6	11.8	100.0	159
7+	8.5	16.1	8.4	46.3	15.8	4.9	100.0	74
Different number								
Husband > wife	60.5	11.8	4.5	13.6	3.3	6.5	100.0	196
Wife > husband	50.7	24.4	1.0	11.9	6.9	5.0	10 <b>0.0</b>	95
Total	59.7	13.6	4.5	12.0	4.2	6.0	100.0	874

Table 6.4 shows the percentage of women and men who want no more children according to the number of children they already have and according to selected background characteristics. Although the difference between the proportion of women who want no more children on the mainland and Zanzibar is small, the difference between men is quite significant. On the mainland, 14 percent of men want no more children, compared to only 3 percent of those in Zanzibar.

Overall there is an inverse relationship between the proportion of women wanting no more children and respondent's level of education. However, among women with a given number of children, the data in Table 6.4 show a generally positive relationship between education and the proportion who want to stop childbearing. For example, among women with three children, 21 percent of those with no education want no more children, compared to 26 percent of those who have completed primary education. Among men, the relationship is inconsistent.

Table 6.4 Desire to limit childbearing by background characteristics

Percentage of all women and men who want no more children, by number of living children and selected background characteristics, Tanzania 1996

Background		Number of living children <sup>1</sup>							
characteristic	0	1	2	3	4	5	6+	All women	All men
Residence									
Mainland	6,6	11.1	16.6	24.6	39.1	52.3	69.4	27.1	13.8
Total urban	6.3	13.8	25.0	37.2	54.3	67.7	81.3	28.3	15.9
Dar es Salaam city	8.7	16.8	27.3	33.9	60.3	59.4	88.9	27.8	11.0
Other urban	4.9	12.4	23.9	38.2	51.8	71.0	78.9	28.5	18.3
Total rural	6.8	10.0	13.8	21.2	34.8	49.4	67.6	26.7	13.1
Zanzibar	8.5	12.3	28.2	21.9	(32.0)	38.9	56.5	27.8	3.3
Education									
No education	5.0	6.8	13.4	20.5	35.4	45.7	61.7	32.0	15.4
Primary incomplete	10.6	15.6	20.1	22.4	37.5	52.9	76.6	31.4	17.6
Primary complete	<b>5</b> .3	11.5	16.6	25.7	40.2	56.2	79,0	22.9	9.7
Secondary+	5.0	11.9	29.5	46.2	(58.9)	(74.9)	(63.8)	21.1	16.2
Total women	6.7	11.1	16.9	24.6	38.9	51.8	68.8	27.1	NA
Total men	2.4	3.1	4.1	14.7	12.9	33.3	46.6	NA	13.5

Note: Figures in parentheses are based on 25-49 cases.

NA = Not applicable.

<sup>1</sup> Includes current pregnancy.

## 6.2 Need for Family Planning Services

The data in this section address the extent of need for family planning services. Unmet need for family planning refers to the category of fecund women who either wish to postpone the next birth (spacers) or wish to stop childbearing altogether (limiters) but are not using a contraceptive method. Pregnant women are considered to have unmet need for spacing or limiting if their pregnancy was mistimed or unwanted, respectively. Similarly, amenorrhoeic women are classified as having unmet need if their last birth was mistimed or unwanted. Women who are currently using a family planning method are said to have a met need for family planning. The total demand for family planning comprises those who fall in the met need and unmet need categories.

Table 6.5 presents estimates for unmet need, met need, and total demand for family planning services for all women, currently married women, and unmarried women and presents data by selected background

Table 6.5 Need for family planning services among all women

Percentage of women with unmet need for family planning, met need for family planning, and the total demand for family planning services, by selected background characteristics, Tanzania 1996

		imet need t aily plannii		far	let need fo nily planni rrently usin	ng		al demand mily plann		Percentage of	Number
Background characteristic	For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total	satis- fied	of women
Age											
15-19	8.7	1.9	10.5	4.1	0.6	4.7	12.8	2.5	15.2	30.8	1,732
20-24	17.7	3.3	21.0	14.8	3.1	18.0	32.6	6.4	38.9	46.2	1,676
25-29	18.1	3.7	21.7	14.9	4.9	19.8	33.0	8.5	41.5	47.6	1,440
30-34	12.6	7.8	20.4	11.6	9.3	21.0	24.2	17.1	41.3	50.7	1,118
35-39	10.0	13.7	23.6	6.4	14.7	21.1	16.4	28.3	44.7	47.2	888
40-44	4.6	18.1	22.8	1.8	18.9	20.7	6.4	37.0	43.4	47.6	680
45-49	2.2	9.6	11.8	1.0	11.8	12.8	3.1	21.4	24.5	52.0	585
Residence											
Mainland	11.8	6.5	18.2	9.2	7.1	16.2	21.0	13.5	34.5	47.1	7,881
Total urban	9.9	5.2	15.1	16.6	12.4	29.0	26.5	17.6	44.1	65.7	1,811
Dar es Salaam city	9.6	4.8	14.4	19.1	11,7	30.8	28.7	16.5	45.2	68.1	563
Other urban	10.0	5.4	15.4	15.5	12.7	28.2	25.6	18.1	43.6	64.6	1,248
Total rural	12.3	6.8	19.2	7.0	5.5	12.4	19.3	12,3	31.6	39.4	6,070
Zanzibar	22.1	7.4	29.5	6.6	3.3	9,9	28.7	10.7	39.4	25.0	239
Region											
Dodoma	12.4	8.9	21.3	7.6	5.4	13.0	20.0	14.3	34.3	38.0	355
Arusha	11.3	4.9	16.2	9.2	8.1	17.3	20.5	13.0	33.5	51.6	589
Kilimanjaro	7.9	5.9	13.7	18.3	19.3	37.7	26.2	25.2	51.4	73.3	390
Tanga	13.8	5,3	19.1	12.6	9.8	22.4	26.4	15.1	41.5	53.9	464
Morogoro	14.3	2.9	17.2	11.1	5.0	16.2	25.5	8.0	33.4	48.4	408
Coast	11.6	5.1	16.6	17.0	9.7	26.7	28.5	14.8	43.3	61.7	159
Dar es Salaam	9.9	5.0	14.9	18.2	11.6	29.8	28.1	16.6	44.8	66.7	646
Lindi	11.0	8.2	19.2	11.0	7.5	18.6	22.0	15.7	37.7	49.2	187
Mtwara	9.1	8.6	17.7	7.5	7.3 5.7	13.2	16.6	14.3	30.8	42.6	355
Ruvuma	13.7	6.7	20.4	7.3 9.7	8.8	18.5	23.4	15.5	38.8	42.6 47.5	305
	8.0	6.7	14.7	6.7	4.4	11.1	14.7	11.1	25.7	43.0	466
Iringa	10.5	4,8	15.3	11.5	7.3	18.8	22.0	12.1	34.1	55.1	473
Mbeya	13.5	8.1	21.6	8.4	7.3 5.8	14.2	21.8	14.0		39.7	283
Singida									35.8		
Tabora	10.1	6.6	16.7	8.6	8.1	16.7	18.7	14.6	33.3	50.0	225
Rukwa	14.7	4.0	18.7	9.6	3.7	13.3	24.4	7.6	32.0	41.6	242
Kigoma	10.6	4.4	15.0	6.3	7.4	13.6	16.9	11.7	28.6	47.6	351
Shinyanga	13.3	5.3	18.7	1.3	2.9	4.3	14.7	8.3	22.9	18.6	686
Kagera	15.1	8.8	23.9	4.6	4,9	9.5	19.7	13.7	33.5	28.4	467
Mwanza Mara	11.0 15.9	10.6 11.2	21.6 27.1	5.2 5.1	4.2 1.8	9.4 6.9	16.1 20.9	14.8 13.0	31.0 33.9	30.2 20.2	573 257
Education	10.2	0.0	10.1	2.0	4.0		12.1	12.0	25.0	26.2	2.216
No education	10.3	8.8	19.1	2.9	4.0	6.8	13.1	12.8	25.9	26.3	2,316
Primary incomplete	10.9	8.1	19.0	4.6	7.9	12.5	15.5	16.0	31.5	39.7	1,630
Primary complete	13.9	4.6	18.6	13.5	8.0	21.5	27.5	12.6	40.1	53.6	3,732
Secondary+	10.2	3.9	14.1	21.1	10.4	31.5	31.3	14.3	45.6	69.1	441
All women	12.1	6.5	18.6	9.1	6.9	16.1	21.2	13.4	34.6	46.4	8,120
Currently married women	15.4	8.5	23.9	10.0	8.4	18.4	25.4	16.9	42.3	43.5	5,411
Unmarried women	5.4	2.5	7.9	7.4	4.0	11.3	12.8	6.5	19.2	58.9	2,709

<sup>&</sup>lt;sup>1</sup> Unmet need for spacing includes pregnant women whose pregnancy was mistimed, amenorrhoeic women whose last birth was mistimed, and women who are neither pregnant nor amenorrhoeic and who are not using any method of family planning but say they want to wait two or more years for their next birth. Also included in unmet need for spacing are women who are unsure whether they want another child or who want another child but are unsure when to have the birth. Unmet need for limiting refers to pregnant women whose pregnancy was unwanted, amenorrhoeic women whose last child was unwanted, and women who are neither pregnant nor amenorrhoeic and who are not using any method of family planning but want no more children. Excluded from the unmet need category are menopausal or infecund women and unmarried women who have not had sexual intercourse in the four weeks prior to the interview.

<sup>2</sup> Using for spacing is defined as women who are using some method of family planning and say they want to have another child or are

<sup>2</sup> Using for *spacing* is defined as women who are using some method of family planning and say they want to have another child or are undecided whether to have another. Using for *limiting* is defined as women who are using and who want no more children. Note that the specific methods used are not taken into account here.

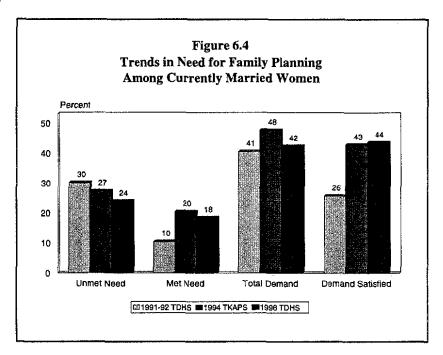
characteristics for all women. Although fertility desires remain high in Tanzania, there still exists a substantial need for family planning. The total demand for family planning for all women is 35 percent and 46 percent of the demand is satisfied. Overall, 19 percent of women have unmet need for family planning services—12 percent for spacing and 7 percent for limiting births. Among 16 percent of women using a method (met need for family planning), 9 percent are spacing and 7 percent are limiting births.

Twenty-four percent of currently married women in Tanzania are in need of family planning services: 15 percent for spacing births and 9 percent for limiting births (see lower panel). On the other hand, 18 percent of married women are using a method (met need for family planning); 10 percent for spacing and 8 percent for limiting births. If all unmet need were satisfied, 42 percent of married women would be using a contraceptive method.

Interest in spacing births is largely concentrated among younger women (under age 30), while unmet need for limiting childbirth is higher among older women. Unmet need is greater among rural than urban

women and is considerably higher among women in Zanzibar than women on the mainland (30 vs. 18 percent). Women in the Mara region show the greatest unmet need (27 percent), while those in the Kilimanjaro region have the lowest unmet need (14 percent). Unmet need for limiting childbirth is higher for women with no education or less educated women, and the percentage of demand satisfied increases with educational level.

Figure 6.4 shows that unmet need for family planning among currently married women in Tanzania has declined from 30 percent in 1991-92 to 24 percent in 1996 and the total demand satisfied has increased from 26 percent to 44 percent during the same period.



### 6.3 Ideal Number of Children

Information on what women and men consider the ideal family size was elicited through two questions. Respondents who had no children were asked, "If you could choose exactly the number of children to have in your whole life, how many would that be?" For respondents who had children the question was rephrased as follows: "If you could go back to the time when you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?" Some respondents, especially those for whom fertility control was an unfamiliar concept, might have had some difficulty in answering this hypothetical question.

Table 6.6 presents the distribution of respondents by ideal number of children, according to the actual number of living children (including current pregnancy). It should be noted that respondents were not forced to give an exact number of children, and only 8 percent of women and 7 percent of men gave a nonnumeric response to the question on ideal family size. This failure to specify an ideal family size could perhaps be due to lack of knowledge on how best to control their family sizes, to the belief that family size control is beyond them, or to indifference to any specific family size.

Those who gave numeric responses generally want to have large families. More than half of all women report five or more children as ideal and another 23 percent want to have four children. Overall, women report a mean ideal number of 5.5 children, compared to 5.9 for men.

Despite the high fertility preferences, the data indicate that there has been a gradual decline in the mean ideal family size among all women in Tanzania, from 6.1 children reported in 1991-92 to 5.5 in the 1996 TDHS.

Percent distribution of all women all women and men and for curre 1996								
			Nu	mber of li	ving child	ren <sup>1</sup>		
Ideal number of children	0	1	2	3	4	5	6+	Tota
			WOMEN					
0	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0.1
1	0.8	1.2	0.2	0.1	0.1	0.0	0.0	0.5
2	10.4	6.2	5.4	1.2	2.1	1.5	1.7	5.1
3	15.7	16.4	7.2	6.3	1.6	2.0	2.4	9.1
4	26.7	29.7	30.8	23.0	20.6	10.4	11.6	23.2
5	15.0	17.1	19.6	18.2	14.0	16.5	7.1	15.2
6 <b>+</b>	19.8	24.5	33.1	43.9	55.2	59.0	<b>6</b> 7.3	39.6
Non-numeric response	11.3	4.8	3.6	7.3	6.3	10.7	9.8	7.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	1,991	1,411	1,100	969	784	607	1,257	8,120
Mean ideal number of children:								
For all women	4.5	4.7	5.2	5.7	6.0	6.5	7.1	5.5
Number of women	1,767	1,344	1,060	899	735	542	1,134	7,480
For currently married women	5.1	5.0	5.3	5.7	6.1	6.5	7.1	5.9
Number of women	380	905	873	767	636	472	996	5,029
			MEN				_	
1	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.1
2	7.6	4.7	2.2	3.8	0.9	0.5	0.9	4.5
3	13.5	13.4	7.9	7.7	0.8	1.2	1.4	8.9
4	29.5	32.7	28.2	22.1	11.4	11.5	12.7	24.0
5	18.4	20.9	17.6	22.7	14.3	14.1	8.4	16.8
5+	23.5	23.9	39.2	39.4	65.6	63.5	65.1	38.4
Non-numeric response	7.2	4.5	4.9	4.4	7.0	9.2	11.5	7.3
Total .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of men	974	228	206	188	158	127	375	2,256
Mean ideal number of children:								
For all men	4.8	4.8	5.4	6.0	7.1	7.3	8.7	5.9
Number of men	904	218	195	179	147	116	332	2,091
For currently married men	5.0	4.8	5.6	6.0	7.1	7.4	8.7	6.7
Number of men	103	168	172	168	146	113	327	1,198
Monogamous men	5.0	4.8	5.5	5.7	7.0	7.1	7.4	6.1
Number of men	98	162	163	151	131	94	227	1,026

The ideal number of children increases with the actual number of living children for both men and women. The mean ideal number of children increases from 4.5 among childless women to 7.1 among women with six or more children. This correlation between actual and ideal number is driven by at least two phenomena. First, to the extent that women and men implement their preferences, those who want smaller families will tend to achieve small families. Second, women and men may "adjust" their ideal number of children upward, as the actual number of children increases (i.e., rationalisation). It is interesting to note that the mean number of children considered ideal by men is consistently higher than the mean number considered ideal by women.

The mean ideal number of children by age and selected background characteristics is given in Table 6.7 for all women and men. Ideal family size increases substantially with age, from 4.5 for women age 15-19 to 6.9 for women 45-49; the pattern is similar for men (Figure 6.5). Urban women want one child fewer on average than rural women (4.4 vs. 5.7); this holds true for every age group. Similarly, the mean ideal family size for urban men is one child fewer than that of rural men. The ideal number of children for women in Zanzibar is higher than that for women on the mainland (6.9 vs. 5.4).

Table 6.7 Mean ideal number of children by background characteristics

Mean ideal number of children for all women and all men by age and selected background characteristics, and for all men, Tanzania 1996

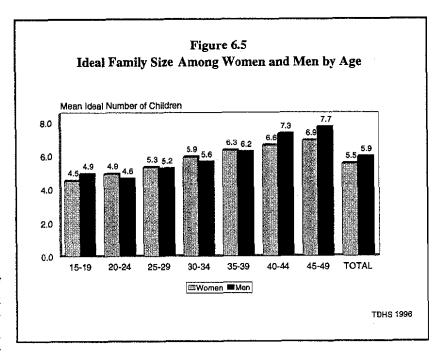
Background				Age of	woman			Total women 15-49	Total men
characteristic	15-19	20-24	25-29	30-34	35-39	40-44	45-49		15-59
Residence								· · · · · · · · · · · · · · · · · · ·	
Mainland	4.5	4.8	5.3	5.8	6.3	6.6	6.9	5.4	5.8
Total urban	3.7	3.9	4.3	4.8	5.2	5.5	6.3	4.4	4.8
Dar es Salaam city	3.6	3.8	4.3	4.5	5.0	5.6	6.6	4.3	4.4
Other urban	3.7	4.0	4.3	4.9	5.3	5.4	6.2	4.5	4.9
Total rural	4.7	5.2	5.6	6.1	6,6	6.8	7.0	5.7	6.2
Zanzibar	5.9	6.5	6.3	8.0	8.5	(7.4)	(8.0)	6.9	7.5
Zone									
Coastal	4.3	4.5	4.9	5.6	5.7	6.1	6.6	5.1	5.5
Northern Highlands	4.5	4.7	5.5	5.5	5,9	6.1	5.2	(5.2)	6.3
Lake	5.0	5.6	5.8	6.5	6.9	7.1	7.3	6.0	6.2
Central	4.3	4.9	5.4	5.7	6.7	6.4	6.3	5.4	5.9
Southern Highlands	4.2	4.5	5.0	5.7	6.7	6.6	7.4	5.3	5.4
Southern	4.1	4.4	4.8	5.3	5.7	6.5	7.5	5.1	5.9
Education									
No education	5.4	6.0	6.4	7,1	7.2	7.2	7.5	6.8	7.9
Primary incomplete	4.5	5.4	5.7	5.9	6.4	6.3	6.2	5.5	6.4
Primary complete	4,4	4.6	5.1	5,3	5.3	5.3	5.3	4.9	5.3
Secondary+	3. <b>6</b>	3.7	3.8	5.0	(4.8)	•	*	4.0	4.7
Total women	4.5	4.9	5.3	5.9	6.3	6.6	6.9	5.5	NA
Total men	4.9	4.6	5.2	5.6	6.2	7.3	7.7	NA	5.9

Note: The ideal number of children for men 50-59 is 8.8. Figures in parentheses are based on 25-49 cases; an asterisk indicates that a figure is based on fewer than 25 cases and has been suppressed. NA = Not applicable.

Zonal variations reveal that women in the Coastal and Southern zones have the lowest mean ideal family size (5.1), while those in the Lake zone have the highest (6.0). Highly educated women exhibit a lower mean ideal number of children of 4.0, while those with no education report a higher mean of 6.8 children. As far as education is concerned, men display a similar pattern to that of women.

### 6.4 Wanted and Unwanted Fertility

The level of unwanted fertility can be measured using the 1996 TDHS questions for each child born in the five years preceding the survey and any current pregnancy to determine whether the pregnancy was planned (wanted then), wanted but at a later time (mistimed) or unwanted (wanted no more children). The answers to these questions provide some insight into the degree to which couples can control fertility. The validity of the answers depends on the extent to which respondents were conscious of how they viewed the pregnancy at the time and how honestly they report. The limitation of such measures is that mistimed or unwanted pregnancies may turn



out to be wanted children after birth and lead to rationalisation. Therefore, the proportion of births that are unwanted at the time of conception are likely to be underestimated.

Table 6.8 shows the percent distribution of births (including current pregnancy) in the five years preceding the survey by fertility planning status, according to birth order, and mother's age at birth.

Seventy-five percent of the births in the past five years were wanted at the time of conception, while 15 percent were mistimed, and 9 percent were not wanted at the time they were conceived. percentage of births that were mistimed or unwanted increases from 18 percent for first order births to 28 percent for fourth or higher order births. A much larger proportion of births to women more than 35 years old than births to younger women are unwanted.

Table 6.9 shows the total wanted fertility rates and the actual total fertility rates for the three years preceding the survey, by selected background characteristics. The wanted fertility rate is calculated in the

Table 6.8 Fertility planning state	able 6.8 Fertility planning	status
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Percent distribution of births in the five years preceding the survey and current pregnancies by fertility planning status, according to birth order and mother's age at birth, Tanzania 1996

Brata des	Planning	status of co	nception			Number	
Birth order and mother's age at birth	Wanted then	Wanted later	Not wanted	Missing	Total	of births <sup>1</sup>	
Birth order							
1	81.1	8.0	9.7	1.2	100.0	1,651	
1 2 3	76.5	16.8	6.2	0.5	100.0	1,365	
3	74.3	20.0	4.7	1.0	100.0	1,162	
4+	70.7	16.7	11.5	1.1	100.0	3,530	
Age at birth							
<20	77.1	10.8	1 <b>1.0</b>	1.1	100.0	1,251	
20-24	76.1	16.5	6.3	1,1	100.0	2,298	
25-29	74.3	18.5	6.4	8.0	100.0	1,833	
30-34	76.2	14,3	8.6	0.9	100.0	1,229	
35-39	69.4	14.6	14.7	1.3	100.0	731	
40-44	63.4	12.8	22.8	0.9	100.0	302	
45-49	47.1	12.2	38.1	2.6	100.0	64	
Total	74.5	15.3	9.2	1.0	100.0	7,708	

Includes current pregnancies.

same manner as the total fertility rate, but unwanted births are excluded from the numerator. For this purpose, unwanted births are defined as those that exceed the number considered ideal by the respondent. A comparison of the two rates suggests the potential impact of the elimination of unwanted births.

Overall, the wanted total fertility rate is 12 percent lower than the actual total fertility rate. If all unwanted births were to be eliminated, the total fertility rate in Tanzania would be 5.1 children per woman which is consistent with the reported ideal family size. The wanted fertility rate reported by women interviewed in the 1996 TDHS is 0.5 (half a child) lower than it was at the time of the TDHS 1991-92 (5.1 in 1996 vs. 5.6 in 1991-92) suggesting a move towards smaller family norms. Women in the Lake zone present both the highest total wanted fertility (6.0) as well as the highest total fertility rate (7.0). The gap between the wanted and actual total fertility rates is also somewhat larger among women in the Lake zone. The gap is smaller for women with secondary or higher education than those with lower education.

#### Table 6.9 Wanted fertility rates

Total wanted fertility rates and total fertility rates for the three years preceding the survey, by selected background characteristics, Tanzania 1996

Background characteristic	Total wanted fertility rate	Total fertility rate
Residence		·
Mainland	5.1	5.8
Total urban	3.5	4.1
Dar es Salaam city	3.0	3.4
Other urban	3.7	4.4
Total rural	5.5	6.3
Zanzibar	(5.2)	(5.9)
Zone		
Coastal	4.3	4.9
Northern Highlands	4.9	5.7
Lake	6.0	7.0
Central	5.3	6.1
Southern Highlands	4.9	5.4
Southern	4.4	4.9
Education		
No education	5.6	6.4
Primary incomplete	5.0	5.9
Primary complete	4.6	5.4
Secondary+	3.0	3.2
<b>T</b> otal	5.1	5.8

Note: Rates are based on births to women 15-49 in the period 1-36 months preceding the survey. The total fertility rates are the same as those presented in Table 3.2. The total fertility rates in parentheses are based on 500-999 women age 15-49.

### CHAPTER 7

### INFANT AND CHILD MORTALITY

This chapter presents estimates of levels, trends, and differentials of neonatal, postneonatal, infant, and childhood mortality among children under five years of age in Tanzania. In addition, information is presented on high-risk fertility behaviour among Tanzanian women. The data presented here are important not only in the understanding of the demographic profile, but also in the design of policies and programmes aimed at the reduction of infant and child mortality and the high risk to mothers arising out of childbirth.

## 7.1 Assessment of Data Quality

The rates of childhood mortality presented in this chapter are defined as follows:

- Neonatal mortality (NN): the probability of dying within the first month of life
- Postneonatal mortality (PNN): the arithmetic difference between infant and neonatal mortality
- Infant mortality  $({}_{1}q_{0})$ : the probability of dying between birth and the first birthday
- Child mortality (491): the probability of dying between exact age one and the fifth birthday
- Under-five mortality (q<sub>0</sub>): the probability of dying between birth and the fifth birthday.

All rates are expressed as deaths per 1,000 live births, except child mortality which is expressed as deaths per 1,000 children surviving to the first birthday.

The mortality rates presented in this chapter are calculated from information drawn from questions asked in the birth history section of the female questionnaire. Preceding the birth history, probing questions are posed on the aggregate childbearing experience of respondents (i.e., the number of sons and daughters who live with the mother, the number who live elsewhere, and the number who have died). In the birth history, for each live birth, information is collected on sex, month and year of birth, survivorship status and current age, and age at death if the child died.

In theory, information from birth histories gives the most robust estimates of infant and child mortality, short of an actual birth and death registration. However, in practice, this information may suffer from problems. Prominent among these are the omissions of some births and deaths, especially infants that died shortly after birth, and the misstatement of date of birth and age at death. Omission of infant deaths is usually most severe for deaths which occur early in infancy. An examination of the 1996 TDHS data on infant and child mortality indicates that the data are of good quality and that there are no serious biases in reporting. Detailed discussions on data quality are given in Appendix C.

## 7.2 Levels and Trends in Infant and Child Mortality

Table 7.1 presents neonatal, postneonatal, infant, child, and under-five mortality rates for three five-year periods, namely, 0-4, 5-9, and 10-14 years before the survey. Looking at the most recent period (0-4 years before the survey or mid-1991 to mid-1996), approximately two-thirds of the deaths among children under five occurred during the first year of life: the infant mortality rate stands at 88 per 1,000 births. The neonatal

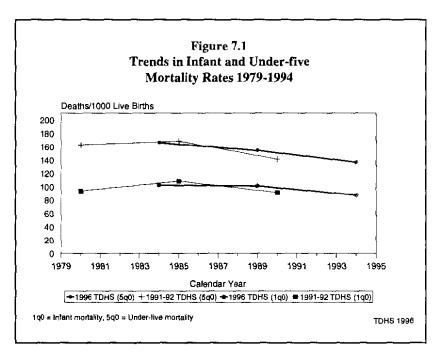
mortality rate (mortality in the first month of life) is low, 32 per 1,000 live births. while postneonatal mortality is 56 deaths per 1,000 live births. Under-five mortality in Tanzania is 137 per 1,000 live births. This is quite a high level of mortality because almost one in every seven children dies before the fifth birthday.

Results from the 1996 TDHS suggest a marked decline in child mortality over the years. All mortality rates in Table 7.1, with the exception of postneonatal mortality, have declined steadily over the 15 years before the survey, with an 18 percent decline in under-five mortality, a 24 percent decline in child mortality, and a 14 percent decline in infant mortality. However, the biggest improvement was made in neonatal mortality with a decline of 32 percent. There is evidence of a decline when mortality rates in the 1996 TDHS are compared with the 1991-92 TDHS. For example, the infant mortality rate has declined from 92 to 88 deaths per 1,000 births and under-five mortality has declined from 141 to 137 (Figure 7.1).

Table 7.1	Infant and child mortality
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Infant and child mortality rates by five-year periods preceding the survey, Tanzania 1996

Years preceding survey	Neonatal mortality (NN)	Postneonatal mortality (PNN)	Infant mortality $\binom{1}{1}q_0$	Child mortality $\binom{4}{4}$	Under-five mortality $({}_{5}\mathbf{q}_{0})$
0-4	31.7	55.7	87.5	53.7	136.5
5-9	41.5	60.1	101.5	58.5	154.1
10-14	46.8	55.4	102.3	70.8	165.9



### 7.3 Socioeconomic Differentials in Childhood Mortality

Differentials in the various mortality rates by selected background characteristics are presented in Table 7.2. The table focuses largely on basic socioeconomic characteristics, including urban-rural areas, zones, mother's educational level, and maternal care prior to birth. A 10-year period (1987-1996) is used to calculate the mortality estimates in order to have a sufficient number of cases in each category, except maternity care, for which a three-year period is used. The rates are based on a sufficient number of cases in each category to ensure statistically reliable estimates.

Mortality is consistently lower in urban than rural areas (Figures 7.2 and 7.3). In the 10 years preceding the survey, infant mortality is about 14 percent lower and under-five mortality is 19 percent lower in urban than in rural areas on the mainland. There are considerable variations in mortality by zones. Infant mortality rates are the lowest (41 per 1,000 live births) in the Northern Highlands. Except for this zone, infant mortality is about 100 per 1,000 live births in all other zones.

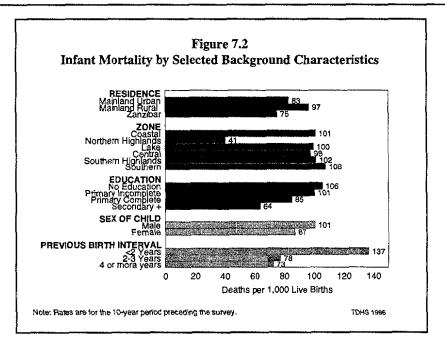
Table 7.2 Infant and child mortality by background characteristics

Infant and child mortality rates for the 10-year period preceding the survey, by residence, zone, education, and medical maternity care, Tanzania 1996

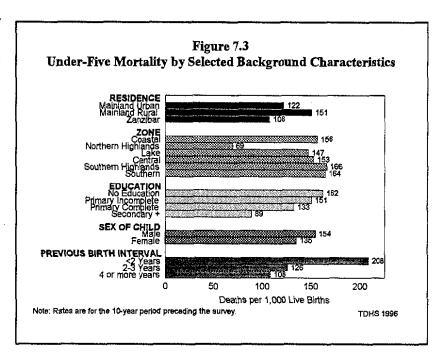
	Neonatal	Post- neonatal	Infant	Child	Under-five
Background	mortality	mortality	mortality	mortality	mortality
characteristic	(NN)	(PNN)	$(_{1}\mathbf{q}_{0})$	( <sub>4</sub> <b>q</b> <sub>1</sub> )	( <sub>5</sub> q <sub>0</sub> )
Residence					
Mainland	36.4	58.4	94.7	56.6	146.0
Total Urban	33.5	49.6	83.1	42.6	122.2
Dar es Salaam city	28.4	42.5	70.9	42.0	110.0
Other Urban	35.5	52.3	87.8	42.8	126.8
Total Rural	37.0	60.2	97.1	59.6	150.9
Zanzibar	(34.6)	40.7	75.3	34.8	107.5
Zone					
Coastal	40.7	60.5	101.3	61.0	156.0
Northern Highlands	18.5	22.1	40.6	30.0	69.3
Lake	36.9	63.1	100.0	52.4	147.1
Central	39.8	58.3	98.1	60.6	152.7
Southern Highlands	41.5	60.0	101.5	<b>71.</b> 7	165.9
Southern	36.0	71.9	107.9	63.2	164.2
Education					
No education	39.9	66.0	105.9	62.6	161.9
Primary incomplete	35.8	64.7	100.6	55.6	150.6
Primary complete	33.9	51.1	85.0	52.2	132.7
Secondary+	(36.9)	27.0	63.9	26.6	88.8
Medical maternity care <sup>1</sup>					
No antenatal or delivery care Either antenatal or	49.7	102.7	152.4	NA	NA
delivery care Both antenatal and	29.4	57.5	86.9	NA	NA
delivery care	31.9	47.5	79.3	NA	NA
Total	36.3	57.8	94.1	55.9	144.8

Note: Figures in parentheses are rates based on 250-499 births.  $^{\rm 1}$  Refers to births in the three years before the survey.

NA = Not applicable.



As expected, education of the mother displays a strong negative relationship with infant and child mortality. Children born to mothers with education suffer the highest mortality. The under-five mortality of children born to mothers with incomplete primary education is 7 percent lower than that for children whose mothers have no education. At higher levels of education the effect is even more dramatic. It can be observed that educating women up to secondary and higher level reduces under-five mortality rates by nearly half.



It is also clear from Table 7.2 that the type of

maternity care women receive is crucial in infant and child survival. Mothers who receive neither antenatal nor delivery care experience the highest neonatal and infant mortality. Receiving any medical care, whether antenatal or delivery care, reduces mortality substantially. The information suggests that if all Tanzanian women today were to receive medical care either during pregnancy or at delivery, early childhood mortality would be reduced by more than 40 percent. On the other hand, if Tanzanian mothers received medical care both during the antenatal period and during delivery, postneonatal and infant mortality would be cut in half and neonatal mortality would be cut by more than one-third.

# 7.4 Demographic Differentials in Mortality

Besides the socioeconomic differentials, demographic factors of both mother and child have been found to influence infant and child mortality to a great extent. These include sex of the child, age of mother, birth order, length of previous birth interval, and the mother's perception of the size of the child at birth. The relationship between these demographic characteristics and mortality is shown in Table 7.3.

Male children experience higher mortality than their female counterparts. Under-five mortality rates for males and females are 154 and 135 deaths per 1,000 live births, respectively. The excess mortality among male children does not diminish after infancy as expected.

The relationship between maternal age (at birth) and childhood mortality is U-shaped, being much higher among children born to mothers age less than 20 or more than 40 years of age. As expected first births and higher order births (order 7 or higher) experience higher mortality. For example, infant mortality rate for first births and births of order seven and higher is around 110, compared with 82-86 for births of order 2-6.

A marked relationship exists between the length of the preceding birth interval and risk of early childhood mortality. The 1996 TDHS data show that short birth intervals significantly reduce a child's chance of survival (Figures 7.2-7.3). Children born less than two years after a preceding sibling are almost twice as likely to die in infancy as those born four or more years after a preceding sibling (137 vs. 73 per 1,000). During ages one to four years, children born after a short interval are more than twice as likely to die as their counterparts born after an interval of four or more years (83 vs. 38 per 1,000). These findings suggest the need to reduce mortality risks for Tanzanian children by promoting family planning use and traditional practices such as breastfeeding, to space births further apart.

Table 7.3 Infant and child mortality by biodemographic characteristics

Infant and child mortality rates for the 10-year period preceding the survey, by selected biodemographic characteristics, Tanzania 1996

Biodemographic characteristic	Neonatal mortality (NN)	Post- neonatal mortality (PNN)	Infant mortality (1 <b>q</b> <sub>0</sub> )	Child mortality (4Q1)	Under-five mortality (5q <sub>0</sub> )
Sex of child					
Male	39.9	60.9	100,8	59.3	154.2
Female	32.6	54.5	87.1	52.4	134.9
Age of mother at birth					
< 20	52.2	67.7	120.0	63.7	176.1
20-29	28.9	56.5	85.4	<b>5</b> 4,1	134.9
30-39	39.2	54.1	93.4	50.3	139.0
40-49	43.0	52.2	95.2	86.2	173.2
Birth order					
1	44.1	64.2	108.3	50.4	153.2
2-3	30.7	55.4	86.1	60.9	141.7
4-6	29.5	52.8	82.3	51.0	129.1
7+	49.0	62.9	111.9	62.5	167.4
Previous birth interval					
< 2 years	54.9	81.9	136.8	82.7	208.2
2-3 years	29.7	47.8	77.5	52.3	125.8
4 or more years	20.6	52.1	72.7	38.2	108.2
Size at birth <sup>1</sup>					
Small or very small	73.7	74.7	148.4	NA	NA
Average or larger	26.6	50.7	77.3	NA	NA
Total	36.3	57.8	94.1	55.9	144.8

<sup>&</sup>lt;sup>1</sup> Refers to births in the three years before the survey.

NA = Not applicable.

A child's size at birth is an important determinant of its survival during infancy. In the 1996 TDHS, mothers were asked whether their young children were very small, small, average, large, or very large at birth. This type of subjective assessment has been shown to correlate closely with actual birth weight. Newborns perceived by their mothers to be small or very small are much more likely to die in the first month of life than those perceived as average or larger in size. Neonatal and infant mortality is very high for children who are reported being small at birth by their mothers.

## 7.5 High-Risk Fertility Behaviour

This section examines the relative importance of under-five mortality risk factors. Research has shown that infants and children have a greater probability of dying if they are born to mothers who are too young or too old, if they are born after a short birth interval, or if they are of high birth order. In the analysis of the effects of high-risk fertility behaviour on child survival, a mother is classified as "too young" if she is less than 18 years of age, and "too old" if she is more than 34 years of age at the time of delivery. A "short birth interval" is defined as a birth occurring less than 24 months after the previous birth, and a child is of "high birth order" if the mother had previously given birth to three or more children (i.e., if the child is of birth order four or higher). Children can be further cross-classified by combinations of these characteristics. Column one of Table 7.4 shows the percentage of births occurring in the five years before the survey that fall into these various risk categories.

Results show that about 58 percent of the children born in the five years before the survey fall into at least one risk category; 20 percent of births are characterised by two or more risk factors. The most serious single mortality risk is being born to mothers more than 34 years of age (risk is 1.6), however very few births fall into this single category. Also at elevated risk of early mortality are children who are born to mothers under age 18 or after a short birth interval (<24 months). These births suffer a mortality risk about 37 percent higher than births not in any high-risk category. In all, 6 percent of births occur to mothers below age 18 and another 6 percent occur less than 24 months after a prior birth.

Although higher birth orders do not constitute any increased mortality risk for the children, it is important to note that when this phenomenon is combined with short birth intervals, the risk of mortality rises by more than 39 percent. A combination of young age at birth and short birth interval contributes to the highest risk of mortality (risk is 2.4).

The third column of Table 7.4 shows that about three-fourths of currently married women have the potential for a high-risk birth. Three in ten women are at risk from a single risk, while 44 percent are at risk from multiple risk factors.

Similar patterns of high-risk fertility behaviour were also found in the 1991-92 TDHS.

### Table 7.4 High-risk fertility behaviour

Percent distribution of children born in the five years preceding the survey by category of elevated risk of mortality, and the percent distribution of currently married women at risk of conceiving a child with an elevated risk of mortality, by category of increased risk, Tanzania 1996

	Births in preceding t		Percent- age of	
Risk category	Per- centage of births	Risk ratio	currently married women	
Not in any high-risk category	25.9	1.00	18.8 <sup>b</sup>	
Unavoidable risk category First births to women 18-34	16.1	1.16	6.8	
Single high-risk category				
Mother's age <18	5.6	1.37	0.8	
Mother's age >34	0.4	1.58	3.2	
Birth interval <24 months	5.6	1.36	9.6	
Birth order >3	26,3	0.84	17.2	
Subtotal	37.9	1.00	30.7	
Multiple high-risk category				
Multiple high-risk category Age <18 & birth interval <24 <sup>c</sup> months	0.4	2.38	0.5	
Age >34 & birth interval <24 months	0.0	-	0.1	
Age >34 & birth order >3	11.9	1.07	24.0	
Age >34 & birth interval <24 months				
& birth order >3	1.9	2.28	5.7	
Birth interval <24 months				
& birth order >3	5.9	1.39	13.3	
Subtotal	20.0	1.30	43.7	
In any high-risk category	57.9	1.10	74.4	
Total	100.0	_	100.0	
Number of births	6,916	_	5,411	

Note: Risk ratio is the ratio of the proportion dead of births in a specific high-risk category to the proportion dead of births not in any high-risk category.

Women were assigned to risk categories according to the status they would have at the birth of a child, if the child were conceived at the time of the survey: age less than 17 years and 3 months, age older than 34 years and 2 months, latest birth less than 15 months ago, and latest birth of order 3 or higher.

Includes sterilised women.
Includes the combined categories Age <18 and birth order >3.

#### CHAPTER 8

#### MATERNAL AND CHILD HEALTH

This chapter presents findings from the 1996 TDHS in three areas of importance to maternal and child health. These are maternal care and characteristics of the newborn, childhood vaccinations, and common childhood illnesses and their treatment. One of the priorities of the Ministry of Health of the Tanzania Government is the provision of medical care during pregnancy and at delivery which is essential for the survival of both the mother and infant. The 1996 TDHS results provide another opportunity to assess progress in the implementation of child survival programmes and to identify the characteristics of nonusers of maternal and child health services and hence identify women whose babies are at risk. In this way, the information will assist policymakers in the planning of appropriate strategies to improve maternal and child care.

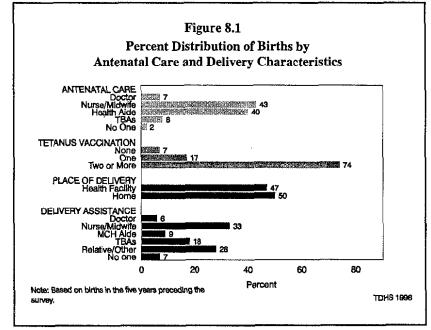
### 8.1 Antenatal Care

### Prevalence and Source of Antenatal Checkup

Table 8.1 shows the percent distribution of live births in the five years preceding the survey by source of antenatal care received during pregnancy, according to maternal and background characteristics. Interviewers recorded all persons a woman may have seen for care, but in the table, only the provider with the highest qualification is considered (if more than one person was seen). The results of the survey indicate very high utilisation of antenatal care in Tanzania for most pregnancies (97 percent). In most cases, antenatal care

was provided by a trained nurse or midwife (43 percent), or a health aide (40 percent). Doctors provided about 7 percent of antenatal care, while traditional birth attendants (TBAs) provided 8 percent of antenatal care. During the five-year period preceding the survey, mothers who did not receive antenatal care accounted for only 2 percent of live births (Figure 8.1).

Source of antenatal care by women's age and birth order of the child varies slightly. Younger women are more likely to receive antenatal care from a more medically skilled provider than older women. For example, 51 percent of women below age 20



were seen by a doctor, trained nurse, or midwife, compared to 43 percent of women 35 years or older. Similarly, lower order births are more likely to receive antenatal care from a doctor, trained nurse, or trained midwife.

Women in urban areas were more likely to receive antenatal care from a doctor, trained nurse, or midwife, while women in rural areas were more likely to receive antenatal care from health aides and TBAs.

Table 8.1 Antenatal care

Percent distribution of births in the five years preceding the survey by source of antenatal care during pregnancy, according to selected background characteristics, Tanzania 1996

Background characteristic	Doctor	Nurse/ Trained midwife	Health aide	Traditional birth attendant <sup>2</sup>	No one	Missing	Total	Number of births
Mother's age at birth								· · · · · · · · ·
< 20	8.8	42.1	38.7	7.4	1.8	1.2	100.0	1,142
20-34	6.6	43.8	39.3	7.3	2.0	0.9	100.0	4,796
35+	4.5	38.9	43.3	9.3	3.4	0.6	100.0	979
Birth order								
1	10.0	42.3	38.7	6.3	1.7	0.1	100.0	1,474
2-3	6.8	43.9	38.8	7.4	2.2	0.8	100.0	2,271
4-5	6.1	44.6	39.4	6.9	1.9	1.2	100.0	1,502
6+	4.2	40.3	42.3	9.7	2.7	0.8	100.0	1,669
Residence								
Mainland	6.8	43.1	39.2	7.8	2.2	0.9	100.0	6,693
Total urban	14.5	62.9	18.8	2.7	0.4	0.8	100.0	1,165
Dar es Salaam city	24.0	64.1	10.1	0.8	0.8	0.3	100.0	327
Other urban	10.7	62.4	22.3	3.4	0.2	1.0	100.0	838
Total rural	5.2	38.9	43.4	8.9	2.6	0.9	100.0	5,529
Zanzibar	2.5	34.9	58.6	2.6	0.1	1.3	100.0	223
Region								
Dodoma	14.4	39.7	38.6	2.5	4.3	0.4	100.0	312
Arusha	11.9	36.0	28.4	11.7	11.2	0.7	100.0	547
Kilimanjaro	6.4	36,4	44.9	11.3	0.4	0.7	100.0	281
Tanga	2.2	21.1	56.2	19.5	0.3	0.6	0.001	365
Могодого	4.3	52.3	33.4	6.3	3.0	0.7	100.0	327
Coast	13.2	50.5	33.5	2.2	0.0	0.5	0.001	104
Dar es Salaam	22.2	66.1	10.1	0.7	0.7	0.2	100.0	377
Lindi	12.7	63.2	20.9	0.0	0.5	2.7	100.0	129
Mtwara	3.8	60.5	34.7	0.3	0.0	0.7	100.0	235
Ruvuma	1.0	52.4	41.1	4.5	0.5	0.5	100.0	250
Iringa	2.0	35.1	52.7	8.4	1,4	0,3	100.0	355
Mbeya	5.8	73.4	17.4	1.7	1.2	0.4	100.0	363
Singida	7.5	50.7	39.3	0.0	2.2	0.3	100.0	258
Tabora	0.7	13.3	69.3	13.3	0.7	2.7	100.0	171
Rukwa	2.8	53.5	35.1	3.4	5.1	0.0	100.0	242
Kigoma	4.2	14.5	63.4	14.5	1.4	2.0	100.0	342
Shinyanga	1.2	42.9	41.5	12.4	1.2	0.9	0.001	635
Kagera	8.2	19.2	61.0	8.8	0.6	2.1	100.0	540
Mwanza	2.9	51.3	35.4	8.9	1.6	0.0	100.0	580
Мага	15.2	56.4	18.2	5.3	1.3	3.6	100.0	281
Mother's education								
No education	4.7	35.9	42,7	10.2	5.0	1.4	100.0	2,048
Primary incomplete	6.7	42.9	37.9	10.1	1.9	0.6	100.0	1,138
Primary complete	7.2	46.2	39.3	5.8	0.7	0.8	100.0	3,493
Secondary+	15.4	51.8	30.8	0.7	0.4	0.9	100.0	236
Total	6.7	42.8	39.8	7.6	2.1	0.9	100.0	6,916

If the respondent mentioned more than one provider, only the most qualified provider was considered. Traditional midwife.

In the mainland urban areas, 15 percent of births received antenatal care from a doctor, compared with 5 percent in rural areas. Moreover, 63 percent of births to women in urban areas received antenatal care from a trained nurse or midwife compared to 39 percent in rural areas. These differences reflect the fact that doctors, trained nurses, and midwives are concentrated mainly in urban areas, making them more accessible to urban women. Doctors, nurses, and midwives are prominent in the city of Dar es Salaam where they provided antenatal care for 24 percent and 64 percent of births, respectively. In Zanzibar, only 3 percent of births received antenatal care from a doctor and 35 percent from a trained nurse or midwife. There are regional variations in the utilisation of antenatal care. Apart from the Dar es Salaam region, which is predominantly urban, more than 10 percent of births in Mara (15 percent), Dodoma (14 percent), Coast and Lindi (13 percent), and Arusha (12 percent) received antenatal care from a doctor. Regions which recorded the highest percentages of antenatal care from a nurse or midwife include Mbeya (73 percent), Dar es Salaam (66 percent), Lindi (63 percent), Mtwara (60 percent), Mara (56 percent), Rukwa (54 percent), Morogoro and Ruvuma (52 percent), and Coast, Singida, and Mwanza (51 percent). At the other end, Arusha (11 percent) had the highest percentage of births that did not receive antenatal care, followed by Rukwa (5 percent), and Dodoma (4 percent).

Births to women with no education were less likely to receive antenatal care than births to women who had at least completed primary education. The proportion of births to women who obtained antenatal care from a doctor increases from 5 percent among women with no education to 15 percent among women with secondary or higher education. Likewise, antenatal care from a nurse or midwife increases from 36 percent of births to women with no education to 52 percent of births to women with secondary or higher education. Births to women with no education were more likely to receive antenatal care from a health aide (43 percent) or birth attendant (10 percent) than births to women with secondary or higher education (31 percent and 1 percent, respectively).

### **Number and Timing of Antenatal Visits**

Pregnancy monitoring and detection of complications are the main objectives of antenatal care. The advantage of starting antenatal care within the first three months of pregnancy is that a woman's normal baseline health can be assessed and monitoring can be done regularly. Obstetricians generally recommend that antenatal visits be made monthly for the first seven months of pregnancy, fortnightly in the eighth month, and then weekly until birth. If the first visit is made during the third month of pregnancy, this schedule translates to a total of about 12 to 13 visits. To detect possible delivery complications at least one visit is required during the last week of pregnancy.

Table 8.2 presents data on the number of antenatal care visits made and stages of pregnancy at the first visit. For 70 percent of the births in the five years before the survey, mothers made four or more antenatal care visits and for 23 percent of births, mothers made between two and three visits. For two percent of the births, women did not make any antenatal visits. The median number of antenatal care visits was 3.9 which suggests that many women make fewer than the recommended number of 12 visits. This may be related to the stage of pregnancy at the first antenatal care visit. For 61 percent of births, women received antenatal care before the sixth month of gestation and for 35 percent of births, women did not receive antenatal care until the sixth or seventh month of pregnancy. The median time at which mothers started antenatal visits is 5.6 months.

Table 8.2 Number of antenatal care visits and stage of pregnancy

Percent distribution of live births in the past five years by number of antenatal care visits, and by the stage of pregnancy at the time of the first visit, Tanzania 1991-1996

Characteristic	TDHS 1991-92	TDHS 1996	
Number of visits			
None	3.6	2.1	
1	1.1	1.5	
2-3 visits	23.5	22.5	
4+ visits	69.5	69.5	
Don't know/missir	ng 2.4	4.4	,
Total	100.0	100.0	
Median	5.0	3.9	
Number of months pregnant at first vi			l
No antenatal care	3.6	2.1	
< 6 months	60.1	60.5	
6-7 months	34.0	34.7	
8+ months.	1.7	1.7	
Don't know/missir	ıg 0.5	1.0	
Total	100.0	100.0	
Median	5.6	5.6	
Number of births	8,032	6,916	

When the 1996 TDHS data on antenatal care are compared with the 1991-92 results, the proportion of births for whom the mother received antenatal care and timing of the first visit have remained constant except that the median number of visits has declined by one (Table 8.2).

#### **Tetanus Toxoid Vaccination**

Tetanus toxoid injections are given during pregnancy for the prevention of neonatal tetanus, a common cause of death among infants in many settings around the world. For full protection, a pregnant woman needs two doses of the toxoid. However, if a woman has been vaccinated during a previous pregnancy, she may only require one dose for a current pregnancy. Five doses are considered adequate to provide lifetime protection. To estimate the extent of tetanus toxoid coverage during pregnancy, women were asked to report if they received these injections against tetanus during pregnancy for all births in the five-year period preceding the survey. The results are presented in Table 8.3 (also in Figure 8.1).

In Tanzania, almost all women (91 percent) received tetanus toxoid vaccination during pregnancy, with women receiving two or more doses of vaccine for almost 75 percent of births and only one dose of tetanus toxoid vaccine for 17 percent of births. Younger women and women with Iow parity are more likely to have received two or more doses of tetanus toxoid than their counterparts. Compared with rural births, births occurring in urban areas are slightly more likely to have received two or more doses of tetanus toxoid. In the mainland, 82 percent of births to urban mothers received two or more tetanus toxoid injections during pregnancy compared to 73 percent of births to rural mothers. Mothers in Zanzibar were much less likely to receive two doses of tetanus toxoid (68 percent of births) than their counterparts in the mainland (75 percent).

Tetanus vaccination status varies among regions. In three regions—Arusha, Morogoro, and Rukwa—more than 10 percent of births had no tetanus toxoid injections during pregnancy. In all regions, more than 60 percent of all births in the five-year period preceding the survey received at least two doses of tetanus toxoid, but the Coast, Dar es Salaam, Lindi, Mtwara, Tabora and Tanga regions exceeded 80 percent coverage. There is a positive relationship between mothers' education and tetanus toxoid coverage. The proportion of births whose mothers received two or more doses of tetanus toxoid during pregnancy increases from 69 percent among women with no education to 77 percent among those with secondary or higher education.

#### 8.2 Medical Care at Delivery

#### Place of Delivery

An important element in reducing health risks for mothers and children are increasing the proportion of babies that are delivered in medical facilities. Proper medical attention and hygienic conditions during delivery can reduce the risk of complications and infections that can cause death or serious illness to either the mother or the baby. Table 8.4 presents the distribution of births in the five years preceding the survey by place of delivery.

Overall, 47 percent of births were delivered in a health facility, while about half of the births were delivered at home. The proportion of births delivered in a health facility decreases with mothers' age and birth order. Urban births were much more likely to take place in health facilities than rural births. Births in the mainland were also more likely to take place in health facilities than those in Zanzibar (47 and 31 percent, respectively). Four out of five births in the Dar es Salaam and Ruvuma regions were delivered at a health facility, compared with three out of five in Kilimanjaro and Tabora, and one out of two births in the Morogoro, Mtwara, and Coast regions. Mother's education is strongly related to place of delivery. The proportion of births delivered at health facilities increases from 29 percent among mothers with no education to 79 percent among mothers with secondary or higher education.

Table 8.3 Tetanus toxoid vaccinations

Percent distribution of births in the five years preceding the survey by number of tetanus toxoid injections received during pregnancy, according to selected background characteristics, Tanzania 1996

	Numb	er of tetanu				
Background characteristic	None	One dose	Two doses or more	Don't know/ missing	Total	Number of births
Mother's age at birth						
< 20	5.9	14.1	78.5	1.4	100.0	1,142
20-34	6.6	17.7	74.0	1.7	100.0	4,796
35+	10.1	18.0	70.7	1.1	100.0	979
Birth order						
1	4.7	13.4	80.4	1.5	100.0	1,474
2-3	7.1	17.0	74.5	1.4	100.0	2,271
4-5	7.4	18.5	72.0	2.2	100.0	1,502
6+	8.6	19.5	70.6	1.3	100.0	1,669
Residence						
Mainland	7.0	16.9	74.5	1.6	100.0	6,693
Total urban	2.9	14.0	81.9	1.1	100.0	1,165
Dar es Salaam city	1.8	13.7	83.5	1.0	100.0	327
Other urban	3.3	14.1	81.3	1.2	100.0	838
Total rural	7.9	17.5	72.9	1.6	100.0	5,529
Zanzibar	5.3	24.4	68.0	2.3	100.0	223
Region						
Dodoma	9,0	12.6	77.6	0.7	100.0	312
Arusha	13.5	18.6	65.6	2.3	100.0	547
Kilimanjaro	3,9	19.4	76.3	0.4	100.0	281
Tanga	2.2	10.9	84.0	2.9	100.0	36 <b>5</b>
Morogoro	10.9	17.5	70.9	0.7	100.0	327
Coast	3,3	13.2	80.2	3.3	100.0	104
Dar es Salaam	1.6	13.9	83.6	0.9	100.0	377
Lindi	5.9	9.5	80.9	3. <b>6</b>	100.0	129
Mtwara	3.4	15.5	80.1	1.0	0.001	235
Ruvuma	6.5	17.3	74.3	1.8	100,0	250
Iringa	7.8	20.3	71.3	0.7	100.0	355
Mbeya	6.2	13.3	79.7	0.8	100.0	363
Singida	9.7	18.7	70.5	1.1	100.0	258
Tabora	0.7	12.7	86.7	<b>0.0</b>	100.0	171
Rukwa	10.5	13.3	75.9	0.3	100.0	242
Kigoma	9.5	17.0	71.5	2.0	100.0	342
Shinyanga	9.8	24.2	64.6	1.4	100.0	635
Kagera	5.2	21.3	70.7	2.7	100.0	540
Mwanza	5.7	15.9	78.0	0.3	100.0	580
Mara	5.3	14.5	74.6	5.6	100.0	281
Mother's education						
No education	12.1	16.9	69.0	2.1	100.0	2,048
Primary incomplete	6.2	16.7	75.9	1.2	100.0	1,138
Primary complete	4.5	17.5	76.7	1.4	100.0	3,493
Secondary+	3.0	17.3	77.0	2.7	100.0	236
Total	7.0	17.2	74.3	1.6	100.0	6,916

Table 8.4 Place of delivery

Percent distribution of births in the five years preceding the survey by place of delivery, according to selected background characteristics, Tanzania 1996

	Pla	ace of deli	very		Number	
Background characteristic	Health facility	Home	Don't know/ missing	Total	of births	
Mother's age at birth	<del></del>		<del></del>			
< 20	53.3	43.5	3.2	100.0	1,142	
20-34	46.9	49.2	3.9	100.0	4,796	
35+	37.1	58.1	4.8	100.0	979	
Birth o <b>rd</b> er				1000		
1	62.1	34.9	3.0	100.0	1,474	
2-3	47.6	49.3	3.2 4.6	100.0	2,271	
4-5	41.7	53.7	4.6 5.2	100.0	1,502	
6+	35.7	59.1	5.2	100.0	1,669	
Residence	47.0	48.9	4.0	100.0	6.693	
Mainland Total urban	47.0 80.7	17.0	2.3	100.0	1,165	
Total urban	86.3	11.6	2.J 2.1	100.0	327	
Dar es Salaam city Other urban	78.6	19.0	2.4	100.0	838	
Total rural	40.0	55.7	4.4	100.0	5,529	
Zanzibar	31.2	67.4	1.4	100.0	223	
Region						
Dodoma	41.5	57.4	1.1	100.0	312	
Arusha	41.3	54.1	4.6	100.0	547	
Kilimanjaro	64.3	31.1	4.6	100.0	281	
Tanga	45.0	54.3	0.6	100.0	365	
Morogoro	54.0	44.7	1.3	100.0	327	
Coast	51.1	44.0 12.3	4.9	100.0	104	
Dar es Salaam	85.9 49.5	12.3 42.3	1.8 8.2	100.0 100.0	377 129	
Lindi	49,5 51.5	42.3 47.8	8.2 0.7	100.0	235	
Mtwara	79.8	17.8	2,4	100.0	250	
Ruvuma	46.6	53.0	0.3	100.0	355	
Iringa Mbeva	46.9	52.7	0.4	100.0	363	
Mbeya Singida	47.1	51.5	1.4	100.0	258	
Tabora	63.3	28.7	8.0	100.0	17ĭ	
Rukwa	45.6	53.5	0.8	100.0	242	
Kigoma	35.5	61.7	2,8	100.0	342	
Shinyanga	38.9	50.4	10.7	100.0	635	
Kagera	29.6	67.7	2.7	100.0	540	
Mwanza	37.6	53.8	8.6	100.0	580	
Mara	31.7	58.7	9.6	100.0	281	
Mother's education	#0 #	<i>(</i> 1 0		100.0	2.042	
No education	29.2	64.9	5.9	100.0	2,048	
Primary incomplete	40.4	56.3	3.3	100.0	1,138	
Primary complete	56.6	40.4	3.0	100.0	3,493	
Secondary+	78.5	18.0	3.5	100,0	236	
Antenatal care visits	7.0	75.9	17.1	100.0	149	
None	35.7	60.0	4,3	100.0	1,656	
1-3 visits 4 or more visits	51.5	45.8	2.7	100.0	4,805	
Don't know/missing	46.6	38.0	15.4	100.0	307	
Total	46.5	49.5	3.9	100.0	6,916	

#### **Assistance During Delivery**

The type of assistance a woman receives during childbirth has important health consequences for both mother and child. Therefore, in addition to the place of delivery, the 1996 TDHS collected data on the type of personnel who assisted during delivery. Table 8.5 shows the percent distribution of live births in the five years before the survey by type of assistance received during delivery, according to background characteristics. Overall, 6 percent were assisted by a doctor, 33 percent by a trained nurse or midwife, 9 percent by a health aide, 18 percent by a birth attendant (TBA), 28 percent by a relative or some other person, and 7 percent of all births were delivered without assistance. Maternal age and child's birth order are associated with type of assistance at delivery; births to older women and those of higher order are more likely to be delivered without any assistance, whereas first births and births to younger women tend to receive better care during delivery. This is encouraging, since first births pose greater risks than subsequent births.

As might be expected, births in urban areas are more likely to be assisted by medical personnel (doctor, trained nurse, or midwife) than rural births. Regional differences in types of assistance at delivery are also prominent. Lake regions, that is Shinyanga, Kagera, Mwanza and Mara, are least likely to receive assistance during delivery. Regions which recorded the highest proportions of births assisted by a doctor, nurse, or midwife during delivery are Dar es Salaam (87 percent), Ruvuma (68 percent), and Kilimanjaro (56 percent).

Again, mother's education is closely related to better supervision at delivery. The percentage of births assisted by doctors, nurses, and midwives increases from 21 percent of births to women with no education to 79 percent of births to women with secondary or higher education.

Not surprisingly, the more antenatal visits a woman makes while pregnant, the greater the likelihood that her baby will be delivered with assistance from medically trained staff. Among births for which mothers made no antenatal visit, only 7 percent were assisted by either doctors or nurses/midwives, compared with 42 percent of babies for whom mothers had four or more antenatal visits.

## 8.3 Characteristics of Delivery

In addition to the information regarding place of and assistance during delivery, the 1996 TDHS collected information on several other aspects relating to the delivery of births. Questions on birth weight and size of the baby at birth were included to estimate the proportion of low birth weight infants.

Table 8.6 presents the percentage of live births in the past five years that were delivered by caesarean section, and the distribution by birth weight and the mother's estimate of baby's size at birth. Based on the reports of mothers, only 2 percent of babies born in Tanzania are delivered by caesarean section. Caesarean sections are less common amongst older women, women with more children, rural women, women from Zanzibar, and those with little or no education. The Dar es Salaam and Kilimanjaro regions have the highest percentage of caesarean deliveries (5 percent), followed by Arusha (4 percent), and Tabora and Ruvuma (3 percent), while Lindi, Rukwa and Mara have less than one percent of births with caesarean deliveries.

A birth weight was reported for about half of births. Among the births for which a birth weight is reported, 89 percent (44 percent of all births) were reported to have a weight of more than 2.5 kg. Only 11 percent (5 percent of all births) were reported to have a weight of less than 2.5 kg, which is considered low birth weight.

Table 8.5 Assistance during delivery

Percent distribution of births in the five years preceding the survey by type of assistance during delivery, according to selected background characteristics, Tanzania 1996

		Attend	lant assisti	ng during deli	very			Total	
Background characteristic	Doctor	Nurse/ trained midwife	Health aide	Traditional birth attendant <sup>2</sup>	Relative/ other	No one	Don't know/ missing		Number of births
Mother's age									
at birth < 20	6.4	29 A	9.0	14.0	29.0	2.6	0.7	100.0	1,142
20-34	5.8	38.4 32.5	8.4	18.2	27.5	6.7	0.7	100.0	4,796
20-34 35+	4.5	25.3	8.1	19.5	29.6	12.6	0.3	100.0	979
Birth order									
1	9.0	43.2	10.2	13.5	22.4	1.1	0.7	100.0	1,474 2,271
2-3	5.9	33.1	8.5	17.8	28.6	5.3	0.8	100.0	2,271
4-5	4.6	29.7	7.7	18.2	29.6	9.2	0.9	100.0	1,502
6+	3.7	24.5	7.5	20.7	30.9	12.0	0.5	0.001	1,669
Residence	5.8	22.6	97	16.4	20.0	7.1	0.7	100.0	6 603
Mainland Total urban	12.0	32.6 66.0	8.7 3.7	16.4 3.5	28.8 12.6	7.1 1.5	0.7 0.6	100.0 100.0	6,693 1,165
Dar es Salaam city	16.0	71.6	0.0	3.6	7.8	0.5	0.5	100.0	327
Other urban	10.5	63.8	5.1	3.5	14.5	1.9	0.7	100.0	838
Total rural	4.5	25.6	9.7	19.1	32.2	8.2	0.7	100.0	838 5,529
Zanzibar	3.8	27.9	9.7 2.7	57.2	6.5	0.6	1.3	100.0	223
Region									
Dodoma	6.5	26.4	5.4	28.2 17.9	33.2 39.0	0.0	0.4	100.0	312 547
Arusha	8.9	28.0	4.1	17.9	39.0	1.8	0.2	100.0	547
<u>Kilimanjaro</u>	11.0	44.9	9.5	10.6	21.9	1.1	1.1	100.0	281
Tanga	1.9	24.0	13.1	21.1	39.6	0.0	0.3	100.0	365
Morogoro	7.0	37.4	7.9	27.2	20.2	0.0	0.3	100.0	327 104
Coast Dar es Salaam	6.6 15.0	44.5 71.7	4.4 0.2	24.2 4.0	19.8 7.8	0.0 0.7	0.5 0.4	100.0 100.0	377
Lindi	6.4	41.4	5.9	10.9	31.8	0.7	2.7	100.0	129
Mtwara	4.8	35.7	10.7	20.3	25.1	2.7	0.7	100.0	235
Ruvuma	5.5	62.8	9,9	5.5	14.1	1.6	0.5	100.0	250
Iringa	5.4	31.4	8.8	30.1	22.0	2.0	0.3	0.001	250 355
Mbeya	9.5	34.9	2.1	11.2	31.1	10.8	0.4	100.0	363
Singida	7.5	27.0	13.1	8.1	38.7	5.0	0.6	100.0	258 171
Tabora	2.7	46.0	15.3	4.7	24.7	5.3	1.3	100.0	171
Rukwa	1.4	34.8	11.3	29.7	16.1	6.5	0.0	100.0	242
Kigoma	3.6	19.3	13.4	15.1	40.2	7.8	0.6	100.0	342
Shinyanga	1.2	24.5	17.0	4.0	38.0	15.3 11.6	0.0	100.0	635
Kagera	3.7 4.8	15.9 26.1	7.6 7.6	25.6 13.1	33.5 26.1	22.3	2.1 0.0	100.0 100.0	540 580
Mwanza Mara	5.0	25.4	4.3	21.1	23.8	16.5	4.0	100.0	281
Mother's education									
No education	3.0	18.2	8.4	21.2	36.4	11.9	0.9	100.0	2,048
Primary incomplete	5.5	26.8	7.3	18.2	33.4	8.1	0.6	0.001	1,138
Primary complete	6.8	40.5	9.3	15.8	23.0	4.0	0.7	100.0	3,493
Secondary+	14.9	64.3	3.2	12.7	4.3	0.0	0.6	100.0	236
Antenatal care visits								400 -	
None	2.0	4.5	0.8	23.8	58.0	10. <u>1</u>	0.8	100.0	149
1-3 visits	3.8	24.8	7.8	20.9	32.7	9.7	0.3	100.0	1,656
4 or more visits	6.5	35.9	9.0	16.6	25.9	5.9	0.1	100.0	4,805
Don't know/missing	5.3	33.4	8.2	14.0	22.1	4.8	12.2	100.0	307
Total	5.7	32,5	8.5	17.7	28.0	6.9	0.7	100.0	6,916

<sup>&</sup>lt;sup>1</sup> If the respondent mentioned more than one attendant, only the most qualified attendant was considered. 
<sup>2</sup> Traditional midwife.

Table 8.6 Delivery characteristics: caesarean section, birth weight and size

Among births in the five years preceding the survey, the percentage of deliveries by caesarean section, and the percent distribution by birth weight and by the mother's estimate of baby's size at birth, according to selected background characteristics, Tanzania 1996

		Birth weight			Size of child at birth					
Background characteristic	Delivery by C-section	Less than 2.5 kg	2.5 kg or more	Don't know	Very small	Smaller than average	Average or larger	Don't know	Total	
Mother's age										
<20	3.1	8.3	45.9	45.9	4.0	8.0	86.1	1.9	1,142	
20-34	2.0	4.8	44.5	50.6	3.4	7.4	87.6	1.7	4,796	
35+	1.8	3.5	35.6	60.9	3.6	6.6	88.1	1.7	979	
Birth order										
1	3.8	9.3	53,8	36.9	4.3	9.3	84.7	1.7	1,474	
2-3	1.8	4.4	45.1	50.6	3.1	7.1	87.9	1.9	2,271	
4-5	1.5	4.3	40.4	55.3	3.1	7.6	87.6	1.7	1,502	
6+	1.5	3.5	35.0	61.5	3. <b>7</b>	5.7	89.0	1.6	1,669	
Residence	2.2	<b>.</b> .	44.	50.7	0.4	~ ^	05.5		( (00	
Mainland	2.2	5.3	44.1	50.6	3.4	7.3	87.5	1.7	6,693	
Total urban	4.2	8.4	74.1	17.5	2.0	7.2	89.4	1.4	1,165	
Dar es Salaam city		9.0	78.8	12.1	2.3	5.9	91.0	0.8	327	
Other urban	3.7	8.2	72.2	19.6	1.8	7.6	88.9	1.7	838	
Total rural	1.7	4.7	37.8	57.5	3.7	7.3	87.1	1.8	5,529	
Zanzibar	1.2	1.7	24.2	74.0	5.6	8.8	83.7	1.9	223	
Region	1.0	= 0	247	<b>50</b> 1		. <b>.</b>	04.0	1.0	212	
Dodoma	1.8	7.2	34.7	58.1	6.9	6.5	84.8	1.8	312	
Arusha	3.9	3.9	39.4	56.7	11.5	4.6	82.8	1.1	547	
Kilimanjaro	4.6	3.2	68.9	27.9 55.6	5.7	2.8	90.1	1.4	281	
Tanga	1.9 1.7	5.4 8.3	39.0 44.4	33.6 47.4	4.5	7.0	87.5 85.1	1.0	365 327	
Morogoro Coast	2.7	6.3 4.9	44.4 48.9	47.4 46.2	4.0 1.1	8.9 4.9	88.5	2.0 5.5	327 104	
Dar es Salaam	4.7	9.0	78.5	12.6	2.2	5.8	91.0	0.9	377	
Lindi	0.9	5.5	45.5	49.1	4.1	4.5	88.2	3.2	129	
Mtwara	2.1	7. <b>6</b>	48.1	44.3	4.8	4.8	89.7	0.7	235	
Ruvuma	2.9	11.5	66.8	21.7	2.9	11.5	84.8	0.7	250	
Iringa	1.7	10.1	41.2	48.6	4.1	15.5	78.7	1.7	355	
Mbeya	3.3	5.4	42.3	52.3	2.1	7.5	90.0	0.4	363	
Singida	2.2	3.1	38.4	58.5	2.5	6.1	90.0	1.4	258	
Тарога	3.3	6.7	60.7	32.7	1.3	13.3	83.3	2.0	171	
Rukwa	0.6	4.0	33.1	62,9	1.1	7.4	90.9	0.6	242	
Kigoma	1.1	4.5	45.3	50.3	1.4	10.3	82.4	5.9	342	
Shinyanga	1.2	3.5	35.7	60.8	1.4	4.6	93.9	0.0	635	
Kagera	1.2	3.4	34.1	62.5	2.1	10.7	83.5	3.7	540	
Mwanza	1.3	1.9	37.6	60.5	1.0	5.7	92.0	1.3	580	
Mara	0.7	4.6	34.3	61.1	1.0	4.6	90.4	4.0	281	
Mother's education										
No education	1.2	3.6	26.4	70.0	4.5	7.2	85.9	2.5	2,048	
Primary incomplete	1.2	6.3	37.3	56.4	4.1	8.3	86.7	0.9	1,138	
Primary complete	2.7	5.7	53.5	40.8	2.8	7.2	88.4	1.6	3,493	
Secondary+	6.0	6.0	73.6	20.4	3.4	6.2	89.1	1.3	236	
Total	2.1	5.2	43.5	<b>5</b> 1.3	3.5	7.3	87.4	1.8	6,916	

According to the respondent's own assessment of her infant's size, the majority of births (87 percent) are classified as average or large. Only 11 percent births were reported to be either small (7 percent) or very small (4 percent).

#### 8.4 Childhood Vaccinations

To obtain information about vaccination coverage, the 1996 TDHS collected information on vaccination coverage for all children born in the five years preceding the survey, although the data presented in this chapter are restricted to children who were alive at the time of the survey. The immunisation programme in Tanzania is implemented by the Ministry of Health through the Expanded Programme on Immunisation (EPI) which started in 1975. By 1986, the operation of the programme was established throughout the country (Ministry of Health, 1989). EPI in Tanzania follows the World Health Organisation's (WHO) guidelines for vaccinating children. To be considered fully vaccinated, a child should receive one dose of BCG vaccine, three doses each of DPT and polio vaccines (excluding polio 0), and one dose of measles vaccine. BCG confers protection against tuberculosis and should be given at birth or at first clinical contact; DPT protects against diphtheria, pertussis, and tetanus. DPT and polio require three vaccinations at approximately three, four, and five months of age; measles should be given at or soon after reaching nine months. WHO recommends that children receive the complete schedule of vaccinations before 12 months of age.

Information on vaccination status was collected from vaccination cards shown to the interviewer and from mothers' verbal reports. All MCH clinics in Tanzania provide "road to health" cards (MCH form No. 3) which include dates of vaccinations. If the cards were available, the interviewers recorded vaccination dates directly. If a vaccination card was presented but a vaccine had not been recorded on the card as having been given, the mother was asked to recall whether that particular vaccine had been given. The mother was then asked if the child had received other vaccinations that were not recorded on the card, and if so, they too were noted on the questionnaire. If the mother was not able to provide a card for the child, she was asked to recall whether or not the child had received BCG, polio, DPT (including the number of doses for each), and measles vaccinations.

Table 8.7 presents the vaccination coverage among children age 12-23 months, according to the source of the information used to determine coverage. The data presented in this table are for children age 12-23 months, thereby including only those children who have reached the age by which they should be fully vaccinated. According to information from both the vaccination cards and mothers' recall (i.e., either source), 96 percent of children age 12-23 months have received a BCG vaccination. Coverage of the polio vaccine at birth is low, with about 55 percent of children having received polio 0. Though a high percentage of children have received the first dose of DPT, there is a steady decline between the first and the third dose of DPT, from 95 percent to 85 percent of children. Likewise, there is a drop in coverage between the first dose of polio (not polio at birth), from 96 percent to 80 percent for the third dose of polio. This represents a dropout rate<sup>1</sup> of 10 percent for DPT and 17 percent for polio. Eighty-one percent of children age 12-23 months have been vaccinated against measles, 68 percent having received it before their first birthday.

Based on both the health card and the mother's report, 71 percent of children age 12-23 months have received all of the recommended vaccinations, while only 3 percent have not received any vaccinations. The remaining 26 percent of children were partially vaccinated.

<sup>&</sup>lt;sup>1</sup> Dropout rate = [(Dose 1 - Dose 3)/Dose 1] multiplied by 100

#### Table 8.7 Vaccinations by source of information

Percentage of children 12-23 months who had received specific vaccines at any time before the survey, by source of information about vaccination, and the percentage vaccinated by 12 months of age, Tanzania 1996

	Percentage of children who received:											
Background characteristic		DPT			Polio			·	triffen,		Number	
	BCG	1	2	3	01	1	2	3	Measles	$All^2$	None	of children
Vaccinated at any tin	ne											
before the survey	7. 1	75.0	74.5	70.1	46.0	760	546	<b>50.0</b>		<i>(</i> <b>5</b>		1 000
Vaccination card	76.4	75.9	74.6	72.1	46.8	76.0	74.6	72.2	66.3	65.1	0.0	1,022
Mother's report	19.8	18.8	16.4	13.1	8.4	19.7	17.4	7.4	14.5	5.4	3.3	313
Either source	96.2	94.7	90.9	85.2	55.2	95.7	92.0	79.6	80.9	70.5	3.3	1,335
Vaccinated by												
12 months of age	95.9	94.4	89.6	82.0	55.1	95.4	90.2	77.1	68.0	59.6	3.5	1,335

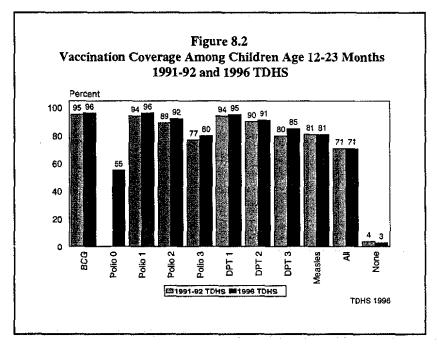
Note: For children whose information was based on the mother's report, the proportion of vaccinations given during the first year of life was assumed to be the same as for children with a written record of vaccination.

Polio 0 is given at birth.

Although overall vaccination coverage has not changed since 1991-92, the dropout rate between the first and third dose of DPT has declined from 15 to 10 percent (Figure 8.2).

#### Differentials in Vaccination Coverage

Table 8.8 presents vaccination coverage (according to information from the card and mother's report) among children age 12-23 months by selected background characteristics. This table also includes information on the percentage of children for whom a vaccination card was shown to the interviewer. Vaccination status does not differ much by sex of the child. There is a decline in the proportion of children vaccinated as the birth order increases. As was observed in the 1991-92 TDHS, vaccination coverage is higher in Zanzibar than in the mainland. Less than half the children age 12-23 months were



fully vaccinated in the Shinyanga region in comparison with 94 percent coverage in the Kilimanjaro region. It must be noted that in some instances the number of observations is too small to give a meaningful representation. Immunisation coverage improves substantially as mothers' level of education increases, from

<sup>&</sup>lt;sup>2</sup> Children who are fully vaccinated (i.e., those who have received BCG, measles, and three doses of DPT and polio (excluding polio 0).

Table 8.8 Vaccinations by background characteristics

Percentage of children 12-23 months who had received specific vaccines by the time of the survey (according to the vaccination card or the mother's report), and the percentage with a vaccination card, according to selected background characteristics, Tanzania

				Perc	entage o	f children	who rec	eived:				Damant	
Background		DPT			<u> </u>	Polio				<u>, , , , , , , , , , , , , , , , , , , </u>		Percent- age with	- Number of
characteristic	BCG	1	2	3	01	1	2	3	Measles	All <sup>2</sup>	None		children
Child's sex													
Male	97,3	95.2	91.5	85.6	55.3	96.4	92.1	81.3	80.7	71.5	2.7	77.9	680
Female	95.1	94.2	90.4	84.8	55.1	95.0	91.9	77.8	81.0	69.4	3.9	75.1	655
Birth order													
1	97.4	97.0	91.9	87.1	61.4	97.2	93.2	78.5	88.8	75.8	2.6	77.1	293
2-3	97.1	96.5	92.6	86.0	57.1	97.3	94.2	81.4	80.8	72.4	2.1	78.0	446
4-5	94.3	91.4	88.5	82.1	49.5	93.5	88.8	76.8	76.0	64.4	5.1	73.2	256
6+	95.4	93.0	89.9	85.0	51.7	94.0	90.5	80.2	77.8	68.1	4.0	76.7	340
Residence													
Mainland	96.1	94.6	90.9	85.2	54.3	95.6	91.9	79.4	80.9	70.3	3.4	76.2	1,293
Total urban	99.6	99.6	97.7	94.6	83.3	99.3	96.8	83.7	95.1	80.6	0.4	80.1	238
Dar es Salaam cit	y 98.9	98.9	95.6	92.3	90.1	97.8	94.5	82.4	93.4	79.1	1.1	76.9	77
Other urban	100.0	100.0	98.7	95.7	80.0	100.0	97.9	84.2	95.9	81.2	0.0	81.6	161
Total rural	95.3	93.5	89.3	83.1	47.8	94.8	90.8	78.5	77.7	68.0	4.0	75.3	1,055
Zanzibar	99.3	99.3	92.5	85.1	82.9	99.3	94.6	85.1	78.9	75.4	0.7	88.9	42
Region													
Dodoma	(95.7)	(95.7)	(93.5)	(91.3)	(52.2)	(93.5)	(93.5)	(87.0)	(89.1)	(82.6)	(4.3)	(84.8)	52
Arusha	<b>91.5</b>	`88.7	88.7	84.5	40.8	91.5	90.Í	76.1	81.7	`71. <b>ś</b>	8.5	57.7	89
Kilimanjaro	100.0	100.0	100.0	100.0	84.6	100.0	100.0	94.2	98.1	94.2	0.0	84.6	52
Tanga	98.1	96.2	88.7	86.8	64.2	96.2	90.6	79.2	83.0	71.7	1.9	71.7	62
Morogoro	94.6	91.1	89.3	82.1	60.7	92.9	91.1	83.9	82.1	69.6	5.4	83.9	61
	(100.0)	(96.7)	(96.7)	(90.0)		(100.0)	(96.7)	(86.7)	(86.7)	(76.7)	(0.0)	(80.0)	17
Dar es Salaam	99.Ó	99.0	95.Í	91.3	91.3	98.1	94.2	81.6	94.2	78.6	1.0	77.7	87
- T - T - T - T - T - T - T - T - T - T		(100.0)	(97.5)	(92.5)		(100.0)	(95.0)	(87.5)	(92.5)	(80.0)	(0.0)	(87.5)	23
Mtwara	100.0	100.0	100.0	92.0	72,0	100.0	98.0	84.0	78.Ó	68.Ó	0.0	78.0	40
Ruvuma	98.4	96.8	95.2	90.3	77.4	98.4	93.5	82.3	90.3	80.6	1.6	82.3	41
Iringa	100.0	100.0	100.0	94.2	51.9	100.0	100.0	88.5	94.2	80.8	0.0	82.7	62
Mbeya	(97.9)	(97.9)	(95.8)	(93.8)	(45.8)	(97.9)	(97.9)	(89.6)	(87.5)	(81.2)	(2.1)	(83.3)	72
Singida	90.6	85.9	81.3	70.3	34.4	84.4	78.1	64.1	70.3	54.7	9.4	67.2	46
. <del>-</del>	(100.0)	(97.1)	(97.1)	(94.1)	(82.4)	(100.0)	(97.1)	(85.3)	(79.4)	(67.6)	(0.0)	(82.4)	39
Rukwa	94.1	92.6	91.2	82.4	36.8	94.1	91.2	70.6	70.6	54.4	5.9	60.3	47
Kigoma	100.0	98.8	96.3	95.1	52.4	98.8	98.8	91.5	86.6	82.9	0.0	85.4	78
Shinyanga	93.6	88.5	76.9	64.1	32.1	91.0	83.3	62.8	56.4	46.2	6.4	71.8	143
Kagera	95.4	96.9	95.4	92.3	63.1	98.5	90.8	76.9	90.8	70.8	1.5	69.2	107
Mwanza	92.3	90.8	84.6	73.8	27.7	93.8	89.2	72.3	69.2	61.5	4.6	73.8	120
Mara	95.0	95.0	86.7	85.0	53.3	95.0	88.3	83.3	76.7	73.3	5.0	88.3	56
Mother's education													
No education	92.2	89.3	83.4	75.1	39.7	90.7	85.4	69.4	69.7	57.9	7.3	66.5	368
Primary incomplete	93.3	93.2	88.5	82.6	52,3	94.0	89.0	77.2	77.6	68.8	5.1	76.0	206
Primary complete+	98.9	97.8	95.2	90.9	63.5	98.6	96.0	85.2	87.2	77.0	0.8	81.5	761

Note: For children whose information was based on the mother's report, the proportion of vaccinations given during the first year of life was assumed to be the same as for children with a written record of vaccination.
Polio 0 is given at birth.

<sup>&</sup>lt;sup>2</sup> Children who are fully vaccinated (i.e., those who have received BCG, measles, and three doses of DPT and polio (excluding polio 0)). Numbers in parentheses are based on 25-49 unweighted children.

58 percent for children whose mothers have no formal education to 77 percent for children whose mothers have completed primary education or higher.

### Trends in Vaccination Coverage

In addition to data from multiple surveys, trends in coverage can be assessed from the 1996 TDHS data. Data on vaccination status of children age 12-59 months allow for an evaluation of coverage in the first year of life among different age groups. Table 8.9 shows the percentage of children by current age group who had been vaccinated by 12 months of age (in order to maintain comparability). The information is derived from either vaccination cards or the mothers' reports. For children whose information was based on the mother's recall, the distribution of vaccinations during the first year of life was assumed to be the same as that for children for whom a vaccination record was available.

Table 8.9 Vaccinations in first year of life by current age

Among children one year to five years old, the percentage with a vaccination card and the percentage who had received each vaccine before their first birthday, according to current age of the child, Tanzania 1996

	Current age of child in months							
Vaccine	12-23	24-35	36-47	48-59	12-59 months			
Vaccination card	· · · · · · · · · · · · · · · · · · ·							
seen by interviewer	76.6	66.7	58.9	52.3	64.2			
Percentage vaccinated at 0-11 months <sup>1</sup>								
BCG	95.9	92.5	91.5	90.5	92.7			
DPT I	94.4	92.0	90.4	88.7	91.5			
DPT 2	89,6	86.3	84.2	84.1	86.2			
DPT 3	82.0	77.2	75.5	74.9	77.6			
Polio 0 <sup>2</sup>	55.1	47.9	43.6	44.3	48.0			
Polio 1	95.4	92.1	91.0	89.5	92.1			
Polio 2	90.2	86,3	83.1	83.3	85.9			
Polio 3	77.1	72.0	67.6	61.8	70.0			
Measles	68.0	70,3	66.3	66.1	67.7			
All vaccinations <sup>3</sup>	59.6	56.8	52.2	47.5	54.3			
No vaccinations	3.5	5.7	7.1	8.1	6.0			
Number of children	1,335	1,188	1,157	1,131	4,812			

<sup>&</sup>lt;sup>1</sup> Information was obtained either from a vaccination card or from the mother if there was no written record. For children whose information was based on the mother's report, the proportion of vaccinations given during the first year of life was assumed to be the same as that for children with a written vaccination record,

The coverage estimates for each age group refer to a specific period of time before the survey. For instance, coverage by 12 months among children 12-23 months roughly refers to the programme performance the year before the survey (i.e., 1995), data on children 24-35 months refer roughly to 1994, data on children 36-47 months refer roughly to 1993, and data on children 48-59 months refer roughly to 1992. Hence, these results may be used to assess the immunisation coverage during the first year of life for the period 1992-1995.

Polio 0 is given at birth.

<sup>&</sup>lt;sup>3</sup> Children who have received BCG, measles, and three doses each of DPT and polio vaccines (excluding polio 0)

Overall, vaccination cards were produced for 64 percent of the children. Expectedly, the percentage of children for whom a vaccination card was seen decreases with age, from 77 percent of children 12-23 months to 52 percent of those age 48-59 months.

The proportion of children who were fully immunised by their first birthday rose from 48 percent among those age 48-59 months at the time of the survey to 60 percent among those age 12-23 months. Over the same time, the proportion of children not receiving any vaccination decreased from 8 percent of children age 48-59 months to 4 percent of children age 12-23 months.

## 8.5 Acute Respiratory Infection

Acute respiratory infection (ARI) is one of the major causes of morbidity and mortality among children in Tanzania. Common symptoms associated with severe respiratory infection include fever, cough, and difficult or rapid breathing. ARI involves the upper respiratory tract and may progress to involve the lower respiratory tract, leading to lung infection. Early diagnosis and treatment with antibiotics can prevent a large proportion of deaths from respiratory infection, especially pneumonia.

To estimate the prevalence and magnitude of ARI, mothers were asked if their children under age five had been ill with coughing accompanied by short, rapid breathing during the two weeks before the survey. Mothers whose children had experienced these symptoms were asked what they had done to treat the illness. Information on disease prevalence is highly dependent on correct reporting and interpretation of symptoms, while information on treatment practices depends on how much mothers know about the medicines their children receive. Mothers may not know whether the tablets or syrups their children receive contain antibiotics or not. Thus, the reporting may vary widely within the country due to differences in reporting.

As Table 8.10 shows, 13 percent of children under five years of age had a cough and fast breathing in the two weeks before the survey. Prevalence of respiratory illness varies by age of the child, rising to a peak at 6-11 months of age (20 percent) then falling slowly to a low at 48-59 months of age (8 percent). There is no significant difference in ARI prevalence by sex, birth order, residence, or education of mother.

Overall, 70 percent of children who had symptoms of ARI were taken to a health facility. Children from urban areas, especially from the city of Dar es Salaam were more likely to be taken to a health facility than those in rural areas.

#### 8.6 Fever

Malaria is a leading cause of mortality and morbidity among children in Tanzania. Since the major manifestation of malaria is fever, mothers were asked whether their children under age five have fever in the two weeks preceding the survey.

Table 8.10 shows that 30 percent of children under five years of age were reported to have had fever in the two weeks prior to the survey. Fever is more prevalent among children age 6-23 months and those who live in Zanzibar. No pronounced differences were observed in the prevalence of fever by either sex or birth order.

#### 8.7 Diarrhoea

In the 1996 TDHS, mothers were asked whether their children under age five had diarrhoea in the two weeks preceding the survey. Table 8.11 presents data about the prevalence of diarrhoea and bloody diarrhoea among children under five years of age. Fourteen percent of children experienced diarrhoea at some time in the two weeks preceding the survey; 3 percent of children experienced bloody diarrhoea, often a symptom of

dysentery. As with fever and respiratory infection, diarrhoea is more common among children age 6 to 23 months than among older or younger children. Diarrhoea prevalence is slightly higher among children whose mothers have primary education than among those with no education or those with at least secondary education. The Coast region experienced the lowest proportion of children with diarrhoea, while Kigoma had the highest.

Dehydration due to severe diarrhoea is a major cause of morbidity and mortality among children in Tanzania. A simple and effective response to a child's dehydration is a prompt increase in fluid intake, i.e., oral rehydration therapy (ORT). ORT consists of giving the child either a solution made by mixing a commercially produced packet of oral rehydration salts (ORS) with water or a recommended home fluid made

Table 8.10 Prevalence and treatment of acute respiratory infection and prevalence of fever

Among all children under five years of age, the percentage who were ill with a cough accompanied with fast breathing and the percentage who were ill with fever during the two weeks before the survey, according to socioeconomic and demographic characteristics, Tanzania 1996

Characteristic	Percentage of children with cough accompanied by fast breathing (ARI)	Among children with ARI, percentage taken to a health facility or provider	Percentage of children ill with fever	Number of children
Child's age	· · · · · · · · · · · · · · · · · · ·	<del></del>		
< 6 months	1 <b>2.8</b>	63.8	28.1	675
6-11 months	20.3	70.3	41.5	700
12-23 months	16.6	73.7	38.2	1,335
24-35 months	12.2	69.0	31.0	1,188
36-47 months	10.0	62.7	25.7	1,157
48-59 months	8.1	73.6	19.4	1,313
Child's sex				
Male	13.0	70.2	30.9	3,136
Female	12.9	69.0	29.7	3,051
Birth order				
1	12.1	74.2	29.2	1,299
2-3	12.4	67.0	29.4	2,034
4-5	1 <b>4.2</b>	69.6	31.5	1,374
6+	13.3	69.3	31.4	1,480
Residence				
Mainland	1 <b>3.0</b>	69.5	30.0	5,983
Total urban	12.0	80.9	30.0	1,066
Dar es Salaam ci	ity 13.3	85.1	29.4	299
Other urban	11.5	79.0	30.2	767
Total rural	1 <b>3.2</b>	67.2	30.0	4,917
Zanzibar	11.8	74.2	40.1	204
Mother's education	n			
No education	11.6	73.6	29.4	1,812
Primary incomplet	te 13.5	68.4	33.8	1,006
Primary complete	13.7	67.3	30.1	3,149
Secondary+	11.6	82.8	25.3	220
Total	13.0	69.6	30.3	6,188

of sugar, salt, and water. In Tanzania, the use of ORS and home fluids is being promoted by the Ministry of Health. Increasing the amount of any type of fluids during a diarrhoeal episode can be considered ORT.

Women interviewed in the 1996 TDHS who had a birth in the five years preceding the survey were asked questions regarding their knowledge of sugar-salt-water solution and treatment of diarrhoea in general. The results are presented in Table 8.12. Almost 90 percent of mothers know about the use of sugar-salt-water-solutions. When asked about specific eating and drinking regimes for children ill with diarrhoea, two-thirds of women recommended giving more fluids than before the illness, while 56 percent said children with diarrhoea should get more food. The level of knowledge of ORS and treatment of diarrhoea is lowest among young mothers 15-19 years of age and increases with age before it drops for older women. Urban women, those living in the Mbeya region and women who have completed primary education or higher tend to be more knowledgeable on the use of sugar-salt-water solution and on the appropriate feeding and drinking practices for children with diarrhoea.

Table 8.13 presents information regard-ing treatment of recent episodes of diarrhoea among children under age five. About 56 percent of children under five years whose mothers reported that they had diarrhoea in the two weeks before the survey were taken to a health facility for treatment. Of all children with diarrhoea, 48 percent were given a solution prepared from ORS packets, 3 percent received recommended home fluids (RHF), and 50 percent received either ORS or RHF. About 57 percent of mothers reported that they increased the amount of fluids given to their children with diarrhoea, 40 percent were given antibiotics while 6 percent of mothers reported receiving injections, and 20 percent provided home remedies. One in four were given neither ORT nor increased fluids to treat the diarrhoea.

#### Table 8.11 Prevalence of diarrhoea

Percentage of children under five years of age with diarrhoea and diarrhoea with blood during the two weeks preceding the survey, by selected background characteristics, Tanzania 1996

	Diarrhoo preceding		
Background characteristic	All diarrhoea	Diarrhoea with blood	Number of children
Child's age			
< 6 months	12.1	1.7	675
6-11 months 12-23 months	27.3 22.9	3,9 4.7	700 1,335
24-35 months	13.2	3.7	1,188
36-47 months	6.4	1.6	1,157
48-59 months	3.3	0.9	1,131
Child's sex			
Male	14.2	2.4	3,136
Female	13.2	3.3	3,051
Birth order			
1	14.5	2.6	1,299
2-3	14.4	2.7	2,034
4-5	11.4	2.8	1,374
6+	14.0	3.2	1,480
Residence			
Mainland	13.5	2.8	5,983
Total urban	11.9	1.4	1,066
Dar es Salaam city Other urban	9.3 12.9	1.1 1.5	299 767
Total rural	13.9	3.2	4,917
Zanzibar	17.4	2.2	204
Domina			
Region Dodoma	14.7	3.9	260
Anisha	14.8	2.7	518
Kilimanjaro	9.6	1.5	268
Tanga	13.5	1.8	320
Morogoro	12.9 4.7	6.3 2.4	276 97
Coast Dar es Salaam	10.0	1.5	346
Lindi	13.0	1.6	108
Mtwara	11.2	1.2	202
Ruvuma	7.4	1.4	229
Iringa Mbeya	12.0 18.7	3.5 5.0	310 330
Singida	18.2	2.7	236
Tabora	18.5	3.0	154
Rukwa	22.2	6.3	207
Kigoma	25.2	4.6	312
Shinyanga Kagara	7.3 20.3	2.2 3.6	580 463
Kagera Mwanza	7.8	1.8	523
Mara	11.0	0.0	244
Mothania advection			
Mother's education No education	12.6	2.7	1,812
Primary incomplete	16.3	<b>4</b> .4	1,006
Primary complete	13.7	2.5	3,149
Secondary+	10.1	1.3	2 <b>2</b> 0
Total	13.7	2.8	6,188

Table 8.12 Knowledge of diarrhoea care

Percentage of women with births in the five years preceding the survey who know about the use of oral rehydration salts (ORS) for treatment of diarrhoea, and the percent distribution by opinion on appropriate feeding practices during diarrhoea, according to selected background characteristics, Tanzania 1996

		Compa	red with us	sual feedir	ng practices,	appropri	ate feeding	during di	iarrhoea:	
			Liq	uids			Solid	foods	•	
Know about Background ORS characteristic packets	Less	Same	More	Don't know/ missing	Less	Same	More	Don't know/ missing	Number of women	
Age										- 4-
15-19	<b>75</b> .3	19.2	13.6	59.2	8.0	19.2	19.7	52.5	8.6	361
20-24	87.0	16.4	14.5	64.1	5.1	18.2	22.7	53.6	5.4	1,194
25-29	88.1	14.0	13.9	67.9	4.2	18.1	21.3	56.7	4.0	1,153
30-34	89.6	11.1	15.0	71.0	3.0	16.1	21.7	58.5	3.7	827
35+	88.3	11.3	16.0	67.7	4.9	17.6	21.4	56.0	5.0	1,043
Residence										
Mainland	87.1	13.6	14.8	66.9	4.7	17.2	21.3	56.5	4.9	4,441
Total urban	93.7	8.1	10.6	79.0	2.3	9.5	19.2	68.1	3.2	870
Dar es Salaam c	ity 90.6	8.4	15.1	74.2	2.3	6.0	21.1	69.9	3.0	253
Other urban	95.0	8.0	8.7	81.0	2.3	11.0	18.4	67.4	3.2	617
Total rural	85.4	15.0	15.8	63.9	5.3	19.1	21.8	53.7	5.4	3,571
Zanzibar	90.0	22.4	12.4	62.6	2.6	35.4	32,1	29.1	3.5	136
Region										
Dodoma	91.2	17.6	16.6	58.0	7.8	22.3	14.5	56.5	6.7	217
Arusha	75.9	16.2	28.5	46.0	9.3	18.6	34.4	38.5	8.6	365
Kilimanjaro	90.8	3.6	10.2	82.1	4.1	5.1	29.1	60.2	5.6	195
Tanga	93.7	9.7	12.6	73.8	3.9	11.2	22.8	60.2	5.8	240
Morogoro	93.4	10.8	12.7	73.6	2.8	15.1	17.5	64.6	2.8	230
Coast	90.4	6.7	10.4	76.3	6.7	5.2	18.5	73.3	3.0	77
Dar es Salaam	90.5	8.6	15.8	73.0	2.6	6.0	21.6	69.0	3.4	294
Lindi	93.5	14.2	13.0	66.3	6.5	15.4	25.4	52.7	6.5	99
Mtwara	92.4	10.7	18.2	69.8	1.3	12.0	30.7	53.3	4.0	181
Ruvuma	94.0	12.8	12.4	71.1	3.8	13.9	16.9	64.3	4.9	174
Iringa	91.4	15.8	10.5	67.9	5.7	15.8	14.4	64.6	5.3	250
Mbeya	94.5	9.8	9.8	77.3	3.1	20.9	21.5	54.0	3.7	245
Singida	86.1	19.0	10.1	67.9	3.0	31.2	18.1	47.7	3.0	170
Тарога	81.6	13.6	8.7	69.9	7.8	11.7	19.4	61.2	7.8	117
Rukwa	91.8	11.4	13.6	70.5	4.5	19.5	21.4	55.0	4.1	151
Kigoma	76.9	11.8	10.0	68.3	10.0	17.6	14.5	57.5	10.4	211
Shinyanga	81.8	20.1	17.2	60.8	1.9	22.5	19.6	55.0	2.9	382
Kagera	78.9	23.2	13.4	57.7	5.7	27.8	12.9	53.6	5.7	319
Mwanza	83.1	13.2	17.5	65.6	3.7	19.6	24.3	52.9	3,2	349
Мага	90.8	9.2	14.6	73.5	2.7	15.1	25.4	57.8	1.6	172
Education										
No education	78.1	19.5	20.8	52.9	6.8	24.3	25.1	44.5	6.1	1,338
Primary incomplet		14.2	13.9	67.5	4.4	20.2	20.5	54.4	5.0	742
Primary complete	91.5	11.0	11.8	73.3	3.9	13.3	20.0	62.3	4.4	2,321
Secondary+	91.8	8.2	9.5	82.1	0.2	17.3	21.3	59.1	2.4	177
Total	87.1	13.9	14.7	66.8	4.7	17.7	21.6	55.7	4.9	4,577

Table 8.13 Treatment of diarrhoea

Among children under five years who had diarrhoea in the two weeks preceding the survey, the percentage taken for treatment to a health facility or provider, the percentage who received oral rehydration therapy (ORT) (either a solution prepared from oral rehydration salts (ORS), recommended home fluids (RHF), or increased fluids), the percentage who received neither ORT nor increased fluids, and the percentage given other treatments, according to selected background characteristics, Tanzania 1996

	Percentage taken to	Oral 1	rehydration		Received	Received neither	o	ther treatm	ents			
Background characteristic	a health facility or provider	ORS packets	RHF at home	Either ORS or RHF	in- creased fluids	ORT nor increased fluids	Anti- biotics	Injec- tion	Home remedy/ other	None	Missing	Number of children
Child's age							***************************************					
< 6 months	41.4	34.2	0.0	34.2	50.6	37.3	25.7	5.0	13.3	24.3	0.0	81
6-11 months	59.2	52.5	4.6	56.0	55.8	24.6	42.1	5.4	21.7	8.7	0.8	191
12-23 months	59.2	50.3	3.9	53.3	56.3	24.4	40.5	7.2	22.5	10.0	0.8	306
24-35 months	55.1	49.6	1.7	50.1	56.5	26.7	41.3	5.3	18.6	12.5	0.7	157
36-47 months	61.3	45.4	0.6	45.4	67.6	19.6	39.1	6.3	19.9	9.8	0.0	74
48-59 months	(46.7)	(40.4)	(4.1)	(44.5)	(56.0)	(36.7)	(40.4)	(5.8)	(19.5)	(8.4)	(2.5)	37
Child's sex												
Male	58.7	50.7	3.0	52.9	56.7	24.9	39.9	6.7	19.7	10.5	0.2	444
Female	53.7	45.6	3.0	47.6	56.6	27.8	38.9	5.5	21.0	12.5	1.2	402
Birth order												
1	53.9	47.4	1.4	48.8	54.0	30.5	40.5	3.1	15.1	17.0	0.0	188
2-3	59.0	49.6	1.8	51.1	55.2	25.2	40.2	7.6	19.7	9.0	1.1	293
4-5	50.5	47.5	5.0	51.7	54.8	26.9	37.4	6.5	22.0	<u> </u>	1.8	157
6+	59.2	47.7	4.6	49.9	62.4	23.4	39.0	6.5	24.9	11.1	0.0	208
Residence												
Mainland	56.5	48.6	3.0	50.7	55.9	26.6	39.7	6.3	20.5	11.4	0.7	811
Total urban	70.0	55.0	4.2	57.4	65.3	18.1	47.6	9.7	19.6	5.7	0.0	127
Dar es Salaam city		60.6	3.0	63.6	60.6	18.2	66.7	12.1	21.2	0.0	0.0	28
Other urban	67.6	53.4	4.5	55.7	66.6	18.1	42.2	9.0	19.2	7.3	0.0	99
Total rural	54.0	47.4	2.8	49.4	54.2	28.2	38.3	5.7	20.7	12.4	0.9	684
Zanzibar	52.2	41.5	3.6	43.9	72.6	17.6	33.3	0.9	17.6	14.0	0.0	36
Mother's education												
No education	54.6	42.7	3.4	44.8	48.4	30.6	35.1	6.6	23.8	13.9	0.0	228
Primary incomplete		47.6	1.8	48.7	55.2	27.1	44.5	7.2	20.8	8.9	1.1	164
	55.7	57.3	3.2	53.8	61.3	23.8	39.8	5.5	18.5	11.2	0.9	454
Primary complete+	33.1	31.3	3.2	33.0	01.5	23.8	37.0	3.3	16.3	11.2	0.9	454
Total	56.3	48.3	3.0	50.4	56.6	26.3	39.5	6.1	20.4	11.5	0.7	846

Note: Figures in parentheses are based on 25 to 49 children who had diarrhoea.

Includes health centre, hospital and private doctor.

The proportion of children with diarrhoea who were taken to a health facility was slightly lower among younger and older children and was more or less the same regardless of sex or birth order. The proportion of children with diarrhoea who are taken to health facilities is expectedly higher in urban areas than in rural areas.

In the 1996 TDHS, all mothers who had a child with diarrhoea were also asked whether they had changed the feeding practices during the diarrhoeal episode. Table 8.14 shows that about 57 percent of children ill with diarrhoea were given more solid foods to eat during the illness, and 38 percent received more to drink. These results suggest that, as the benefits of increasing fluid intake during a diarrhoeal episode are quite widely understood, a reasonable proportion of mothers have decided to increase fluid intake when their children have diarrhoea. Still, it is discouraging to note that 27 percent of mothers say they gave their children less to drink. This is an increase from the 13 percent reported in the 1991-92 TDHS.

### Table 8.14 Feeding practices during diarrhoea

Percent distribution of children under five years who had diarrhoea in the past two weeks by amount of solid foods given and amount of fluids given, Tanzania 1996

Feeding practice	Total	•
Amount of solid foods given		•
Same	25.1	
More	56.6	
Less	16.0	
Don't know/missing	2.2	
Amount of fluids given		
Same	33.0	
More	37.8	
Less	27.3	
Don't know/missing	1.9	
Total	100.0	
Number of children	846	

## **CHAPTER 9**

## MATERNAL AND CHILD NUTRITION

The 1996 TDHS collected data from mothers regarding the feeding patterns of all of their children under five years of age. In this chapter, the data are used to evaluate infant feeding practices, including breastfeeding, introduction of complementary and supplementary weaning foods, and the use of feeding bottles. As part of the survey, the height and weight of all children under five and their mothers were also measured, allowing a cross-sectional assessment of maternal and child nutritional status.

# 9.1 Breastfeeding and Supplementation

Early childhood feeding practices and patterns are important determinants of the nutritional status of children which in turn influence their health status. A mother's nutritional well-being before and during pregnancy influences the health of her baby at birth, her own ability to breastfeed successfully, as well as her general health. The health benefits of breastfeeding for both mother and child are undisputed and are influenced by both the duration and intensity of breastfeeding and by the age at which the child receives supplementary foods and other liquids.

## Prevalence and Initiation of Breastfeeding

The data presented in Table 9.1 confirm that breastfeeding in Tanzania is almost universal, with 97 percent of the children born in the five years preceding the survey having been breastfed at some time. The proportion of children ever breastfed was high across all residential areas and regions, and did not vary significantly by other background characteristics. The results are similar to those of the 1991-92 TDHS.

Early initiation of breastfeeding is beneficial for mother and child. From the mother's perspective, early suckling stimulates the release of a hormone that helps her uterus to maintain a contracted state. From the child's perspective, the first breast milk is important because it contains colostrum which is rich in antibodies. Data show that about 60 percent of the children in Tanzania were breastfed within an hour of birth and 88 percent in the first 24 hours after delivery. Babies in the Arusha and Kilimanjaro regions are more likely to start breastfeeding within one hour of birth than their counterparts in other regions. Children are less likely to receive early breastfeeding if their mothers have no education, if the delivery was assisted by a traditional midwife, or if they were delivered at home.

### Age Pattern of Breastfeeding and Introduction of Supplementary Foods

In the TDHS, children who received only breast milk in the 24 hours before the survey are defined as being exclusively breastfed, and children who are fully breastfed receive only plain water in addition to breast milk. The timing of introduction of supplementary foods besides breast milk has important implications for the child and the mother. Early supplementation, especially under unhygienic conditions, can result in infection with foreign organisms and lower immunity to disease. The timing of introduction of food supplements also has an impact on the length of the mother's postpartum amenorrhoea. Early initiation of supplementation results in earlier resumption of the mother's menstrual periods, since supplementation diminishes infants' dependence on breast milk and reduces the frequency of suckling.

Table 9.1 Initial breastfeeding

Percentage of children born in the five years preceding the survey who were ever breastfed, and the percentage who started breastfeeding within one hour of birth and within one day of birth, by selected background characteristics, Tanzania 1996

			age who astfeeding	
Background characteristic	Percentage ever breastfed	Within one hour of birth	Within one day of birth <sup>1</sup>	Number of children
Child's sex			27.0	2 5 5 2
Male E1	97.2	59.9	87,9	3,552
Female	97.3	57.7	87.5	3,364
Residence				
Mainland	97.2	58.6	87.6	6,693
Total urban	98.2	67.3	92.3	1,165
Dar es Salaam city	98.2	61.1	93.4	327
Other urban	98.1	69.8	91.9	838
Total rural	97.1	56.8	86.6	5,529
Zanzibar	98.7	65.7	92.0	223
Region				
Dodoma	95.7	58.5	94.3	312
Arusha	98.9	86.5	96.5	547
Kilimanjaro	98.2	8,88	96.0	281
Tanga	98.1	75.6	88.9	365
Morogoro	98.7	65.4	98.7	327
Coast	100.0	37.9	83.0	104
Dar es Salaam	98.0	61.3	93.6	377
Lindi	98.6	48.8	90.3	129
Mtwara	96.6	47.0	91.1	235
Ruvuma	98.7	59.7 68.1	96.8 98.6	250 355
Iringa Mbarra	96.3 99.2	52.7	85.8	363
Mbeya Singida	99.2 98.3	59.5	88.7	258
Singida Tabora	98.3 88.7	51.9	79.7	171
Rukwa	97.7	44.1	82.9	242
Kigoma	93.3	49.4	84.7	342
Shinyanga	99.4	57.1	75.4	635
Kagera	95.7	35.0	70.7	540
Mwanza	97.1	54.4	86.6	580
Mara	94.4	38.5	81.8	281
N. G. A. L				
Mother's education	07.3	56.1	95 A	2.049
No education	97,3 96.3	56.1 58.2	85.4 88.2	2,048 1,138
Primary incomplete	90.3 97.7	60.4	88.9	3,493
Primary complete Secondary+	97.2	63.0	88.2	236
A				
Assistance at delivery	97.6	66.9	91.1	3,229
Health professional Traditional midwife	97.0 96.6	55.9	89.8	1,223
Other or none	97.2	50.5	83.6	2,414
Place of delivery				
Place of delivery Health facility	97.5	67.3	91,3	3,218
At home	97.3 97.1	52.0	86.1	3,425
, a nome	71.1	ی, بید ر	00.1	ل.47−و ل

Note: Total includes 50 children for whom data on assistance at delivery and 272 children for whom information on place of delivery are missing.

Includes children who started breastfeeding within one hour of birth.

Mothers were asked if they had given various types of liquids or solid foods to their children under three in the past 24 hours (Table 9.2). Virtually all infants under one year of age were breastfed (96-99 percent). The prevalence of breastfeeding declines to 88 percent at age 16-17 months to 46 percent at age 22-23 months.

Table 9.2 Breastfeeding status

Percent distribution of living children under three years of age by current breastfeeding status, according to child's current age in months, Tanzania 1996

			Breastfe	eding and:		NY 1
Age in months	Not breast- feeding	Exclusively breastfed	Plain water only	Comple- mentary foods	Total	Number of living children
0-1	0.6	55.2	24.3	19.9	100.0	202
2-3	1.3	27.4	21.1	50.2	100.0	235
4-5	2.7	8.0	12.3	77.0	100.0	238
6-7	0.7	4,1	3.9	91.3	100.0	240
8-9	2.3	1.7	0.8	95.1	100.0	226
10-11	3.6	2.0	0.6	93.8	100.0	234
12-13	4.6	0.0	0.1	95.3	100.0	250
14-15	8.5	0.0	0.7	90.8	100.0	229
16-17	12.4	0.0	0.2	87.5	100.0	202
18-19	18.8	0.7	0.1	80.4	100.0	245
20-21	39.4	0.0	0.0	60.6	100.0	205
22-23	54.4	0.0	0.0	45.6	0.001	205
24-25	71.8	0.0	0.3	27.9	100.0	215
26-27	75.9	0.0	0.0	24.1	100.0	184
28-29	82.1	0.0	0.0	17.9	100.0	208
30-31	90.3	0.0	0.0	9.7	100.0	191
32-33	94.6	0.0	0.0	5.4	100.0	187
34-35	95.0	0.0	0.0	5.0	100.0	203
0-3 months	1.0	40.3	22.6	36.2	100.0	437
4-6 months	1.8	6.9	10.1	81.3	100.0	367
7-9 months	2.0	2.3	1.1	94.6	100.0	338
0-5 months	1.6	28.9	19.0	50.6	100.0	675

Note: Breastfeeding status refers to 24 hours preceding the survey. Children classified as breastfeeding and plain water only receive no complementary foods.

Overall, 29 percent of infants under five months of age were exclusively breastfed. The prevalence of exclusive breastfeeding declines from 55 percent for infants under age two months to 27 percent among those age two to three months to only 8 percent among children age four to five months. Many Tanzanian (young) infants appeared to receive water only in addition to breast milk.

By six to seven months of age, 91 percent of children are given breast milk and complementary foods other than plain water. This rises to 95 percent by eight to nine months of age and by the time they reach 34-35 months of age, 95 percent of all children have been fed solid foods.

Table 9.3 shows the differentials in duration and frequency of breastfeeding by background characteristics of the child and mother. At the national level, the median duration of any breastfeeding is around 22 months. The median duration of exclusive breastfeeding is around one month and full breastfeeding (breastfeeding plus plain water only) around two months. There is very little variation between the breastfeeding duration by sex of the children and by residence. Duration of breastfeeding is the longest in the Southern zone (24 months) and the shortest in the Lake zone (20 months). Breastfeeding seems to decrease slightly as educational level rises.

Table 9.3 Median duration and frequency of breastfeeding by background variables

Median duration of any breastfeeding, exclusive breastfeeding, and full breastfeeding among children under three years of age, and the percentage of children under six months of age who were breastfed six or more times in the 24 hours preceding the interview, according to background characteristics, Tanzania

	C	hildren under	3 years of ag	ge <sup>1</sup>	Children under six months		
	Median	breastfeeding	duration		Breastfed 6 or more	_ <del></del>	
Background characteristic	Any breast- feeding	Exclusive breast- feeding	Full breast- feeding <sup>2</sup>	Number of children	times in preceding 24 hours	Number of children	
Child's sex							
Male	21,2	1.2	2.3	2,191	91.0	345	
Female	21.8	0.7	2.2	2,095	91.9	330	
Residence							
Mainland	21.5	1.1	2.2	4,156	91.5	648	
Total urban	21.2	0.6	1.5	720	95.8	117	
Dar es Salaam city	20.6	0.5	1.9	203	(96.4)	24	
Other urban	21.6	0.6	1.3	517	95.7	94	
Total rural	21.6	1.3	2.4	3,436	90.5	530	
Zanzibar	21.0	0.4	2.0	130	90.7	27	
Zones							
Coastal	21.4	0.6	1.9	864	87.7	130	
Northern Highlands	21.5	2.0	2.2	510	93.4	88	
Lake	20.2	1.3	2.6	1,598	89.3	238	
Central	22.9	1.6	2.0	350	92.9	57	
Southern Highlands	23.3	0.6	2.0	583	96.7	102	
Southern	24.4	1.0	2.3	380	94.9	60	
Mother's education							
No education	22.2	0.7	2.5	1,236	90.8	185	
Primary incomplete	21.0	1.2	2.2	699	85.6	113	
Primary complete	21.3	1.2	2.2	2,202	93.6	351	
Secondary+	20.3	0.4	1.5	149	(91.6)	25	
Assistance at delivery							
Health professional	21.4	0.7	2.1	1,955	94.5	278	
Traditional midwife	22.0	0.7	2.1	764	84.0	141	
Other or none	21.4	1.6	2.5	1,544	92.2	255	
Total	21.5	1.0	2.2	4,286	91.4	675	
Mean	21.2	2.5	3.6	97.4	NA	NA	
Prevalence/Incidence mean	21.3	1.8	3.0	NA	NA	NA	

Note: Figures in parentheses are based on 25 to 49 children. Total includes 24 children under 3 years of age for whom data on assistance at delivery are missing.

Frequent breastfeeding must be practised in order for mothers (and children) to reap all its benefits. The data in Table 9.3 indicate that 91 percent of children under six months of age were breastfed six or more times in the 24 hours preceding the interview.

NA = Not applicable.

Medians and means are based on current status and durations are in months.

<sup>&</sup>lt;sup>2</sup> Either exclusive breastfeeding or breastfeeding and plain water only.

## **Types of Supplemental Foods**

Table 9.4 presents information on the types of food received by children under age three in the 24 hours before the survey interview, according to whether or not the child is still being breastfed. Infant formula is not commonly used in Tanzania. Overall, only 9 percent of children are given infant formula. Mothers seem to prefer giving other milk and liquids to giving infant formula. Meat, poultry, fish, and eggs contain protein and other nutrients that are important for growth, recovery from illness, and mental development. The proportion of children receiving these foods rises from 4 percent at age two to three months to 53 percent at age 14-17 months. Foods made from grains, flour, or cereals (such as porridge) are common foods for children from age two to three months, while tubers and plantains are common foods for children. By age eight to nine months, more than 90 percent are getting grains, flour, or cereals and 14 percent are getting tubers and plantains.

····	····		Liquids			Solid/mu	ishy food		··	<u> </u>
Breast Age milk in months) only	Infant formula	Other milk	Other liquids	Meat/ poultry/ fish/ eggs	Grain/ flour/ cereal	Tubers/ plantain	Other	Use of bottle with a nipple	Numbe of children	
			BRE	ASTFEEI	OING CHI	LDREN	·····			
0-1	55.5	0.9	6.6	6.9	0,6	9.4	0.8	1.5	3.6	201
2-3	27.8	2.3	18.4	12.9	3.9	29.6	0.3	1.8	13.6	232
4-5	8.2	7.0	25.9	26.8	7.7	63.7	3.9	8.4	10.7	232
6-7	4.2	9.2	36.0	24.0	17.8	81.6	7.3	27.4	9.0	238
8-9	1.8	12.9	38.1	3 <b>2</b> .3	34.8	93.9	14.4	45.1	<b>5</b> .7	221
10-11	2.1	9.6	33.5	36.3	38.0	93.1	17.9	55.3	7.7	226
12-13	0.0	7.3	35.4	34.9	47.4	93.8	19.9	65.8	8.1	238
14-15	0.0	10.7	33.7	33.8	52.9	92.5	20.4	64.1	<b>7</b> .1	210
16-17	0.0	13.6	33.7	35.2	52.9	93.7	23.4	70.5	2.7	177
18-23	0.4	10.3	29.8	36.7	48.9	96.7	21.8	70.3	5.5	417
24-29	0.0	12.6	38.2	37.3	47.6	97.3	20.0	68.6	9.1	142
30-35	0.0	16.2	44.7	20.2	36.5	90.3	16.2	66.7	8.4	39
0-3 months	40.7	1.7	12.9	10.1	2.3	20.2	0.5	1.7	9.0	432
4-6 months	7.0	7.4	26.9	26.0	10.1	70.3	4.3	13.8	<b>9</b> .1	360
7-9 months	2.3	12.1	40.3	29.3	30.4	89.6	12.9	40.7	7.9	331
0-5 months	29.3	3.5	17.4	15.9	4.2	35.4	1.7	4.0	9.6	664
Total	8.4	8.8	30.0	29.0	32.5	78.0	13.9	44.7	7.5	2,572
		<u>.</u>	NON-B	REASTFE	EDING C	HILDRE	N			
18-23	NA	10.5	36.7	37.4	54.6	93.1	30.6	74.7	8.7	238
24-29	NA	8.5	30.2	31.9	50.9	89.2	28.4	75.7	5.0	465
30-35	NA	7.4	28.9	32.7	50.8	88.9	26.6	76.9	3.9	542

Bottle feeding is not commonly practised in Tanzania. Four percent of breastfed children under age two months were given a bottle with a nipple. Among children still breastfeeding, bottle feeding peaks at age two to three months (14 percent).

#### 9.2 Nutritional Status of Children

The nutritional status of children is an outcome of many interrelated factors. These include environmental, economic, political, biological, educational, cultural, and food security factors. Feeding practices and infections also affect nutritional status. The nutritional status of children can thus be used as an indicator of the socioeconomic development of a community or nation.

#### Measures of Nutritional Status in Childhood

Evaluation of nutritional status is based on the rationale that in a well-nourished population, one observes a statistically predictable distribution of children of a given age with respect to height and weight. In the 1996 TDHS, the nutritional status of children is analysed and evaluated in comparison with the commonly used U.S. National Centre for Health Statistics (NCHS) standard, which is recommended by the World Health Organisation (WHO). The use of this reference population is based on the finding that well-nourished young children of all population groups follow very similar growth patterns. Although variations in height and weight exist, these approximate a normal distribution when the population under study is large.

Height and weight data as well as information on the child's age in months were used to construct the three standard indices of physical growth that describe the nutritional status of children: height-for-age, weight-for-height and weight-for-age. Each of these indices provides somewhat different information about the nutritional status of a population of children.

Height-for-age is a measure of linear growth. Children who are more than two standard deviations below (-2 SD) the median of the NCHS reference population are considered short for their age or "stunted," a condition reflecting the cumulative effect of chronic malnutrition. If the child is below minus three standard deviations (-3 SD) from the median of the reference population, the child is considered to be severely stunted. Stunting is a condition that reflects failure to receive adequate food intake over a long period of time and is also affected by repeated episodes of illness. Height-for-age thus represents a measure of the long-term effects of malnutrition in a population and does not vary appreciably according to the season of data collection.

The weight-for-height index describes current nutritional status. Children who are below -2 SD from the median of the reference population are considered "wasted" or too thin for their height, a condition reflecting acute or recent nutritional deficit. As with stunting, children whose weight-for-height is below -3 SD of the reference median are considered severely wasted. Wasting represents the failure to receive adequate nutrition in the period immediately preceding the survey and may be the result of recent episodes of illness. Severe wasting is closely linked to mortality risk and may reflect acute shortage of food.

Weight-for-age is a composite index of weight-for-height and height-for-age and, thus does not distinguish between acute malnutrition (wasting) and chronic malnutrition (stunting). A child can be underweight for his/her age because he/she is stunted, wasted, or both. Children whose weight-for-age is below -2 SD from the median of the reference population are classified as "underweight," and those below -3 SD are classified as severely underweight.

#### **Anthropometric Data Collection**

In the TDHS, all children whose mothers were interviewed and who had been born since January 1991 were weighed using a digital scale with an accuracy of 100 grams. Their standing height (for children age 24 months and older) or recumbent length (for children under age 24 months) was also measured using the Shorr height board. Of the 6,188 children (age 0-59 months at the time of the survey) eligible for measurement, 92 percent were weighed and measured (see Table C.3 in Appendix). The reason most commonly reported for not measuring a child was that the child was not at home. Of the children who were both weighed and

measured, there was a very small percentage of children for whom age data were not usable or who were considered to have implausibly low or high values for height-for-age or weight-for-height. The following analysis focuses on the 5,344 children (or 86 percent of children) age 0-59 months, for whom complete age and anthropometric data were collected.

In a population in which children are healthy and well fed, only 2.3 percent of children are expected to fall below -2 SD for each of the three indices, whereas less than 1 percent are expected to fall below -3 SD.

#### Levels of Childhood Malnutrition

Table 9.5 shows the proportions of children classified as malnourished according to each of the three measures of nutritional status by selected demographic characteristics of the child. Table 9.6 shows the same measures according to socioeconomic characteristics of the mother.

Table 9.5 Nutritional status of children by demographic characteristics

Percentage of children under five years of age who are classified as malnourished according to three anthropometric indices of nutritional status: height-for-age, weight-for-height, and weight-for-age, and mean Z-score, by selected demographic characteristics, Tanzania 1996

	Height-for-age			w	eight-for-he	ight	Wei	ght-for-age		
Background characteristic	Percentage below -3 SD	Percentage below -2 SD	Z score	Percentage below -3 SD	Percentage below -2 SD <sup>1</sup>	Z-score	Percentage below -3 SD	Percentage below - 2 SD <sup>1</sup>	Mean Z-score	Number of children
Child's age	<del></del>			_		·				
<6 months	2.8	10,7	-0.6	2.4	5.5	0,2	1.4	7.0	-0.2	597
6-11 months	7.3	26.6	-1.2	1.6	6.6	-0.3	7.8	27.1	-1.2	647
12-23 months	20.9	52.3	-2.0	2.1	13.4	-0.7	11.8	40.9	-1.7	1,236
24-35 months	23.2	51.6	-2.0	1.3	6.1	-0.4	10.7	38.1	-1.6	1,018
36-47 months	22.2	<b>5</b> 1.9	-2.1	0.5	5.0	-0.3	6.4	30.7	-1.5	955
48-59 months	20.6	46.9	-1.9	0.3	4.2	-0.2	4.6	26.3	-1.3	892
Child's sex										
Male	18.6	44.9	-1.8	1.5	8.1	-0.4	8.4	30,8	-1.4	2,727
Female	17.1	41.9	-1.7	1.2	6.4	-0.3	7.1	30.4	-1.3	2,617
Birth order										
1	15.5	43.1	-1.7	2.3	8.3	-0.3	8.1	<b>2</b> 9,3	-1.3	1,078
2-3	18.0	42.7	-1.7	1.1	7.0	-0.3	7.2	28.4	-1.3	1,758
4-5	18.6	41.5	-1.7	0.9	5.5	-0.3	6.7	28.5	-1.3	1,209
6+	18.8	46.5	-1.9	1.3	8.4	-0.5	9.2	36.8	-1.5	1,299
Previous birth interval										
First birth	15.7	43.2	-1.8	2.3	8.3	-0.3	8.3	29.4	-1.3	1,080
< 24 months	22.6	46.8	-1.9	1.1	6.6	-0.4	8.4	34.8	-1.5	679
24-47 months	18,0	44.3	-1.8	0.9	6.9	-0.3	7.5	30,5	-1.3	2,739
48+ months	16.3	38.3	-1.6	1.7	7.5	-0.4	7.4	29.3	-1.3	846
Total	17.8	43.4	-1.7	1.3	7.2	-0.4	7.8	30.6	-1.4	5,344

Note: Figures are for children born in the period 0-59 months preceding the survey. Each index is expressed in terms of the number of standard deviation (SD) units from the median of the NCHS/CDC/WHO international reference population. Children are classified as malnourished if their z-scores are below minus two or minus three standard deviations (-2 SD or -3 SD) from the median of the reference population.

<sup>1</sup> Includes children who are below -3 SD.

An examination of Table 9.5 on height-for-age suggests that there is considerable chronic malnutrition among Tanzanian children. Overall, 43 percent of Tanzanian children are classified as stunted and 18 percent are severely stunted. Stunting increases sharply from 11 percent among children less than six months old to more than 50 percent among children 12-47 months old. Male children are slightly more likely to be stunted (45 percent) or severely stunted (19 percent) than female children (42 percent and 17 percent, respectively). Stunting is more prevalent among children with a short birth interval.

Stunting is more prevalent among children in rural areas than among their urban counterparts on the mainland (Table 9.6). Forty-six percent of rural children are stunted, compared with 33 percent of urban children. The proportion of stunted children is highest in the Iringa region (71 percent) and lowest in the Tabora region (26 percent). The level of mother's education is associated with her children's nutritional status. The proportion of stunted children ranges from 49 percent among children whose mothers have no education to 24 percent among those whose mothers have some secondary education.

Overall, 7 percent of children under five in Tanzania are wasted (low weight-for-height); 1 percent are severely wasted. Variations in the level of wasting by demographic characteristics show that wasting increases from 6 percent among children under six months of age, to 13 percent among children 12-23 months of age, indicating that food supplementation during the weaning period may be inadequate. There are no significant differences in the prevalence of acute malnutrition between rural and urban children on the mainland, however acute malnutrition is highest in Zanzibar. The lowest prevalence of wasting is reported in the Morogoro and Tabora regions (4 percent) and highest in the Coast and Kagera regions (11 percent). Prevalence of wasting among children is inversely related to the educational level of their mothers (Table 9.6).

More than 30 percent of Tanzanian children under five are underweight for their age, which may reflect stunting, wasting, or both. Low weight-for-age is most common during the second year of life (ages 12-23 months). The prevalence of low weight-for-age is higher among children living in rural areas on the mainland and in Zanzibar than among urban children. Underweight children are more common among those whose mothers have less education.

Figure 9.1 shows the distribution of children by age and by the extent to which they deviate from the reference population in terms of the Zscores for the three anthropometric indices. This shows the remarkable deterioration in nutritional status that begins shortly after birth, continuing through the first year and a half, and then leveling off or improving slightly thereafter to the third birthday.

# Trends in Malnutrition in Tanzania

The anthropometric data collected in the 1996 TDHS are similar to those obtained during the 1991-92 TDHS. Trends in the

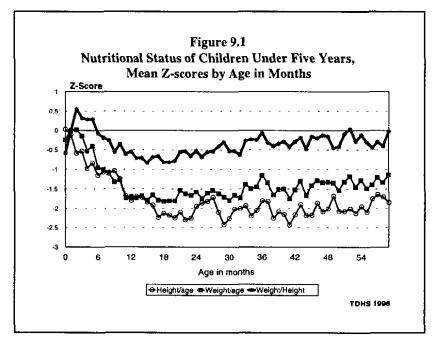


Table 9.6 Nutritional status of children by background characteristics

Percentage of children under five years of age who are classified as malnourished according to three anthropometric indices of nutritional status: height-for-age, weight-for-height, and weight-for-age, and mean Z-scores, by selected background characteristics, Tanzania 1996

	1	Height-for-age			eight-for-he	ight	Wei	ght-for-age		
Background characteristic	Percentage below -3 SD	Percentage below -2 SD <sup>1</sup>	e Z score	Percentage below -3 SD	Percentage below -2 SD <sup>1</sup>	Z-score	Percentage below -3 SD	Percentage below - 2 SD <sup>1</sup>	Mean Z-score	Number of children
Residence					· · · · · · · · · · · · · · · · · · ·					
Mainland	17.9	43.6	-1.8	1.3	7.1	-0.3	7.7	3 <b>0.5</b>	-1.3	5,180
Total urban	12.0	32.9	-1.4	1.6	7.6	-0.2	4.1	19.5	-1.0	898
Dar es Salaam city	13.4	31.1	-1.4	1.4	8.8	-0.2	3.5	23.0	-1.1	239
Other urban	11.5	33.5	-1.4	1.7	7.2	-0.1	4.4	18.3	-1.0	659
Total rural	19.2	45.9	-1.8	1.3	7.0	-0.4	8.5	32.9	-1.4	4,282
Zanzibar	14.7	37.1	-1.6	1.8	11.0	-0.6	8.8	33.8	-1.5	163
Region										
Dodoma	23.0	48.1	-2.0	0.5	8.0	-0,4	7.5	34.2	-1.6	210
Arusha	19.8	43.7	-1.7	1.1	7.2	-0.4	9.2	35.1	-1.4	451
Kilimanjaro	14.9	33.5	-1.4	1.2	5.6	-0.2	4.0	21.0	-1.0	246
Tanga	23.2	55.3	-2.1	0.8	4.9	-0.4	8.1	36.2	-1.6	287
Morogoro	19.1	52.7	-2.1	0.9	4.1	-0.1	7.3	25.5	-1.4	238
Coast	23.8	51.7	-2.0	2.1	11.2	-0.4	8.4	34.3	-1.6	82
Dar es Salaam	12.0	30.6	-1.3	1.5	8.1	-0.2	4.2	22.2	-1.0	281
Lindi	31.2	58.6	-2.2	1.3	7.0	-0.4	13.4	41.4	-1.7	92
Mtwara	26.9	58.0	-2.2	0.5	5.9	-0.3	8.7	35.6	-1.6	177
Ruvuma	22.6	53.5	-2.0	0.6	5.2	-0.2	7.1	29.4	-1.4	203
Iringa	35.3	70.5	-2.5	0.9	6.2	-0.4	14.7	48.2	-1.9	268
Mbeya	17.2	46.9	-1.8	2.1	6.2	-0.1	6.8	20.8	-1.2	289
Singida	16.8	38.6	-1.6	1.8	7.0	-0.3	9.8	28.4	-1.2	205
Tabora	8.0	25.7	-1.2	2.7	4,4	-0.1	2.7	14.2	-0.8	129
Rukwa	17.1	42.0	-1.7	1.9	9.7	-0.4	9.7	30.5	-1.4	184
Kigoma	19.2	52.5	-2.0	1.4	7.6	-0.6	7.6	43.1	-1.7	264
Shinyanga	11.0	31.3	-1.4	0.7	6.8	-0.5	5.0	27.8	-1.3	514
Kagera	15.6	41.6	-1.7	3.2	10.8	-0.6	11.2	36.0	-1.5	412
Mwanza	12.7	33.8	-1.5	0.4	7.6	-0.3	6.3	27.0	-1.1	438
Mara	9.7	32.6	-1.4	2.2	8.4	-0.2	5.7	18.9	-1.0	211
Education										
No education	20.8	49.4	-1.9	1.2	8.5	-0.5	10.0	36.9	-1.5	1,541
Primary incomplete	17.6	44.0	-1.8	1,3	7.4	-0.4	9.5	32.9	-1.4	845
Primary complete	16.9	41.2	-1.7	1.4	6.6	-0.3	6.4	27.7	-1.3	2,773
Secondary +	7.5	24.1	-1.0	1.1	5.2	-0.2	2.3	11.9	-0.8	184
Total	17.8	43.4	-1.7	1.3	7.2	-0.4	7.8	30.6	-1.4	5,344

Note: Figures are for children born in the period 0-59 months preceding the survey. Each index is expressed in terms of the number of standard deviation (SD) units from the median of the NCHS/CDC/WHO international reference population. Children are classified as malnourished if their z-scores are below minus two or minus three standard deviations (-2 SD or -3 SD) from the median of the reference population.

1 Includes children who are below -3 SD.

nutritional status for children under five are presented in Table 9.7. One factor that could not be controlled was the difference in the timing of the surveys—the 1991-92 TDHS fieldwork took place from October 1991

to March 1992, while the 1996 survey was conducted from July to November 1996. Nutritional status is known to be subject to seasonal variations, often deteriorating just before the peak harvest time and improving after harvest; it also varies with fluctuations in disease prevalence. However, it is difficult to assess what effect, if any, the difference timing in data collection between the two surveys might have on the results concerning nutritional status of children.

Results show that the proportion of children under age five who have chronic malnutrition or stunting (low height-for-age) was stable at 43 percent between the two surveys, while acute malnutrition or wasting (low weight-for-height) rose from 6 to 7 percent. Since the change in wasting refers to conditions immediately preceding the two surveys, the overall trend in nutrition using this measure may be misleading. The percentage of children who are underweight (low weight-for-age) increased slightly from 29 to 31 percent.

#### Table 9.7 Trends in nutritional status of children

Among children under five years of age, the percentage classified as malnourished according to height-for-age, weight-for-height, and weight-forage. 1991-92 TDHS and 1996 TDHS, Tanzania 1996

Index	1991-92 TDHS	1996 TDHS	-
Height-for-age	42.6	43.4	-
< -3 SD	16.7	17.8	
Weight-for-height < -2 SD < -3 SD	6.0 1.2	7.2 1.3	
Weight-for-age < -2 SD < -3 SD	28.8 7.1	30.6 7.8	
Number of children	6,097	5,344	

#### 9.3 Maternal Nutritional Status

All mothers of children born since January 1991 were eligible to be weighed and measured<sup>1</sup> in the 1996 TDHS. The objective was to obtain a picture of the nutritional status of women of reproductive age, but in considering the cost and length of the survey, a decision was made to limit the anthropometric section to women with young children who would be measured anyway.<sup>2</sup> In reviewing the results of the maternal anthropometric data collection, it is important to remember that the sample of women is not representative of all women age 15-49 and will overrepresent high fertility age groups, for example, women 25-34 years old.

Several measures must be used to assess the nutritional status of women (Krasovec and Anderson, 1991). In this report, two indices are presented: height, and body mass index (BMI). Maternal height is associated with past socioeconomic status and nutritional status in childhood and adolescence. It is related to the risk of difficult delivery, since small stature is often associated with small pelvic size. Short women also often stand the risk of bearing infants with low birth weight. The cut off point below which a woman can be identified as at risk is in the range of 140-150 centimetres (cm).

Table 9.8 shows that the mean height of mothers measured in the 1996 TDHS is 156 cm. Less than 3 percent of mothers are shorter than 145 cm.

In addition to height, the other commonly used index is the BMI, which is derived by dividing the weight in kilograms (kg) by the square height in metres (m<sup>2</sup>). This indicator is used to assess thinness or obesity. A cut off point of 18.5 (kg/m<sup>2</sup>) has been recommended for defining short term or acute nutritional

<sup>&</sup>lt;sup>1</sup> The measuring boards and scales used to measure the mothers were the same as those used to collect anthropometric measurements of children.

<sup>&</sup>lt;sup>2</sup> Interviewers were instructed to weigh and measure all women who had had a birth since January 1991, regardless of whether or not the child was still living.

status, while a level below 16 classifies severe malnutrition (James et al., 1988) which is associated with increased mortality. The results of the 1996 TDHS show that the mean BMI among nonpregnant mothers was 22; 9 percent of mothers had a BMI below the 18.5 cut-off point, reflecting the prevalence of acute malnutrition among nonpregnant women.

Table 9.8 Maternal nutritional status by background characteristics

Among women who had a birth in the five years preceding the survey, percentage of women under 145 centimetres, mean body mass index (BMI) of women, and percentage of women whose BMI is less than 18.5 (kg/m²), and mean DHS z-score and percentage of Tanzanian mothers who are more than -2 SD below the median of the DHS population, by selected background characteristics, Tanzania 1996

		Height			BMI			BMI (DHS)	
Background characteristics	Mean	Percent- age < 145	Number of women	Mean	Percent- age < 18.5	Number of women	Mean DHS z-score	Z-score below -2 SD	Z-score number
Age									
15-19	155.9	3. <b>0</b>	328	21.5	8.6	272	-0.4	3.4	272
20-24	156.1	3.5	1,122	21.6	9.5	913	-0.4	2.1	911
25-29	156.6	1.8	1,104	22.0	8. <i>5</i>	903	<b>-0.6</b>	4.7	900
30-34	157.0	2.4	791	22.3	7.6	658	-0.7	7.1	657
35-49	156.2	2.9	983	22.2	10.8	883	-1.0	14.4	881
Residence									
Mainland	156.4	2.7	4,198	22.0	9.0	3,524	-0.7	6.6	3,516
Total urban	156.4	2.1	809	23.1	8.1	710	-0.3	4.9	710
Dar es Salaam city	155.6	3.0	227	23.5	7.3	207	-0.2	4.5	207
Other urban	156.7	1.7	582	22.9	8.4	503	-0.4	5.0	503
Total rural	156.4	2.8	3,389	21.7	9.2	2,814	-0.8	7.0	2,806
Zanzibar	155.4	2.9	129	21.4	15.4	105	-0.9	13.1	105
Region									
Dodoma	156.0	2.8	198	21.2	12.2	167	-0.9	10.1	167
Arusha	158.2	1.4	355	22.0	15.4	285	-0.7	10.1	285
Kilimanjaro	156.5	1.6	191	23.0	9.5	168	-0.5	10.1	167
Tanga	154.6	5.0	234	21.2	11.3	196	-0.9	7.8	193
Morogoro	153.3	6.6	212	21.6	6.1	179	-0.8	6.7	179
Coast	153.7	4.8	72	21.8	8.3	62	-0.7	5.6	62
Dar es Salaam	155.5	2.8	267	23.5	7.3	242	-0.2	4.2	242
Lindi	152.9	7.9	89	21.7	8.8	80	-0.8	9.6	.79
Mtwara	152.8	6.0	173	20.9	13.8	152	-1.0	9.6	152
Ruvuma	153.7	5.7	171	21.8	4.7	154	-0.8	3.0	154
Iringa	154.5	3.6	234	22.5	6.7	198	-0.7	5.5	198
Mbeya	155.8	2.0	221	22.8	3.2	187	-0.4	1.6	185
Singida	158.3	0.9	165	22.0	6.9	145	-0.7	5.4	145
Tabora	157.8	0.0	108	22,2	5.1	89	-0.5	5.1	89
Rukwa	156.7	2.3	146	22.3	3.0	115	-0.5	2.4	115
Kigoma	156.2	3.4	199	21.1	10.8	168	-0.9	5.7	167
Shinyanga	159.1	0.5	382	21.9	8.2	311	-0.6	5.3	311
Kagera	157.5	1.7	293	21.3	14.3	219	-0.9	12.9	217
Mwanza	158.5	1.1	331	22.2	8.1	275	-0.6	4.0	275
Mara	159.3	0.0	157	22.0	8.3	135	-0.5	5.5	135
Education									
No education	156.3	3.6	1.266	21.6	11.2	1,040	-0.9	9.3	1,039
Primary incomplete	155.7	2.8	698	21.8	10.1	586	-0.8	9.1	<b>5</b> 86
Primary incomplete	156.5	2.2	2,197	22.1	8.0	1,856	-0.6	4.8	1,851
Secondary +	158.2	1.4	167	24.3	6.5	1,830	-0.0	4.0	146
Secondary +									•
Total	156.4	2.7	4,327	22.0	9.2	3,629	-0.7	6.8	3,621

Note: Table includes only women who had a birth in the five years preceding the survey. The BMI index excludes pregnant women and those who are less than two months postpartum.

Overall, there is very little variation by background characteristics in maternal height and body mass measures among Tanzanian women. The percentage of women with height below 145 centimetres is higher among women in the Lindi region (8 percent) compared to other regions. Older women (35-49 years old), women from Zanzibar, women from the Arusha and Kagera regions, and women with low or no education are more likely to fall below the 18.5 BMI measure than other women.

# **CHAPTER 10**

# MATERNAL MORTALITY

Maternal mortality is recognised as a serious health problem in developing countries and Tanzania is no exception. These countries are characterised by high fertility, high incidence of infectious diseases, poverty, and scarcity of health services, which lead to high maternal mortality, among other things.

In Tanzania there have been deliberate efforts in the past to obtain maternal mortality estimates from small studies and hospital-based studies. Some estimates were derived from records of health facilities which also contained information about causes of deaths. Until now, such studies have estimated maternal mortality in Tanzania at 200-400 deaths per 100,000 live births (Ministry of Health, 1996). However, hospital records can over or underestimate maternal mortality. On the one hand, hospital records do not include those who do not deliver in hospitals (e.g., the poor, those in remote areas who are less likely to deliver babies in hospitals). On the other hand, hospital records are likely to overstate the true maternal mortality rate because women who develop complications during pregnancy or delivery are more likely to deliver in a hospital.

The estimates presented in this chapter are therefore important; they fill a vacuum for reliable, national estimates of maternal mortality. However, these estimates have no parallel against which they can be compared. Therefore, there is a need for further national-level investigation of this problem.

In the 1996 TDHS, both female and male respondents were requested to list all their siblings, that is, all the children born to their mother starting with the first born, and whether or not each of these siblings was still alive at the time of survey. The current age was collected for those who were still alive, and additional information was sought on the year of death and age at death of deceased siblings.

To establish whether deaths were maternity-related, respondents were further asked questions for all sisters who died at age 12 or older: "Was [NAME OF SISTER] pregnant when she died?"; and if not, "Did she die during childbirth?"; and if not, "Did she die within two months after the end of a pregnancy or childbirth?" It is intended that this information will not only give an estimate of maternal risk but a complete profile of person-years of exposure to the risk of mortality for the adult population being investigated.

The direct approach used in this chapter to estimate adult and maternal mortality maximises use of data collected in the 1996 TDHS on the survivorship, the age of surviving siblings, the age at death of siblings who died, and the number of years since the sibling died. This allows the data to be aggregated to determine the number of person-years of exposure to mortality and the number of deaths which have occurred to siblings in a particular calender year. According to Rutenberg and Sullivan (1991), it is possible to compute maternal mortality rates by dividing maternal (or all female or male adult) deaths by person-years of exposure.

## 10.1 Assessment of Data Quality

Techniques presented in this report have been employed under the presumption of the existence of both accurate and complete data pertaining to the number of siblings, their survival status, and the circumstances concerning the cause of their deaths. Hence, it is important to see at the outset how well these data meet this assumption. A brief description of data quality will be presented here and a more detailed discussion appears in Appendix C. One measure of quality is the completeness of information on siblings. Overall, the TDHS data on siblings is nearly complete. The distribution of the year of birth of respondents in

relation to their siblings is another way to measure the quality of the data on maternal mortality. The median year of birth of respondents (1969) almost coincides with the median year of birth of siblings (1970), implying that there is no substantial underreporting of siblings (Appendix Table C.8). The sex ratio of reported siblings (the ratio of brothers to sisters) was a little low (100.7), possibly showing slight underreporting of brothers (Appendix Table C.9).

# 10.2 Adult Mortality

Another way of assessing the quality of maternal mortality data is to look at estimates of adult mortality on the theory that if the overall mortality estimates show a generally stable and plausible pattern, this gives greater weight to the maternal mortality estimates derived thereafter. Estimates of male and female adult mortality can be obtained from information collected in the sibling history. Agespecific death rates are computed by dividing the number of deaths in each age group by the total person-months of exposure in that age group during the specified reference period. Age-specific death rates are then adjusted by the current age distribution of the de facto female population age 15-49 from the household schedule, by taking the sum of each age-specific mortality rate multiplied by the percentage of women in that age group, to obtain an overall agestandardized female adult mortality rate. It is assumed that the age distribution of respondents is the same as that of siblings. The same procedure is applied to obtain the male adult mortality rate using the age distribution of the male population obtained from the household schedule. Table 10.1 presents age-specific mortality estimates for females and males for the period 0-9 years before the survey.

In total, female respondents enumerated 47,727 siblings, of whom 23,775 were sisters and 23,952 were brothers. The number of sibling deaths during 1987-1996 is fairly small. Age-specific rates are based on relatively few occurrences and therefore subject to sampling variability. As such, it is preferable to aggregate the data over the age range 15-49. The number of reported female and male deaths in the age group 15-49 were 501 and 601, respectively. The female adult mortality rate is 21 percent lower than the male adult mortality rate.

Table 10.1 Adult mortality rates

Direct estimates of female and male adult mortality for the period 0-9 years prior to the survey, Tanzania 1996

Age	Deaths	Exposure	Mortality rates
	W	OMEN	
15-19	64	30,867	2.06
20-24	94	30,743	3.05
25-29	108	26,243	4.11
30-34	84	20,220	4.13
35-39	70	13,980	4.99
40-44	51	8,239	6.24
45-49	30	4,356	6.88
15-49	501	134,649	3.93 <sup>a</sup>
		MEN	
15-19	57	29,599	1.92
20-24	90	30,506	2.95
25-29	97	26,734	3.64
30-34	130	20,649	6.32
35-39	103	14,061	7.31
40-44	75	8,095	9.26
45-49	49	4,076	12.00
15-49	601	133,719	4.98 <sup>a</sup>
Note: N	1ortality ra	tes are exp	ressed per

Note: Mortality rates are expressed pe 1,000 population.
Age-adjusted rate.

The observed rates may be taken to be reasonably stable. For establishing their reliability it is useful to compare them to measures generated from other sources such as the 1988 Population Census (Bureau of Statistics, 1994). This comparison reveals that the adult mortality rates calculated from the 1996 TDHS data are generally too low compared to the 1988 Population Census data (not shown). These findings suggest that underreporting of deceased siblings in the TDHS data.

<sup>&</sup>lt;sup>1</sup>Although data were collected from male respondents, the analysis here is restricted to female respondents

## 10.3 Maternal Mortality

The age specific estimates of maternal mortality are presented in Table 10.2. These are derived through the reported survivorship of sisters. Age-specific mortality rates are calculated by dividing the number of maternal deaths by vears of exposure. The overall rate for women 15-49 is standardized by the age distribution of the survey respondents. Maternal deaths are defined as any death that occurred during pregnancy, childbirth, or within two months after the birth or termination of a pregnancy.

In all, the number of maternal deaths for the period 1987-1996 is 137. The general pattern is of high maternal mortality particularly in the 20-24 and 25-29 age groups. This is probably

Table 10.2 Direct estimates of maternal mortality

Direct estimates of maternal mortality for the period 0-9 years prior to the survey, Tanzania 1996

Age	Maternal deaths	Exposure	Mortality rates <sup>1</sup>	Proportion of maternal deaths to female deaths
15-19	17	30,867	0.541	0.266
20-24	38	30,743	1.238	0.404
25-29	31	26,243	1.165	0.287
30-34	20	20,220	0.996	0.238
35-39	18	13,980	1.260	0.257
40-44	6	8,239	0.751	0.118
45-49	8	4,356	1.769	0.267
15-49	137	134,649	1.043	0.274
General Fert	tility Rate (GFR)	_	0.197	
Maternal Me	ortality Ratio (MM	$(\mathbf{R})^2$	529	

Expressed per 1,000 woman-years of exposure.

due to the fact that more pregnancies occur in these age groups. However, the age-specific pattern should be interpreted with caution because of the small number of events. The maternal mortality rate, which is the annual number of maternal deaths per 1,000 women age 15-49 for the period 1987-1996 is 1.043. Maternal deaths accounted for 27 percent of all deaths to women age 15-49 during the 10 years preceding the survey.

The maternal mortality rate is conventionally converted to a maternal mortality ratio and expressed per 100,000 lives births by dividing the age-standardised maternal mortality rate by the age-standardised general fertility rate for the same reference period. The advantage of this type of conversion is that it highlights the obstetric risk, which has a high programmatic significance. Thus, for Tanzania between 1987-1996, the maternal mortality ratio is estimated at 529. In other words, for every 1,000 live births in Tanzania during this period, 5 women died of pregnancy-related causes.

<sup>&</sup>lt;sup>2</sup> Expressed per 100,000 live births; calculated as the maternal mortality rate divided by the general fertility rate.

# **CHAPTER 11**

# SEXUAL ACTIVITY AND KNOWLEDGE OF AIDS

### 11.1 Introduction

AIDS and HIV infection have been identified as serious health and socioeconomic problems in Tanzania. The AIDS virus was probably introduced in Tanzania in the early 1980s. The first three cases of AIDS were reported in 1983 in the Kagera region. Since then, cases continued to increase, and by 1986 all regions of the country had reported AIDS cases. Due to its fast spread, the control of AIDS has become a top government priority. The government set up the National Aids Control Programme (NACP) under the Ministry of Health.

It is estimated that about 1.2 million Tanzanians are infected with HIV, while about 400,000 have already developed AIDS (WHO, 1995). Data received from 10 antenatal clinics throughout the country show that HIV prevalence ranges up to 33 percent. The overall cumulative case rate by 1995 was 221 per 100,000 people, 228 for men and 214 for women. The highest case rates of more than 900 per 100,000 are in the age group 30-34 years among men and more than 700 per 100,000 in the same age group among women. Children age 10-14 have the lowest case rates (5.7 per 100,000 for boys and 8.0 per 100,000 for girls). The overall male-female case ratio and case rate ratio were 1.01 and 1.07, respectively, showing a slight overall female case load during 1995 (NACP, 1996). Although all regions are affected, Dar es Salaam, Mbeya and Kagera are the most affected regions. These three regions have kept the same positions in the order of reporting high number of AIDS cases for the past four years.

Other sexually transmitted diseases (STD), apart from AIDS, have been identified as co-factors in HIV transmission. In 1995, there were 375 STD cases reported from 54 STD sentinel sites and in total, 28,463 STD cases were recorded up to 1995 (NACP, 1996). On average, 2,372 cases were reported in a month, ranging from 11,864 cases found in men who accounted for 42 percent compared with 58 percent in women. The largest diagnostic category was Genital Discharge Syndrome (23 and 27 percent for males and females, respectively).

The 1996 TDHS included questions to assess the knowledge of STDs, the proportion of respondents who have had an STD, whether they sought advice or treatment for the disease, and whether they took measures to protect their sexual partners. The TDHS also included questions on AIDS to assess the knowledge and attitudes of respondents regarding transmission mechanisms and prevention of infection with the AIDS virus. Female and male respondents were asked if they had heard of AIDS and if so, the source from which they had received the most information. To assess awareness, respondents were asked to name the modes of transmission of the AIDS virus. They were also asked if they thought it was possible to prevent AIDS and if so, how, and whether they had changed their sexual behaviour to prevent getting AIDS and if so, how.

<sup>&</sup>lt;sup>1</sup>The case rates have been calculated from the reported cumulative number of AIDS cases (as the numerator) and the corresponding total regional populations after projection (as the denominator).

Male-female case ratio = (Total male AIDS cases/Total female AIDS cases).

Male-female rate ratio = (Male case rate /Female case rate) (NACP, 1996).

#### 11.2 Sexual Partners

Given the evidence that the vast majority of HIV infections in Tanzania are contracted through heterosexual contact, information on sexual behaviour is important in designing and monitoring intervention programmes to control the spread of the disease. Both male and female respondents were asked questions about sexual partners with whom they had sex in the 12 months preceding the survey. Respondents were asked about their spouses, and regular and nonregular sexual partners. Married respondents were asked whether they had sexual partners other than their spouse and if so, how many regular partners they had. They also were asked to state when they last had sexual intercourse with their spouse. Unmarried respondents were asked whether they had a regular sexual partner and if so, how many regular partners they had. They also were asked to state when they last had sex with a regular partner. Both married and unmarried respondents were also asked whether they had sexual intercourse with someone other than a regular partner within 12 months before the survey. They were then asked how many people they had sex with and when the most recent sexual encounter with a nonregular partner occurred.

Tables 11.1.1 and 11.1.2 present data on the number of sexual partners respondents had in the 12 months preceding the survey. The vast majority of currently married women (95 percent) had not had sex with anyone other than their spouse (or have not had sex at all) in the 12 months preceding the survey. In the 1994 TKAPS, the figure was 93 percent. Among married women, sex outside marriage is more likely to be higher for women from the Mtwara, Lindi, and Coast regions than other regions. Two-thirds (65 percent) of the unmarried women were not sexually active in the 12 months preceding the survey. Unmarried women living in Lindi region were most likely to have had more than one partner than their counterparts.

Seventy-four percent of married men reported having only one sexual partner in the previous 12 months. Only 7 percent of married men reported abstaining from sex in the past 12 months, whereas 19 percent reported having sex with two or more women. Among married men, sex outside marriage is higher among 20-29 age groups, among men married 0-4 years, among those living in the Southern zone, and among those who have some education. Forty percent of unmarried men had been sexually active in the previous 12 months. Twenty percent had one partner and about the same percent had two or more partners. A higher proportion of unmarried men had more than one partner among those age 25-29, among men living in urban areas, living in Coastal and Southern zones, and those with higher education.

#### 11.3 Awareness of Sexually Transmitted Diseases

Table 11.2 shows the percentage of women and men who spontaneously mentioned knowing about specific STDs, by various background characteristics.

AIDS is by far the most widely known STD among respondents. Without probing, more than 80 percent of women and men cited AIDS. The next most commonly reported STD was gonorrhoea, with 57 percent of women and 78 percent of men spontaneously reporting knowledge of the disease. This gender difference in knowledge also occurs regarding knowledge of syphilis, with men more likely (72 percent) than women (51 percent) to mention this disease. Fifteen percent of women and 7 percent of men could not cite a single STD.

Both women and men are less likely to be informed about STDs if they lack formal education, if they live in rural areas on the mainland or live in Zanzibar, and if they are younger (15-19 years). Differences by regions were also observed; lack of knowledge of STDs was lowest in the Arusha region (27 percent of women and 14 percent of men could not cite a single STD). Being formerly or currently married and, if never married, having had sex significantly contributes to having knowledge of STDs.

Table 11.1.1 Number of sexual partners: women

Percent distribution of currently married and unmarried women, by number of persons with whom they had sexual intercourse in the past 12 months, according to background characteristics, Tanzania 1996

			,	Cuitinu	married wome	ш						Unma	arried women			
		Number o	f partners	(includin	g spouse)	<u> </u>		Number			Number o	of partner	rs			
Background Characteristic	0	1	2-3	4+	Missing/ Don't know	Total	Mean	Number of women	0	1	2-3	4+	Missing/ Don't know	Total	Mean	Number of wome
Age 15-19	4.1	90.2	5.0	0.1	0.6	100.0	1.0	401	76.8	19.4	2.7	0.5	0.5	100.0	0.3	1,331
20-24	3.6	91.2	4.3	0.6	0.4	100.0	1.0	1.131	52.8	39.0	5.0	1.9	1.3	100.0	0.6	545
25-29	5.2	89.0	5.0	0.4	0.4	100.0	1.0	1.184	44.2	47.7	5.3	0.3	2.4	100.0	0.6	256
30-39	6.6	87.4	5.1	0.4	0.5	100.0	1.0	1,687	50.3	42.6	4.6	1.2	1.3	100.0	0.6	319
40-49	7.7	88.5	3.0	0.1	0.6	100.0	1.0	1,008	68.0	26.1	3.6	1.0	1.4	100.0	0.4	257
Marital duration																
Never married	NA	NA	NA	NA	NA	NA	NA	NA	69.9	25.7	2.7	0.9	0.9	100.0	0.4	1,887
0-4	3.6	92.0	3.7	0.4	0.3	100.0	1.0	1,312	53.6	36.7	7.8	1.3	0.6	100.0	0.6	141
5-9	4.4	89.4	5.4	0.4	0.4	100.0	1.0	1,203	40.0	49.6	8.0	1.3	1.2	100.0	0.7	154
10-14	7.6	85.8	5.5	0.2	0.8	100.0	1.0	919	47.6	41.9	7.8	0.7	2.0	100.0	0.6	128
15+	7.0	88.1	4.1	0.4	0.5	100.0	1.0	1,977	60.7	32.6	4.1	0.9	1.7	100.0	0.5	399
Residence																
Mainland	5.8	88.8	4.6	0.4	0.5	100.0	1.0	5,245	64.1	30.0	3.8	0.9	1.1	100.0	0.4	2,635
Total urban	3.7	88.8	6.2	0.5	0.7	100.0	1.1	1,073	56.1	36.5	4.7	1.4	1.3	100.0	0.5	738
Dar es Salaam city	3.7	86.1	9.0	0.5	0.7	100.0	1.1	340	56.4	36.0	4.9	2.3	0.4	100.0	0.6	223
Other urban	3.7	90.1	5.0	0.5	0.7	100.0	1.0	733	56.0	36.7	4.6	1.1	1.7	100.0	0.5	515
Total rural	6.3	88.7	4.2	0.3	0.4	100.0	1.0	4,172	67.2	27.5	3.5	0.7	1.0	100.0	0.4	1,897
Zanzibar	3.2	94.6	2.0	0.0	0.3	100.0	0.1	166	93.6	6.4	0.0	0.0	0.0	100.0	0.1	73
Region	- 0		<b>5</b> 0										_			
Dodoma	7.9	83.0	7.9	0.0	1.3	100.0	1.0	258	66.3	30.2	2.3	0.0	1.2	100.0	0.4	97
Arusha	11.8	86.0	0.9	0.3	0.9	100.0	0.9	403	68.2	25.0	2.7	0.7	3.4	100.0	0.3	186
Kilimanjaro	4.0	94.6	0.9	0.0	0.4	100.0	1.0	221	70.0	24.1	2.4	0.0	3.5	100.0	0.3	169
Tanga	3.3	88.0	6.2	0.0	2.5	100.0	1.0	282	64.7	24.4	7.7	1.3	1.9	100.0	0.5	181
Morogoro	4.6	91.6	3.0	0.4	0.4	100.0	1.0	257	62.9	32.9	3.6	0.0	0.7	100.0	0.4	151
Coast	4.1	81.9	11.7	1.8	0.6	100.0	1.2	98	51.9	34.9	8.5	4.7	0.0	100.0	0.8	61
Dar es Salaam	3.6	87.3	8.1	0.4	0.6	100.0	1.1	399	55.8	37.3	4.5	2.1	0.3	100,0	0.6	246
Lindi	11.4	72.4	11.9	3.3	1.0	100.0	1.2	123	43.5	41.7	13.0	1.9	0.0	100.0	0.8	63
Mtwara	12.3	73.7	11.7	1.6	0.6	100.0	1.1	248	56.4	30.1	8.3	3.0	2.3	100.0	0.7	107
Ruvuma	8.3	83.4	7.0	1.0	0.3	100.0	1.0	205	44.4	49.0	4.6	2.0	0.0	100.0	0.7	100
Iringa	17.3	81.9	0.8	0.0	0.0	100.0	0.8	291	78.8	19.2	1.4	0.7	0.0	100.0	0.3	175
Mbeya	4.7	91.5	3.3	0.5	0.0	100.0	1.0	318	69.9	25.2	4.9	0.0	0.0	100.0	0.4	155
Singida	5.9	88.9	4.4	0.4	0.4	100.0	1.0	194	71.0	23.4	1.6	2.4	1.6	100.0	0.4	89
Tabora	4.3	87.0	8.7	0.0	0.0	100.0	1.1	157	58.3	31.7	8.3	1.7	0.0	100.0	0.6	68
Rukwa	0.8	93.4	5.4	0.4	0.0	100.0	1.1	177	54.3	41.5	2.1	2.1	0.0	100.0	0.5	64
Kigoma	4.5	94.3	1.2	0.0	0.0	100.0	1.0	233	85.4	11.4	2.4	0.8	0.0	100.0	0.2	117
Shinyanga	1.2	95.3	3.1	0.0	0.4	100.0	1.0	464	65.3	30.6	3.3	0.0	0.8	100.0	0.4	221
Kagera	2.0	95.6	2.4	0.0	0.0	100.0	1.0	337	78.5	21.5	0.0	0.0	0.0	100.0	0.2	130
Mwanza Mara	1.9 5.6	96.7 87.3	1.4 6.6	0.0 0.5	0.0 0.0	100.0 100.0	1.0 1.0	395 183	46.9 70.0	50.0 27.5	1.0 2.5	0.0 0.0	2.1 0.0	100.0 100.0	0.5 0.3	17
	5.0	6,10	0.0	0.5	v.v	100.0	1.0	103	70.0	د. ۱۷	۷.٥	0.0	U.U	100.0	0.3	74
Educational No education	7.1	88.5	3.7	0.4	0.4	100.0	1.0	1,829	62.2	32.1	3.5	1.4	0.7	100.0	0.5	488
Primary incomplete	5.7	88.0	5.3	0.4	0.4	100.0	1.0	921	73.4	21.3	3.4	1.0	0.7 0.8	100,0	0.3	710
Completed primary	5.0	89.2	5.0	0.3	0.5	100.0	1.0	2,461	61.2	32.4	4.3	0.7	1.5	100.0	0.5	
Secondary +	2.4	94.3	2.4	0.0	0.8	100.0	1.0	200	64.8	31.9	2.3	0.7	0.3	100.0	0.5	1,270 24
rotal -	5.7	88.9	4.5	0.4	0.5	100.0	1.0	5,411	64.9	29.4	3.7	0.9	1.0	100.0	0.4	2,709

Table 11.1.2 Number of sexual partners: men

Percent distribution of currently married and unmarried men, by number of persons with whom they had sexual intercourse in the past 12 months, according to background characteristics, Tanzania 1996

				Current	ly married men	l						Unu	narried men			
	-	Numb	er of parine	ers (inclu	ding spouse)			Number			Numb	er of partn	ers			Numbe
Background characteristic	0	1	2-3	4+	Missing/ don't know	Total	Mean	of men	0	1	2-3	4+	Missing/ don't know	Total	Меал	of men
Age [5-19		*	*	*	*	100.0	*		72.6	12.5	0.7	2.2	0.6	100.0	0.6	400
15-19 20-24	9.0	52.1	22.1	14.8	2.0	100.0 100.0	2.1	6 91	73.6 45.5	13.7 26.9	8.7 20.1	3.3 6.5	0.6 1.0	100.0 100.0	0.6 1.2	482 280
25-29	6.2	68.3	19.7	4.8	1.0	100.0	1.4	196	43.5 33.9	26.1	17.4	17.2	5.5	100.0	1.9	105
23-29 30-39	5.9	74.1	14.1	4.9	1.1	100.0	1.4	463	44.1	21.1	16.5	10.4	3.5 7.9	100.0	1.5	60
40-49	6.8	75.3	13.7	3.6	0.6	100.0	1.3	332	(60.1)	(10.8)	(11.9)	(13.1)	(4.0)	100.0	(1.1)	22
50-59	6.6	85.7	6.8	0.9	0.0	100.0	1.1	200	(00.1)	(10.0)	(11.9)	(13.1)	(4.0)	100.0	(1.1)	23 17
30-39	0.0	63.1	0.6	0.9	0.0	100.0	1.1	200		•	-	•	•	100.0	•	17
Marital duration																
Never married	NA	NA	NA	NA	NA	NA	NA	NA	60.4	19.2	13.3	5.7	1.4	100.0	0.9	851
0-4	7.1	64.1	20.0	7.5	1.3	100.0	1.6	293	(44.0)	(21.3)	(20.0)	(13.2)	(1.6)	100.0	(1.5)	39 29 22 27
5-9	4.6	74.5	14.1	4.7	2.1	100.0	1.3	275	:		*	*	*	100.0	•	29
10-14	6.8	73.1	14.7	5.4	0.0	100.0	1.5	219	-	-	-	-		100.0	# (1.4)	22
15+	7.2	79.2	10.9	2.6	0.2	100.0	1.2	501	(49.8)	(23.1)	(10.2)	(16.9)	(0.0)	100.0	(1.4)	27
Residence																
Mainland	6.6	73.2	14.6	4.8	0.8	100.0	1.4	1,253	<b>57.</b> 3	20.1	14.0	6.9	1.8	100.0	1.0	934
Total urban	3.9	73.9	17,3	3.9	1.0	100.0	1.3	260	51.9	21.8	18.4	6.3	1.6	0.001	1.1	248
Dar es Salaam city	7.6	64.4	17.4	8.3	2.3	100.0	1.5	83	34.3	34.3	21.4	8.6	1.4	100.0	1.4	88
Other urban	2.2	78.3	17.3	1.9	0.4	100.0	1.2	177	61.6	14.9	16.8	5.0	1.7	100.0	0.9	160
Total rural	7.3	73.1	13.8	5.0	0.8	100.0	1.4	992	59.2	19.5	12.3	7.1	1.9	100.0	1.0	686
Zanzibar	3.6	90.5	4.3	0.0	1.5	100.0	1.0	35	89.5	8.2	2.2	0.0	0.0	100.0	0.1	33
Zone																
Coastal	6.1	70.2	17.2	4.6	1.9	100.0	1.4	268	48.7	23.6	20.5	5.4	1.7	100.0	1.1	240
Northern highlands	7.9	80.4	6.6	4.2	0.8	100.0	1.3	146	58.4	21.9	10.0	7.0	2.7	100.0	1.0	129
Lake	2.7	76.4	15.6	4.4	0.8	100.0	1.4	437	58.1	19.3	15.2	7.0	0.4	100.0	1.0	320
Central	7.8	71.7	17.9	2.6	0.0	100.0	1.3	101	67.6	16.2	6.4	7.1	2.7	100.0	0.8	75
Southern highlands	9.2	84.1	2.9	3.7	0.0	100.0	1.1	186	79.8	12.4	3.9	3.8	0.0	100.0	0.6	122
Southern	12.9	53.9	24.4	8.2	0.6	100.0	1.6	149	47.4	19.9	13.1	12.0	7.5	100.0	1.6	82
Education																
No education	7.0	80.3	8.4	4.3	0.0	100.0	1.2	213	66.6	11.4	12.2	6.4	3.4	100.0	1.0	92
Primary incomplete	7.2	75.2	13.9	3.3	0.4	100.0	1.3	342	75.0	13.6	5.9	4.2	1.2	100.0	0.6	322
Primary complete	6.4	70.3	16.4	5.6	1.2	100.0	1.5	612	48.4	23.8	18.3	7.8	1.6	100.0	1.2	454
Secondary +	4.3	75.2	14.8	4.2	1.5	100.0	1.3	121	42.8	28.1	17.8	8.8	2.6	100.0	1.2	100
Total	6.5	73.7	14.3	4.6	0.8	100.0	1.4	1,288	58.4	19.7	13.5	6.6	1.8	100.0	1.0	968

Note: Figures in parentheses are based on 25-49 men; and asterisk indicates that a figure is based on fewer than 25 men and has been suppressed. NA = Not applicable.

Table 11.2 Knowledge of STDs

Percent of respondents who know of specific sexually transmitted diseases according to background characteristics, Tanzania 1996

characteristic  Age 15-19 20-24 25-29 30-39 40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex Residence Mainland Total urban Dar es Saleam city Other urban Total rural Zanzibar	35.5 55.9 57.9 57.9 50.7 NA 52.9 60.1 43.2 60.0 29.9 52.4 68.4 65.0	90.1 61.6 64.0 63.7 58.2 NA 59.4 69.2 46.5 64.2 32.3	71.6 83.1 84.0 83.8 80.5 NA 81.9 85.2 74.9 84.3 67.4	Genital warts 0.5 1.5 0.5 1.4 0.8 NA	Other 4.2 6.7 6.5 6.2 NA	Don't know any 25.2 11.8 10.8 11.6 15.4 NA	Number of women 1,732 1,676 1,440 2,006 1,265 NA	Syphil- lis 49.6 74.7 83.7 81.1 78.2	57.2 78.5 84.0 86.7	73.6 80.8 84.8 87.6	Genital warts  1.4 4.6 2.5 3.0	Other 3.9 6.8 8.6 7.7	Don't know any 17.9 4.3 4.1 4.0	488 371 301
20-24 25-29 30-39 40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	55.9 57.9 57.0 50.7 NA 52.9 60.1 43.2 60.0 29.9 52.4 68.4	61.6 64.0 63.7 58.2 NA 59.4 69.2 46.5 64.2 32.3	83.1 84.0 83.8 80.5 NA 81.9 85.2 74.9 84.3	1.5 0.5 1.4 0.8 NA	6.7 6.5 6.2 NA 6.6	11.8 10.8 11.6 15.4	1,676 1,440 2,006 1,265	74.7 83.7 81.1 78.2	78.5 84.0 86.7	80.8 84.8 87.6	4.6 2.5	6.8 8.6	4.3 4.1	371 301
20-24 25-29 30-39 40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	55.9 57.9 57.0 50.7 NA 52.9 60.1 43.2 60.0 29.9 52.4 68.4	61.6 64.0 63.7 58.2 NA 59.4 69.2 46.5 64.2 32.3	83.1 84.0 83.8 80.5 NA 81.9 85.2 74.9 84.3	1.5 0.5 1.4 0.8 NA	6.7 6.5 6.2 NA 6.6	11.8 10.8 11.6 15.4	1,676 1,440 2,006 1,265	74.7 83.7 81.1 78.2	78.5 84.0 86.7	80.8 84.8 87.6	4.6 2.5	6.8 8.6	4.3 4.1	371 301
25-29 30-39 40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	57.9 57.0 50.7 NA 52.9 60.1 43.2 60.0 29.9 52.4 68.4	64.0 63.7 58.2 NA 59.4 69.2 46.5 64.2 32.3	84.0 83.8 80.5 NA 81.9 85.2 74.9 84.3	0.5 1.4 0.8 NA 1.0 1.4	6.7 6.5 6.2 NA	10.8 11.6 15.4	1,440 2,006 1,265	83.7 81.1 78.2	84.0 86.7	84.8 87.6	2.5	8.6	4.1	301
30-39 40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	57.0 50.7 NA 52.9 60.1 43.2 60.0 29.9 52.4 68.4	63.7 58.2 NA 59.4 69.2 46.5 64.2 32.3	83.8 80.5 NA 81.9 85.2 74.9 84.3	1.4 0.8 NA 1.0 1.4	6.5 6.2 NA 6.6	11.6 15.4	2,006 1,265	81.1 78.2	86.7	87.6				
40-49 50-59  Marital status Currently in union Formerly in union Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	52.9 60.1 43.2 60.0 29.9 52.4 68.4	59.4 69.2 46.5 64.2 32.3	80.5 NA 81.9 85.2 74.9 84.3	0.8 NA 1.0 1.4	6.2 NA 6.6	15.4	1,265	78.2			3.0	7.7		
Marital status Currently in union Formerly in union Never married Had sex Never had sex Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	52.9 60.1 43.2 60.0 29.9 52.4 68.4	59.4 69.2 46.5 64.2 32.3	NA 81.9 85.2 74.9 84.3	NA 1.0 1.4	NA 6.6									523
Marital status Currently in union Formerly in union Never married Had sex Never had sex Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	52.9 60.1 43.2 60.0 29.9 52.4 68.4	59.4 69.2 46.5 64.2 32.3	81.9 85.2 74.9 84.3	1.0 1.4	6.6	NA	NA		86.5 77.8	90.7 85.2	4.0 0.7	7.5	1.9 5.4	35 <b>5</b> 218
Currently in union Formerly in union Never married Had sex Never had sex Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	60.1 43.2 60.0 29.9 52.4 68.4	69.2 46.5 64.2 32.3	85.2 74.9 84.3	1.4				73.3	//.8	83.2	0.7	8.1	3.4	218
Formerly in union Never married Had sex Never had sex Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	60.1 43.2 60.0 29.9 52.4 68.4	69.2 46.5 64.2 32.3	85.2 74.9 84.3	1.4										
Never married Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	43.2 60.0 29.9 52.4 68.4	46.5 64.2 32.3	74.9 84.3			13.6	5,411	80.2	84.9	88.8	3.2	7.8	3.0	1,288
Had sex Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	60.0 29.9 52.4 68.4	64.2 32.3	84.3	07	8.9	9.5	822	79.7	83.0	86.3	0.5	12.7	2.9	117
Never had sex  Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	29.9 52.4 68.4	32.3			3.3	21.4	1,887	59.3	66.0	74.8	2.5	4.7	13.5	847
Residence Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	52.4 68.4		67.4	1.0	3.9	10.6	839	69.9	78.7	80.3	4.1	5.6	6.1	501
Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	68.4			0.5	2.8	30.0	1,048	43.9	47.5	66.7	0.2	3.5	24.1	346
Mainland Total urban Dar es Salaam city Other urban Total rural Zanzibar	68.4													
Total urban Dar es Salaam city Other urban Total rural Zanzibar	68.4	58.2	80.6	1.0	6.2	14.9	7,881	73.6	78.2	83.1	2.9	7.1	6.8	2,187
Dar es Saleam city Other urban Total rural Zanzibar		73.8	88.7	i.ĭ	6.3	6.0	1,811	81.5	85.6	83.1	5.3	5.6	3.7	509
Other urban Total rural Zanzibar	0.5.07	76.4	92.3	1.1	3.9	3.8	563	77.6	84.6	83.1	8.1	8.1	1.5	171
Total rural Zanzibar	69.9	72.6	87.1	i.i	7.4	7.0	1.248	83.4	86.1	83.2	3.8	4.4	4.8	338
Zanzibar	47.6	53.6	78.2	0.9	6.2	17.5	6,070	71.2	76.0	83.1	2.1	7.3	7.7	1,678
	17.3	30.9	80.3	1.1	0.2	19.0	239	33.9	61.5	89.7	0.0	0.0	10.3	1,078
Pemba Unquia	12.2 20.5	17.3 39.3	71.9 85.5	2.0 0.6	0.0 0.3	28.1 13.3	92 148	13.0 48.1	59.3 63.0	96.3 85.2	0.0	0.0 0.0	3. <b>7</b> 14. <b>8</b>	28 41
Unguja	20,3	J <b>J.</b> J	د.ده	υ,υ	0.5	13.3	140	40.1	03.0	03.4	v.v	0.0	14.0	41
Regions	27.0	46.7	72.2	0.6	2.5	20.1	265	40.1	<b>60</b> I	70.3	0.0	4.0	10.0	0.5
	37.8	46.7	73.3	0.6	3.5	20.3	355	42.1	62.1	79.3	0.0	4.3	12.9	.96
Arusha	43.5	50.1	66.3	0.9	1.3	27.1	589	55.3	62.8	75.5	1.1	2.1	13.8	1 <b>5</b> 6
Kilimanjaro	59.0	68.7	84.7	0.3	0.5	13.7	390	71.8	80.0	85.1	0.5	1.0	8.2	119
Tanga	46.0	63.3	76.9	0.3	4.5	20.4	464	61.3	74.7	85.3	4.0	8.0	8.0	108
Morogoro	50.7	<u>5</u> 6.8	84.9	0.0	1.1	12.5	408	63.6	72.0	86.7	0.0	2.8	8.4	95
Coast	56.7	71.8	92.1	1.4	5.8	6.1	159	77.4	88.7	80.6	0.0	16.1	6.5	45
Dar es Salaam	63.6	74.9	91.8	1.0	4.1	4.2	646	77.3	83.6	82.6	8.2	9.9	2.0	191
	65.4	71.4	91.2	0.0	15.4	6.6	187	93.0	98.6	97.2	1.4	12.7	1.4	54
	56.2	67.1	84.4	0.2	18.6	12.7	355	87.1	94.1	94.1	1.0	19.8	4.0	96
	62.9	76.6	83.7	0.4	2.8	10.5	305	78.4	90.2	90.2	1.0	17.6	1.0	<b>8</b> 2
	58.1	47.6	77.6	1.3	4.9	14.9	466	73.0	72.3	83.9	0.7	13.9	5.1	100
Mbeya	62.1	64.6	77.4	0.3	26.1	14.0	473	88.9	81.9	76.4	15.3	8.3	9.7	137
Singida	53.6	65.2	82.5	0.3	1.0	16.0	283	72.6	86.9	88.1	6.0	2.4	3.6	180
Tabora	51.5	55.6	82.8	3.5	4.5	13.6	225	61.1	68.5	83.3	5.6	0.0	5.6	82
Rukwa	53.3	66.0	74.2	0.0	10.2	19.5	242	84.6	82.1	85.9	2.6	12.8	5.1	71
	34.3	47.4	78.7	1.4	1.9	19.5	351	77.1	67.1	90.0	2.9	1.4	4,3	9 <b>5</b>
Kigoma	63.5	60.8	78.4	0.5	9.1	14.7	686	78.7	78.7	78.7	0.6	7.9	4.5 9.1	202
													7.1 7.0	
Kagera	34.9	29.9	86.6	5.3	0.7	13.4	467	58.0	59.4	89.9	0.0	4.3	5.8	139
	51.9 37.9	44.8 59.9	77.4 83.0	0.6 1.1	4.8 8.3	16.5 11.6	573 257	91.0 85.5	93.6 85.5	73.1 81.8	0.0 1.8	3.8 3.6	5.1 10.9	176 64
			-2.0					50.0				2.0		
Education	40.0		<b>50.0</b>				0.04.4	<b>60.0</b>		50.5			110	
No education	40.8	44.6	70.3	0.8	6.2	24.8	2,316	59.8	65.3	72.5 81.7	1.7	9.9	14.3	304
Primary incomplete	44.9	50.0	78.2	1.0	5.7	18.4	1,630	65.9	69.8	81.7	2.3	6.6	10.5	664
	58.6	66.1	87.2	1.1	6.6	8.8	3,732	76.8	83.1	86.0	2.7	6.5	3.8	1,066
Secondary +	69.7	78.7	87.9	0.7	2.2	3.0	441	87.8	92.4	90.5	5.9	5.1	0.7	222
Total	51.4	57.4	80.6	1.0	6.1	15.0	8,120	72.4	77.7	83.3	2.8			

## 11.4 Prevalence of Sexually Transmitted Diseases

Respondents were asked whether they had had any sexually transmitted disease in the 12 months preceding the survey. As Table 11.3 shows, 2 percent of women and 8 percent of men reported having an STD in the year preceding the survey. These levels are likely to be underestimates of the true prevalence for two reasons. First, many STD cases are unrecognised and perhaps more importantly, many respondents fail to report a recent STD because of the social stigma.

Those who report having an STD are more likely to be in the more sexually active age groups (20 - 39) and to have been formerly married than currently married or never married. Urban men are more likely to have had an STD than their rural counterparts on the mainland. Men from the Mtwara region and women from the Rukwa region are more likely to have had an STD than respondents from other regions. The prevalence of STDs has remained the same for women and has increased from 4 to 8 percent for men since the 1994 TKAPS.

Table 11.4 presents information on the 178 women and 174 men who report having had an STD in the 12 months preceding the survey. The vast majority of respondents (84 percent of both women and men) who report having any STD sought treatment, but a smaller proportion of men (58 percent) than women (83 percent) informed their partners of the infection. When asked what, if anything, was done to prevent infecting the respondent's partner, 7 percent of women and 18 percent of men said that they did nothing, while 38 percent of women and 5 percent of men reported that their partners were already infected. One-fourth of the women who had an STD said they avoided sex, another fourth (24 percent) said that they took medicine, and less than 1 percent reported using condoms. Among men who reported having had an STD, 52 percent mentioned that they avoided sex, while 18 percent took medicine. Four percent of men said they used condoms to avoid infecting their partners.

## 11.5 AIDS Knowledge and Awareness

Dissemination of AIDS information is a joint effort among government agencies such as the National Aids Control Programme, nongovernment organisations, and donor agencies. The messages channeled to the public include information about basic transmission modes and prevention strategies. Respondents in the 1996 TDHS were asked about sources of information from which they had learned most about AIDS.

### Awareness and Sources of AIDS Information

Tables 11.5.1 and 11.5.2 show that nearly all women (97 percent) and men (99 percent) in Tanzania know of AIDS. Similar to the findings in the 1994 TKAPS, the most common sources of information mentioned are radio, and friends, or relatives with 64 percent of women and 87 percent of men citing radio as a source, and 65 percent of women and 55 percent of men mentioning friends or relatives as a source of AIDS information (Figure 11.1). Men are more likely than women to cite newspapers and pamphlets or posters as sources of AIDS information. On the other hand, women are more likely to receive information about AIDS from health workers than men. Religious institutions such as churches and mosques are also sources of information on AIDS, as are schools. About 7-9 percent of respondents have received information from religious institutions or from school. Respondents from the city of Dar es Salaam tend to receive information about AIDS more from radio, television, newspapers, and pamphlets than other urban and rural respondents. These media are also more widely cited as sources of AIDS information by more educated women and men.

Table 11.3 Self-reporting of sexually transmitted diseases in the past year

Percent of respondents who report having sexually transmitted diseases (STD) during the 12 months prior to the survey, by specific sexually transmitted disease, and background characteristics, Tanzania 1996

				Women							N	/len			
Background characteristic	Any STD	Syphil- lis	Gon- orrhoca	AIDS	Genital warts	Other	Number of women	Any STD	Syphil- lis	Gon- orrhoea	Genital warts	Dis- charge from penis	Sore/ ulcer on penis	Other	Number of men
A <b>ge</b> 15-19	0.8	0.4	0.4	0.0	0.0	0.0	1,732	2.9	0.5	0.6	0.2	1.4	1.1	0.5	488
20-24	2.3	0.4 0.3	1.5	0.0	0.0	0.0	1,732	8.6	3.6	4.0	0.2	5.7	2.9	0.3	371
25-29	3.0	0.8	2.1	0.0	0.0	0.0	1,440	12.2	1.4	7.9	0.2	9.6	4.1	0.4	301
30-39	2.7	0.9	1.7	0.0	0.1	0.0	2,006	11.1	2.0	7.1	0.0	5.9	2.1	0.5	523
40-49	2.1	0.4	1.5	0.0	0.0	0.2	1,265	7.5	1.5	5.8	0.0	5.2	2.3	0.3	35
50-59	NA	ŇA	ŇA	NA	NA	NA	NA	3.1	0.7	2.1	0.0	0.8	0.0	0.0	218
Marital status															
Currently in union	2.6	0.7	1.6	0.0	0.0	0.2	5,411	8.1	1.5	5.1	0.0	5.0	2.2	0.4	1,288
Formerly in union	2.9	0.4	2.2	0.0	0.2	0.2	822	19.2	3.2	13.2	0.0	13.2	2.6	1.4	117
Never married	0.8	0.3	0.6	0.0	0.0	0.0	1,887	5.6	1.7	2.7	0.1	3.4	2.0	0.2	847
Residence	2-	A -			0.0		<b>5</b> 001	<b>4</b> ^	1.5	4.5			2.2	٥.	a 102
Mainland	2.2	0.6	1.5	0.0	0.0	0.1	7,881	7.9	1.7	4.8	0.1	4.9	2.2	0.4	2,187
Total urban	2.1	0.4	1.3	0.0	0.2	0.2	1,811	11.3	2.0	7.4	0.1	7.6	2.8 2.6	0.0 0.0	509
Dar es Salaam city	1.5	0.2 0.6	0.8 1.5	0.2 0.0	0.3 0.1	0.2 0.2	563 1.248	12.9 10.5	1.1 2.5	8.5 6.8	0.4 0.0	9.2 6.7	2.9	0.0	171 338
Other urban	2.4 2.3	0.6	1.5	0.0	0.1	0.2	6,070	6.9	1.6	4.0	0.0	4.1	2.9	0.0	1,678
Total rural Zanzibar	0.4	0.0	0.2	0.0	0.0	0.0	239	1.1	0.0	0.0	0.0	1.1	0.0	0.0	69
Pemba	0.0	0.0	0.0	0.0	0.0	0.0	92	0.0	0.0	0.0	0.0	0.0	0.0	0.0	28
Unguja	0.6	0.3	0.3	0.0	0.0	0.0	148	1.9	0.0	0.0	0.0	1.9	0.0	0.0	41
Regions															
Dodoma	1.3	0.0	1.3	0.0	0.0	0.0	355	11.4	0.0	10.7	0.0	8.6	2.9	0.0	96
Arusha	3.2	0.4	2.3	0.0	0.2	0.0	589	8.5	1.1	4.3 6.7	0.0	2.1	2.1	0.0	156
Kilimanjaro	0.5	0.0	0.5	0.0	0.0	0.0	390	9.7	1.5		0.0	3.6	2.1	0.0	119
Tanga	1.3	0.3	1.0	0.0	0.0	0.0	464	6.7	1.3	5.3	0.0	5.3	5.3	0.0	108
Morogoro	1.3	0.3	1.1	0.0	0.0	0.0	408	7.7	4.2	3.5	0.0	5.6	2.8	0.0	95
Coast	0.4	0.4	0.0	0.0	0.0	0.0	159	9.7	0.0	4.8	0.0	6.5	1.6	1.6	45
Dar es Salaam	1.4	0.1	0.8	0.1	0.3	0.1	646	12.2	1.0	7.9	0.3	8.2	2.6	0.0	191
Lindi	1.9	0.6	1.6	0.0	0.0	0.0	187	15.5	1.4 6.9	12.7	0.0	7.0	1.4	0.0 6.9	54
Mtwara	2.5	0.5	2.0	0.0 0.0	0.0 0.0	0.0	355 305	22.8 9.8	0.9	9.9 8.8	0.0 0.0	11.9 6.9	9.9 2.9	0.0	96 82
Ruvuma	1.1 1.8	0.2 1.0	0.6 0.5	0.0	0.0	0.2 0.3	466	0.7	0.0	0.0 0.0	0.0	0.0	0.0	0.0	100
Iringa Mbeya	4.5	1.0	3.2	0.0	0.0	0.3	473	9.7	2.8	6.9	0.0	8.3	1.4	0.0	137
Singida	1.3	0.3	1.0	0.0	0.0	0.0	283	9.5	2.4	6.0	1.2	8.3	0.0	0.0	80
Tabora	2.5	1.5	1.0	0.0	0.0	0.0	225	5.6	5.6	1.9	0.0	3.7	3.7	0.0	82
Rukwa	6.8	1.7	4.8	0.0	0.0	0.3	242	3.8	1.3	0.0	0.0	2.6	1.3	0.0	71
Kigoma	0.5	0.0	0.5	0.0	0.0	0.0	351	5.7	0.0	5.7	0.0	5.7	0.0	0.0	95
Shinyanga	3.5	0.8	2.1	0.0	0.0	0.5	686	6.1	3.0	1.2	0.0	2.4	1.2	0.6	202
Kagera	0.7	0.7	0.0	0.0	0.0	0.0	467	2.9	0.0	0.0	0.0	1.4	1.4	0.0	139
Mwanza	2.9	1.3	1.6	0.0	0.0	0.0	573	1.3	0.0	1.3	0.0	1.3	0.0	0.0	176
Mara	5.4	1.1	3.6	0.0	0.0	0.7	257	7.3	1.8	5.5	0.0	5.5	3.6	0.0	64
Education															_
No education	2.1	0.5	1.3	0.0	0.0	0.2	2,316	9.8	1.4	5.5	0.2	6.3	2.5	0.0	304
Primary incomplete	2.2	0.5	1.5	0.0	0.0	0.2	1,630	5.4	1.6	2.8	0.1	3.8	1.4	0.7	664
Primary complete	2.4	0.7	1.6	0.0	0.1	0.1	3,732	9.0	1.9	5.6	0.0	5.5	2.6	0.4	1,066
Secondary +	0.4	0.0	0.4	0.0	0.0	0.0	441	5.7	1.0	4.2	0.0	2.0	1.5	0.0	222
Total	2.2	0.6	1.4	0.0	0.0	0.1	8,120	7.7	1.7	4.6	0.1	4.8	2.1	0.4	2,250

Table 11.4 Action taken by respondents who reported a sexually transmitted diseases in the past year

Among respondents who had a sexually transmitted disease during the 12 months prior to the survey, the percent who sought advice or treatment, the percent who informed their partner(s), and the percent who took measures to avoid infecting their partner(s), according to background characteristics, Tanzania 1996

	Among res who had		Perc	entage who	took action	n to	Partner		
Background characteristic	Percent who sought treatment	Percent who informed partners	Avoided sex	Used condoms	Took medicine	Other	infected/ no measure taken	No measure taken	Number of women/ men
			W	OMEN					
Age	_								
<30	86.3	75.2	22.6	1.2	18.4	26.1	36.8	5.6	96
30+	81.5	92.3	27.8	0.0	30.1	32.5	38.2	7.7	82
Marital status									
Currently married	83 <i>.</i> 5	91.2	28.0	0.8	25.6	30.5	42.8	7.5	138
Not currently married	86.0	54.7	14.8	0.0	17.3	24.1	18.6	3.0	39
Urban/Rural									
Urban	97.8	67.0	20.1	0.0	30.0	34.7	19.4	13.2	39
Rural	80.3	87.6	26.4	0.8	22.1	27.5	42.5	4.7	139
Education									
No education	67,0	78.4	24.1	0.0	20.6	11.8	47.1	8.5	50
Primary incomplete	91.6	82.5	16.1	0.0	36.2	32.5	34.8	5.4	35
Primary complete +	90.3	85.9	28.9	1.2	20.8	37.0	33.3	5.9	93
Total	84.1	83.1	25.0	0.6	23.8	29.1	37.5	6.5	178
			]	MEN	****		·····		
Age							* TW-1		
<30	78.6	54.5	40.3	6.5	16.3	22.9	6.7	23.5	83
30+	89.2	60.5	62.9	1.4	19.0	19.0	4.2	13.8	92
Marital status			<b>*</b> 0 *						
Currently married	86.2	63.0	58.6	4.8	17.8	22.3	4.6	12.6	105
Not currently married	81.1	49.7	42.6	2.4	17.5	18.7	6.6	27.1	70
Urban/Rural	•								
Urban	81.9	55.7	48.4	2.5	17.7	19.1	6.6	25.6	58
Rural	85.3	58.6	54.1	4.5	17.7	21.7	4.8	14.9	117
Education	n								_
No education	82.8	62.0	65.4	0.0	3.9	10.8	12.4	17.9	30
Primary incomplete	81.9	60.4	42.6	5.2	21.1	27.5	1.8	20.2	36
Primary complete +	85.3	55.6	51.7	4.5	20.4	21.4	4.7	18.0	109
Total	84.2	57.7	52.2	3.9	17.7	20.8	5.4	18.4	174

Table 11.5.1 Knowledge of AIDS and sources of AIDS information: women

Percent of women who have ever heard of AIDS, percent who have received information about AIDS from specific sources, and mean number of sources of information about AIDS, by background characteristics, Tanzania 1996

						Sources of	f AIDS info	rmation						
Background characteristic	Knows AIDS	Radio	TV	News-	Pamph- lets	Health worker	Mosque/ church	School	Com- munity meeting	Friend/ relative	Work place	Other source	Mean number of sources	Number of women
Age	0.5.5								5.0					
15-19	95.8	58.2	4.5	17.5	4.5	11.9	6.8	24.8	5.0	58.4	1.2	4.1	2.1	1,732
20-24	97.9	72.2	5.8	26.3	5.7	26.4	7.6	6.8	7.8	63.0	1.1	4.8	2.3	1,676
25-29	97. <u>2</u>	67.0	4.7	20,5	6.3	30.1	7.8	3.5	9.8	64.2	2.2	4.8	2.3	1,440
30-39	96. <b>7</b>	65.1	4.5	17.2	5.6	28.9	8.9	2.0	10.6	66.5	2.1	4.9	2.2	2,006
40-49	97.6	55.5	1.9	8.3	3.7	24.5	10.4	2.1	12.6	73.6	3.1	5.1	2.1	1,265
Marital status														
Currently in union	97.0	63.6	3.8	16,2	5.1	27.2	8.1	3.2	10.2	67.7	1.8	5.0	2.2	5,411
Formerly in union	97.4	65.9	4.7	17.6	6.1	26.0	8.8	3.1	9.4	68.2	3.8	4.5	2.2	822
Never married	96.8	63.9	6.1	24.8	5.1	15.3	8.5	24.6	5,5	54.7	1.2	4.2	2.2	1,887
Residence														
Mainland	96.9	63.4	3.8	18.3	5.2	24.4	8.5	8.3	9.0	65.4	1.9	4.9	2.2	7,881
Total urban	99.6	86.8	11.4	39.3	10.6	27.9	12.8	10.3	8.4	56.3	4.4	6.0	2.8	1.811
Dar es Salaam city	99.8	96.8	25.8	52.0	14.3	18.5	22.8	15.6	7.7	47.3	4.5	11.4	3.2	563
	99.8 99.5	82.2	4.9	33.6	8.9	32.1	8.3	7.9	8.7	60.4	4.3	3.6	2.6	1.248
Other urban							8.3 7.2		9.2					6,070
Total rural	96.1	56.4	1.5	12.0	3.6	23.4		7.7		68.1	1.2	4.5	2.0	
Zanzibar	99.8	82.6	25.2	19.8	4.6	18.9	0.4	4.0	10.2	43.4	0.6	1.0	2.1	239
Pemba	100.0	78.0	8.1	13.6	1.7	21.0	0.0	3.4	12.5	51.9	0.7	0.7	1.9	92
Unguja	99.7	85.5	35.8	23.7	6.4	17.6	0.6	4.3	8.7	38.2	0.6	1.2	2.2	148
Region														
Dodoma	97. <b>8</b>	68.3	2.5	17.5	7.3	21.0	5.7	7.0	12.4	54.9	2.2	3.8	2.1	355
Arusha	84.0	50.7	2.8	23.2	2.8	17.7	16.2	10.4	4.1	34.3	1.5	3.6	2.0	589
Kilimanjaro	9 <b>8.7</b>	86.5	3.6	27.2	1.3	21.9	16.5	11.2	5.1	42.5	1.8	2.5	2.2	390
Tanga	98.5	71.1	1.5	15.6	2.8	19.8	5.0	9.3	3.3	55.0	0.8	1.3	1.9	464
Могодого	97.9	71.6	1.1	16.4	7.4	26.8	4.8	4.2	4.2	73.2	1.3	3.2	2.2	408
Coast	99.6	83,4	5.1	18.1	2.5	19.5	16.6	16.6	7.9	66.1	1.4	9.7	2.5	159
Dar es Salaam	99.9	96.5	23.4	49.5	13.7	18.7	22.0	15.4	7.6	49.3	4.3	10.7	3.1	646
Lindi	99.4	77.0	1.9	22.6	5.7	46.9	1.9	7.2	5.7	61.6	1.6	4.1	2.4	187
Мtwaгa	99.1	67.3	2.5	11.1	2.9	31.1	2.0	6.6	6.1	70.3	0.9	2.5	2.1	355
Ruvuma	99.6	69.3	0.4	14.4	2.8	41.8	3.9	7.9	7.5	67.8	2.4	3.2	2.2	305
Iringa	96.9	55.0	0.3	10.5	5.1	26.0	6.7	9.3	20.6	71.7	3.3	6.4	2.2	466
Mbeya	98.7	64.6	1.3	15.0	10.2	31.5	6.7	4.5	11.8	78.7	2.9	1.3	2.3	473
Singida	95.2	55.1	2.5	17.8	6.3	29.2	7.9	9.6	17.0	65.2	1.3	1.5	2.2	283
Tabora	96.0	53.0	2.5	18.2	4.0	31.3	7.6	4.0	4.5	67.2	1.0	12.1	2.1	225
	97.5	47.9	2.3	6.2	6.5	20.1	4.0	4.5	4.5	88.4	2.0	4.8	2.0	242
Rukwa		47.9	2.3	8.4		15.8	4.0 8.7	4.3 7.9		67.3			2.0	351
Kigoma	96.7				4.4				9.8		1.1	13.6		386
Shinyanga	96.0	48.0	1.3	13.3	5.1	19.2	2.4	7.7	15.5	84.3	1.3	0.5	2.1	
Kagera	9 <b>8</b> .6	52.1	3.5	14.4	4.9	23.9	15.5	8.1	15.5	69.4	2.8	15.1	2.3	467
Mwanza	97.7	46.5	1.0	10.6	0.1	27.1	2.9	4.8	4.8	82.9	1.3	0.3	1.9	573
Mara	97.5	69.3	2.5	18.8	<b>2</b> .2	22.4	2.5	5.8	3.2	67.1	0.7	1.8	<b>2</b> .0	257
Education														
No education	92.1	41.4	0.8	1.9	1.3	17.1	7.1	1.3	9.8	75.2	0.8	3.6	1.7	2,316
Primary incomplete	97.9	59.8	2.4	10.2	4.7	20.4	6.9	12.5	7.9	66.1	1.3	4.4	2.0	1,630
Primary complete	99.3	76.3	4.7	27.1	6.2	29.5	9.1	9.1	8.8	59.9	2.3	5.4	2.4	3,732
Secondary +	99.6	93.0	27.9	60.3	18.8	32.0	12.2	19.1	11.0	45.7	<b>6</b> .1	6.2	3.3	441
Sociality ,	,,,,	2.7.0		00.5	10.0	J#.0			11.0		0.1		5.5	
Total	97.0	63.9	4.4	18.3	5.2	<b>2</b> 4.3	8.2	8.1	9.0	64.8	1.9	4.7	2.2	8,120

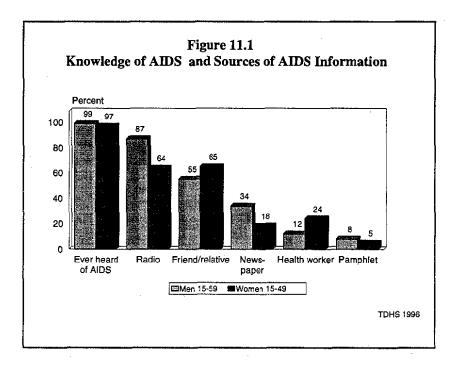
Table 11.5.2 Knowledge of AIDS and sources of AIDS information: men

Percent of men who have ever heard of AIDS, percent who have received information about AIDS from specific sources, and mean number of sources of information about AIDS, by background characteristics, Tanzania 1996

						Sources o	f AIDS info	rmation						
Background characteristic	Knows AIDS	Radio	TV	News- papers	Pamph- lets	Health worker	Mosque/ church	School	Com- munity meeting	Friend/ relative	Work place	Other	Mean number of sources	Number of men
Age	97.0	76.6	8.3	26.1	4.2	5.4	6.3	22.1	27	55.3	1.2	4.0	2.2	400
15-19 20-24	97.0 99.4	91.9	14.4	26.1 35.8	4.3 7.3	11.4	6.2 8.6	22.1 7.9	3.7 3.0	55.2 52.8	1.2 2.9	4.0 9.1	2.2 2.5	4 <b>88</b> 371
25-29	99.4	91.4	13.7	39.5	12.3	15.7	10.1	2.8	7.9	54.6	4.6	5.5	2.5	301
30-39	99.3	92.2	12.5	40.1	10.2	13.9	8.7	1.3	8.2	48.9	3.3	8.8	2.5	523
40-49	99.5	88.1	10.0	37.1	6.0	15.9	9.6	1.6	6.6	56.7	5.5	5.0	2.4	355
50-59	98.9	79.9	2.2	21.9	6.9	14.4	14.3	0.4	13.6	66.7	3.9	8.6	2.4	218
Marital status														
Currently in union	99.7	90.0	9.6	36.1	9.3	15.2	9.9	1.7	8.5	55.9	4.0	7.3	2.5	1,288
Formerly in union	99.4	87.9	11.4	29.7	7.0	12.6	9.7	0,0	5.5	58.0	3.9	6.4	2.3	117
Never married	97.4	<b>81.9</b>	12.2	31.6	5.4	7.7	7.5	16.2	3.9	52.1	2.3	5.9	2.3	847
Residence		0				4.4.	0.5			## C				
Mainland	98.8	86.5	9.2	33.7	7.7	12.1	9.3	7.2	6.8	55.8	3.1	6.9	2.4	2,187
Total urban	99.8	93.9	21.0	53.4	10.9	10.6	9.2	6.8	7.3	49.2	6.9	7.2	2.8	509
Dar es Salaam city	100.0	96.3	42.3	63.6	14.3	8.1	8.8	7.4	10.7	37.5	7.7	6.6	3.0	171
Other urban	99.7	92.7	10.3	48.2	9.2	11.9	9.3	6.5	5.5	55.1	6.4	7.4	2.6	338
Total rural	98.5	84.3	5.7	27.8	6.7	12.5	9.3	7.3	6.6	57.8	2.0	6.9	2.3	1,678
Zanzibar	100.0	97.0	55.3	43.9	9.6	18.5	0.0	2.6	1.5	17.5	10.4	0.0	2.6	69
Pemba	100.0	92.6	16.7	24.1	1.9	18.5	0.0	3.7	3.7	29.6	20.4	0.0	2.1	28
Unguja	100.0	100.0	81.5	57.4	14.8	18.5	0.0	1.9	0.0	9.3	3.7	0.0	2.9	41
Region	98.6	85.0	3.6	28.6	4.3	12.9	2.9	0.2	10.1	41.4	2.6	5.7	2.1	0.0
Dodoma Amaha	90.6 92.6	76.6	9.6	28.6 31.9	4.3 6.4	16.0	2.9 11.7	9.3 7.4	12.1 6.4	41.4 34.0	3.6		2.1	96
Arusha Kilimanjaro	92.0	92.3	8.2	31.9 45.6	6.4 4.6	6.2	7.2	7.4 7.2	5.1	28.2	2.1 1.5	$\frac{1.1}{1.0}$	2.2 2.1	156 119
Tanga	98.7	89.3	5.3	32.0	5.3	14.7	4.0	8.0	1.3	32.0	2.7	1.3	2.0	108
Могодого	99.3	86.7	2.8	20.3	8.4	11.9	5.6	8.4	4.2	53.8	2.1	5.6	2.1	95
Coast	98.4	90.3	14.5	29.0	3.2	14.5	3.2	9.7	4.8	37.1	8.1	16.1	2.3	45
Dar es Salaam	100.0	96.7	40.5	63.5	14.8	8.6	8.6	7.2	10.5	38.5	7.9	5.9	3.0	191
Lindi	100.0	94.4	4.2	26.8	16.9	19.7	11.3	4.2	7.0	63.4	2.8	22.5	2.7	54
Mtwara	100.0	85.1	6.9	25.7	8.9	23.8	99	4.0	11.9	53.5	2.0	7.9	2.4	96
Ruvuma	100.0	89.2	2.0	31.4	9.8	26.5	5.9	5.9	7.8	44.1	8.8	6.9	2.4	<b>82</b>
Iringa	99.3	79.6	0.7	27.7	5.8	10.2	8.0	9.5	21.2	67.2	3.6	2.9	2.4	100
Mbeya	98.6	88.9	2.8	27.8	5.6	2.8	9.7	13.9	2.8	91.7	4.2	2.8	2.6	137
Singida	100.0	81.0	10.7	32.1	9.5	3.6	8.3	4.8	4.8	57.1	0,0	3.6	2.2	80
Tabora	98.1	79.6	3.7	38.9	7.4	1.9	1.9	3.7	1.9	53.7	3.7	29.6	2.3	82
Rukwa	100.0	85.9	0.0	10.3	2.6	2.6	28.2	25.6	6.4	92.3	12.8	0.0	2.7	71
Kigoma	100.0	85.7	2.9	28.6	7.1	17.1	4.3	4.3	5.7	61.4	0.0	22.9	2.4	95
Shinyanga	98.2	80.5	7.3	32.9	9.1	14.6	7.3	5.5	7.3	73.8	1.2	0.6	2.4	202
Kagera	100.0	81.2	11.6	21.7	7.2	10.1	2.9	5.8	4.3	66.7	1.4	26.1	2.4	139
Mwanza	100.0	93.6	10.3	39.7	5.1	16.7	12.8	2.6	3.8	62.8	0.0	0.0	2.5	176
Mara	98.2	90.9	5.5	45.5	9.1	7.3	47.3	1.8	5.5	58.2	0.0	0.0	64	2.8
Education														
No education	96.2	68.9	6.5	4.7	1.8	10.8	6.5	0.0	7.8	73.1	1.6	6.3	2.0	304
Primary incomplete	98.2	80.8	5.2	23.8	5.2	9.6	8.8	9.6	5.5	60.0	2.8	4.3	2.2 2.5	664
Primary complete	99.8	93.6	10.5	41.1	8.2	13.2	9.1	7.1	6.7	48.5	3.4	7.8		1,066
Secondary +	100.0	97.1	33.5	71.1	21.4	17.6	12.6	8.7	7.9	42.4	7.7	9.5	3.3	222
Total	98.8	86.8	10.7	34.1	7.7	12.2	9.0	7.0	6.6	54.6	3.4	6.7	2.4	2.254
LOGI	78.8	5.00	10.7	34.1	1.1	12.2	9.0	7.0	0.0	34.0	3,4	0.7	2.4	2,256

# Knowledge of Ways to Avoid HIV/AIDS

To ascertain the depth of knowledge about AIDS, respondents who have ever heard of AIDS were asked whether a person can do something to avoid getting AIDS and if so, what. Tables 11.6.1 and 11.6.2 show the percentage of women and men who know of specific ways to avoid getting AIDS. Among respondents who have ever heard of AIDS, 35 percent of women and 34 percent of men believe that there is no way to avoid AIDS or that they do not know if there is any way to avoid AIDS. Thirty-nine percent of women and 55 percent of men cite use of condoms as a way to avoid



AIDS; this is an improvement since 1994, when only 36 percent of women and 49 percent of men cited condoms as an AIDS prevention mechanism. One-fourth say that having only one partner can help to prevent the spread of the disease, and 20 percent of women and 17 percent of men report that limiting the number of sexual partners can prevent AIDS. Fifteen percent of women and 22 percent of men say that abstaining from sex can protect against getting the AIDS virus. Thirteen percent of women and one-fourth of the men mention that avoiding sex with a prostitute can prevent getting the disease. Urban respondents are more likely to report safe patterns of sexual behaviour (condom use, staying with one partner) than their rural counterparts.

## Knowledge of AIDS-related Health Issues

Additional questions were asked to learn whether respondents are aware of the levels of risk involved in contracting AIDS. Respondents were asked whether it is possible for a healthy-looking person to have the AIDS virus. Seventy percent of women and 79 percent of men reported knowing it is possible for a healthy looking person to have AIDS (Tables 11.7.1 and 11.7.2). This knowledge has not changed significantly since the 1994 TKAPS in which 69 percent of women and 78 percent of men reported knowing it is possible for a healthy looking person to have the AIDS virus. However, this knowledge varies by educational background and residence. As many as 46 percent of women with no education and 41 percent of uneducated men reported either that a heathy looking person cannot have the AIDS virus or that they did not know. In the mainland, 34 percent of rural women and 25 percent of rural men reported the same.

Most respondents (95 percent) know that AIDS cannot be cured. Seventy-five percent of women and 77 percent of men know that AIDS can be transmitted from mother to child. Better educated respondents and those from urban areas are more likely than less educated and rural residents to know that AIDS can be transmitted from mother to child.

Table 11.6.1 Knowledge of ways to avoid AIDS: women

Percent of women who have ever heard of AIDS, who know of specific ways to avoid HIV/AIDS, and percent with misinformation, by background characteristics, Tanzania 1996

					,	Ways to a	void AIDS						
Background characteristic	There is no way to avoid	Does not know if any way to avoid	Abstain from sex	Use condoms	Have only one sex partner	Not many partners	Avoid sex with prosti- tutes	Avoid sex with homo- sexuals	Avoid trans- fusions	Avoid in- jections	Don't know specific way	Percent with misin- formation	Number of women
Age 15-19 20-24 25-29	13.0 12.6 12.3	34.9 19.0 18.8	14.8 13.7 13.8	29.8 48.1 46.5	16.4 24.5 26.9	13.9 20.5 20.3	8.7 13.8 12.5	1.0 1.5 1.9	1.1 1.1 1.5	3.5 4.4 4.6	0.8 0.4 0.5	1.1 2.3 2.2	1,659 1,641 1,400
30-39 40-49	10.8 10.3	19.8 26.1	15.1 18.2	41.9 27.9	28.7 26.9	23.9 22.3	16.5 15.6	2.4 1.8	2.2 1.3	5.5 4.5	0.2 0.1	1.7 2.2	1,941 1,235
Marital status Currently in union	11.8	21.8	13.2	40.0	26.7	22.3	14.8	2.0	1.4	4.2	0.4	1.9	5,249
Formerly in union Never married	12.6 11.7	19.8 30.6	18.6 18.7	44.2 35.1	25.0 18.7	20.5 13.9	12.4 10.0	1. <b>2</b> 1.1	2.3 1.5	6.0 4.8	0.3 0.6	2.3 1.5	801 1,826
Residence Mainland	11.6	23.7	14.8	39.7	25.2	20.5	13.3	1.8	1.5 3.3	4.6	0.4	1.8	7,637 1,804
Total urban Dar es Salaam city Other urban	9.9 13.5 8.3	13.0 9.5 14.6	18.5 22.3 16.7	56.8 60.2 55.3	31.9 37.9 29.3	23.8 20.3 25.4	15.1 13.4 15.8	1.8 0.3 2.5	3.0 3.5	6.4 5.1 6.9	0.1 0.2 0.1	2.7 2.4 2.8	562 1,242
Total rural Zanzibar Pemba Unguja	12.1 19.3 22.0 17.7	27.1 20.4 25.8 17.1	13.7 19.9 25.8 16.2	34.4 24.7 10.8 33.3	23.1 7.5 4.7 9.3	19.5 10.9 8.8 12.2	12.8 17.2 11.9 20.6	1.8 0.0 0.0 0.0	1.0 0.7 0.0 1.2	4.0 3.1 2.0 3.8	0.5 0.9 1.0 0.9	1.6 3.5 2.7 4.1	5,832 239 92 147
Region Dodoma	13.0	26.3	20.1	29.5	19.5	20.5	19.5	0.6	2.9	6.5	1.3	1.3	347
Arusha Kilimanjaro	15.7 17.8	33.8 14.4	9.4 16.0	24.9 41.0	23.1 20.4	12.2 14.9	8.6 12.4	0.3 0.3	0.5 1.0	4.3 5.2	0.0 0.5	0.3 0.8	495 385
Tanga Morogoro Coast	18.6 8.9 16.3	19.9 21.4 13.0	7.1 27.9 20.7	37.5 39.6 58.3	13.5 19.0 30.4	18.1 24.1 15.6	16.3 25.5 10.1	0.3 8.1 0.0	1.0 4.9 0.4	2.6 6.5 4.7	0.3 0.0 0.4	0.5 3.0 4.7	457 400 158
Dar es Salaam Lindi Mtwara	13.9 12.0 9.6	10.0 21.8 35.5	20.8 13.6 17.6	59.2 51.3 33.6	38.1 13.6 9.2	19.5 21.5 16.2	13.6 25.3 15.8	0.4 1.6 0.5	3.0 1.6 0.7	4.7 3.8 1.6	0.1 0.3 1.4	3.3 1.3 1.8	645 185 352
Ruvuma Iringa	6.3 13.3 6.5	26.9 30.5 20.6	11.9 14.3 21.3	40.5 24.9 42.6	23.5 19.1 31.6	23.7 21.8 21.9	19.8 19.1 9.4	4.3 10.3 0.3	2.4 1.9 0.3	4.5 3.4 2.6	0.6 0.0 0.3	1.5 2.7 0.6	304 452 467
Mbeya Singida Tabora	10.7 9.5	28.8 21.6	15.2 16.8	34.7 40.0	24.0 22.1	18.9 26.3	17.3 5.8	0.5 0.5	0.3 2.1	5.6 7.9	1.1 0.5	1.6 1.6	270 216
Rukwa Kigoma Shinyanga	13.7 9.6 6.1	20.9 35.2 24.7	11.9 14.6 13.3	32.3 28.7 47.8	33.4 19.7 41.4	21.2 13.5 21.1	2.9 13.0 6.9	0.3 0.3 0.8	0.6 0.8 1.1	2.3 5.1 2.8	0.6 0.3 0.0	1.2 1.1 0.8	235 339 658
Kagera Mwanza Mara	10.4 9.9 14.4	22.5 25.1 22.2	18.2 2.6 6.3	32.1 48.8 43.3	25.4 33.3 13.3	23.6 26.7 30.4	12.5 9.2 8.5	2.9 0.7 1.5	2.9 0.0 1.1	8.2 4.0 9.3	0.0 0.7 0.7	3.6 1.7 5.6	461 560 251
Educational				21.4	22.8	17.7	12.1	1.4	0.5	1.4	0.5	1.3	2 125
No education Primary incomplete Primary complete Secondary +	13.3 11.5 11.6 8.0	34.7 28.6 17.3 5.5	12.3 14.6 15.1 29.1	34.9 48.7 62.5	20.6 26.1 36.4	17.7 17.7 22.1 25.3	12.1 12.5 14.3 16.1	1.4 1.7 1.9 2.1	0.5 1.2 1.9 4.3	4.8 5.3 11.8	0.5 0.2 0.4 0.4	1.3 2.2 1.8 4.0	2,135 1,595 3,706 439
Total	11.8	23.6	15.0	39.3	24.6	20.2	13.4	1.7	1.5	4.5	0.4	1.9	7,876

<sup>1</sup> Includes avoiding kissing, mosquito hites, seeking protection from traditional healer, and other types of misinformation.

Table 11.6.2 Knowledge of ways to avoid AIDS: men

Propert of the who have ever board of AIDS who know of energific years to avoid HIV/AIDS and percent with misinformation, by background

Percent of men who have ever heard of AIDS, who know of specific ways to avoid HIV/AIDS, and percent with misinformation, by background characteristics, Tanzania 1996

					Way	s to avoid A	AIDS						
Background characteristic	There is no way to avoid	Does not know any way to avoid	Abstain from sex	Use condoms	Have only one sex partner	Not many partners	Avoid sex with prosti- tutes	Avoid sex with homo- sexuals	Avoid trans- fusions	Avoid in- jections	Don't know specific way	Percent with misin- formation	Number of men
Age 15-19	10.5	21.4	17.7	51.1	18.2	11.6	18.9	1.1	1.4	4.9	0.1	2.0	473
20-24	8.5	23.4	23.2	64.2	26.6	14.1	26.6	1.4	1.9	5.3	0.2	3.4	369
25-29	9.8	21.6	22.3	59.5	25.9	19.0	26.3	4.9	4.2	8.6	0.0	6.5	300
30-39	9.9	25.7	24.9	60.7	26.2	19.3	27.8	2.8	i.7	7.7	0.1	4.5	519
40-49	10.5	24.9	24.3	47.6	31.0	24.8	26.6	0.8	2.4	6.3	0.0	2.2	353
50-59	9.0	27.4	20.0	35.6	26.9	13.9	29.4	0.4	0.6	4.3	0.5	0.0	215
Marital status													
Currently in union	9.9	25.1	23.1	52.6	27.9	19.8	29.2	2.4	2.2	7.3	0.1	3.7	1,285
Formerly in union	8.6	23.4	28.2	63.1	27.2	13.0	13.0	0.0	1.2	2.9	0.0	1.3	117
Never married	9.9	22.2	19.8	56.3	21.2	13.3	21.3	1.6	1.8	5.2	0.2	2.8	825
Residence													
Mainland	9.8	24.0	22.5	55.7	24.7	16.3	24.4	2.0	2.1	6.4	0.1	3.3	2,161
Total urban	6.5	17.4	32.7	66.4	31.0	15.4	18.8	2.0	3.3	8.1	0.0	4.6	508
Dar es Salaam city	5.5	14.7	40.4	68.7	31.2	12.1	8.5	0.4	3.7	13.2	0.0	8.8	171
Other urban	7.0	18.8	28.7	65.1	30.9	17.0	24.1	2.8	3.1	5.5	0.0	2.5	336
Total rural	10.8	26.0	19.3	52.5	22.8	16.6	26.1	2.0	1.7	5.9	0.2	2.9	1,653
Zanzibar	9.6	20.5	13.4	18.5	44.2	41.1	60.0	0.0	0.0	3.0	0.7	2.2	69
Pemba	1.9	31.5	16.7	13.0	57.4	38.9	61.1	0.0	0.0	1.9	1.9	5.6	28
Unguja	14.8	13.0	11.1	22.2	35.2	42.6	59.3	0.0	0.0	3.7	0.0	0.0	41
Region	10.2	23.9	23.2	49.3	13.8	15.2	16.7	1.4	1.4	3.6	0.0	2.2	94
Dodoma	12.3 13.8	23.9 33.3	23.2 14.9	49.3 41.4	17.2	20.7	10.7	0.0	1.1	3.4	0.0	2.2 2.3	145
Arusha	12.4	33.3 16.1	19.7	47.2	19.7	20.7 16.1	10.3	0.0	4.1	4.1	0.0	1.0	117
Kilimanjaro	18.9	20.3	12.2	39.2	23.0	20.3	4.1	0.0	1.4	1.4	0.0	0.0	107
Tanga	12.0	26.8	28.9	53.5	18.3	14.8	15.5	7.7	4.9	7.0	1.4	1.4	94
Morogoro Coast	6.6	16.4	39.3	65.6	45.9	14.8	4.9	0.0	1.6	3.3	0.0	1.6	44
Dar es Salaam	5.3	14.5	40.5	68.7	32.9	12.2	8.2	0.3	3.6	12.2	0.0	8.6	191
Lindi	0.0	25.4	62.0	78.9	11.3	18.3	16.9	0.0	0.0	4.2	0.0	2.8	54
Mtwara	2.0	34.7	59.4	68.3	11.9	11.9	4.0	0.0	0.0	4.0	0.0	4.0	96
Ruvuma	6.9	21.6	43.1	56.9	21.6	15.7	7.8	3.9	2.9	3.9	0.0	3.9	82
Iringa	16.2	27.2	19.1	40.4	22.1	16.9	24.3	8.1	5.1	5.1	0.0	2.2	100
Mbeya	35.2	15.5	16.9	36.6	15.5	14.1	12.7	5.6	0.0	1.4	0.0	0.0	135
Singida	17.9	27.4	14.3	46.4	13.1	8.3	15.5	0.0	0.0	3.6	0.0	0.0	80
Tabora	3.8	15.1	5.7	62.3	9.4	1.9	52.8	0.0	3.8	11.3	0.0	5.7	80
Rukwa	15.4	26.9	12.8	20.5	20.5	17.9	12.8	0.0	0.0	0.0	0.0	0.0	71
Kigoma	2.9	28.6	8.6	48.6	10.0	1.4	61.4	2.9	4.3	17.1	0.0	17.1	95
Shinyanga	5.0	30.4	15.5	68.9	46.0	26.7	34.8	3.1	0.0	6.8	0.0	1.2	198
Kagera	1.4	17.4	8.7	60.9	5.8	4.3	63.8	1.4	5,8	18.8	0.0	8.7	139
Mwanza	2.6	33.3	19.2	75.6	59.0	25.6	51.3	2.6	0.0	0.0	0.0	0.0	176
Mara	3.7	18.5	11.1	70.4	40.7	44.4	25.9	0.0	0.0	13.0	1.9	0.0	63
Education													
No education	14.2	27.8	16.0	32.8	18.0	13.5	22.3	1.0	0.0	2.5	0.4	2.4	293
Primary incomplete	10.4	26.1	19.2	48.0	21.8	14.5	27.2	0.8	0.8	2.2	0.0	1.7	652
Primary complete	9.3	22.6	23.6	62.4	26.0	18.6	22.7	2.4	2.0	7.4	0.2	3.6	1,063
Secondary +	4.1	18.5	32.7	65.1	42.0	22.5	37.9	4.8	7.9	18.1	0.0	7.3	222
Total	9.8	23.9	22.2	54.6	25.3	17.1	25.5	2.0	2.0	6.3	0.1	3.3	2,230

<sup>&</sup>lt;sup>1</sup> Includes avoiding kissing, mosquito bites, seeking protection from traditional healer, and other misinformation.

Table 11.7.1 Knowledge and perception about AIDS: women

Percent distribution of women who have heard of AIDS by their knowledge and perception about AIDS, according to background characteristics, Tanzania 1996

		healthy e AIDS		Can	AIDS be	cured?	be tr	n AIDS ansmitte ther to c	ed from		vs someo S/died o		-	Number
Background characteristic	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Total	of women
Age		10.5	17.0		02.0	4.4	<i></i>	10.6	22.4	41.0	50.0		100 0	1.650
15-19	62.7	19.5	17.8	2.6	93.0	4.4	65.0	12.6	22.4	41.3	52.8	5.0	100.0	1,659
20-24	74.9	15.6	9.3	1.8	96.5	1.8	80.4	8.7	10.8	49.5	45.7	4.2	100.0	1,641
25-29	74.3	14.9	10.5	1.7	96.2	2.0	80.5	8.4	11.1	49.0	45.8	5.0	100.0	1,400
30-39 40-49	73.4 64.3	13,6 14,4	12.9 21.1	1.9 2.2	95.0 93.4	3.1 4.3	79.7 69.2	7.8 10.9	12.4 19.8	51.7 49.1	43,8 45.9	4,2 4,5	0,001 0.001	1,941 1,235
40-49	04.5	14.4	∠r, t	2.2	7.1.4	47	07.∠	10.9	12.0	49.1	43.9	4.3	100.0	1,2.5,5
Marital status			10.6	- 0	0.1.0		<b>7</b> ( 0			40.0			1000	5 5 40
Currently in union	71.1	15.1	13.6	2.0	94.8	3.1	76.9	9.1	14.0	49.0	46.1	4.5	100.0	5,249
Formerly in union	69.4	16.2	14.4	1.6	96.2	2.1	78.5	9.4	12.0	53.6	42.1	3.9	100.0	108
Never married	68.1	16.8	15.1	2.2	94.2	3.5	69.2	11.2	19.5	43.4	50.8	4.9	100.0	1,826
Residence														
Mainland	70.6	15.1	14.1	2.0	94.8	3.2	75.0	9.7	15.3	48.5	46.3	4.6	100.0	7,637
Total urban	84.7	8.6	6.6	2.0	97.2	0.8	83.7	7.8	8.4	58.6	35.4	5.6	100.0	1,804
Dar es Salaam city	84.8	9.5	56	2.3	96.8	0.9	83.9	6.9	9.2	52.3	39.4	8.0	100.0	562
Other urban	84.6	8.1	7.0	1.9	97.3	0.8	83.6	8.2	8.1	61.4	33.5	4.5	100.0	1,242
Total rural	66.2	17.1	16.4	2.0	94.1	3.9	72.2	10.3	17.4	45.4	49.7	4.3	100.0	5,832
Zanzibar	57.5	31.1	11.3	2.1	96.4	1.4	85.0	7.2	7.8	35.8	60.7	3.0	100.0	239
Pemba	49.8	33.2	16.9	1.4	96.3	2.4	82.7	8.1	9.2	39.7	59.0	1.4	100.0	92
Unguja	62.3	29.9	7.8	2.6	96.5	0.9	86.4	6.7	7.0	33.3	61.7	<b>4</b> .1	100.0	147
Region														
Dodoma	64.3	16.2	19.5	2.3	93.8	3.9	71.1	13.3	15.6	49.4	45.5	4.2	100.0	347
Arusha	66.5	14.5	18.5	3.6	89.6	6.9	72.8	9.9	17.3	34.3	59.6	5.3	100.0	495
Kilimanjaro	84.0	8.8	7.0	1.3	98.2	0.5	76.5	9.8	13.7	49.5	47.4	2.8	100.0	385
Tanga	75.8	11.5	12.8	1.5	95.9	2.6	64.3	16.1	19.6	48.2	48.0	3.1	100.0	457
Morogoro	69.1	16.3	14.4	1.6	95.4	3.0	74.0	10.8	15.2	49.9	47.4	1.6	100.0	400
Coast	76.I	13.8	10.1	2.5	93.5	3.6	77.5	7.2	15.2	47.8	42.0	8.7	0.001	158
Dar es Salaam	84.7	9.4	5.8	2.2	96.5	1.3	83.6	7.1	9.3	51.4	40.5	7.6	100.0	645
Lindi	71.2	18.7	10.1	1.3	96.2	2.5	69.0	14.6	16.1	60.1	30.7	9.2	100.0	185
Mtwara	63.4	18.5	18.1	0.7	95.9	3.4	69.3	14.0	16.5	56.5	131.6	1.4	100.0	352
Ruvuma	71.1	14.4	14.2	0.9	97.0	2.2	72.6	12.3	15.1	50.4	136.2	3.4	0.001	304
lringa	58.9	15.4	25.7	0.5	94.4	4.8	66.8	9.0	24.1	48.3	47.7	4.0	100.0	452
Mbeya	80.0	8.7	11.3	3.5	93.9	2.6	77.4	7.7	14.8	59.7	34.5	5.8	100.0	467
Singida	65.9	15.5	18.7	9.9	84.0	6.1	71.7	9.9	18.1	54.1	42.4	3.5	100.0	270
Tabora	66.3	16.3	17.4	1.1	95.3	3.7	79.5	11.6	8.4	58.4	40.0	1.1	0.001	216
Rukwa	72.7	14.5	12.8	0.9	97.4	1.7	68.9	11.3	19.8	56.1	38.1	4.9	100.0	235
Kigoma	67.9	11.5	20.6	1.7	92.7	5.6	76.3	6.5	17.2	47.3	49.0	3.4	100.0	339
Shinyanga	62.8	21.9	15.0	0.8	96.7	2.5	76.1	8.3	15.6	32.8	65.8	1.1	100.0	658
Kagera	69.6	17.1	12.5	3.9	91.4	4.6	83.9	4.3	11.8	72.1	21.8	4.6	0.001	461
Mwanza Mara	64.7 78.5	23.4 13.3	11.9 7.0	0.3 1.9	98.3 96.7	1.3 1.5	77.2 83.0	8.3 8.5	14.5 8.5	30.4 42.2	68.3 55.2	0.7 2.2	100.0 100.0	560 251
														•
Education No education	53.4	20.5	25.6	2.6	90.5	6.9	62.6	11.7	25.7	36.8	57.4	5.0	100.0	2,135
Primary incomplete	67.0	16.9	25.6 15.9	2.0	94.9	2.9	70.5	12.0	17.5	46.5	48.3	3.0 4.9	100.0	1,595
Primary incomplete	78.7	13.2	8.0	1.7	97.0	1.3	82.3	8.2	9.5	53.8	41.6	4.9	100.0	3,706
Secondary +	91.5	6.9	1.6	2.2	97.3	0.5	94.7	3.1	2.2	62.3	33.4	4.0	100.0	439
,	70.2	15.6	14.0	2.0	94.8	3.1	75.3	9.6	15.1	48.2	46.8	4.5	100.0	7,876
Total	70.2	0.01	14.0	2.0	94.6	3.1	13.3	9.0	15.1	46.2	40.8	4.3	100.0	7,070

Table 11.7.2 Knowledge and perceptions about AIDS: men

Percent distribution of men who have heard of AIDS, by their knowledge and perception about AIDS, according to background characteristics, Tanzania 1996

Background characteristic	Can a healthy person have AIDS virus?			Can AIDS be cured?			Can AIDS virus be transmitted from mother to child?			Knows someone with AIDS/died of AIDS				N
	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Total	Number of men
Age														
15-19	67.9	16.6	14.9	1.2	94.9	3.7	67.0	9.7	23.2	37.9	56.7	4.9	100.0	473
20-24	85.9	7.0	6.4	1.3	97.4	1.3	82.4	8.4	8.8	51.8	44.8	3.5	100.0	369
25-29	82.8	11.0	5.8	2.5	96.3	1.3	82.6	7.2	9.7	54.8	40.6	3.2	100.0	300
30-39	84.2	8.5	6.8	1.5	95.7	2.8	82.1	7.8	9.8	56.3	37.0	5.4	100.0	519
40-49	78.6	10.4	10.8	2.6	95.5	1.8	77.1	0.6	12.4	59.5	36.0	4.0	100.0	353
50-64	70.1	9.5	19.5	3.7	92.6	3.7	70.4	9.6	19.0	52.3	40.6	6.8	100.0	215
Marital status														
Currently in union	80.4	9.6	9.4	2.1	95.6	2.4	80.4	7.7	11.5	56.4	37.7	5.0	100.0	1,285
Formerly in union	81.8	11.0	7.3	2.0	95.8	2.2	71.3	4.7	14.0	52.9	43.6	1.2	100.0	117
Never married	75.2	12.4	11.8	1.7	95.5	2.7	72.6	9.9	17.2	44.0	51.3	4.4	100.0	825
Residence														
Mainland	78.3	11.0	10.2	1.9	95.5	2.6	77.1	8.9	13.6	52.4	42.3	4.6	100.0	2,161
Total urban	90.2	4.2	5.3	2.7	95.5	1.7	82.7	7.7	8.5	60.4	33.1	5.7	100.0	508
Dar es Salaam city	89.3	4.0	5.5	3.3	95.2	1.1	82.7	7.7	9.2	57.4	34.6	7.0	100.0	171
Other urban	90.6	4.2	5.1	2.4	95.6	2.0	82.7	7.7	8.1	62.0	32.3	5.0	100.0	336
Total rural	74.7	13.1	11.7	1.7	95.5	2.8	75.4	9.3	15.2	50.0	45.1	4.2	100.0	1,653
Zanzibar	87.0	1.9	8.9	2.2	97.8	0.0	76.0	6.6	17.4	23.6	70.8	4.8	100.0	69
Pemba	87.0	1.9	11.1	5.6	94.4	0.0	81.5	0.0	18.5	14.8	79.6	3.7	100.0	28
Unguja	87.0	1.9	7.4	10.0	0.00	0.0	72.2	1.1	16.7	29.6	64.8	5.6	100.0	41
Region														
Dodoma	62.3	21.7	15.9	2.2	95.7	2.2	61.6	0.3	18.1	46.4	50.7	2.9	100.0	94
Arusha	69.0	16.1	14.9	2.3	92.0	5.7	74.7	0.3	12.6	39.1	57.5	3.4	100.0	145
Kilimanjaro	86.5	8.3	5.2	1.6	97.4	1.0	81.3	8.3	10.4	59.1	36.8	3.6	100.0	117
Tanga	77.0	6.8	16.2	2.7	95.9	1.4	67.6	0.8	21.6	60.8	33.8	2.7	100.0	107
Morogoro	74.6	13.4	12.0	2.1	96.5	1.4	66.9	6.9	16.2	49.3	42.3	6.3	100.0	94
Coast	90.2	3.3	6.6	1.6	91.8	6.6	85.2	9.8	4.9	47.5	45.9	4.9	100.0	44
Dar es Salaam	89.1	4.3	5.6	3.0	95.7	1.0	83.2	6.9	9.5	55.9	35.9	7.2	100.0	191
Lindi	83.1	11.3	5.6	1.4	97.2	1.4	81.7	8.5	9,9	46.5	46.5	7.0	100.0	54
Mtwara	77.2	10.9	11.9	2.0	93.1	5.0	68.3	5.8	15.8	42.6	50.5	6.9	100.0	96
Ruvuma	79.4	8.8	11.8	0.0	99.0	1.0	84.3	4.9	10.8	52.0	42.2	5.9	100.0	82
Iringa	73.5	9.6	16.9	0.0	97.1	2.9	78.7	7.4	14.0	54.4	38.2	7.4	100.0	100
Mbeya	70.4	23.9	5.6	7.0	91.5	1.4	80.3	9.9	9,9	50.7	39.4	9.9	100.0	135
Singida	59.5	19.0	21.4	3.6	91.7	4.8	76.2	1.9	11.9	53.6	39.3	7.1	100.0	80
Tabora	81.1	5.7	13.2	0.0	98.1	1.9	71.7	5.7	22.6	79.2	18.9	1.9	100.0	80
Rukwa	76.9	7.7	15.4	1.3	98.7	0.0	65.4	1.5	23.1	43.6	48.7	7.7	100.0	71
Kigoma	87.1	2.9	5.7	0.0	98.6	1.4	74.3	4.3	20.0	62.9	31.4	1.4	100.0	95
Shinyanga	72.0	16.1	11.8	1.2	95.7	3.1	76.4	6.2	17.4	39.1	59.6	0.6	100.0	198
Kagera	82.6	7.2	8.7	0.0	98.6	1.4	82.6	5.8	11.6	75.4	21.7	2.9	0.001	139
Mwanza	91.0	5.1	3.8	1.3	93.6	5.1	85.9	3.8	9.0	43.6	51.3	3.8	100.0	176
Mara	79.6	14.8	1.9	3.7	94.4	1.9	87.0	9.3	3.7	59.3	40.7	0.0	100.0	63
Education			<b></b> -		n		<b>.</b>							
No education	58.6	18.3	22.5	0.6	91.6	7.7	60.4	2.0	27.6	38.9	55.1	4.4	100.0	293
Primary incomplete	71.2	12.4	16.1	1.9	95.0	3.0	69.2	1.1	19.3	43.3	49.1	6.5	100.0	652
Primary Complete	85.4	9.0	5.0	1.9	96.9	1.2	83.9	7.1	8.6	55.5	40.2	3.9	100.0	1,063
Secondary +	94.4	3.8	1.5	3.8	95.9	0.3	89.6	6.4	4.1	73.5	23.6	2.6	100.0	222
Total	78.6	10.7	10.2	1.9	95.6	2.5	77.1	8.8	13.7	51.6	43.1	4.6	100.0	2,230

#### Personal Knowledge of Someone with AIDS

The 1996 TDHS included a question on whether respondents personally know somebody who has AIDS or who has died of AIDS. Results in Tables 11.7.1 and 11.7.2 show that personal experience with AIDS patients is common in Tanzania. About half the respondents report knowing someone who has AIDS or has died of AIDS. Personal acquaintance with AIDS on the mainland is higher than in Zanzibar. The data show that more than 70 percent of respondents from the Kagera region know someone with AIDS or who died of AIDS.

# 11.6 Perception of the Risk of Getting HIV/AIDS

Respondents who have heard of AIDS were asked whether they thought that their chances of getting the AIDS virus were great, moderate, small, or nil. Interviewers then asked respondents why they thought their chances were great/moderate or small/nil. Table 11.8 shows that 32 percent of women and 25 percent of men were unable to classify their own risk. Twenty-nine percent of women and 41 percent of men say that they have no chance of being infected. This is similar to the results from the 1994 TKAPS. Women are more likely than men to report that their chances of getting AIDS are great (13 vs. 7 percent).

As might be expected, the proportion who feel that they have no chance of getting AIDS is higher among young women and men, among those who are never married, and those who had no sexual partners other than their spouses in the preceding 12 months. The proportion reporting no risk is also higher among rural residents on the mainland and residents in Zanzibar. Women who reported that they have no risk at all of getting AIDS are more likely to be from the Kigoma and Kilimanjaro regions and men are more likely to be from the Mwanza region.

Perceptions of risk may or may not accurately reflect one's true risk of AIDS. However, causes of concern arise when an individual at moderate or great risk of contracting AIDS has a spouse who considers himself or herself at little or no risk. This situation may arise from a person engaging in high-risk activities without his or her spouse's knowledge. It is possible to compare spouses' views of their risks to assess whether couples have similar or desperate levels of perceived risk of contracting AIDS. The 1996 TDHS used the fact that in some households, both women and men were interviewed, making it possible to link data on currently married men and their wives living in the same household and look at couples in Tanzania as units of study. Data regarding couple's perception of their risk of getting AIDS are presented in Table 11.9.

The results show that there is a considerable difference of opinion between spouses couples as to their risk of getting AIDS. Among 19 percent of couples, both spouses report the same level of risk (13 percent say no risk at all, 4 percent say a small risk, and 1 percent say either a moderate or great risk of getting AIDS). A higher proportion of husbands (40 percent) than wives (25 percent) reported that they have no risk of getting AIDS and more wives (13 percent) than husbands (7 percent) think that they have a great risk of getting AIDS. This disproportionate perception of risk among couples is probably based on information about marital relations not captured in these data.

Respondents who classified themselves to be at no risk or to have a small risk of getting AIDS were asked why they perceive themselves so. Table 11.10 shows information on reasons why individual women and men state that their risk is low or nil. Roughly equal proportions of women and men state that their risk is low or nil because they were abstaining from sex altogether (29 and 25 percent, respectively). More than half the women and 45 percent of men report that sticking to one sexual partner or limiting the number of sexual partners is the reason for their low risk. Although low (15 percent), men are more likely than women (4 percent) to report that condom use is the reason for their low risk of getting AIDS. More respondents now think that their risk of getting AIDS is low or nil because of abstaining from sex than found in the 1994 TKAPS.

Table 11.8 Perception of risk of getting AIDS

Percent distribution of respondents who have heard of AIDS, by their perception of the risk of getting AIDS, according to background characteristics, Tanzania 1996

*	Women								Men							
	<del></del> -	Personal chance of getting AIDS							Personal chance of getting AIDS							<del></del>
	No risk at all	Small	Moderate	Great	Has AIDS	Don't know	Total	Number	No risk at all	Small	Moderate	Great	Has AIDS	Don't know	Total	Number
<b>FE</b> 15-19	38.9	15.5	5.9	7.6	0.2	31.9	100.0	1,659	47.9	15.8	4.4	5.3	0.1	26.5	100.0	473
20-24 25-29	26.8 23.5	17.4 15.2	11.4 14.6	13.0 14.4	0.1 0.0	31.4 32.4	100.0 100.0	1,641 1,400	41.2 38.4	19.3 18.2	9.0 11.2	7.8 11.0	0.0 0.0	22.8 21.2	100.0 100.0	369 300
30-39	23.7	15.0	12.6	16.5	0.2	32.1	100.0	1,941	37.3	19.6	11.8	7.3	0.0	24.0	100.0	519
40-49 50-59	30.7 NA	14.4 NA	9. <b>2</b> NA	11.5 NA	0.0 NA	34.2 NA	100.0 NA	1,235 NA	35.6 45.5	19.2 13.8	10.7 4.8	6.5 4.2	0.0 0.0	28.0 31.7	100.0 100.0	353 215
farital status Currently in union	25.4	15.0	12.0	14.4	0.0	33.3	100.0	5,249	39.3	18.4	10.7	6.3	0.0	25.2	100.0	1,285
Formerly in union Never married	27.1 38.6	14.4 17.6	11.9 6.7	14.2 7.4	0.1 0.3	32.3 29.4	100.0 100.0	801 1,826	38.2 43.5	21.1 16.8	5.0 6.3	13.9 7.2	0.0 0.1	21.8 26.1	100.0 100.0	117 825
o. of sexual partners of																
han spouse in past 12 me 0	30.4	15.1	10.2	11.8	0.1	32.3	100.0	6,661	45.8	17.0	6.4	4.6	0.0	26.1	100.0	1,563
1 2-3	18.8 16.1	18.3 16.9	13.6 14.5	17.4 20.5	0.0 0.0	31.8 32.0	100.0 100.0	1,001 142	31.7 29.0	21.0 20.5	15.1 17.1	9.6 1 <b>2</b> .1	0.0 0.0	22.6 21.2	100.0 100.0	342 198
4+	(11.4)	(8.9)	(15.7)	(22.0)	(3.3)	(38.8)	100.0	37	18.6	15.4	10.0	25.3	0.0	30.8	100.0	109
esidence Asinland	27.7 24.7	15.7 18.4	10.9 11.9	13.0 12.1	0.1 0.2	32.6 32.6	100.0	7,637 1.804	40.0 34.6	18.0 24.5	9.1 9.2	7.2 5.9	0.0	25.8 25.6	100.0 100.0	2,161
Total urban Dar es Salaam city	20.8	22.0	11.1	9.8	0.2	36.2	100.0	562	25.7	32.4	9.2	3.9 4.8	0.1 0.4	26.8	100.0	508 171
Other urban Total rural	26.5 28.6	16.8 14.8	12.3 10.6	13.2 13.3	0.2 0.1	31.0 32.6	100.0	1,242 5,832	39.1 41.6	20.5 15.9	8.8 9.1	6.5 7.6	0.0 0.0	25.0 25.8	100.0 100.0	336 1,653
anzibar	58.3	10.5	6.1	3.5	0.0	21.6	100.0	239	68.6	16.6	0,0	3.0	0,0	11.8	100.0	69
Pemba Unguja	62.0 55.9	<i>6</i> .4 13.0	4.7 7.0	2.7 4.1	0.0 0.0	24.1 20.0	100.0 100.0	92 147	85.2 57.4	5,6 24,1	0.0 0.0	1.9 3.7	0.0 0.0	7.4 14.8	100.0 10 <b>0</b> .0	28 41
egion Dodoma	37.3	13.3	12.0	8.8	0.0	28.6	100.0	347	48.6	13.8	10.1	5.8	0.0	21.7	100.0	94
Arusha	36.0	13.2	5.6 5.4	6.9	0.0	38.3 40.7	100.0	495	40.2	13.8	9.2	8.0	0.0	28.7	100.0	145
Kilimanjaro Tanga	38.4 32.4	10.6 9.9	5.4 6.6	4.6 5.9	0.3 0.3	40.7 44.9	0.001 0.001	385 457	35.8 32.4	15.0 10.8	6.7 6.8	4.7 8.1	0.0 0.0	37.8 41.9	100.0 100.0	117 107
Morogoro	27.4 14.9	8.7 22.8	17.6 8.3	10.3 9.4	0.0 0.0	36.0 44.6	100.0 100.0	400 158	44.4 39.3	7.7 24.6	7.0 1.6	8.5 8.2	0.0 0.0	32.4 26.2	100.0 100.0	94 44
Coast Dar es Salaam	20.8	21.8	10.4	10.2	0.1	36.7	100.0	645	24.3	32.6	10.5	4.3	0.3	28.0	100.0	191
Lindi Mtwara	16.8 27.5	15.2 13.7	20.3 8.9	21.5 15.6	0.0 0.0	26.3 34.3	100.0 100.0	185 352	46.5 50.5	28.2 14.9	14.1 10.9	2.8 8.9	0,0 0,0	8.5 14.9	100.0 100.0	54 96
Ruvuma	19.2	11.2	11.4	15.3	0.0	42.9	100.0	304	47.1	18.6	4.9	8.8	0.0	20.6	100.0	82
Iringa Mbeya	27.9 24.2	12.2 11.6	11.4 7.1	15.1 9.7	0.3 0.6	33.2 46.8	100.0 100.0	452 467	43.4 22.5	17.6 16.9	9.6 5.6	8.8 5.6	0.0 0.0	20.6 49.3	100.0 100.0	100 135
Singida	35.2	14.9	8.0	7.5	0.0	34.4	100.0	270	31.0	20.2	16.7	15.5	0.0	16.7	100.0	80
Tabora Rukwa	30.0 27.0	7.9 7.3	7.4 14.2	16.8 11.9	0.0 0.0	37.9 39.5	100.0 100.0	216 235	18.9 25.6	9.4 14.1	7.5 5.1	3.8 6.4	0.0 0.0	60.4 48.7	100.0 100.0	80 71
Kigoma	40.0	14.6	8.2	10.7	0.3	26.2	100.0	339	45.7	11.4	10.0	5.7	0.0	27.1	100.0	95
Shinyanga Kagera	27.5 26.8	19.7 20.0	9.2 14.3	24.4 16.1	0.0 0.0	19.2 22.9	100.0 100.0	658 461	49.7 30.4	29.2 13.0	6.8 21.7	9.3 5.8	0,0 0.0	5.0 29.0	100.0 100.0	198 139
Mwanza	19.1	28.1	18.2	18.8	0.0	15.8	100.0	560	66.7	17.9	3.8	5.1	0.0	6.4	100.0	176
Mara	18.9	26.3	18.5	18.9	0.0	17.4	100.0	251	51.9	13.0	14.8	14.8	0.0	5.6	100.0	63
<b>Iducation</b> No education	26.1	14.0	9.4	14.1	0.1	36.3	100.0	2,135	39.0	12.0	7.5	9.2	0.0	32.3	100.0	293
Primary incomplete	31.6	13.5	9.4	12.0	0.1	33.4	100.0	1,595	45.2	14.7	6.5	6.9	0.1	26.6	100.0	652
Primary complete Seondary +	27.9 36.0	16.6 21.2	11.8 13.3	13.0 6.4	0.1 0.0	30.5 23.2	100.0 100.0	3,706 439	39.5 37.2	19.0 30.0	10.1 11.4	7.5 2.1	0.0 0.0	23.9 19.3	100.0 100.0	1,063 222
otal	28.6	15.5	10.8	12.7	0.1	32.3	100.0	7,876	40.9	17.9	8.8	7.0	0.0	25.3	100.0	2,230
			•	-		=		,	, -		,		• •			_,

Note: Total includes 34 women and 17 men who reported "Don't know" to number of sexual partners in past 12 months. Figures in parentheses are based on 25-49 unweighted cases. NA = Not applicable.

Table 11.9 Perception of risk of getting HIV/AIDS among couples

Percent distribution of couples who know about AIDS, by husband's and wife's perception of risk of getting AIDS, Tanzania 1996

	Cł							
Chances of getting AIDS: wife	No risk at all	Small	Moderate	Great	Don't know	Total	Number of couples	
No risk at all	12.7	3.7	2.5	2.2	4.3	25.4	277	
Small	6.7	3.6	2.2	0.7	3.2	16.4	179	
Moderate	3.9	2.2	1.3	0.8	2.5	10.8	118	
Great	5.2	2.9	1.4	1.2	2.0	12.6	137	
Don't know	11.3	5.1	2.6	1.7	14.1	34.7	378	
Total	39.8	17.4	10.1	6.6	26.1	100.0	-	
Number of couples	433	190	110	72	284	_	1,089	

Table 11.10 Reasons for perception of small/no risk of getting AIDS

Percent of women and men who think they have a small or no risk of getting AIDS, by reasons for that perception of risk, Tanzania 1996

Marital status	Abstain from sex	Use condoms	partner/ limit	(Spouse) avoid prosti- tution	No blood trans- fusion	No in- jections	Other	Number
			WON	IEN				,
Never in union	70.4	5.2	10.0	14.1	1.3	3.3	4.4	1,027
Currently in union	4.9	2.3	78.3	20.2	0.9	2.2	7.2	2,117
Formerly in union	52.4	7.3	16.0	25.9	1.8	3.7	7.0	332
Total	28.8	3.6	52.2	18.9	1.1	2.7	6.4	3,476
	· <del>· · · · · · · · · · · · · · · · · · ·</del>		ME	EN				
Never in union	50.1	18.2	9.1	29.7	1.8	7.4	5.3	497
Currently in union	7.3	10.5	72.6	51.3	1.6	5.4	2.6	742
Formerly in union	30.8	39.6	14.3	47.1	1.0	3.5	1.0	69
Total	24.9	14.9	45.3	42.9	1.7	6.0	3.6	1,310

Respondents who classified themselves to be at moderate or great risk of contracting AIDS were also asked why they perceive themselves to be at such risk. Results are presented in Table 11.11. Sixty-one percent of women believe that they are at moderate or great risk because their spouses or regular partners have another sexual partner besides themselves. Twenty-eight percent of women say they are at moderate or great risk because they do not use condoms. The most common reasons given by men being at moderate or great risk are that they do not use condoms (34 percent), they have sex with prostitutes (21 percent), and they have many sex partners (20 percent). Eighteen percent of men perceive themselves to be at moderate or great risk because their spouse or regular partner has another sexual partner.

Women and men who have heard of AIDS and ever had sexual intercourse were asked if they had changed their sexual behaviour to prevent getting AIDS and if so, in what way. As shown in Tables 11.12.1 and 11.12.2 (and Figure 11.2), 82 percent of women and 91 percent of men reported changing their sexual

behaviour. By far the most common change among respondents was to restrict sex to one partner (49 percent of women and 45 percent of men), while 15 percent of women and 24 percent of men had reduced their number of sexual partners. Only 2 percent of women and 9 percent of men say they began using condoms to avoid AIDS. Respondents living in rural areas on the mainland and those with no education are more likely not to have changed their sexual behaviour in response to their perceived risk of AIDS than their counterparts.

Percent of women and that perception of risk,			ave mode	rate or grea	t risk of	getting AI	DS, reas	ons for
Marital status	Don't use condoms	Multiple sex partners	Spouse has partner	Had sex with prosti- tute	Had blood trans- fusion	Had in-	Other	Number of women/ men
	<del></del>		WOME	N			· · · · · · · · · · · · · · · · · · ·	
Never in union	31.8	11.8	37.0	7.8	2.3	8.8	21.0	257
Currently in union	25.6	3.7	67.4	6.0	0.8	5.7	17.1	1,384
Formerly in union	35.6	15.6	44.6	8.4	1.4	4.7	16.7	209
Total	27.6	6.1	60.6	6.5	1.1	6.1	17.6	1,849
			MEN	3				<u></u>
Never in union	30.9	20.8	13.5	23.7	4.7	11.7	7,2	112
Currently in union	34.2	18.4	21.9	19.6	2.7	13.2	15.7	219
Total	34.1	19.7	18.4	20.6	3.1	12.1	13.6	354

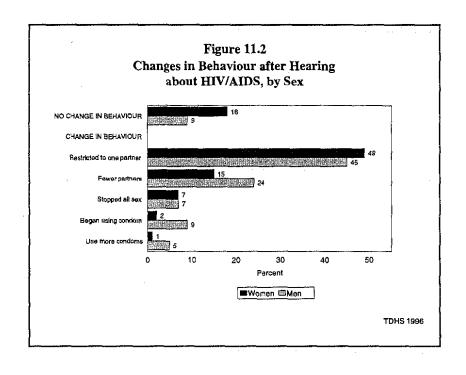


Table 11.12.1 AIDS prevention behaviour: women

Percent of women who have heard of AIDS, by specific changes in behaviour in order to avoid AIDS, and background characteristics, Tanzania 1996

Changes in behaviour to avoid AIDS										
Background characteristic	No change in sexual behaviour <sup>1</sup>	Kept virgin- ity	Stopped sex	Began using condom	Increased condom use	Restricted to one partner	Fewer partners	Avoided sex with pros- stitutes	Other sexual be- haviour	Number of women
Perception of AIDS ri										
among those who have heard of AIDS	e									
No/small risk	14.9	19.2	8.5	2.2	1.4	45.7	12.5	4.4	1.5	3,476
Moderate risk	19.4 24.5	1.9 3.0	8.4 4.7	3.7 1.7	1.6 0.8	58.6 55.8	24.8 23.4	3.0	2.1 1.3	847 1,011
Great risk/has AIDS Don't know/missing	19.5	11.6	4.0	1.2	0.8	47.2	10.2	4.8 3.6	1.5	2,542
Age							_			
15-19	10.8 18.5	51.5 7.3	3.8 6.5	1.8 3.1	1.1 1.3	24.4 51.9	8.4 17.3	1.9 4.7	1.3 1.8	1,659
20-24 25-29	18.5	1.6	4.8	2.4	0.6	61.5	16.3	3.4	1.8	1,641 1,400
30-39	19.8	0.5	6.3	1.5	1.6	58.4	18.1	5.9	1.5	1,941
40-49	24.3	0.1	12.6	0.7	0.6	48.5	11.2	3.9	1.5	1,235
Marital status Currently in union	22.2	0.0	3.7	1.2	0.6	60.0	16.1	4.5	1.8	5,249
Formerly in union	16.7	0.1	25.3	5.2	3.0	36.8	17.7	5.2	1.8	801
Never married	7.0	55.0	6.6	2.7	1.7	22,3	8.3	2.2	0.8	1,826
Residence Mainland	17.8	12.5	6.6	2.0	1.1	49.3	14.7	4.1	1.6	7,637
Total urban	10.9	12.2	8.2	4.4	3.1	55.6	15.9	5.7	2.0	1,804
Dar es Salaam city	11.6	12.8	8.1	6.9	2.6	58.0	12.5	7.8	3.6	562
Other urban Total rural	10.6 19.9	11.9 12.6	8.2 6.1	3.2 1.3	3.3 0.5	54.5 47.3	17.5 14.4	4.8 3.6	1.3 1.4	1,242 5,832
Zanzibar	29.2	22.0	4.3	0.2	0.3	36.0	5.9	2.5	1.9	239
Pemba	40.7	22.4	3.4	0.0	0.3	25.8	2.7	2.7	0.7	92
Unguja	22.0	21.7	4.9	0.3	0.3	42.3	7.8	2.3	2.6	147
Region Dodoma	5.2	9.1	16.2	1.3	0.6	49.4	31.8	4.9	2.3	347
Arusha	7.9	15.5	4.3	0.5	1.0	50.5	8.1	1.3	2.3 1.3	495
Kilimanjaro	11.9 19.9	19.3	3.9 3.1	2.3	1.5	53.9 46.4	6.2	2.1 1.5	0.8 0.5	385
Tanga Morogoro	9.5	17.9 9.5	9.8	1.8 1.9	2.0 2.7	62.3	5.9 10.0	2.2	0.5	457 400
Coast	16.3	12.7	5.8	5.8	1.4	48.9	10.9	13.4	6.2	158
Dar es Salaam Lindi	12.3 14.9	12.2 4.7	8.3 <b>5.</b> 4	6.0 5.7	2.2 1.6	58.5 38.0	11.8 39.6	7.1 13.0	3.1 1.6	645 185
Mtwara	21.1	5.7	5.3	2.1	0.2	47.8	26.1	11.0	1.8	352
Ruvuma	13.4	6.7	4.7	2.2	0.6	60.1	18.5	10.6	1.5	304
Iringa Mbeya	10.3 12.9	17.8 14.2	9.3 4.2	0.5 1.6	0.3 0.6	53.3 54.2	7.7 8.7	1.9 1.6	0.8 0.6	452 467
Singida	6.7	16.0	6.4	1.6	0.3	56.0	13.6	4.8	4.0	270
Tabora	25.3	5.8	20.5	1.6	0.5	30.0	11.1	6.8	1.6	216
Kukwa Kigoma	27.0 24.5	9.6 20.0	1.7 9.9	0.9	0.3 0.0	31.5 33.5	7.6 12.1	1.7 6.8	0.6 1.1	235 339
Shinyanga	35.6	13.3	4.2	0.6	1.1	40.8	16.4	0.0	0.0	658
Kagera	17.9	13.2	7.5	0.4	0.4	44.6	26.1	4.3	5.0	461
Mwanza Mara	30.0 26.3	7.6 8.5	3.6 4.8	2.6 3.7	2.6 0.4	46.9 46.3	17.8 18.9	1.0 3.7	0.0 1.5	560 251
Education		_	_		_			_		
No education Primary incomplete	26.4 19.4	4.2 23.3	7.4 5.9	0.4 1.7	0.3 0.8	45.5 39.6	13.4 10.7	3.4 3.3	1.2 0.8	2,135 1,595
Primary incomplete	19.4	12.0	6.0	2.8	1.3	54.9	17.0	3.3 4.8	2.0	3,706
Secondary +	7.9	23,4	9.6	3.9	4.5	48.2	12.4	4.1	2.0	439
Total	18.1	12.8	6.6	2.0	1.1	48.9	14.5	4.1	1.6	7,876

Table 11.12.2 AIDS prevention behaviour: men

Percent of men who have heard of AIDS, by specific changes in behaviour in order to avoid AIDS, and background characteristics, Tanzania 1996

				Chang	es in behav	iour to avo	id AIDS				
Background characteristic	No change in sexual behaviour <sup>1</sup>	Kept virgin- ity	Stopped sex	Began using condom	Increased condom use	Restricted to one partner	Fewer	Avoided sex with pros-stitutes	Other sexual be- haviour	Number of men	
Perception of AIDS ri	sk			<del></del>					<del></del>		
among those who have heard of AIDS											
No/small risk	5.9 10.5	17.2 1.8	9.2 6.5	8.2 11.2	4.7 7.6	48.7 42.8	26.2 33.7	17.9	1.2 3.6	1,310	
Moderate risk Great risk /has AIDS	22.3	4.6	3.1	10.0	2.6	38.5	27.5	22.3 22.2	3.6 1.2	197 158	
Don't know/missing	12.4	16.4	4.6	7.9	4.6	38.4	14.8	16.5	1.0	565	
Age 15-19											
15-19 20-24	7.4 4.8	57,6 12.6	3.9 7.5	5.6 15.9	4.1 8.7	17.1 38.5	8.4 26.0	7.0 21.9	0.0 0.5	473 369	
25-29	10.7	1.7	6.9	14.5	8.5	48.9	22.0	20.9	2.4	300	
30-39	6.3	0.8	7.7	8.2	4.4	58.8	32.4	22.4	2.7	519	
40-49 50-59	13.1 18.2	0.0 0.0	8.6 12.3	4.1 1.9	1.7 0.0	59.3 54.1	31.7 25.3	20.3 19.9	1.6 0.7	353 215	
Marital status											
Currently in union	10.9	0.0	7.1	6.2	2.6	60.9	29.7	22.3	1.7	1,285	
Formerly in union Never married	9.8 6.3	0.0 39.7	20.8 5.7	10.5 11.8	14.9 6.8	24.4 22.9	31.4 14.2	20.6 11.6	0. <b>5</b> 0.9	117 825	
Residence											
Mainland	9.3	14,0	7.5	8.7	4.9	45.0	24.3	17.9	1.4	2,161	
Total urban	9.1 14.3	11.8 9.6	8.0	13.4 24.3	7.8	44.1 37.5	23.5 25.4	15.2	1.5	508 171	
Dar es Salaam city Other urban	6.4	12.9	3.3 10.4	7.9	3.3 10.1	37.3 47.4	22.6	5. <del>9</del> 19.9	2.2 1.1	336	
_Total rural	9.4	14.7	7.4	7.3	4.0	45.3	24.6	18.7	1.4	1,653	
Zanzibar Pemba	2.2 5.6	36.6 33.3	1.1 0.0	1.1 0.0	1.1 0.0	39.3 42.6	15.5 5.6	30.7 24.1	0.0 0,0	69 28	
Unguja	0.0	38.9	1.9	1.9	1.9	37.0	22.2	35.2	0.0	41	
Region											
Dodoma	5.1 13.8	15.9 16.1	5.8 3.4	10.1 2.3	4.3 6.9	40.6 33.3	28.3 21.8	11.6 4.6	$0.7 \\ 1.1$	94 145	
Arusha Kilimanjaro	13.0	10.9	6.2	7.8 7.8	7.8	33.3 43.5	17.1	4.0 4.1	0.5	143	
Tanga	23.0	10,8	0.0	9.5	5.4	37.8	14.9	5.4	0.0	107	
Morogoro Coast	9.9 21.3	12.7 14.8	5.6 6.6	4.9 16.4	4.2 1.6	44.4 31.1	19.7 16.4	12.0 4.9	1.4 1.6	94 44	
Dar es Salaam	14.8	10.2	3.6	24.0	3.9	37.2	24.3	5.9	2.3	191	
Lindi	1.4	12.7	25.4	12.7	8.5	57.7	38.0	26.8	2.8	54	
Mtwara Ruvuma	4.0 4. <del>9</del>	12.9 13.7	59.4 32.4	9.9 5.9	3.0 9.8	66.3 52.0	14.9 17.6	3.0 2.0	1.0 1.0	96 82	
Iringa	9.6	19.1	5.1	3.7	2.9	50.0	21.3	5.1	2.2	100	
Mbeya	2.8	12.7	0.0	1.4	18.3	76.1	2.8	1.4	0.0	135	
Singida Tabora	3.6 11.3	11. <del>9</del> 11.3	3.6 0.0	1.2 24.5	8.3 1.9	69.0 11.3	23.8 13.2	6.0 52.8	1.2 3.8	80 80	
Rukwa	11.5	16.7	0.0	1.3	3.8	60.3	1.3	1.3	0.0	71	
Kigoma	11.4 14.3	8.6 15.5	1.4 4.3	12.9 3.1	1.4 1.2	42.9 44.7	15.7 38.5	48.6 14.9	4.3 0.0	95 198	
Shinyanga Kagera	5.8	13.0	4.3	17.4	2.9	23.2	36.5 14.5	53.6	4.3	139	
Mwanza Mara	0.0 1.9	21.8 16.7	3.8 3.7	1.3 9.3	0.0 3.7	46.2 46.3	61.5 55.6	50.0 33.3	0.0 1.9	176 63	
Education	2,2		· · · ·	2.5	· · · ·	- 0.0	22.0			0.0	
No education	17.4	11.5	6.5	2.8	0.9	43.0	19.5	21.3	1.4	293	
Primary incomplete	11.2	26.4	8.6	4.2	2.5	38.8	21.9	17.2	0.0	652	
Primary complete Secondary +	5.8 7.8	9.7 8.9	7.7 2.7	11.0 16.4	6.7 7.3	48.5 47.8	25.9 27.4	17.5 20.6	2.1 1.5	1,063 222	
Total	9.1	14.7	7.3	8.5	4.8	44.9	24.1	18.3	1.4	2,230	

## 11.7 AIDS Testing

Tables 11.13.1 and 11.13.2 show the percentage of women and men who have been tested for AIDS or want to be tested and, of these, the percentage who know of a source of AIDS testing, according to selected background characteristics. Four percent of women and 11 percent of men have already been tested for AIDS and interestingly, about two-thirds of women and men express a desire to be tested for AIDS. Among those who have already been tested for the AIDS virus and those who express a desire for AIDS testing, more than half of them know a place where they can be tested for the AIDS virus.

# 11.8 Sources of Condom Supply

Because of the important role condom use plays in combating the transmission of HIV, respondents were asked if they knew of a source for condoms and if so, to name the source. Table 11.14 shows knowledge of condoms and knowledge of a source for condoms among women and men who have heard of AIDS and who have had sexual intercourse. While most of the respondents know about condoms, many do not know where they can obtain them. Eighty-seven percent of women and 95 percent of men know of condoms. Nevertheless, only 58 percent of women and 74 percent of men who have heard of condoms know where to get them. Among those who know a source, 81 percent of women and 72 percent men reported that they could obtain condoms from a public source, while 32 percent of women and 40 percent of men mentioned private pharmacies as a source for condoms. Knowledge of condoms and knowledge of a source for condoms are highest among respondents who live in urban areas and those who have some formal schooling.

## 11.9 Use of Condoms

Tables 11.15.1 and 11.15.2 show the percentage of women and men who had sex in the 12 months preceding the survey who have ever used condoms for contraceptive purposes, for STD prevention, or either reason. One-third of men and 13 percent of women report using a condom for either reason. Results show that both men and women are slightly more likely to use condoms for STD prevention than to use for fertility regulation.

Condom use rises with increasing education among both women and men; urban dwellers are more likely than rural dwellers to have ever used a condom. The tables also show the prevalence of condom use during the last sexual intercourse by type of sexual contact (i.e., spouse or nonspouse). Not surprisingly, the likelihood of a condom being used is higher when the respondent had sex with someone other than their spouses. Seventeen percent of women and more than one-third of men used a condom when they had sex with a partner other than their spouse. However, only 2 percent of women and 4 percent of men used a condom with their spouses.

Table 11.13.1 Testing for AIDS: women

Among women who know of AIDS, the percent who have been tested and the percent who would like to be tested, and for those respondents tested or who desired testing, the percent who know a source for testing, Tanzania 1996

	Know of AIDS					ested for A			
	Have been tested	Want to be		Know	Source	e of AIDS	testing		
Background characteristic	for AIDS	tested for AIDS	Number	source for test	Public	Private medical	Other	Number	
Age 15-19	2.3	64.6	1,659	42.2	38.5	6.4	0.2	1,109	
20-24	5.3	70.4	1,641	54.7	49.6	8.8	0.5	1,243	
25-29	5.3	, 69.1	1,400	57.3	50.5	12.2	0.3	1,041	
30-39	4,7	67.8	1,941	57.4	51.8	10.6	0.6	1,408	
40-49	2.7	62.5	1,235	46.0	39.8	10.1	0.7	805	
Marital status									
Currently in union	4.0	68.4	5,249	52.2	46.7	9.8	0.4	3,804	
Formerly in union	6.1	66.0	801	57.8	52.3	10.9	0.7	577	
Never married	3.5	63.6	1,826	49.4	44.1	8.4	0.5	1,226	
Residence									
Mainland	4.1	67.0	7,637	52.1	46.5	9.9	0.5	5,428	
Total urban	7.3	66.8	1,804	65.3	61.5	8.6	1.0	1,336	
Dar es Salaam city	10.1	60.9	562	60.4	58.1	8.1	1.1	399	
Other urban	6.0	69.4	1,242	67.4	63.0	8.8	1.0	938	
Total rural	3.1	67.0	5,832	47.7	41.6	10.3	0.3	4,092	
Zanzibar	3.7	70.8	239	55.0	54.5	0.5	0.0	178	
Region									
Dodoma	1.3	57.5	495	59.7	55.2	7.2	0.6	204	
Arusha	4.1	72.8	385	32.7	25.7	10. <del>9</del>	0.3	380	
Kilimanjaro	10.1	59.0	457	60.1	47.4	15.3	0.4	266	
Tanga	2.3	61.5	400	40.8	38.4	3.2	0.4	291	
Morogoro	3.0	66.1	1 <b>5</b> 8	54,9	48.6	8.6	0.0	276	
Coast	2.9	65.6	645	39.2	38.6	0.5	0.5	108	
Dar es Salaam	9.2	61.2	185	59.6	57.4	7.3	1.5	454	
Lindi	8.5	73.1	352	66.3	58.9	14.3	0.4	151	
Mtwara	1.8	75.3	304	54.3	54.0	10.4	0.0	272	
Ruvuma	7.1	71.1	452	64.2	44.1	32.0	0.6	238	
Iringa	4.8	61.0	467	54.4	37.9	21.8	2.0	297	
Mbeya	4.5	66.8	270	51.6	43.9	11.8	0.5	333	
Singida	3.2	64.0	216	51.2	49.2	5.2	1.6	181	
Tabora	5.8	69.5	235	64.3	53.8	23.1	0.0	163	
Rukwa	1.2	57.3	339	37.8	36.8	1.0	0.5	138	
Kigoma	3.7	64.8	658	58.0	54.7	10.7	0.4	232	
Shinyanga	1.9	69.7	461	48.1	47.3	1.6	0.0	472	
Kagera	3.6	76.4	560	55.4	49.1	10.3	0.0	369	
Mwanza	1.7	70.6	251	44.3	43.8	1.8	0.0	405	
Mara	1.9	77.4		54.7	51.4	8.9	0.0	199	
Education									
No education	1.6	64.4	2,135	36.0	32.9	5.8	0.3	1,408	
Primary incomplete	3.4	66.6	1,595	46.2	39.6	9.2	0.4	1,117	
Primary complete	5.1	69.6	3,706	59.4	53.3	11.5	0.5	2,769	
Secondary +	10.6	60.5	439	81.7	76.2	11.4	1.4	312	
Total	4.1	67.1	7,876	52.2	46.7	9.6	0.5	5,606	

Table 11.13.2 Testing for AIDS: men

Among men who know of AIDS, the percent who have been tested and the percent who would like to be tested, and for those respondents tested or who desire testing, the percent who know a source for testing, Tanzania 1996

	Know of	AIDS		<u> </u>		ested for A		<del>,,, ,,,,,</del>
Doolsonwad	Have been tested for	Want to be tested		Source Know source	of AIDS	testing Private		
Background characteristic	AIDS	for AIDS	Number	for test	Public	medical	Other	Number
Age 15-19	3.4	69.5	473	47.2	43.3	9.1	0.0	345
20-24	11.1	66.8	369	69.7	65.6	12.5	0.0	287
25-29	16.6	64.7	309	69.0	59.0	13.2	1.8	
		66.7		_	62.8			243
30-39	15.1		519	69.4		11.5	0.3	425
40-49	14.5	57.6	353	69.1	62.6	11.6	0.3	255
50-59	7.1	65.5	215	55.6	48.5	11.1	0.0	157
Marital status	12.0	45.0	1.005		50.5		0.5	1 000
Currently in union	13.2	65.3	1,285	66.6	59.7	11.7	0.5	1,009
Formerly in union	15.8	57.5	117	78.4	70.5	15.4	0.7	86
Never married	7.7	66.8	825	57.0	52.1	10.3	0.2	615
Residence								
Mainland	11.4	65.9	2,161	63.1	56.8	11.7	0.4	1,670
Total urban	17.9	58.9	508	72.7	66.4	10.4	1.2	390
Dar es Salaam city	17.6	50.0	171	68.5	63.6	7.1	2.2	116
Other urban	18.1	63.4	336	74.5	67.6	11.8	0.7	274
Total rural	9.3	68.1	1,653	60.2	53.8	12.1	0.2	1,281
Zanzibar	9.3	51.4	69	84.2	84.2	0.0	0.0	42
Region								
Dodoma	6.5	65.9	94	63.0	59.0	8.0	0.0	68
Arusha	10.3	64.4	145	50.8	38.5	13.8	0.0	108
Kilimanjaro	18.7	64.8	117	59.6	49.7	11.2	1.9	98
Tanga	12.2	73.0	107	52.4	44.4	9.5	0.0	91
Morogoro	12.7	69.0	94	56.9	52.6	7.8	0.0	77
Coast	4.9	77.0	44	36.0	36.0	2.0	0.0	36
Dar es Salaam	16.4	51.0	191	66.8	62.0	6.8	2.0	129
Lindi	16.9	69.0	54	75.4	68.9	18.0	0.0	46
Mtwara	6.9	82.2	96	68.9	67.8	4.4	0.0	85
Ruvuma	23.5	52.9	82	80.8	53.8	33.3	1.3	62
Iringa	8.1	58.8	100	62.6	56.0	16.5	0.0	67
Mbeya	14.1	73.2	135	64.5	56.5	12.9	1.6	118
Singida	8.3	44.0	80	68.2	68.2	2.3	0.0	42
Тарога	5.7	69.8	80	70.0	57.5	25.0	0.0	61
Rukwa	14.1	64.1	71	54.1	54.1	0.0	0.0	55
Kigoma	8.6	68.6	95	64.8	59.3	16.7	0.0	73
Shinyanga	6.8	72.7	198	50.8	50.8	3.1	0.0	157
Kagera	11.6	66.7	139	75.9	66.7	13.0	0.0	108
Mwanza	6.4	65.4	176	73.9	69.6	16.1	0.0	126
Mara	18.5	77.8	63	69.2	65.4	21.2	0.0	61
Education								
No education	6.2	63.7	293	42.1	37.8	7.1	0.0	205
	6.2					7.1	0.0	205
Primary incomplete	6.4	68.9	652	55.5	50.4	8.8	0.2	491
Primary complete	13.7	66.6	1,063	69.4	62.8	12.9	0.2	855
Secondary +	20.7	52.3	222	85.1	75.7	16.7	2.7	162
Total	11.3	65.5	2,230	63.6	57.4	11.4	0.4	1,712

Table 11.14 Knowledge of condoms

Among respondents who have heard of AIDS and have ever had sex, percent who know of condoms and know a source of condoms, according to background characteristics, and by specific sources, Tanzania 1996

			So	urce of con	doms: won	nen				Source of condoms: men					
n. l	77	Knows		D-i	D4 .	0.1		Number	**	Knows					Numbe
Background characteristic	Knows condom	any source	Public	Private medical	Pharm- acy	Other source	Missing	of women	Knows condom	any source	Public	Private medical	Pharm- acy	Other source	of men
Age 15-19	86.7	54.2	68.9	5.3	39.1	47.6	0.0	806	97.4	74.3	63.7	4.5	48.8	56.5	200
20-24	92.2	61.9	77.7	8.9	36.8	37.8	0.0	1.522	97.8	81.2	69.9	6.4	42.1	57.4	322
25-29	90.8	64.3	84.9	8.1	32.1	32.2	0.0	1.378	98.9	79.2	72.5	8.8	39.5	52.2	295
30-39	87.6	59.1	84.3	8.9	28.6	32.4	0.0	1,934	95.8	76.4	75.4	5.2	38.5	48.8	515
40-49	73.8	46.7	84.8	12.1	20.7	27.8	0.4	1,234	93.5	71.6	74.2	7.7	37.7	46.7	353
50-59	NA NA	NA	NA	NA	NA	NA	ŇA	NA NA	82.3	47.4	70.3	7.7	29.2	55.6	215
Marital status															
Currently in union	85.6	57.3	83.9	8.8	29.1	32.0	0.0	5,249	93.9	71.6	74.6	6.8	38.1	48.6	1,285
Formerly in union	88.4	60.2	77.4	9.8	30.9	38.5	0.4	801	91.0	75.4	69.4	3.9	33.8	54.4	117
Never married	91.8	63.3	69.9	7.4	46.1	46.7	0.0	823	98.0	78.7	67.1	6.8	44.9	58.9	498
Residence	0/7	50.6	00.0	0.0	22.2	25.2	0.1	<i>( (</i> 07	04.0	72.6	71.4	63	40.6	<b>60.0</b>	1 050
Mainland	86.7	58.6	80.8	8.9	32.2	35.3	0.1	6,687	94.9	73.6	71.4	6.7	40.6	53.2	1,858
Total urban	97.6	73.1	75.8	9.5 11.8	50.6	41.7	0.1	1,587	98.9	85.9	60.3	6.0	60.7	64.7	448
Dar es Salaam city	99.1	68.9	65.7		74.3	57.7	0.0	491	99.2	90.2	52.3	8.2	62.7	71.8	155
Other urban	96.9	75.1	80.1	8.5	40.6	35.0	0.1	1,096	98.8	83.7	64.8	4.7	59.6	60.7	293
Total rural	83.4	53.3 49.0	83.3	8.6	23.1	32.0	0.1	5,100	93.7	69.5	76.0	6.9	32.2	48.4	1,410
Zanzibar	84.2	49.0 46.0	95.8 93.8	1.7 0.0	5.5 5.0	14.6	0.0	186 71	89.4	79.8	98.3	4.1	4.9	1.7	44 19
Pemba	76.0 89.3	46.0 50.6	95.8 96.7	2.5	5.0 5.7	12.5 15.6	0.0 0.0	115	(83.3) (93.9)	(93.3) (71.0)	(96.4)	(3.6) (4.5)	(0.0)	(3.6)	25
Unguja	67.3	20.0	90.7	2.3	3.1	15.0	0.0	115	(93.9)	(71.0)	(100.0)	(4.3)	(9.1)	(0.0)	23
Region Dodoma	83.2	62.2	91.7	7.6	28.3	9.0	0.0	315	93.1	73.1	78.5	8.9	44.3	22.8	79
Arusha	76.6	52.2	60.9	6.8	27.1	49.6	0.0	418	87.7	67.2	51.2	2.3	23.3	72.1	121
Kilimanjaro	96.2	66.9	55.9	20.3	21.8	46.0	0.5	312	93.6	77.0	41.1	11.3	28.2	56.5	105
Tanga	88.5	55.9	76.2	8.1	28.7	36.9	0.0	376	93.9	71.0	54.5	6.8	25.0	54.5	95
Morogoro	88.6	65.9	88.7	5.6	27.7	29.2	0.0	362	96.8	65.0	80.8	6.4	29.5	43.6	82
Coast	93.8	64.6	84.9	18.5	43.2	49.3	0.0	138	98.1	80.4	73.2	17.1	19.5	68.3	38
Dar es Salaam	99.1	66.6	67.0	11.5	73.4	56.0	0.2	567	99.3	90.0	52.5	8.6	62.7	71.3	172
Lindi	93.7	61.7	96.0	8.0	14.4	31.0	0.0	177	100.0	72.6	93.3	6.7	35.6	24.4	47
Mtwara	88.3	57.7	96.7	6.2	7.1	21.9	0.0	332	96.6	58.8	94.0	2.0	18.0	10.0	83
Ruvuma	93.1	62.5	78.2	9.1	25.8	40.5	0.0	284	95.5	75.0	63.5	4.8	36.5	47.6	70
lringa	81.0	50.8	82.8	7.8	21.9	20.3	0.0	373	91.8	65.3	81.8	7.6	39.4	28.8	81
Mbeya	91.7	70.5	86.6	5.2	49.4	15.7	0.0	401	98.4	86.9	81.1	3.8	69.8	58.5	118
Singida	79.4	59.2	95.9	5.4	31.8	34.5	0.0	226	93.2	75.4	88.5	1.9	38.5	23.1	71
Tabora	90.5	66.0	80.4	14.0	9.3	52.3	0.0	204	100.0	76.6	69.4	2.8	13.9	72.2	71
Rukwa	85.5	58.3	82.6	3.2	43.2	16.8	0.6	213	95.4	62.9	89.7	0.0	82.1	51.3	59
Kigoma	86.0	45.3	85.6	9.9	5.4	34.2	0.0	272	100.0	71.9	89.1	10.9	17.4	39.1	87
Shinyanga	78.2	50.8	90.3	1.6	3 <b>8.7</b>	31.5	0.0	571	92.6	65.1	70.7	6.1	48.8	52.4	167
Kagera	87.2	50.5	63.6	20.6	14.0	58.9	0.0	400	95.0	78.9	66.7	11.1	13.3	71.1	120
Mwanza	<b>7</b> 7.9	49.1	95.3	5.6	35.5	23.4	0.0	517	91.8	71.4	82.5	0.0	55.0	67.5	137
Mara	87.9	61.3	86.5	4.5	22.6	36.1	0.0	229	91.1	70.7	96.6	20.7	75.9	44.8	53
Education															
No education	69.7	39.1	82.7	6.7	20.0	28.2	0.0	2,048	83.1	51.5	70.0	8. <u>4</u>	29.2	43.8	259
Primary incomplete	88.8	52.8	80.7	9.2	27.2	36.0	0.2	1,223	92.7	62.0	74.1	4.5	25.0	52.4	480
Primary complete	95.2	66.3	81.6	9.2	32.5	35.6	0.1	3,266	98.0	80.1	72.1	6.0	43.1	50.3	960
Secondary +	99.4	84.7	75.8	8.8	57.5	39.9	0.0	337	99.6	93.9	69.7	11.0	54.0	62.9	202
Total	86.7	58.4	81.2	8.7	31.6	34.8	0.1	6,873	94.8	73.7	72.0	6.6	39.7	52.0	1,901

Note: Figures in parentheses are based on 25-49 men. NA ≈ not applicable.

Table 11.15.1 Use of condoms: women

Percent of women who have had sex in the past year who ever used condoms and percent who used condoms during last sexual intercourse, according to perception of AIDS risk, background characteristics and changes in sexual behaviour, Tanzania 1996

	,	Ever used	condom	ı	Used condom during last sexual intercourse						
•	Use condom for FP	Use condom to avoid STD		Number	Last sex with spouse	Number	Last sex with other	Number	Last sex with any partner	Number	
AIDS not always fatal											
or don't know	7.0	10.9	12.2	1 192	10	1 079	25.5	300	5.0	2 202	
No/small risk	7.9 11.1	10.8 12.2	13.2 16.6	2,282	1.8	1,978	25.5	390	5.9	2,282	
Moderate risk		10.2		700 877	2.3	596 732	15.8	143	5.2	700	
Great risk/has AIDS	9.8	6.8	13.9		1.8		10.9	188	3,8	877	
Don't know/missing	8.2	0,0	10.2	1,905	1.4	1,637	11.7	335	3.3	1,905	
Age											
15-19	7.4	13.4	15.6	620	1.5	362	18.7	276	9.2	620	
20-24	12.4	13.8	17.5	1,291	2.6	1,065	21.9	273	6.8	1,291	
25-29	9.9	10.9	14.7	1,205	2.0	1,084	15.6	177	4.1	1,205	
30-39	8.1	7.5	11.0	1,667	1.4	1,525	15.5	226	3.4	1,667	
40-49	4.0	3.5	5.2	981	1.0	907	7.2	105	1.7	981	
Marital status											
Currently in union	6.9	6.3	9.5	4,954	1.7	4,943	17.0	247	2.6	4,954	
Formerly in union	21.9	31.6	34.5	332	NA	0	15.5	332	15.5	332	
Never married	17.6	28.6	30.8	478	NA NA	0	18.4	478	18.4	478	
110 to marrios	17.0	20,0	50.0	7,0	1411	v	101	710	10.7	710	
Residence	2.0	0.7		<b>7</b> 400		4 500	.= 0	1 2 10		- (00	
Mainland	8.8	9.7	12.9	5,600	1.7	4,783	17.3	1,049	4.7	5,600	
Total urban	17.8	21.1	26.1	1,318	3.6	1,022	29.4	358	10.8	1,318	
Dar es Salaam city	18.3	24.1	29.4	411	5.7	324	34.3	118	14.4	411	
Other urban	17.6	19.8	24.6	907	2.6	699	27.1	240	9.1	907	
_Total rural	6.0	6.2	8.9	4,282	1.2	3,761	11.0	690	2.9	4,282	
Zanzibar	3.6	5.4	6.2	165	1.3	160	*	8	1.5	165	
Zone											
Coastal	11.9	14.8	18.2	1,378	3.0	1,141	22.7	313	7.7	1,378	
Northern highlands	14.2	9.2	16.5	596	2.8	505	22.7	98	6.1	596	
Lake	4.8	6.2	7.9	1,909	1.0	1,674	13.5	284	2.8	1,909	
Central	7.3	9.5	12.8	457	1.4	404	15.3	79	3.9	457	
Southern highlands	9.3	7.1	11.0	802	1.4	710	13.5	113	3.1	802	
Southern	8.3	12.2	14.2	623	0.9	509	13.5	170	4.4	623	
Education											
No education	2.0	3.0	3.9	1,735	0.5	1,586	5.2	215	1.1	1,735	
Primary incomplete	5.6	8.3	9.6	1,020	1.6	858	16.1	215	4.7	1,020	
Primary complete	12.5	12.6	17.3	2,740	2.4	2,305	19.4	546	5.9	2,740	
Secondary +	24.7	26.0	35.4	269	4.5	194	37.2	80	14.3	269	
Changes in sexual behaviour											
No sexual	4.0	2.7	5.0	1 262	0.4	1 100	7.0	222	1.0	1 2/2	
behaviour change	4.2	3.7	5.9	1,263	0.4	1,108	7.2	222	1.6	1,263	
Stopped sex	6.8	6.5	10.2	203	1.7	169	(10.3)	38	3.4	203	
Began using condom	58.5	100.0	100.0	136	24.3	61	71.8	93	60.0	136	
Used condom more	64.1	100.0	100.0	82	43.2	33	(83.3)	54	72.2	82	
Restrict one partner	9.6	9.8	13.6	3,427	2.1	2,986	16.3	537	4.4	3,427	
Fewer partners Avoid sex with prostitute	9.3	12.3	15.7	942	1.7	796	15.4	221	5.0	942	
A VOID CAY WITH BEOSTIONA	9.8	13.2	15.1	270	2.1	225	9.7	63	4.0	270	
Avoid sex with prostitute											

Note: Figures in parentheses are based on 25-49 women; an asterisk indicates a figure is based on fewer than 25 women and has been suppressed.

NA = not applicable.

Table 11.15.2 Use of condoms: men

Percent of men who have had sex in the past year who ever used condoms and percentage who used condoms during last sexual intercourse, according to perception of AIDS risk, background characteristics and changes in sexual behaviour, Tanzania 1996

	]	Ever used	condom			Used con	Used condom during last sexual intercourse						
	Use ondom for FP	Use condom to avoid STD	Either	Number	Last sex with spouse	Number	Last sex with other	Number	Last sex with any partner	Number			
AIDS not always fatal					<del> </del>								
or don't know No/small risk	22.8	29.3	32.2	880	3.3	664	39.0	312	16.0	880			
Moderate risk	24.5	38.0	39.4	171	5.1	125	29.5	93	18.0	171			
Great risk/has AIDS	26.8	27.5	32.4	130	2.2	71	20.7	83	14.5	130			
Don't know/missing	18.1	27.6	31.0	391	4.3	295	37.1	152	16.8	391			
Age													
15-19	23.3	36.5	37.5	129	*	5	25.4	125	24.6	129			
20-24	35.9	49.6	51.5	226	6.3	75	40.3	180	33.1	226			
25-29	27.4	40.2	44.2	248	4.5	177	45.8	116	23.8	248			
30-39	25.1	30.8	34.3	462	5.7	416	38.6	125	14.6	462			
40-49	12.0	16,1	18.7	314	1.9	297	19.0	69	5.9	314			
50-64	8.0	7.9	11.7	193	0.3	184	15.1	24	2.2	193			
Marital status													
Currently in union	16.7	22.2	25.4	1,190	3.7	1,154	30.2	258	9.4	1,190			
Formerly in union	54.0	61.0	64.4	61	NA	0	35.3	61	35.3	61			
Never Married	36.4	51.9	53.9	319	NA	ő	38.5	319	38.5	319			
Residence													
Mainland	22.6	30.3	33.3	1,535	3.8	1,122	35.1	634	16.7	1,535			
Total urban	36.1	44.7	49.1	360	7.8	241	<b>47.</b> 1	168	26.5	360			
Dar es Salaam city	43.7	53.4	57.3	130	11.2	73	54.9	77	37.9	130			
Other urban	31.8	39.7	44.5	230	6.3	168	40.5	92	20.1	230			
Total rural	18.5	25.9	28.5	1,175	2.7	881	30.8	466	13.7	1,175			
Zanzibar	2.1	6.2	6.2	37	0.0	32	*	6	0.0	37			
Zone													
Coastal	30.7	37.7	40.6	368	6.1	238	42,3	184	<b>24</b> .1	368			
Northern highlands	25.4	30.9	34.9	180	4.1	125	39.2	66	17.3	180			
Lake	12.1	24.6	26.6	549	0.0	417	<b>29</b> .1	216	11.4	549			
Central	25.2	31.9	35.6	116	5.4	90	35.5	44	17.2	116			
Southern highlands	26.6	25.4	30.5	194	7.9	167	(48.5)	39	15.1	194			
Southern	25.8	31.1	33.5	165	4.1	118	23.9	91	14.7	165			
Education													
No education	7.8	11.7	12.4	222	2.2	191	13.8	54	4.9	222			
Primary incomplete	11.8	17.9	20.3	391	1.4	306	18.1	138	7.5	391			
									_				
Primary complete Secondary +	26.6 44.2	36.0 50.9	39.4 56.6	789 170	5.0 6.0	550 107	39.7 55.0	366 82	20.9 29.8	789 170			
Changes in sexual behavio	our												
No sexual behaviour			40.5	150									
change	14.1	12.8	18.2	172	1.3	119	15.9	80	8.3	172			
Stopped sex	13.5	18.1	19.4	99	3.2	77	(13.5)	43	7.6	99			
Began using condom	60.5	100.0	100.0	167	10.2	68	69.3	142	61.7	167			
Used condom more	83.4	100.0	100.0	78	49.2	29	82.2	64	79.1	78			
Restrict one partner	18.6	22.7	26.1	858	3.8	706	30.7	236	11.0	858			
Fewer partners	20.9	29.2	31.1	468	1.9	342	26.1	213	12.6	468			
Avoid sex with prostitute	12.8	23.9	26.1	349	0.0	272	24.7	143	10.1	349			

Note: Figures in parentheses are based on 25-49 men; an asterisk indicates a figure is based on fewer than 25 men and has been suppressed.

NA = not applicable.

## **CHAPTER 12**

## FEMALE CIRCUMCISION

Female circumcision, also known as female genital mutilation, is practiced in various parts of Tanzania, but little is known about its prevalence. The practice of female circumcision in the country is based mainly on cultural tradition.

In the 1996 TDHS, every female respondent was asked a series of questions on female circumcision. First, she was asked if she had been circumcised. If circumcised, she was asked the type of circumcision<sup>1</sup>, age at which the operation was performed, and who performed the operation. Whether a woman was circumcised or not, if she had a daughter, the same information was collected on the eldest living daughter.

## 12.1 Prevalence of Female Circumcision

Table 12.1 shows that 18 percent of women are circumcised. Younger women (age 15-19 years), women living in Zanzibar, and in urban areas on the mainland are less likely to be circumcised than other women. A higher proportion of circumcised women live in the Arusha (81 percent), Dodoma (68 percent), and Mara (44 percent) regions. Twenty to forty percent of circumcised women are found in the Kilimanjaro (37 percent), Iringa (27 percent), Singida and Tanga (25 percent), and Morogoro (20 percent) regions. In the rest of the regions, less than 5 percent of women are circumcised.

## 12.2 Type of Circumcision

Table 12.2 shows the percent distribution of circumcised women by the type of circumcision. Three types of female circumcision are presented in this table: clitoridectomy, excision, and infibulation. Clitoridectomy is the removal of the prepuce with or without excision of all or part of the clitoris. Excision is the removal of the prepuce with all or part of the labia minora. Infibulation is the most severe form of female circumcision. It involves removing not only the clitoris and adjacent tissues (labia minora), but the external labia as well. The raw edges of the wounds are then sewn together leaving only a tiny opening for urination and menstruation (WHO, 1996).

Among the circumcised women, 57 percent underwent clitoridectomy, 36 percent excision, and 5 percent infibulation. Sixty-five percent of urban women and 56 percent of rural women underwent clitoridectomy. Six percent of rural women and only 2 percent of urban women had infibulation. Nine out of 10 circumcised women in the Lake zone underwent clitoridectomy, in contrast to 1 out of 4 women in the Southern Highlands. Excision is more common among circumcised women in the Southern Highlands (70 percent), and infibulation accounts for 12 percent of all circumcised women in Central zone.

## 12.3 Age at Circumcision and Person who Performed Circumcision

Table 12.3 presents the percent distribution of all women who are circumcised, by age at circumcision. Nine percent of all women reported that they were circumcised before age six, 30 percent were between age 6-10, 32 percent were age 11-15 and 15 percent were age 16 years or older when they were circumcised.

<sup>&</sup>lt;sup>1</sup>In gathering information on the type of circumcision, women were asked: "What type of circumcision did you have? Did you have clitoridectomy, excision, or infibulation?" It is possible that some women may be misclassified, because the distinctions between these types are not always completely clear.

Fourteen percent of women did not know at what age they were circumcised. Women from the Central zone are circumcised at a younger age than in any other zone.

In Africa, female circumcision is usually performed by traditional birth attendants, midwives, or elderly women in the locality who have experience but not necessarily any medical training (Rushwan, 1990). Table 12.4 shows that only about 4 percent of all circumcisions were performed by a doctor or trained nurse/midwife, 9 percent by a traditional midwife, and 74 percent by a circumcision practitioner. More than 80 percent of all circumcisions were performed by a traditional practitioner in the Coastal and Lake zones.

## 12.4 Female Circumcision Among Daughters

Female respondents who had one or more daughters at the time of the survey were asked whether their eldest daughter was circumcised, and if so, the age at which she was circumcised, and the person who performed the circumcision.

As Table 12.5 shows that about 7 percent of eldest daughters were reported to have been circumcised. Although the percentage of daughters circumcised is lower than the percentage of circumcised respondents, it does not necessarily indicate a decline in female circumcision because some daughters were still too young to be circumcised. Among the eldest daughters, 23 percent were circumcised when they were less than six years old, 36 percent were between six and 10 years old, and 34 percent were 11 years or older. Women from the Northern Highland and Central zones are most likely to have their daughter(s) circumcised. There is a negative relationship between mother's education and the likelihood a daughter will be circumcised (Table 12.5).

Among circumcised daughters, 78 percent were circumcised by a circumcision practitioner, 9 percent by a traditional midwife, and only 4 percent were eircumcised by a doctor or a trained nurse/midwife (Table 12.6).

Table 12.1 Prevalence of female circumcision

Percent of women circumcised, by background characteristics, Tanzania, 1996.

Pockground	Dorgant	
Background characteristic	Percent circumcised	Number
Characteristic	circumciseu	Number
Age	•	
15-19	13.5	1,732
20-24	15.9	1,676
25-29	19.6	1,440
30-34	20.8	1,118
35-39	18.7	888
40-44	21.3	680
45-49	22.2	585
15 47	22.2	505
Residence		
Mainland	18.4	7,881
Total urban	10.4	1,811
Dar es Salaam city	6.2	563
Other urban	12.4	1,248
Total rural	20.8	6,070
Zanzibar	0.5	239
Pemba	0.3	92
Unguja	0.6	148
O-5-		
Zones		
Coastal	12.4	1,916
Northern Highlands	63.7	979
Lake	5.1	2,559
Central	49.0	638
Southern Highlands	11.3	1,181
Southern	1.8	847
Domina		
Regions Dodoma	67.0	355
Arusha	67.9 81.4	355 589
	36.9	
Kilimanjaro Tanga	25.1	390 464
Tanga Maragara	20.2	
Morogoro Coast	1.8	408 159
Dar es Salaam	5.4	646
Lindi	1.9	187
	2.9	355
Mtwara		
Ruvuma	0.4	305
Iringa Mbaya	27.0	466
Mbeya	1.0	473
Singida Tabasa	25.4	283
Tabora	1.5	225
Rukwa	1.4	242
Kigoma	0.0	351
Shinyanga	0.5	686
Kagera	1.1	467 572
Mwanza	1.3	573
Mara	43.7	257
Total	17.9	8,120

Table 12.2 Types of female circumcision

Percent distribution of circumcised women, by the type of circumcision, according to background characteristic, Tanzania, 1996.

		Туре					
Background characteristic	Clitori- dectomy	Excision	Infibu- lation	Other	Missing/ don't know	Total	Number of women
Age							
15-19	57.6	32.9	7.0	0.3	2.0	100.0	233
20-24	66.1	28.9	3.5	0.0	1.5	100.0	267
25-29	51.9	39.6	7.5	0.0	1.1	100.0	282
30-34	58.0	37.6	2.6	0.5	1.3	100.0	233
35-39	54.1	36.9	7.1	0.0	1.9	100.0	166
40-44	50.0	44.0	5.4	0.5	0.0	100.0	145
45-49	63.0	33.3	2.8	0.0	1.0	100.0	130
Urban/Rural							
Urban	65.2	31.0	2.1	0.0	1.7	100.0	190
Rural	56.3	36.5	5.7	0.2	1.3	100.0	1,264
Zone							
Coastal	56.3	40.0	2.7	0.0	0.9	100.0	237
Northern Highlands	60.4	34.5	4.2	0.0	0.9	100.0	623
Lake	90.0	7.4	0.7	0.0	2.0	100.0	132
Central	<b>53.8</b>	32.5	12.1	0.6	0.9	100.0	313
Southern Highlands	23.9	70.2	3.6	0.0	2.3	100.0	134
Total	57.4	35.8	5.3	0.2	1.3	100.0	1,454

Table 12.3 Age at circumcision

Percent distribution of circumcised women, by age at circumcision, according to background characteristics, Tanzania, 1996

		Αį			Number		
Background characteristic	0-5	6-10	11-15	16 +	Missing/ don't know	Total	of women
Urban/Rural							
Urban	12.6	33.1	26.1	12.5	15.7	100.0	190
Rural	8.0	29.5	33.2	15.7	13.6	100.0	1,264
Zone							
Coastal	3.5	22.3	33.8	27.2	13.2	100.0	237
Northem Highlands	8.2	32.5	28.8	16.3	14.3	100.0	623
Lake	1.4	11.6	61.1	18.3	7.6	100.0	132
Central	17.8	43.3	20.9	1.4	16.7	100.0	313
Southern Highlands	6.8	19.8	42.8	18.8	11.7	100.0	134
Total	8.6	29.9	32.3	15.3	13.9	100.0	1,454

Note: Total includes 15 women in the Southern zone.

Table 12.4 Person who performed the circumcision

Percent distribution of circumcised women, by person who performed the circumcision, according to background characteristics, Tanzania, 1996

Background characteristic	Doctor	Trained nurse/ midwife	Tradi- tional midwife	Circum- cision practi- tioner	Other	Missing/ don't know	Total	Number of women
Urban/Rural								
Urban	1.9	4.4	9.9	70.1	6.3	7.3	100.0	190
Rural	2.5	0.6	8.4	74.8	7.5	6.1	100.0	1,264
Zone								
Coastal	0.0	1.1	9.1	82.7	3.3	3.9	100.0	237
Northern Highlands	5.2	1.7	9.9	71.9	6.1	5.2	100.0	623
Lake	0.7	2.4	0.0	91.4	2.1	3.4	100,0	132
Central	0.5	0.0	7.4	69.7	12.6	9.8	100.0	313
Southern Highlands	0.0	0.0	13.8	64.6	14.3	7.2	100.0	134
Total	2.4	1.1	8.6	74.2	7.4	6.2	100.0	1,454

Table 12.5 Age at circumcision: eldest daughter

Note: Total includes 15 women in the Southern zone.

Among women with at least one daughter, percent whose eldest daughter has been circumcised, and percent distribution of circumcised eldest daughters, by age at circumcision, according to background characteristics of the mother, Tanzania, 1996

	Parantaga		. "	Age	at circum	cision		
Background characteristics of mother	Percentage with eldest daughter circumcised	Number with daughter	0-5	6-10	11+	Don't know/ missing	Total	Number of circumcised daughters
Urban/Rural								
Urban	2.6	967	*	*	*	*	100.0	25
Rural	7.8	3,786	22.1	36.1	34.2	7.6	100.0	296
Zone								
Coastal	4.8	1.040	(6.4)	(36.4)	(52.0)	(5.2)	100.0	50
Northern Highlands	21.2	<b>56</b> 3	34.4	32.7	28.1	4.8	100.0	119
Lake	1.7	1,570	(13.7)	(3.5)	(79.4)	(3.5)	100.0	27
Central	22.4	398	27.6	50.0	12.4	10.0	100.0	89
Southern Highlands	4.3	683	*	*	*	*	100.0	29
Southern	1.2	499	*	*	*	*	100.0	6
Education								
No education	10.7	1,669	17.5	34.9	40.8	6.8	100.0	178
Primary incomplete	9.1	879	19.0	40.2	37.8	3.1	100.0	80
Primary complete +	2.8	2,205	46.1	31.5	8.6	13.8	100.0	62
Total	6.7	4,753	23.4	35.6	33.8	7,2	100.0	321

Note: Figures in parentheses are based on 25-49 unweighted cases. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

Table 12.6 Person who performed the circumcision: eldest daughter

Percent distribution of circumcised eldest daughters by person who performed the circumcision according to background characteristics, Tanzania, 1996

Background characteristics of mother	Doctor	Trained nurse/midwife	Tradi- tional midwife	Circum- cision practi- tioner	Other	Don't know/ missing	Total	Number of circumcised daughters
Urban/Rural								
Urban	*	*	*	*	*	*	100.0	25
Rural	2.3	1.0	8.3	78.8	5.1	4.5	100.0	296
Education								
No education	3.7	0.6	9.5	77.1	6.5	2.6	100.0	178
Primary incomplete	1.2	1.2	9.8	82.5	4.4	0.9	100.0	80
Primary complete +	1.6	1.6	5.9	73.3	3.8	13.8	100.0	62
Total	2.7	0.9	8.9	77.7	5.5	4.3	100.0	321

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# APPENDIX A SAMPLE DESIGN

## APPENDIX A

### SAMPLE DESIGN

The sample developed for the 1996 TDHS survey was a probabilistic sample selected in three stages. The selection of EAs was made in two stages: first, wards/branches and then enumeration areas within wards/branches were selected. Lists of all households were prepared for the selected EAs and, at the third sampling stage, households were selected from these lists. The 1996 TDHS survey was designed to sustain a variety of analyses at the various domains of interest. The survey was planned to provide estimates (based on the results of the Woman's Questionnaire) for the whole country, for urban and rural areas in the country, and groups of regions (zones). In addition, the sample will provide certain estimates for each of the 20 regions in the mainland and 2 subgroups in Zanzibar: Pemba and Unguja. The sample was designed to be self-weighted in each of the 20 regions on the mainland and each of the 2 subgroups in Zanzibar. In each region (subgroup), the sample of EAs was proportionally distributed accordingly to its urban and rural size. However, the sample for any major domain was also weighted. In most regions, one in every four households was selected for the men's survey, and in six regions (Dar es Salaam, Dodoma, Iringa, Kilimanjaro, Morogoro, and Shinyanga), men in every second household were selected for the interview. The sample of men was designed to provide estimates for the country as a whole and for urban and rural areas.

A total sample of 8,900 households were selected with the objective to have 9,000 completed interviews of women 15 to 49 years old. A total of 8,141 households were occupied and in 7,969 households, interviews were completed. In those households interviewed, 8,501 women 15 to 49 years old were identified and 8,120 were completed interviews.

The sample for the 1996 TDHS was selected from the same primary sampling units used in the 1991-92 TDHS. The sample frame for the 1991-92 survey was based on the list of enumeration areas from the 1988 Population Census; therefore, this census is also implicitly a frame for the 1996 TDHS. The list of census enumeration areas for the 1996 TDHS survey was stratified by each of the 20 regions (for the mainland) and within each region by urban and rural areas. In total, 357 EAs were selected, 95 in the urban area and 262 in the rural. Table A1 shows the sample distribution of EAs.

The absolute probability of selecting an EA (product of the probability of selecting a ward/branch and the conditional probability of selecting an EA within a ward/branch) can be expressed as:

$$P_{ii} = (a * M_i) / (\Sigma M_i)$$

where

a = the number of designated EAs to be selected in the urban or rural areas in a particular region;

 $M_i$  = the number of households of the i<sup>th</sup> EA according to the 1988 population census,

 $\Sigma M_i$  = the total number of households in the urban /rural region according to the 1988 population census.

In each of the selected EAs, a complete household listing operation was carried out and households were selected so as to maintain a self-weighting sample with the urban and rural areas of each of the 20 regions on the mainland and each of the 2 subgroups in Zanzibar. However, the total 1996 TDHS sample is a weighted one, and it will require a final weighing adjustment procedure to provide national estimates.

The overall probability of household selection or the sampling fractions (f) is given by the formula:  $f = P_{1i} * (c_i / L_i)$ 

## where:

 $c_i$  = is the number of households selected (sample take); and Li = the total number of households, listed in the i<sup>th</sup> selected EA.

Accordingly, the sample take is calculated as:

$$c_i = (f * L_i) / P_{Ii}$$

Region	Expected number of completed interviews	Urban EAs	Rural EAs	Total EAs
Dodoma	400	1	14	15
Arusha	400	4	12	16
Kilimanjaro	400	4	12	16
Tanga	400	4	12	16
Morogoro	400	4	12	16
Coast	400	4	12	16
Dar es Salaam	750	27	2	29
Lindi	400	4	12	16
Mtwara	400	4	12	1 <b>6</b>
Ruvuma	400	4	12	16
Iringa	400	1	14	15
Mbeya	400	4	12	16
Singida	400	1	14	15
Tabora	400	4	12	1 <b>6</b>
Rukwa	400	4	12	16
Kigoma	400	4	12	16
Shinyanga	400	l	14	15
Kagera	400	1	14	15
Mwanza	400	4	12	16
Мага	400	1	14	15
Zanzibar				
Pemba	350	0	5 5	5 7
Unguja	350	2	5	7
Total	9000	95	262	357

# Table A.2.1 Sample Implementation: women

Percent distribution of households and eligible women in the DHS sample by result of the interview and household, eligible women and overall response rates, according to residence and zone, Tanzania 1996

			<u> </u>	R	esidenc	e	·					Zone			
Interview results	Mainland	Total urban	Dar es Salaam city	Other urban		Zanzibar	Pemba	Unguja	Coastal	Northern high- lands	Lake	Central	Southern high- lands	Southern	Total
Selected households	90.7	85.3	92.2	941	91.1	88.1	82,9	02.6	96.2	87.7	01.0	90.5		02.1	PO 5
Completed (C) Household present but no competent respondent	89.7	85.5	83.3	86.4	91.1	88.1	84.9	93.6	86.3	87.7	91.8	89.5	91.1	93.1	89.5
at home (HP)	0.9	1.3	1.8	1.1	0.8	1.5	1.9	1.2	1.3	0.1	1.2	0.5	1.5	0.2	1.0
Refused (R)	0.1	0.1	0.1	0.1	0.1	0.6	1.1	0.0	0.2	0.0	0.1	0.4	0.0	0.1	0.1
Dwelling not found (DNF)	0.8	2.1	2.2	2.1	0.4	1.0	0.5	1.5	1.4	0.5	0.4	0.8	0.7	0.7	0.8
Household absent (HA)	3.3	4.5	5.5	4.0	2.9	1.1	0.0	2.3	3.4	9.6	0.8	3.6	2,4	1.4	3.1
Dwelling vacant (DV)	4.2	5.8	5.6	5.9	3.7	7.2	13.0	0.9	6.1	2.0	4.7	3.5	3,8	3.7	4.5
Dwelling destroyed (DD)	0.7	0.5	0.8	0.3	0.7	0.3	0.3	0.3	0.9	0.0	0.6	0.9	0.3	0.8	0.7
Other (O)	0.3	0.3	0.6	0.2	0.3	0.3	0.3	0.3	0.4	0.0	0.4	0.8	0.2	0.1	0.3
Total percent	100.0	100.0	100.0			100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	8,188	2,029	714	1,315	6,159	712	368	344	2,735	977	1,870	770	1,180	1,368	8,900
Household response									_						_
rate (HRR)	98.0	96.0	95.2	96.4	98.6	96.6	95.9	97.3	96.7	99.3	98.1	98.1	97.6	99.0	97.9
Eligible women		22.5									n		a= -		
Completed (EWC)	95.6	95.5	93.5	96.6	95.7	94.3	94.6	94.0	94.3	95.2	95.3	95.8	97.0	97.1	95.5
Not at Home (EWNH)	2.8	2.9	4.6	2.0	2.7	3.2	2.6	3.8	3.5	2.8	3.2	1.9	2.3	1.8	2.8
Refused (EWR)	0.3	0.6 0.1	0.8	0.5	0.2 0.1	1.0 0.0	1.6	0.5	0.6	0.3	0.4	0.7	0.0	0.1	0.4
Partly completed (EWPC)	0.1 0.9	0.1	0.0	0.1 0.7	1.0	0.0	0.0 0.6	0.0 1.1	0.1 1.1	0.1 0.8	0.0	0.0 1.1	0.0 0.6	0.1 0.6	0.0 0.9
Incapacitated (EWI) Other (EWO)	0.9	0.6	0.4	0.2	0.3	0.9	0.6	0.5	0.4	0.8	0.9	0.5	0.6	0.6	0.9
State (2 a. G)	<b>Q.</b> 3	0.1	0.0	0.2	0.5	4.0	0.0	u.s	0.4	0.0	0.1	0.5	0,1	0.5	0.4
Total percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	7,821	1,941	712	1,229	5,880	680	312	368	2,605	905	1,900	740	1,089	1,262	8,501
Eligible woman response															
rate (EWRR) <sup>2</sup>	95.6	95.5	93.5	96.6	95.7	94.3	94.6	94.0	94.3	95.2	95.3	95.8	97.0	97.1	95.5
Overall response							22.5								
rate (ORR)	93.7	91.7	89.0	93.1	94.4	91.1	90.7	91.5	91.2	94.6	93.5	94.0	94.7	96.1	93.5

Note: The household response rate is calculated for completed households as a proportion of completed, no competent respondent, refused, and dwelling not found. The eligible woman response rate is calculated for completed interviews as a proportion of completed, not at home, postponed, refused, partially completed, incapacitated and "other."The overall response rate is the product of the household and woman response rates.

Using the number of households falling into specific response categories, the household response rate (HRR) is calculated as:

<sup>&</sup>lt;sup>2</sup> Using the number of eligible women falling into specific response categories, the eligible woman response rate (EWRR) is calculated as:

<sup>&</sup>lt;sup>3</sup> The overall response rate (ORR) is calculated as: ORR = (HRR \* EWRR)  $\div$  100

## Table A.2.2 Sample Implementation: men

Percent distribution of households and eligible men in the DHS sample by result of the interview and household, eligible men and overall response rates, according to residence and zone, Tanzania 1996

***************************************				R	esidenc	e						Zone			
Interview results	Mainland	Total urban	Dar es Salaam city	Other urban		Zanzibar	Pemba	Unguja	Coastal	Northern high- lands		Central	Southern high- lands	Southern	Total
Selected households Completed (C) Household present but no competent respondent	88.7	83.1	81.1	84.8	90.9	87.6	82.3	93.3	84.9	86.9	93.1	91.6	88.6	91.8	88.7
at home (HP) Refused (R) Dwelling not found (DNF) Household absent (HA)	1.1 0.1 0.9 3.8	1.5 0.1 2.1 5.7	2.7 0.3 1.9 7.1	0.5 0.0 2.3 4.4	0.9 0.0 0.5 3.1	3.8 0.0 0.5 1.1	4.2 0.0 1.0 0.0	3.3 0.0 0.0 2.2	2.1 0.1 1.5 4.0	0.0 0.0 0.5 10.4	1.4 0.0 0.3 0.7	0.3 0.3 0.0 2.7	1.4 0.0 1.4 3.5	0.3 0.0 0.8 1.6	1.2 0.1 0.9 3.7
Dwelling vacant (DV) Dwelling destroyed (DD) Other (O)	4.4 0.6 0.3	6.2 0.8 0.5	5.2 1.1 0.5	7.0 0.5 0.5	3.8 0.6 0.2	6.5 0.5 0.0	12.5 0.0 0.0	0.0 1.1 0.0	6.0 1.1 0.4	2.2 0.0 0.0	3.5 0.7 0.3	4.1 0.3 0.7	4.7 0.2 0.2	4.9 0.5 0.0	4.6 0.6 0.3
Total percent Number	100.0 2,882	100.0 794	100.0 366	100.0 428	100.0 2,088	100.0 186	100.0 96	100.0 90	100.0 1,033	100.0 367	100.0 579	100.0 296	100.0 428	100.0 365	100.0 3,068
Household response rate (HRR) <sup>1</sup>	97.7	95.7	94.3	96.8	98.4	95.3	94.0	96.6	95.8	99.4	98.2	99.3	96.9	98.8	97.6
Etigible men Completed (EMC) Not at Home (EMNH) Refused (EMR) Partly completed (EMPC) Incapacitated (EMI) Other (EMO)	86.2 9.1 0.9 0.0 1.4 2.3	80.3 13.5 0.8 0.1 0.8 4.4	74.7 17.0 1.4 0.3 0.3 6.3	86.0 9.8 0.3 0.0 1.4 2.5	88.6 7.3 1.0 0.0 1.6 1.5	64.7 24.6 0.6 0.0 0.0 10.2	67.5 16.3 0.0 0.0 0.0 16.3	62.1 32.2 1.1 0.0 0.0 4.6	77.8 15.1 1.0 0.1 0.9 5.1	88.1 7.9 1.2 0.0 1.2 1.5	84.9 9.5 1.6 0.0 1.6 2.4	88.5 8.7 0.4 0.0 0.0 2.4	90.8 6.6 0.3 0.0 1.9 0.3	92.9 3.4 0.0 0.0 2.4 1.4	84.9 10.1 0.9 0.0 1.3 2.8
Total percent Number	100.0 2,491	100.0 721	100.0 364	100.0 357	100.0 1,770	100.0 167	100.0 80	100.0 87	100.0 889	100.0 328	100.0 577	100,0 253	100.0 316	100.0 295	100.0 2,658
Eligible man response rate (EMRR) <sup>2</sup>	86.2	80.3	<b>7</b> 4.7	86.0	88.6	64.7	67.5	62.1	77.8	88.1	84.9	88.5	90.8	92.9	84.9
Overall response rate (ORR) <sup>3</sup>	84.3	76.8	70.5	83.2	87.3	61.6	63.5	59.9	74.6	87.6	83.4	87.9	88.0	91.8	82.8

Note: The household response rate is calculated for completed households as a proportion of completed, no competent respondent, refused, and dwelling not found. The eligible man response rate is calculated for completed interviews as a proportion of completed, not at home, postponed, refused, partially completed, incapacitated and "other. "The overall response rate is the product of the household and man response rates.

Using the number of households falling into specific response categories, the household response rate (HRR) is calculated as:

EMC + EMNH + EMR + EMPC + EMI + EMO

<sup>&</sup>lt;sup>2</sup> Using the number of eligible men falling into specific response categories, the eligible man response rate (EWRR) is calculated as:

<sup>&</sup>lt;sup>3</sup> The overall response rate (ORR) is calculated as: ORR = (HRR \* EMRR)  $\div$  100

# APPENDIX B ESTIMATES OF SAMPLING ERRORS

## APPENDIX B

# ESTIMATES OF SAMPLING ERRORS

The estimates from a sample survey are affected by two types of errors: nonsampling errors, and sampling errors. Nonsampling errors are the results of mistakes made in implementing data collection and data processing, such as failure to locate and interview the correct household, misunderstanding the questions on the part of either the interviewer or the respondent, and data entry errors. Although numerous efforts were made during the implementation of the 1996 TDHS to minimize this type of error, nonsampling errors are impossible to avoid and difficult to evaluate statistically.

Sampling errors, on the other hand, can be evaluated statistically. The sample of respondents selected in the TDHS is only one of many samples that could have been selected from the same population, using the same design and expected size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. Although the degree of variability is not known exactly, it can be estimated from the survey results.

A sampling error is usually measured in terms of the standard error for a particular statistic (mean, percentage, etc.), which is the square root of the variance. The standard error can be used to calculate confidence intervals within which the true value for the population can reasonably be assumed to fall. For example, for any given statistic calculated from a sample survey, the value of that statistic will fall within a range of plus or minus two times the standard error of that statistic in 95 percent of all possible samples of identical size and design.

If the sample of respondents had been selected as a simple random sample, straightforward formulae for calculating sampling errors could have been used. However, the TDHS sample is the result of a two-stage stratified design, and, consequently, it was necessary to use more complex formulae. The computer software that calculated sampling errors for the TDHS was the ISSA Sampling Error Module (SAMPERR). This module used the Taylor linearization method of variance estimation for survey estimates that are means or proportions. The Jackknife repeated replication method is used for variance estimation of more complex statistics such as fertility and mortality rates.

The Taylor linearization method treats any percentage or average as a ratio estimate, r = y/x, where y represents the total sample value for variable y, and x represents the total number of cases in the group or subgroup under consideration. The variance of r is computed using the formula given below, with the standard error being the square root of the variance:

$$var(r) = \frac{1-f}{x^2} \sum_{h=1}^{H} \left[ \frac{m_h}{m_h - 1} \left( \sum_{i=1}^{m_h} z_{hi}^2 - \frac{z_h^2}{m_h} \right) \right]$$

in which

$$z_{hi} = y_{hi} - r.x_{hi}$$
, and  $z_h = y_h - r.x_h$ 

where h represents the stratum which varies from 1 to H,  $m_h$  is the total number of enumeration areas selected in the  $h^{th}$  stratum, is the sum of the values of variable y in EA I in the  $h^{th}$  stratum,  $x_{hi}$  is the sum of the number of cases in EA I in the  $h^{th}$  stratum, and is the overall sampling fraction, which is so small that it is ignored.

The Jackknife repeated replication method derives estimates of complex rates from each of several replications of the parent sample, and calculates standard errors for these estimates using simple formulae. Each replication considers *all but one* cluster in the calculation of the estimates. Pseudo-independent replications are thus created. In the TDHS, there were 357 non-empty clusters. Hence, 357 replications were created. The variance of a rate r is calculated as follows:

$$var(r) = \frac{1}{k(k-1)} \sum_{i=1}^{k} (r_i - r)^2$$

in which

$$r_i = kr - (k-1)r_{(i)}$$

where r is the estimate computed from the full sample of 357 clusters,

 $r_{(i)}$  is the estimate computed from the reduced sample of 356 clusters (i<sup>th</sup> cluster excluded), and

k is the total number of clusters.

In addition to the standard error, SAMPERR computes the design effect (DEFT) for each estimate, which is defined as the ratio between the standard error using the given sample design and the standard error that would result if a simple random sample had been used. A DEFT value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a value greater than 1.0 indicates the increase in the sampling error due to the use of a more complex and less statistically efficient design. SAMPERR also computes the relative error and confidence limits for the estimates.

Sampling errors for the TDHS are calculated for selected variables considered to be of primary interest. Two sets of results, one for women and one for men, are presented in this appendix for the country as a whole, for urban and rural areas, for each of the six zones: Coastal, Northern Highlands, Lake, Central, Southern Highlands, and Southern, and six residential areas: Mainland, Zanzibar, Urban mainland, Rural mainland, Dar es Salaam urban, and rest of Urban mainland. For each variable, the type of statistic (mean, proportion, or rate) and the base population are given in Table B.1. Tables B2 to B16 present the value of the statistic (R), its standard error (SE), the number of unweighted (N) and weighted (WN) cases, the design effect (DEFT), the relative standard error (SE/R), and the 95 percent confidence limits (R±2SE), for each variable. The DEFT is considered undefined when the standard error considering simple random sample is zero (when the estimate is close to 0 or 1).

In general, the relative standard error for most estimates for the country as a whole is small, except for estimates of very small proportions. There are some differentials in the relative standard error for the estimates of sub-populations. For example, to estimate the proportion of *Using Contraceptive to Currently married women age 15-49*, the relative standard errors as a percent of the estimated mean for the whole country, for urban areas, and for rural areas are 3.9 percent, 6.8 percent, and 4.8 percent, respectively. The confidence interval (e.g., as calculated the proportion for *Using Contraceptive to currently married women age 15-49*)

can be interpreted as follows: the overall national sample proportion is 0.184 and its standard error is .007. Therefore, to obtain the 95 percent confidence limits, one adds and subtracts twice the standard error to the sample estimate, ie. 0.184±2(.007). There is a high probability (95 percent) that the *true* average proportion of contraceptive use for currently married women age 15 to 49 is between 0.170 and 0.198.

	Value	Standard error	Un- weighted	Weighted	Design effect	Relative error	·	ence limi
Variable	(R)	(SE)	(N)	(WN)	DEFT	SE/R	R-2SE	R+2S
Urban residence	0.235	0.011	8120	8120	2.399	0.048	0.212	0.257
No education	0.285	0.008	8120	8120	1.530	0.027	0.270	0.301
Secondary education or more	0.054	0.005	8120	8120	1.953	0.090	0.045	0.064
Never in union	0.232	0.006	8120	8120	1.323	0.027	0.220	0.245
Currently married	0.666	0.007	8120	8120	1.366	0.011	0.652	0.681
Married before 20	0.654	0.008	6391	6388	1.382	0.013	0.637	0.670
First sex relationship before 18	0.622	0.009	6391	6388	1.422	0.014	0.605	0.640
Children ever born (15-49)	3.087	0.041	8120	8120	1.255	0.013	3.004	3.169
Children ever born (40-49)	6.970	0.092	1251	1265	1.109	0.013	6.786	7.153
Children surviving	2.584	0.036	8120	8120	1.306	0.014	2.511	2.657
Knowing any method	0.885	0.006	5404	5411	1.411	0.007	0.873	0.897
Knowing any modem method	0.877	0.006	5404	5411	1.410	0.007	0.865	0.890
Ever use any method	0.356	0.010	5404	5411	1.534	0.028	0.336	0.376
Using any method	0.184	0.007	5404	5411	1.355	0.039	0.170	0.199
Using any modern method	0.133	0.006	5404	5411	1.299	0.045	0.121	0.145
Using pill	0.055	0.004	5404	5411	1.129	0.064	0.048	0.062
Jsing IUD	0.006	0.001	5404	5411	1.126	0.200	0.004	0.008
Using injectables	0.045	0.003	5404	5411	1.053	0.066	0.039	0.050
Using condom	0.008	0.001	5404	5411	1.087	0.162	0.006	0.011
Using female sterilisation	0.019	0.002	5404	5411	1.328	0.131	0.014	0.024
Using periodic abstinence	0.020	0.002	5404	5411	1.172	0.111	0.016	0.025
Using withdrawal	0.026	0.002	5404	5411	1.094	0.091	0.021	0.031
Using public sector source	0.742	0.018	1018	954	1.312	0.024	0.706	0.778
Want no more children	0.280	0.007	5404	5411	1.157	0.025	0.266	0.294
Want to delay child at least 2 years	0.372	0.008	5404	5411	1.217	0.022	0.356	0.388
deal number of children	5.462	0.044	7474	7480	1.576	0.008	5.374	5.550
Mother received tetanus injection	0.914	0.006	6789	6916	1.489	0.006	0.903	0.926
Received medical care at delivery	0.467	0.013	6789	6916	1.806	0.028	0.441	0.493
Had diarrhoea in the past 2 weeks	0.137	0.005	6080	6188	1.107	0.036	0.127	0.147
Freated with ORS packets	0.483	0.022	850	846	1.224	0.045	0.439	0.526
Sought medical treatment	0.563	0.021	850	846	1.167	0.037	0.522	0.605
Having health card	0.766	0.013	1297	1335	1.139	0.017	0.739	0.792
Received BCG vaccination	0.962	0.007	1297	1335	1.311	0.007	0.948	0.976
Received DPT vaccination (3 doses)	0.852	0.011	1297	1335	1.087	0.012	0.831	0.874
Received polio vaccination (3 doses)	0.796	0.012	1297	1335	1.099	0.012	0.772	0.820
Received measles vaccination	0.809	0.012	1297	1335	1.250	0.013	0.772	0.836
Fully immunised	0.705	0.014	1297	1335	1.212	0.022	0.674	0.030
Weight-for-height (below -2 SD)	0.072	0.004	5226	5344	1.010	0.051	0.065	0.080
Height-for-age (below -2 SD)	0.434	0.010	5226	5344	1.408	0.023	0.414	0.454
Weight-for-age (below -2SD)	0.306	0.008	5226	5344	1.206	0.026	0.290	0.322
Total fertility rate (3 years)	5.818	0.133	NA	22758	1.604	0.023	5.551	6.084
Neonatal mortality rate (5 years)	31.741	2.715	6908	7039	1.215	0.023	26.311	37.172
Infant mortality rate (5 years)	87.471	4.689	6931	7065	1.213	0.054	78.093	96.850
Child mortality rate (5 years)	53.675	3.485	7026	7154	1.166	0.054	46.705	60.645
Under-five mortality rate (5 years)	136.452	5.841	7020	7182	1.302	0.043	124.769	
Postneonatal mortality rate (5 years)	55.730	3.696	6929	7062	1.302	0.043	48.337	63.123

Table B.2.2 Sampling errors - National sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value error weighted Weighted effect еттог R-2SE R+2SE Variable (R) (N) DEFT SE/R (SE) (WN) 0.237 0.012 2256 2256 0.052 Urban residence 1.372 0.213 0.262 No education 0.135 0.009 2256 2256 1.238 0.066 0.117 0.153 2256 Secondary education or more 0.098 800.0 2256 1.253 0.080 0.083 0.114 Never in union 0.375 0.012 2256 2256 1.166 0.032 0.352 0.399 Currently married 0.571 0.012 2256 2256 1.151 0.021 0.547 0.595 Knowing any method 0.934 0.009 1268 1288 0.009 0.917 0.951 1.224 Knowing any modern method 0.928 0.009 1268 1288 1.197 0.009 0.911 0.946 Ever use any method 0.4870.017 1268 1288 1.183 0.034 0.454 0.520 0.294 0.016 1288 0.053 1268 1.221 Using any method 0.263 0.326 Using any modern method 0.158 0.012 1268 1288 1.164 0.075 0.134 0.182 Using pill 0.066 0.007 1268 1288 1.041 0.110 0.051 0.080 0.004 0.002 1268 1288 Using IUD 0.866 0.368 0.001 0.008 0.030 1288 Using injectables 0.005 1268 1.016 0.163 0.020 0.039 Using condom 0.046 0.007 1268 1288 0.150 0.032 0.059 1.167 Using female sterilisation 0.012 0.004 1268 1288 1.175 0.296 0.005 0.020 0.092 Using periodic abstinence 0.011 1268 1288 0.120 0.070 0.114 1.360 0.037 Using withdrawal 0.007 1268 1288 1.253 0.180 0.024 0.050 0.194 Want no more children 0.013 1268 1288 1.145 0.065 0.169 0.220 Want to delay child at least 2 years 0.412 0.015 1268 1288 1.091 0.037 0.382 0.442 Ideal number of children 5.882 0.104 2047 2091 1.338 0.018 5.674 6.091

		Standard	Un-		Design	Relative		ence limi
Variable	Value (R)	error (SE)	weighted (N)	Weighted (WN)	effect DEFT	error SE/R	R-2SE	R+2S
Urban residence	1.000	0.000	2088	1906	NA	0.000	1.000	1.000
No education	0.138	0.012	2088	1906	1.625	0.089	0.113	0.162
Secondary education or more	0.149	0.016	2088	1906	2.010	0.105	0.118	0.181
Never in union	0.294	0.016	2088	1906	1.585	0.054	0.262	0.325
Currently married	0.593	0.016	2088	1906	1.529	0.028	0.560	0.625
Married before 20	0.573	0.016	1632	1492	1.309	0.028	0.541	0.605
First sex relationship before 18	0.552	0.019	1632	1492	1.532	0.034	0.514	0.590
Children ever born (15-49)	2.366	0.085	2088	1906	1.520	0.036	2.197	2.535
Children ever born (40-49)	6.072	0.203	235	218	1.075	0.033	5.666	6.479
Children surviving	2.044	0.075	2088	1906	1.558	0.037	1.893	2.195
Knowing any method	0.976	0.005	1245	1130	1.215	0.005	0.965	0.986
Knowing any modern method	0.975	0.006	1245	1130	1.241	0.006	0.964	0.986
Ever use any method	0.562	0.029	1245	1130	2.027	0.051	0.505	0.619
Using any method	0.327	0.022	1245	1130	1.669	0.068	0.282	0.371
Using any modern method	0.266	0.019	1245	1130	1.498	0.070	0.229	0.304
Using pill	0.102	0.010	1245	1130	1.198	0.101	0.081	0.122
Using IUD	0.014	0.004	1245	1130	1.077	0.253	0.007	0.022
Using injectables	0.095	0.009	1245	1130	1.139	0.100	0.076	0.114
Using condom	0.020	0.005	1245	1130	1.213	0.241	0.010	0.029
Using female sterilisation	0.033	800.0	1245	1130	1.496	0.231	0.018	0.048
Using periodic abstinence	0.041	0.008	1245	1130	1.470	0.201	0.025	0.058
Using withdrawal	0.015	0.004	1245	1130	1.192	0.272	0.007	0.023
Using public sector source	0.682	0.031	463	437	1.432	0.046	0.619	0.744
Want no more children	0.290	0.014	1245	1130	1.102	0.049	0.262	0.319
Want to delay child at least 2 years	0.335	0.017	1245	1130	1.265	0.050	0.302	0.369
deal number of children	4.491	0.077	1972	1798	1.767	0.017	4.337	4.646
Mother received tetanus injection	0.959	0.007	1351	1235	1.142	0.007	0.945	0.972
Received medical care at delivery	0.801	0.024	1351	1235	1.862	0.030	0.753	0.850
Had diarrhoea in the past 2 weeks	0.123	0.012	1234	1132	1.245	0.096	0.099	0.147
Freated with ORS packets	0.543	0.055	154	139	1.318	0.101	0.434	0.653
Sought medical treatment	0.678	0.042	154	139	1.095	0.062	0.594	0.763
Having health card	0.806	0.025	277	252	1.068	0.032	0.755	0.857
Received BCG vaccination	0.997	0.003	277	252	0.965	0.003	0.990	1.000
Received DPT vaccination (3 doses)	0.942	0.014	277	252	0.983	0.015	0.915	0.970
Received polio vaccination (3 doses)	0.838	0.026	277	252	1.162	0.031	0.786	0.890
Received measles vaccination	0.944	0.014	277	252	1.016	0.015	0.916	0.972
Fully immunised	0.804	0.026	277	252	1.068	0.032	0.753	0.855
Weight-for-height (below -2 SD)	0.077	0.010	1026	950	1.251	0.134	0.056	0.097
Height-for-age (below -2 SD)	0.324	0.018	1026	950 050	1.162	0.054	0.289	0.360
Weight-for-age (below -2 SD)	0.196	0.013	1026	950 5403	1.026	0.069	0.169	0.223
Total fertility rate (3 years)	4.108	0.223	NA 2570	5403	1.370	0.054	3.662	4,554
Neonatal mortality rate (10 years)	33.410	5.101 7.227		2329	1.246 1.219	0.153	23.209	43.612
Infant mortality rate (10 years) Child mortality rate (10 years)	81.653 42.119		2573 2587	2331		0.089	67.198 32.230	96.108
Under-five mortality rate (10 years)	120.332	4.944 8.521	2587 2591	2344	1.110	0.117		52.007
	120.332	0.321	439 I	2347	1.207	0.071	103.290	137.375

Variable	Value (R)	Standard error (SE)	Un- weighted (N)	Weighted (WN)	Design effect DEFT	Relative error SE/R	Confidence limits	
							R-2SE	R+2SE
Urban residence	1.000	0,000	616	535	NA	0.000	1.000	1.000
No education	0.068	0.012	616	535	1.167	0.174	0.045	0.092
Secondary education or more	0.219	0.027	616	535	1.604	0.122	0.166	0.273
Never in union	0.431	0.022	616	535	1.093	0.051	0.387	0.474
Currently married	0.504	0.024	616	535	1.196	0.048	0.456	0.552
Knowing any method	0.970	0.012	303	270	1.205	0.012	0.946	0.994
Knowing any modern method	0.970	0.012	303	270	1.205	0.012	0.946	0.994
Ever use any method	0.631	0.037	303	270	1.323	0.058	0.557	0.704
Using any method	0.361	0.033	303	270	1.177	0.090	0.296	0.426
Using any modern method	0.263	0.030	303	270	1.203	0.116	0.202	0.324
Using pill	0.094	0.015	303	270	0.872	0.156	0.065	0.123
Using IUD	0.012	0.005	303	270	0.829	0.438	0.001	0.022
Using injectables	0.028	0.009	303	270	0.993	0.339	0.009	0.046
Using condom	0.109	0.022	303	270	1.246	0.205	0.064	0.154
Using female sterilisation	0.018	0.008	303	270	1.075	0.451	0.002	0.035
Using periodic abstinence	0.071	0.014	303	270	0.977	0.204	0.042	0.100
Using withdrawal	0.022	0.013	303	270	1.570	0.608	0.000	0.048
Want no more children	0.243	0.027	303	270	1.104	0.112	0.188	0.297
Want to delay child at least 2 years	0.349	0.029	303	270	1.071	0.084	0.290	0.408
Ideal number of children	4.818	0.156	559	495	1.448	0.032	4.507	5.130

Table B.4.1 Sampling errors - Rural sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Value weighted Weighted effect error error Variable (R) (SE) (N)(WN) DEFT SE/R R-2SE R+2SE Urban residence 0.000 0.000 6032 6214 NA 0.000 0.000 NA 0.009 6214 1.539 0.331 6032 0.028 0.312 0.349 No education Secondary education or more 0.025 0.004 6032 6214 2.021 0.162 0.017 0.033 0.007 6032 0.031 Never in union 0.214 6214 1.269 0.200 0.227 0.689 0.008 6032 6214 1.338 0.012 0.673 0.705 Currently married 0.009 4759 4895 1.395 0.014 0.659 Married before 20 0.678 0.697 0.010 4759 4895 1.388 0.015 0.625 First sex relationship before 18 0.644 0.663 3.308 0.048 6032 6214 0.015 3,404 1.227 3.211 Children ever born (15-49) 0.101 Children ever born (40-49) 7.156 1016 1048 1.114 0.014 6.954 7.358 0.043 6032 6214 1.291 0.016 2.664 Children surviving 2.750 2.835 0.861 0.008 4159 4282 1.418 0.009 0.846 0,876 Knowing any method 0.852 0.008 4159 4282 1.412 0.009 0.836 Knowing any modern method 0.8674159 1.405 0.033 0.281 Ever use any method 0.301 0.010 4282 0.3214159 4282 1.293 0.048 0.147 0.0070.1330.161Using any method 0.098 0.006 4159 4282 1.282 0.060 0.086 Using any modern method 0.1101.099 0.081 Using pill 0.043 0.003 4159 4282 0.036 0.050 0.001 4159 4282 0.304 0.001 0.004 1.182 0.006 Using IUD 0.003 1.043 0.0900.031 4159 4282 0.026 0.037 Using injectables 4159 1.047 0.005 0.001 4282 0.224 0.003 0.008 Using condom 0.015 0.002 4159 4282 1.276 0.160 0.010 0.020 Using female sterilisation 0.002 4159 4282 0.972 0.123 0.011 0.018 Using periodic abstinence 0.015 0.003 4159 4282 1.067 0.096 0.024 0.035 0.029 Using withdrawal 0.794 0.019 517 1.095 0.024 0.756 555 0.831 Using public sector source 4159 4282 0.277 0.008 1.165 0.029 0.261 0.293Want no more children 0.009 4159 4282 1.193 0.0240.364 0.400 Want to delay child at least 2 years 0.382 0.051 Ideal number of children 5.769 5502 5682 1.538 0.009 5,668 5.871 0.905 0.007 5438 5681 1.510 0.008 0.891 0.919 Mother received tetanus injection 0.394 0.014 5438 5681 1.841 0.037 0.365 0.423 Received medical care at delivery 0.005 5056 0.140 4846 1.073 0.0390.129 0.151 Had diarrhoea in the past 2 weeks 0.471 0.024 696 707 1.220 0.051 0.422 0.519 Treated with ORS packets 707 1.179 0.493 Sought medical treatment 0.541 0.024696 0.0440.588 0.756 0.015 1020 1083 1.145 0.020 0.726 Having health card 0.787 0.954 0.008 1020 1083 1.296 0.937 0.009 0.971 Received BCG vaccination 1020 1083 0.831 0.013 1.082 0.015 0.806 Received DPT vaccination (3 doses) 0.857 0.786 0.014 1020 1083 1.075 0.017 0.759 0.814 Received polio vaccination (3 doses) 0.777 0.016 1020 1083 1.262 0.021 0.744 0.810 Received measles vaccination Fully immunised 0.682 0.018 1020 1083 1.218 0.0260.646 0.717 4394 0.072 0.0044200 0.952 0.054 0.064 0.079 Weight-for-height (below -2 SD) 0.011 4200 4394 1.430 0.435 0.458 0.025 0.481 Height-for-age (below -2 SD) 0.330 0.009 4200 4394 1.205 0.312 0.0280.349 Weight-for-age (below -2 SD) 6.344 0.143 NA 17354 1.570 0.023 6.057 6.631 Total fertility rate (3 years) 36.958 10494 10912 42.083 Neonatal mortality rate (10 years) 2.563 1.288 0.06931.833 96.794 4.860 10517 10934 1.510 0.050 87.073 106.514 Infant mortality rate (10 years) 52.574 58.926 10578 11006 3.176 1.123 0.054 65.277 Child mortality rate (10 years) 150.016 5.941 10602 11029 1.486 0.040 138,134 161,897 Under-five mortality rate (10 years) Postneonatal mortality rate (10 years) 59.836 3.542 10516 10933 1.385 0.059 52,751 66.920 NA = Not applicable.

Variable		Standard error (SE)	Un- weighted (N)	Weighted (WN)	Design effect DEFT	Relative error SE/R	Confidence limits	
	Value (R)						R-2SE	R+2SE
Urban residence	0.000	0.000	1640	1721	NA	NA	0.000	0.000
No education	0.156	0.011	1 <b>64</b> 0	1721	1.238	0.071	0.133	0.178
Secondary education or more	0.061	0.006	1640	1721	1.059	0.103	0.048	0.073
Never in union	0.358	0.014	1640	1721	1.189	0.039	0.330	0.386
Currently married	0.592	0.014	1640	1721	1.141	0.023	0.564	0.619
Knowing any method	0.924	0.010	965	1018	1.208	0.011	0.904	0.945
Knowing any modern method	0.917	0.010	965	1018	1.179	0.011	0.896	0.938
Ever use any method	0.449	0.019	965	1018	1.159	0.041	0.412	0.486
Using any method	0.277	0.018	965	1018	1.233	0.064	0.241	0.312
Using any modern method	0.130	0.013	965	1018	1.168	0.097	0.105	0.156
Using pill	0.058	0.008	965	1018	1.098	0.142	0.042	0.075
Using IUD	0.002	0.001	965	1018	0.939	0.616	0.000	0.005
Using injectables	0.030	0.006	965	1018	1.016	0.185	0.019	0.041
Using condom	0.029	0.006	965	1018	1.201	0.224	0.016	0.042
Using female sterilisation	0.011	0.004	965	1018	1.213	0.377	0.003	0.019
Using periodic abstinence	0.097	0.013	965	1018	1.406	0.138	0.071	0.124
Using withdrawal	0.041	0.008	965	1018	1.194	0.186	0.026	0.056
Want no more children	0.182	0.014	965	1018	1.153	0.079	0.153	0.210
Want to delay child at least 2 years	0.429	0.017	965	1018	1.089	0.040	0.394	0.464
Ideal number of children	6.213	0.128	1488	1596	1.324	0.021	5.957	6.468

Table B.5.1 Sampling errors - Coastal zone sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Weighted Value ептог weighted effect error Variable (SE) (N) (WN) DEFT SE/R R-2SE R+2SE (R) Urban residence 0.445 0.024 2457 1916 2.351 0.4920.053 0.398 2457 No education 0.2280.013 1916 1.570 0.058 0.201 0.254Secondary education or more 0.101 0.010 2457 1916 1.609 0.097 0.081 0.120 0.012 2457 Never in union 0.263 1916 1.371 0.046 0.239 0.2880.013 2457 Currently married 0.627 1916 1.322 0.021 0.601 0.653 Married before 20 0.662 0.013 1903 1472 1.195 0.020 0.636 0.687 First sex relationship before 18 0.616 0.014 1903 1472 1.253 0.023 0.588 0.643 2457 Children ever born (15-49) 2.739 0.051 1916 0.8900.019 2.638 2.840 Children ever born (40-49) 6.526 0.195331 261 1.186 0.030 6.1376.916 2457 Children surviving 2.265 0.0431916 0.911 0.019 2.179 2.351 1202 Knowing any method 0.945 0.011 1565 1.929 0.012 0.923 0.967Knowing any modern method 0.943 0.011 1565 1202 1.919 0.012 0.920 0.965 0.479 1565 0.442 Ever use any method 0.018 1202 1.463 0.039 0.516 Using any method 0.263 0.016 1565 1202 1.400 0.059 0.232 0.295Using any modern method 0.195 0.012 1565 1202 1.182 0.061 0.171 0.218 Using pill 0.0800.008 1565 1202 1.118 0.096 0.065 0.096 Using IUD 0.009 0.002 1565 1202 0.973 0.257 0.004 0.014 Using injectables 0.068 0.006 1565 1202 0.977 0.091 0.056 0.081 Using condom 0.017 0.003 1565 1202 0.928 0.179 0.011 0.023 Using female sterilisation 0.018 0.0041565 1202 1.276 0.237 0.0100.027Using periodic abstinence 0.030 0.0061565 1202 1.446 0.2070.0180.043 Using withdrawal 0.0320.0061565 1202 1.335 0.186 0.020 0.044390 Using public sector source 0.7120.026 317 1.113 0.036 0.660 0.763 1565 Want no more children 0.260 0.015 1202 1.338 0.057 0.2310.290Want to delay child at least 2 years 0.366 0.017 1565 1202 1.381 0.046 0.333 0.400Ideal number of children 5.052 0.0802214 1703 1.566 0.016 4.892 5.212 0.936 1851 1396 1.099 0.0080.921 0.950 Mother received tetanus injection 0.007 1851 0.604 Received medical care at delivery 0.556 0.024 1396 1.674 0.043 0.508Had diarrhoea in the past 2 weeks 0.1230.0091668 1244 1.086 0.075 0.105 0.142 Treated with ORS packets 0.498 0.026 214 154 0.701 0.052 0.446 0.549 Sought medical treatment 0.558 0.028 214 154 0.742 0.049 0.503 0.613 Having health card 0.796 0.026 360 269 1.171 0.032 0.745 0.847 Received BCG vaccination 0.9790.007360 269 0.8820.007 0.9660.993360 269 0.939 Received DPT vaccination (3 doses) 0.8710.017 0.019 0.8370.905 Received polio vaccination (3 doses) 0.8240.024 360 269 1.166 0.0290.7760.872 Received measles vaccination 0.8600.026 360 269 1.401 0.030 0.8080.913 360 269 1.294 Fully immunised 0.7440.0310.041 0.6830.805 0.0701392 1052 Weight-for-height (below -2 SD) 0.007 0.942 0.096 0.0570.083 0.450 0.016 1392 0.419 Height-for-age (below -2 SD) 1052 1.117 0.035 0.4820.2950.014 1392 1052 1.051 0.0460.268 0.322Weight-for-age (below -2 SD) 1.404 Total fertility rate (3 years) 4.929 0.231 NA 5359 0.047 4.466 5.391 Neonatal mortality rate (10 years) 40.745 4.934 3594 2717 1.338 30.876 50.614 0.121 Infant mortality rate (10 years) 101.262 8.188 3600 84.886 117.638 2721 1.442 0.081 60.951 3621 2743 Child mortality rate (10 years) 5.775 1.244 0.095 49.402 72.501 156.041 3627 1.434 136.325 175.757 Under-five mortality rate (10 years) 9.858 2748 0.063Postneonatal mortality rate (10 years) 60.517 5.152 3600 2721 1.175 0.085 50.212 70.821 NA = Not applicable.

		011	¥ T		<b>5</b>	D-1-4	Confider	ice limits
Variable	Value (R)	Standard error (SE)	Un- weighted (N)	Weighted (WN)	Design effect DEFT	Relative error SE/R	R-2SE	R+2SE
Urban residence	0.473	0.030	692	508	1.566	0.063	0.414	0,533
No education	0.102	0.011	692	508	0.969	0.109	0.080	0.125
Secondary education or more	0.157	0.018	692	508	1.334	0.118	0.120	0.194
Never in union	0.404	0.022	692	508	1.154	0.053	0.361	0.447
Currently married	0.528	0.022	692	508	1.172	0.042	0.483	0.572
Knowing any method	0.938	0.014	362	268	1.100	0.015	0.910	0.966
Knowing any modern method	0.938	0.014	362	268	1.100	0.015	0.910	0.966
Ever use any method	0.527	0.034	362	268	1.287	0.064	0.460	0.595
Using any method	0.319	0.030	362	268	1.235	0.095	0.258	0.379
Using any modern method	0.223	0.025	362	268	1.152	0.113	0.173	0.274
Using pill	0.091	0.016	362	268	1.045	0.174	0.059	0.122
Using IUD	0.010	0.005	362	268	0.911	0.489	0.000	0.019
Using injectables	0.035	0.010	362	268	1.024	0.283	0.015	0.055
Using condom	0.074	0.015	362	268	1.125	0.210	0.043	0.105
Using female sterilisation	0.012	0.006	362	268	1.046	0.505	0.000	0.024
Using periodic abstinence	0.047	0.012	362	268	1.117	0.265	0.022	0.072
Using withdrawal	0.042	0.012	362	268	1.135	0.286	0.018	0.066
Want no more children	0.162	0.026	362	268	1.355	0.162	0.110	0.215
Want to delay child at least 2 years	0.457	0.030	362	268	1.145	0.066	0.397	0.517
Ideal number of children	5.454	0.162	585	434	1.242	0.030	5.130	5.779

Table B.6.1 Sampling errors - Northern Highlands zone sample: women, Tanzania 1996 Confidence limits Relative Standard Un-Design Value Weighted error weighted effect ептог R-2SE Variable (R) (SE) (N) (WN) DEFT SE/R R+2SE Urban residence 0.2090.030 862 979 2.189 0.145 0.1490.270 979 No education 0.2590.016 862 1.102 0.064 0.2260.292 979 Secondary education or more 0.072 0.014 862 1.649 0.202 0.043 0.101 862 979 1.208 0.066 Never in union 0.2800.018 0.2430.317979 Currently married 0.638 0.020 862 1.247 0.032 0.597 0.679 0.515 679 773 1.262 0.047 0.466 Marricd before 20 0.024 0.563 679 First sex relationship before 18 0.512 773 1.182 0.044 0.467 0.558 0.023 979 1.194 2.852 862 0.039 Children ever born (15-49) 0.112 2.627 3.076 Children ever born (40-49) 6.648 0.239 124 135 1.043 0.036 6.169 7.127 Children surviving 2.598 0.095 862 979 1.117 0.037 2.407 2.789 0.721 544 Knowing any method 0.020 624 1.030 0.028 0.6810.760 544 Knowing any modern method 0.703 0.022 624 1.109 0.031 0.659 0.746 Ever use any method 0.483 0.027 544 624 1.244 0.055 0.429 0.536 544 Using any method 0.310 0.017 624 0.872 0.056 0.2760.345 544 Using any modern method 0.199 0.018 624 1.071 0.0920.162 0.235Using pill 0.064 0.013544 624 1.284 0.2110.0370.091 544 0.023 0.007 624 1.079 0.301 0.009 Using IUD 0.037 544 1.125 0.216 Using injectables 0.048 0.010 624 0.027 0.068 544 0.500 Using condom 0.016 0.008 624 1.466 0.000 0.031 544 1.030 0.196 Using female sterilisation 0.048 0.009 624 0.029 0.067 Using periodic abstinence 0.036 0.008 544 624 1.052 0.2340.019 0.053 544 0.112 Using withdrawal 0.071 0.008624 0.720 0.055 0.087 146 159 1.472 0.105 Using public sector source 0.575 0.060 0.454 0.695 0.257 544 624 0.048 0.232 Want no more children 0.012 0.656 0.281Want to delay child at least 2 years 0.403 0.025 544 624 1.173 0.0610.354 0.452 Ideal number of children 5.216 0.123 785 889 1.265 0.0244.970 5.462 Mother received tetanus injection 0.881 0.016 719 828 1.151 0.018 0.849 0.913 0.493 0.035 719 828 1.583 0.071 0.423 Received medical care at delivery 0.563 0.130 683 786 1.072 0.108 0.102 Had diarrhoea in the past 2 weeks 0.014 0.158 0.334 0.062 87 102 1.189 0.184 Treated with ORS packets 0.2110.458 Sought medical treatment 0.591 0.048 87 102 0.912 0.081 0.496 0.687 0.798 Having health card 0.676 0.034 123 141 0.0500.609 0.743 0.946 123 141 1.038 0.022 0.905 Received BCG vaccination 0.021 0.988 0.902 141 0.938 Received DPT vaccination (3 doses) 123 0.678 0.020 0.018 0.866123 141 0.746 Received polio vaccination (3 doses) 0.827 0.025 0.031 0.777 0.878141 1.014 Received measles vaccination 0.877 0.030 123 0.0340.817 0.937 Fully immunised 0.8000.034 123 141 0.957 0.043 0.732 0.869 697 Weight-for-height (below -2 SD) 0.067 0.012 607 1.116 0.174 0.043 0.0900.401 697 607 1.258 0.0660.348 Height-for-age (below -2 SD) 0.0260.454607 697 0.301 0.021 1.075 0.069 0.260 0.343 Weight-for-age (below -2 SD) 2741 1.790 0.073 4.878 6.542 Total fertility rate (3 years) 5.710 0.416 NA Neonatal mortality rate (10 years) 18.479 4.347 1357 1557 1.126 0.235 9.785 27.173 40.550 6.472 1558 1.152 0.160 27,606 53.495 Infant mortality rate (10 years) 1358 6.383 Child mortality rate (10 years) 29.976 1361 1562 1.220 0.213 17,210 42.743 Under-five mortality rate (10 years) 0.907 0.093 56.374 69.311 6.468 1363 1564 82.247 Postneonatal mortality rate (10 years) 22.071 4.034 1357 1557 0.961 0.18314,003 30.139 NA = Not applicable.

Table B.6.2 Sampling errors - Northern Highlands zone sample: men, Tanzania 1996 Confidence limits Relative Standard Un-Design Value weighted Weighted effect error error Variable (R) (SE) (N) (WN) DEFT SE/R R-2SE R+2SE Urban residence 0.213 0.035 289 275 1,442 0.163 0.144 0.283 No education 0.103 0.028 289 275 1.552 0.269 0.048 0.159 Secondary education or more 0.114 0.025 289 275 1.345 0.221 0.064 0.165 0.405 0.031 289 275 1.070 0.076 0.343 0.467 Never in union 0.532 0.027 289 275 0.924 0.051 Currently married 0.477 0.586 Knowing any method 0.812 0.044 145 146 1.344 0.054 0.725 0.900 0.790 0.043 145 146 1.277 0.055 0.703 Knowing any modern method 0.876 0.492 0.054 145 146 Ever use any method 1.288 0.109 0.385 0.600 0.354 0.048 145 146 Using any method 1.196 0.135 0.259 0.450 0.177 0.038 145 146 Using any modern method 1.182 0.212 0.102 0.252 Using pill 0.059 0.020 145 146 1.013 0.337 0.019 0.099 0.012 0.007 145 146 0.000 Using IUD 0.751 0.557 0.026 0.024 0.014 145 146 0.594 0.000 Using injectables 1.115 0.052 Using condom 0.051 0.012 145 146 0.659 0.238 0.027 0.075 0.031 Using female sterilisation 0.017 145 146 1.208 0.562 0.000 0.066 0.075 145 146 Using periodic abstinence 0.027 1.237 0.363 0.020 0.129 Using withdrawal 0.094 0.033 145 146 1.373 0.355 0.027 0.161 0.265 0.047 145 146 0.177 Want no more children 1.276 0.172 0.359 Want to delay child at least 2 years 0.372 0.045 145 146 1.120 0.121 0.282 0.462 Ideal number of children 6.279 0.579 261 244 1.650 0.092 5.120 7.437

		Standard	Un-		Design	Relative		nce limit
Variable	Value (R)	error (SE)	weighted (N)	Weighted (WN)	effect DEFT	error SE/R	R-2SE	R+2S1
Urban residence	0.130	0.017	1811	2559	2.141	0.130	0.096	0.164
No education	0.339	0.017	1811	2559	1.513	0.050	0.305	0.373
Secondary education or more	0.032	0.010	1811	2559	2.340	0.300	0.013	0.052
Never in union	0.205	0.011	1811	2559	1.110	0.051	0.184	0.226
Currently married	0.692	0.012	1811	2559	1.150	0.018	0.667	0.717
Married before 20	0.688	0.016	1428	2021	1.285	0.023	0.656	0.719
First sex relationship before 18	0.649	0.019	1428	2021	1.515	0.030	0.610	0.687
Children ever born (15-49)	3.405	0.100	1811	2559	1.334	0.029	3.204	3,605
Children ever born (40-49)	7.632	0.198	284	394	1.080	0.026	7.237	8.028
Children surviving	2.851	0.088	1811	2559	1.375	0.031	2.676	3.027
Knowing any method	0.870	0.014	1252	1771	1.449	0.016	0.842	0.897
Knowing any modern method	0.864	0.014	1252	<b>17</b> 71	1.423	0.016	0.837	0.892
Ever use any method	0.195	0.020	1252	1771	1.757	0.101	0.155	0.234
Using any method	0.099	0.013	1252	1771	1.535	0.131	0.073	0.124
Using any modern method	0.073	0.011	1252	1771	1.546	0.156	0.050	0.095
Using pill	0.027	0.006	1252	1771	1.215	0.208	0.016	0.038
Using IUD	0.002	0.001	1252	1771	1.045	0.744	0.000	0.004
Using injectables	0.029	0.006	1252	1771	1.164	0.191	0.018	0.040
Using condom	0.003	0.001	1252	1771	1.028	0.580	0.000	0.005
Using female sterilisation	0.012	0.005	1252	1771	1.462	0.368	0.003	0.022
Using periodic abstinence	0.019	0.004	1252	1771	0.928	0.188	0.012	0.026
Using withdrawal	0.005	0.002	1252	1 <b>771</b>	1.027	0.414	0.001	0.009
Using public sector source	0.768	0.053	131	175	1.421	0.069	0.662	0.873
Want no more children	0.296	0.014	1252	1771	1.114	0.049	0.267	0.324
Want to delay child at least 2 years	0.386	0.014	1252	1771	1.033	0.037	0.358	0.415
Ideal number of children	6.006	0.095	1700	2440	1.718	0.016	5.816	6.195
Mother received tetanus injection	0.914	0.012	1800	2549	1.594	0.014	0.889	0.938
Received medical care at delivery	0.381	0.024	1800	2549	1.735	0.063	0.333	0.429
Had diarrhoea in the past 2 weeks	0.136	0.009	1605	2275	0.997	0.065	0.119	0.154
Freated with ORS packets	0.437	0.044	238	310	1.267	0.102	0.348	0.526
Sought medical treatment	0.514	0.045	238	310	1.246	0.087	0.424	0.604
Having health card	0.762	0.025	384	543	1.138	0.033	0.711	0.812
Received BCG vaccination	0.952	0.014	384	543	1.252	0.014	0.924	0.979
Received DPT vaccination (3 doses)	0.806	0.021	384	543	1.014	0.025	0.765	0.847
Received polio vaccination (3 doses)	0.755	0.020	384	543	0.930	0.027	0.714	0.796
Received measles vaccination	0.741	0.026	384	543	1.134	0.035	0.689	0.793
Fully immunised	0.641	0.027	384	543	1.081	0.042	0.587	0.694
Weight-for-height (below -2 SD)	0.079	0.006	1384	1966	0.869	0.081	0.066	0.092
Height-for-age (below -2 SD)	0.366	0.018	1384	1966	1.300	0.048	0.331	0.402
Weight-for-age (below -2 SD)	0.295	0.014	1384	1966	1.072	0.047	0.268	0.323
Fotal fertility rate (3 years)	6.968	0.260	NA	7161	1.386	0.037	6.449	7.487
Neonatal mortality rate (10 years)	36.861	4.480	3355	4759	1.249	0.122	27.901	45.822
Infant mortality rate (10 years)	99.995	7.622	3364	4768	1.297	0.076	84.751	115.238
Child mortality rate (10 years)	52.366	4.649	3373	4789	0.964	0.089	43.068	61.664
Under-five mortality rate (10 years)	147.124	8.646	3383	4800	1.198			164.416
Postneonatal mortality rate (10 years)	63.133	5.372	3363	4767	1.166	0.085	52.390	73.876

Table B.7.2 Sampling errors - Lake zone sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value Weighted error weighted effect error Variable DEFT SE/R (SE) (WN) R-2SE R+2SE (R) (N) Urban residence 0.126 0.021 490 757 1,421 0.169 0.083 0.169 No education 0.171 0.019 490 757 1.101 0.109 0.134 0.209 Secondary education or more 0.084 0.012 490 757 0.969 0.145 0.060 0.108 757 Never in union 0.382 0.026 490 1.198 0.069 0.329 0.434 0.578 757 0.046 Currently married 0.027 490 1.193 0.524 0.631 0.929 438 282 1.045 0.897 Knowing any method 0.016 0.017 0.961 Knowing any modern method 438 0.925 1.056 0.891 0.958 0.017 282 0.018 Ever use any method 0.352 0.030 282 438 1.061 0.086 0.292 0.413 0.222 438 Using any method 0.029 282 1.178 0.132 0.164 0.280 0.016 438 0.038 Using any modern method 0.071 282 1.073 0.232 0.104 438 Using pill 0.032 0.013 282 1.218 0.397 0.007 0.058 Using IUD 0.003 0.003 438 0.902 282 1.013 0.000 0.009 0.006 Using injectables 0.012 282 438 0.920 0.491 0.024 0.000 Using condom 0.016 0.006 282 438 0.850 0.398 0.003 0.029 Using female sterilisation 0.007 438 0.005 282 1.037 0.716 0.000 0.018 Using periodic abstinence 0.146 0.027 282 438 1.285 0.091 0.2000.186 0.005 0.899Using withdrawal 0.004 282 438 0.722 0.000 0.013 Want no more children 0.163 0.022 282 438 1.008 0.136 0.118 0.207 Want to delay child at least 2 years 0.475 0.028 438 0.925 282 0.058 0.420 0.530 Ideal number of children 6.183 0.164 482 746 1.186 0.026 5.855 6.510

Table B.8.1 Sampling errors - Central zone sample: women, Tanzania 1996 Confidence limits Standard Un-Relative Design Value weighted Weighted error effect error R-2SE R+2SE Variable (R) DEFT (SE) (N) (WN) SE/R Urban residence 0.139 0.060 709 0.432 0.019 0.259 638 4.616 No education 0.301 0.030 709 638 1.731 0.099 0.242 0.361 Secondary education or more 0.0400.010 709 638 1.390 0.254 0.020 0.061 Never in union 0.201 0.017 709 638 1.114 0.0840.167 0.234 Currently married 0.708 0.028 709 638 1.656 0.040 0.765 0.652 Married before 20 0.641 0.030 569 513 1.473 0.046 0.581 0.700 0.604 First sex relationship before 18 0.029 569 513 1.390 0.047 0.547 0.661 Children ever born (15-49) 3.407 0.102 709 638 0.905 0.030 3.202 3.612 Children ever born (40-49) 6.900 0.289 130 119 1.134 0.042 6.322 7.478 Children surviving 2.854 0.078 709 638 0.814 0.027 2.698 3.010 Knowing any method 0.876 0.020 499 452 1.351 0.023 0.836 0.916 0.863 0.022 499 452 0.026 Knowing any modern method 1.435 0.819 0.907 0.347 0.034 499 452 1.606 0.099 Ever use any method 0.278 0.415 Using any method 0.1490.021 499 452 1.312 0.141 0.107 0.190 Using any modern method 0.132 0.017 499 452 1.110 0.127 0.099 0.166 0.059 0.011 499 452 Using pill 1.008 0.1810.037 0.080 Using IUD 0.007 0.005 499 452 1.353 0.746 0.0000.016 0.057 0.009 499 452 Using injectables 0.854 0.156 0.039 0.0740.002 0.002 499 452 0.892 1.002 0.005 Using condom 0.000 Using female sterilisation 0.0090.005 499 452 1.127 0.534 0.0000.018 0.008 0.005 499 452 1.237 0.611 Using periodic abstinence 0.0000.018 Using withdrawal 0.0080.004 499 452 0.929 0.459 0.001 0.016 0.900 0.043 87 77 0.048 Using public sector source 1.335 0.814 0.987 0.305 0.021 499 452 1.041 0.070 Want no more children 0.262 0.348 0.375 0.020 499 452 0.909 Want to delay child at least 2 years 0.053 0.335 0.414 5.449 646 0.022 Ideal number of children 0.120 568 1.217 5.210 5.689 Mother received tetanus injection 0.8970.022 636 570 1.387 0.024 0.854 0.940 Received medical care at delivery 0.425 0.040 636 570 1.743 0.093 0.3460.504 0.1640.018 560 496 0.113 Had diarrhoea in the past 2 weeks 1.153 0.1270.201Treated with ORS packets 0.712 0.039 94 81 0.813 0.055 0.790 0.633 Sought medical treatment 0.7080.042 94 81 0.874 0.060 0.623 0.792 Having health card 0.765 0.044 110 98 1.081 0.058 0.677 0.853 98 Received BCG vaccination 0.933 0.028110 1.170 0.0300.877 0.989 98 Received DPT vaccination (3 doses) 0.8140.043 110 1.138 0.052 0.729 0.89998 Received polio vaccination (3 doses) 0.762 0.062 110 1.517 0.082 0.638 0.886 98 Received measles vaccination 0.803 0.048 110 1.251 0.0600.707 0.898 Fully immunised 0.695 0.064 110 98 1.435 0.092 0.567 0.822 Weight-for-height (below -2 SD) 0.075 0.010 472 415 0.767 0.128 0.056 0.095 Height-for-age (below -2 SD) 0.4340.031 472 415 1.271 0.071 0.373 0.496 Weight-for-age (below -2 SD) 0.3140.024 472 415 1.117 0.077 0.265 0.362 Total fertility rate (3 years) 6.101 0.472 NA 1796 1.567 0.0775.156 7.046 Neonatal mortality rate (10 years) 39.836 6.141 1263 1126 0.985 0.154 27,553 52,118 Infant mortality rate (10 years) 98.101 13.935 1266 1129 1.405 0.14270,232 125,970 Child mortality rate (10 years) 60.555 10.744 1276 1138 1.260 0.17739,066 82.044 152.715 Under-five mortality rate (10 years) 20.834 1279 1140 1.713 0.136 111.047 194.384 Postneonatal mortality rate (10 years) 58.265 13.316 1266 1129 1.703 0.22931.633 84.897 NA = Not applicable.

Table B.8.2 Sampling errors - Central zone sample: men, Tanzania 1996

							Confider	nce limits
Variable	Value (R)	Standard error (SE)	Un- weighted (N)	Weighted (WN)	Design effect DEFT	Relative error SE/R	R-2SE	R+2SE
Urban residence	0.123	0.042	224	176	1.905	0.340	0.040	0.207
No education	0.180	0.033	224	176	1.284	0.183	0.114	0.246
Secondary education or more	0.061	0.027	224	176	1.717	0.453	0.006	0.115
Never in union	0.379	0.028	224	176	0.851	0.073	0.324	0.434
Currently married	0.574	0.029	224	176	0.862	0.050	0.517	0.631
Knowing any method	0.957	0.020	127	101	1.108	0.021	0.917	0.997
Knowing any modern method	0.947	0.022	127	101	1.104	0.023	0.903	0.991
Ever use any method	0.495	0.029	127	101	0.659	0.059	0.437	0.554
Using any method	0.242	0.019	127	101	0.487	0.077	0.205	0.279
Using any modern method	0.194	0.020	127	101	0.557	0.101	0.154	0.233
Using pill	0.058	0.018	127	101	0.842	0.302	0.023	0.093
Using IUD	0.000	0.000	127	101	NA	NA	0.000	0.000
Using injectables	0.051	0.017	127	101	0.859	0.329	0.018	0.085
Using condom	0.074	0.026	127	101	1.124	0.353	0.022	0.127
Using female sterilisation	0.009	0.009	127	101	1.099	1.001	0.000	0.028
Using periodic abstinence	0.032	0.012	127	101	0.790	0.384	0.008	0.057
Using withdrawal	0.000	0.000	127	101	NA	NA	0.000	0.000
Want no more children	0.304	0.045	127	101	1.093	0.147	0.215	0.394
Want to delay child at least 2 years	0.288	0.043	127	101	1.066	0.149	0.202	0.374
Ideal number of children	5.920	0.284	200	159	0,984	0.048	5.352	6.489

NA = Not applicable.

Table B.9.1 Sampling errors - Southern Highlands zone sample: women, Tanzania 1996 Confidence limits Standard Design Relative Value Weighted error weighted effect error Variable (R) (N) (WN) DEFT SE/R R-2SE (SE) R+2SE Urban residence 0.216 0.033 1056 1181 2.611 0.1530.150 0.282 No education 0.302 0.020 1056 1181 1.397 0.065 0.262 0.341 Secondary education or more 0.042 0.017 1056 1181 2.700 0.396 0.009 0.076 0.245 Never in union 0.018 1056 1181 1.389 0.075 0.2080.282Currently married 0.666 0.021 1056 1181 1.459 0.032 0.624 0.708 Married before 20 0.640 0.023837 933 1.357 0.035 0.595 0.6850.591933 First sex relationship before 18 0.020 837 1.183 0.034 0.550 0.631 3.343 Children ever born (15-49) 3.138 0.103 1056 1181 0.033 2.933 1.121Children ever born (40-49) 6.802 0.187186 0.983 0.027 6.429 7.176 217 0.039 2.719 2.523 0.098 1056 1181 1.322 2.327 Children surviving 0.919 0.013 713 786 1.289 0.014 0.893 0.945 Knowing any method 713 0.939 0.912 786 Knowing any modern method 0.013 1.248 0.015 0.8861.025 0.398 0.019 713 786 0.047 0.360 0.435 Ever use any method 0.178 713 786 0.102 0.018 1.260 0.142 0.214 Using any method 0.103 0.014 713 786 1.228 0.136 0.075 0.131 Using any modern method 0.052 800.0713 786 1.009 0.036 0.069 Using pill 0.161 Using IUD 0.0000.000713 786 NA NA 0.000 0.000 0.031 0.006 713 786 0.872 0.182 0.020 0.042 Using injectables Using condom 0.004 0.003 713 786 1.063 0.606 0.000 0.010 0.015 0.0070.001 Using female sterilisation 713 786 1.512 0.456 0.029 0.005 713 786 0.461 0.001 0.0111.287 0.021 Using periodic abstinence 0.057 0.010 713 786 1.200 0.183 0.036 0.078 Using withdrawal 93 109 1.228 Using public sector source 0.816 0.050 0.061 0.717 0.915 713 786 1.029 0.065 0.2280.296 0.262 0.017 Want no more children 713 786 0.343 0.388 0.022 1.232 0.058 0.433 Want to delay child at least 2 years 1071 5.343 0.101 961 0.019 5.141 5.545 Ideal number of children 1.3820.915 890 959 1.351 0.015 0.888 0.942 Mother received tetanus injection 0.013 959 890 0.391 Received medical care at delivery 0.4640.037 1.860 0.0790.538 847 1.098 0.140 0.171 0.015 780 0.090 0.202 Had diarrhoea in the past 2 weeks 0.495 0.048 139 145 1.049 0.096 0.400 0.591Treated with ORS packets 0.545 0.046 139 145 1.021 0.085 0.452 0.638 Sought medical treatment 0.772 168 181 0.965 0.042 0.707Having health card 0.032 0.837 1.000 Received BCG vaccination 0.977 0.015 168 181 1.239 0.015 0.947 0.992 181 Received DPT vaccination (3 doses) 0.910 0.022 168 0.025 0.865 0.955 181 Received polio vaccination (3 doses) 0.843 0.032 168 1.092 0.038 0.779 0.907 181 0.798 0.855 0.028 168 1.022 0.033 0.912 Received measles vaccination 0.742 0.035 168 181 1.002 0.047 0.672 0.812 Fully immunised 685 742 0.049 0.093 Weight-for-height (below -2 SD) 0.071 0.011 1.078 0.154 742 1.439 0.485 0.542 0.029 685 0.053 0.599 Height-for-age (below -2 SD) 742 0.331 685 1.421 0.084 0.275 0.387 Weight-for-age (below -2 SD) 0.028 5.416 0.267 NA 3299 1.403 0.049 4.881 5.951 Total fertility rate (3 years) 41.498 5.161 1741 1875 1.001 0.12431.175 51.821 Neonatal mortality rate (10 years) Infant mortality rate (10 years) 101.530 10.265 1745 1880 1.303 0.101 81.000 122.060 1900 0.123 54.080 Child mortality rate (10 years) 71.665 8.793 1764 1.076 89.251 1768 1905 0.087 136.955 194.883 165.919 14.482 1.368 Under-five mortality rate (10 years) Postneonatal mortality rate (10 years) 60.032 1745 1880 1.249 44.364 75.701 7.834 0.131 NA = Not applicable.

Table B.9.2 Sampling errors - Southern Highlands zone sample: men, Tanzania 1996 Confidence limits Design Relative Standard Un-Value weighted Weighted effect error error DEFT SE/R R-2SE R+2SE Variable (R) (SE) (N) (WN) 0.996 0.259 0.211 0.024 0.114 0.163 Urban residence 287 309 0.020 309 1.034 0.162 0.084 0.164 No education 0.124 287 0.045 0.144 Secondary education or more 0.025 287 309 1.424 0.261 0.094 0.893 0.070 0.313 0.414 0.025 287 309 Never in union 0.363 287 309 0.957 0.046 0.547 0.658 Currently married 0.602 0.028 Knowing any method 0.982 0.009175 186 0.867 0.009 0.965 1.000 0.007 0.963 0.992 Knowing any modern method 0.977 0.007 175 186 0.635 0.080 0.538 0.742 0.051 175 186 1.400 Ever use any method 0.640 0.398 1.466 0.289 0.507 Using any method 0.054 175 186 0,137 0.048 175 1.653 0.269 0.082 0.274 Using any modern method 0.178 186 175 1.029 0.374 0.010 0.073 Using pill 0.042 0.016 186 Using IUD 0.000 0.000 175 186 NA NA 0.000 0.000 0.406 0.009 0.089 Using injectables 0.049 0.020 175 186 1.221 0.139 Using condom 0.070 0.034 175 186 1.766 0.486 0.002 Using female sterilisation 0.017 0.013 175 186 1.331 0.774 0.000 0.043 Using periodic abstinence 0.111 0.027 175 186 1.142 0.245 0.057 0.166 0.037Using withdrawal 0.094 0.029 175 186 1.291 0.303 0.152 0.128 Want no more children 0.197 0.035 175 186 1.146 0.175 0.267 0.140 Want to delay child at least 2 years 0.350 0.049 175 186 1.359 0.252 0.449 Ideal number of children 5.414 0.217 259 288 1.416 0.040 4.981 5.848 NA = Not applicable.

Table B.10.1 Sampling errors - Southern zone sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Value error weighted Weighted effect error R-2SE Variable DEFT SE/R R+2SE (R) (SE) (N) (WN) Urban residence 0.203 0.0241225 847 2.077 0.118 0.155 0.251 0.249 0.019 1225 847 1.552 0.077 0.210 0.287No education 0.023 0.006 1225 847 1.312 0.243 0.012 0.034 Secondary education or more Never in union 0.1950.019 1225 847 1.648 0.096 0.158 0.232 Currently married 0.680 0.020 1225 847 1.517 0.030 0.640 0.721 Married before 20 0.722 0.021 975 675 1,488 0.030 0.679 0.765 First sex relationship before 18 0.743 0.019 975 675 1.349 0.025 0.705 0.781 Children ever born (15-49) 2.869 0.077 1225 847 0.985 0.027 3.023 2.716 6.553 196 139 0.025 6.220 Children ever born (40-49) 0.166 0.814 6.886 1225 847 1.030 0.028 2.230 2.499 Children surviving 2.365 0.067 Knowing any method 0.944 0.008 831 577 0.972 0.008 0.929 0.960 Knowing any modern method 0.935 0.008 831 577 0.908 0.008 0.920 0.951 0.407 577 0.062 Ever use any method 0.025 831 1.486 0.357 0.458 0.183 831 577 1.347 0.099 0.147 0.219Using any method 0.018 0.161 831 577 1,339 0.106 0.127 0.196 Using any modern method 0.017 0.082 577 0.131 0.060 0.103 Using pill 0.011 831 1.126 Using IUD 0.0010.001 831 577 0.918 0.998 0.0000.003 0.049 800.0 577 1.068 0.164 0.065 Using injectables 831 0.033 0.011 0.004 577 1.092 0.359 0.003 0.019 Using condom 831 0.019 577 1.129 0.282 0.008 0.030 Using female sterilisation 0.005 831 0.009 0.003 831 577 0.977 0.356 0.003 0.015 Using periodic abstinence Using withdrawal 0.004 0.002 831 577 0.966 0.552 0.000 0.008 0.843 0.035 0.042 0.773 0.914 Using public sector source 171 116 1.265 Want no more children 0.302 0.021 831 577 1.308 0.069 0.261 0.344 Want to delay child at least 2 years 0.282 0.022 831 577 1.404 0.078 0.238 0.326 809 0.016 Ideal number of children 5.123 0.0821168 1.274 4.958 5.287 893 0.008 Mother received tetanus injection 0.929 0.007614 0.7410.914 0.943 Received medical care at delivery 0.6280.030 893 614 1.635 0.048 0.567 0.688 0.100 784 539 1.149 0.123 0.075 Had diarrhoea in the past 2 weeks 0.012 0.124 0.604 78 54 0.097 0.486 Treated with ORS packets 0.059 1.057 0.721 Sought medical treatment 0.639 78 54 0.965 0.0820.534 0.744 0.053 Having health card 0.818 0.040 152 104 1.222 0.048 0.739 0.897 Received BCG vaccination 0.9940.006 152 104 0.972 0.006 0.981 1.000 Received DPT vaccination (3 doses) 0.915 152 104 1.134 0.030 0.860 0.970 0.027 0.841 0.038 152 104 1.224 0.045 0.766 0.916 Received polio vaccination (3 doses) 0.861 0.035 152 104 0.040 0.791 0.930 Received measles vaccination 1.223 Fully immunised 0.756 0.045 152 104 1.262 0.060 0.666 0.846 0.058 686 472 1.093 0.170 0.038 0.078 Weight-for-height (below -2 SD) 0.010 Height-for-age (below -2 SD) 0.562 0.023 686 472 1.200 0.041 0.516 0.608 Weight-for-age (below -2 SD) 0.340 472 1.199 0.068 0.294 0.387 0.023686 Total fertility rate (3 years) 4.944 0.217 NA 2401 1.096 0.044 4.510 5.377 Neonatal mortality rate (10 years) 35.998 6.639 1754 1207 1.364 0.184 22.720 49.276 Infant mortality rate (10 years) 107.875 12.979 1757 1209 1.642 0.120 81.918 133.832 Child mortality rate (10 years) 63.164 6.132 1770 1218 0.943 0.097 50.900 75.428 164.226 Under-five mortality rate (10 years) 13.207 1773 1220 1.452 0.080 137.812 190.639 Postneonatal mortality rate (10 years) 71.877 9.914 1757 1209 1.489 0.138 52.049 91.705 NA = Not applicable.

Table B.10.2 Sampling errors - Southern zone sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value Weighted weighted effect error error (R) DEFT SE/R R-2SE Variable (SE) (N) (WN) R+2SE 0.233 0.029 274 231 1.132 0.124 0.175 0.291 Urban residence 0.024 No education 0.105 274 231 1.272 0.225 0.058 0.152 Secondary education or more 0.031 0.014 274 231 1.345 0.455 0.003 0.059 0.272 0.027 274 231 1.016 0.101 0.217 0.326 Never in union 0.645 0,040 0.026 274 231 0.892 Currently married 0.594 0.697 Knowing any method 0.984 0.012 149 1.253 0.012 0.960 1.000 177 Knowing any modern method 0.984 0.012 177 149 1,253 0.012 0.960 1.000 0.539 0.611 0.036 177 149 0.969 0.058 Ever use any method 0.682 0.244 0.310 0.033 149 0.952 0.377 177 0.107 Using any method Using any modern method 0.230 149 1.090 0.035 177 0.150 0.161 0.299 149 0.160 0.029 177 1.046 0.102 0.218 Using pill 0.181 0.000 0.000 149 0.000 0.000 Using IUD 177 NA NA 149 Using injectables 0.038 0.012 177 0.836 0.318 0.014 0.062 149 0.027 177 0.996 0.451 0.003 0.051 Using condom 0.012 0.005 149 0.966 0.991 0.000 Using female sterilisation 0.005 177 0.016 0.048 149 0.961 0.017 Using periodic abstinence 0.015 177 0.324 0.079 Using withdrawal 0.017 0.010 177 149 0.978 0.559 0.000 0.036 0.197 0.026 177 149 0.851 0.129 0.146 0.248 Want no more children Want to delay child at least 2 years 0.350 0.032 177 149 0.901 0.093 0.285 0.414 1.102 Ideal number of children 5.852 0.222 260 219 0.038 5.408 6.296 NA = Not applicable.

Table B.11.1 Sampling errors - Mainland sample: women, Tanzania 1996 Confidence limits Relative Standard Un-Design Value егтог weighted Weighted effect ептог R-2SE R+2SE Variable (R) (SE) (N) (WN) DEFT SE/R Urban residence 0.230 0.012 7479 7881 2.379 0.050 0.207 0.253 0.285 0.008 7479 7881 1.508 0.028 0.300 No education 0.269 Secondary education or more 0.046 0.005 7479 7881 2.075 0.109 0.036 0.056 Never in union 0.2330.006 7479 7881 1.303 0.027 0.220 0.245 Currently married 0.666 0.007 7479 7881 1.346 0.011 0.651 0.680 0.650 0.008 5880 6197 1.354 0.013 0.634 0.667 Married before 20 First sex relationship before 18 0.623 0.009 5880 6197 1.402 0.014 0.606 0.641 3.076 0.043 7479 7881 1.239 0.014 2.991 3.161 Children ever born (15-49) 6.951 0.094 1161 1232 1.097 0.013 6.764 7.139 Children ever born (40-49) 2.572 0.037 7479 7881 1.292 0.015 2.497 2.647 Children surviving Knowing any method 0.8830.006 4961 5245 1.383 0.007 0.870 0.895 Knowing any modern method 0.875 0.006 4961 5245 1.382 0.007 0.862 0.888 Ever use any method 0.358 0.010 4961 5245 1.511 0.029 0.338 0.379 Using any method 0.1860.007 4961 5245 1.333 0.040 0.171 0.201 Using any modern method 0.134 0.006 4961 5245 1.277 0.046 0.122 0.146 Using pill 0.055 0.004 4961 5245 1.110 0.065 0.048 0.062 0.006 0.001 4961 5245 1.101 0.202 0.004 0.008 Using IUD Using injectables 0.045 0.003 4961 5245 1.030 0.067 0.039 0.051 0.008 0.001 4961 5245 1.064 0.164 0.006 0.011 Using condom Using female sterilisation 0.019 0.003 4961 5245 1.305 0.134 0.014 0.024 0.021 0.002 4961 5245 1.147 0.112 0.016 0.025 Using periodic abstinence 0.027 0.002 4961 5245 1.067 0.091 0.022 0.032 Using withdrawal Using public sector source 0.739 0.018 969 935 1.300 0.025 0.702 0.775 Want no more children 0.2790.007 4961 5245 1.132 0.026 0.265 0.294 Want to delay child at least 2 years 0.371 800.0 4961 5245 1.200 0.022 0.354 0.387 Ideal number of children 5.416 0.044 6866 7253 1.563 0.008 5.327 5.504 Mother received tetanus injection 0.914 0.006 6181 6693 1.462 0.007 0.902 0.926 Received medical care at delivery 0.4710.013 6181 6693 1.784 0.028 0.4440.498 Had diarrhoea in the past 2 weeks 0.1350.005 5521 5983 1.094 0.038 0.1250.146 Treated with ORS packets 0.4860.023 755 811 1.216 0.047 0.440 0.531 0.565 Sought medical treatment 0.022 755 811 1.155 0.038 0.522 0.608 1293 Having health card 0.7620.014 1179 1.120 0.018 0.734 0.789 Received BCG vaccination 196.0 0.007 1179 1293 1.281 0.007 0.947 0.975 0.852 1179 1293 Received DPT vaccination (3 doses) 0.011 1.073 0.013 0.831 0.874 0.794 1293 Received polio vaccination (3 doses) 0.013 1179 1.083 0.016 0.769 0.819 Received measles vaccination 0.8090.014 1179 1293 1.235 0.017 0.781 0.837 Fully immunised 0.703 0.016 1293 0.022 1179 1.196 0.672 0.735 Weight-for-beight (below -2 SD) 0.071 0.004 4776 5180 1.007 0.053 0.064 0.079 Height-for-age (below -2 SD) 0.436 0.010 4776 5180 1.389 0.024 0.416 0.457 Weight-for-age (below -2 SD) 0.305 0.008 4776 5180 1.193 0.027 0.2890.322 5.813 0.137 NA 22082 1.582 0.024 5.539 6.087 Total fertility rate (3 years) 36,390 11907 12817 1.271 0.065 31.670 Neonatal mortality rate (10 years) 2,360 41.111 94,746 4,343 11932 12841 0.046 86.060 103.433 Infant mortality rate (10 years) 1.462 Child mortality rate (10 years) 56.618 2.867 12005 12926 1.118 0.051 50.885 62.351 146,000 Under-five mortality rate (10 years) 5.329 12032 12952 1.448 0.037 135.342 156.658 Postneonatal mortality rate (10 years) 58.356 3.127 11930 12839 0.054 1.337 52.102 64.610 NA = Not applicable.

Table B.11.2 Sampling errors - Mainland sample: men, Tanzania 1996

							Confidence limits		
Variable	Value (R)	Standard error (SE)	Un- weighted (N)	Weighted (WN)	Design effect DEFT	Relative error SE/R	R-2SE	R+2SE	
Urban residence	0.233	0.013	2148	2187	1.374	0.054	0.208	0.258	
No education	0.135	0.009	2148	2187	1.242	0.068	0.117	0.153	
Secondary education or more	0.091	0.008	2148	2187	1.295	0.088	0.075	0.107	
Never in union	0.373	0.012	2148	2187	1.165	0.033	0.349	0.398	
Currently married	0.573	0.012	2148	2187	1.147	0.021	0.548	0.597	
Knowing any method	0.932	0.009	1212	1253	1.216	0.009	0.915	0.950	
Knowing any modern method	0.927	0.009	1212	1253	1.189	0.010	0.909	0.945	
Ever use any method	0.494	0.017	1212	1253	1.180	0.034	0.460	0.528	
Using any method	0.296	0.016	1212	1253	1.220	0.054	0.264	0.328	
Using any modern method	0.159	0.012	1212	1253	1.160	0.077	0.134	0.183	
Using pill	0.065	0.007	1212	1253	1.036	0.113	0.051	0.080	
Using IUD	0.004	0.002	1212	1253	0.858	0.368	0.001	0.008	
Using injectables	0.030	0.005	1212	1253	1.015	0.167	0.020	0.039	
Using condom	0.046	0.007	1212	1253	1.160	0.151	0.032	0.060	
Using female sterilisation	0.013	0.004	1212	1253	1.164	0.296	0.005	0.020	
Using periodic abstinence	0.092	0.011	1212	1253	1.359	0.122	0.070	0.115	
Using withdrawal	0.037	0.007	1212	1253	1.246	0.182	0.024	0.051	
Want no more children	0.198	0.013	1212	1253	1.139	0.066	0.172	0.224	
Want to delay child at least 2 years	0.400	0.015	1212	1253	1.093	0.038	0.369	0.430	
Ideal number of children	5.844	0.106	1974	2044	1.342	0.018	5.632	6.056	

Table B.12.1 Sampling errors - Zanzibar sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Value error weighted Weighted effect егтог Variable (SE) R-2SE (R) (N) DEFT SE/R R+2SE (WN) Urban residence 0.398 0.036 641 239 1.850 0.090 0.327 0.470 No education 0.309 0.021 641 239 1.155 0.068 0.267 0.351 Secondary education or more 0.332 0.019 641 239 1.041 0.058 0.293 0.371 Never in union 0.228 0.018 641 239 1.060 0.0770.193 0.264 Currently married 0.694 0.016 641 239 0.894 0.023 0.661 0.727 Married before 20 0.754 0.027 511 191 1.399 0.035 0.700 0.807 191 First sex relationship before 18 0.594 0.025 511 1.147 0.042 0.544 0.644 Children ever born (15-49) 3.434 0.130 641 239 0.990 0.0383.175 3.694 Children ever born (40-49) 7.645 0.263 90 33 0.798 0.034 8.172 7.118 Children surviving 2.973 0.106 641 239 0.936 0.036 3.184 2.761 Knowing any method 0.957 0.006 443 166 0.663 0.007 0.944 0.970 Knowing any modern method 0.954 0.006 443 166 0.608 0.006 0.942 0.967 Ever use any method 0.274 0.019 443 166 0.886 0.0680.237 0.312 Using any method 0.131 0.012 443 166 0.752 0.0920.107 0.155 Using any modern method 0.108 0.015 443 166 1.014 0.1390.078 0.138Using pill 0.055 0.011 443 166 1.028 0.2030.033 0.077 Using IUD 0.003 0.003 443 166 1.056 0.9890.000 0.008 Using injectables 0.031 0.010 443 166 1.232 0.330 0.010 0.051 Using condom 0.004 0.003 443 166 1.029 0.733 0.000 0.011 Using female sterilisation 0.015 0.005 443 166 0.940 0.360 0.004 0.026 Using periodic abstinence 0.011 0.005 443 166 1.049 0.463 0.001 0.022 Using withdrawal 0.006 0.004 443 166 0.972 0.580 0.000 0.014 Using public sector source 0.916 0.046 49 19 0.051 0.823 1,000 1.156 Want no more children 0.299 0.033 443 166 1.531 0.112 0.232 0.366 Want to delay child at least 2 years 0.418 0.021 443 166 0.877 0.049 0.376 0.459 Ideal number of children 6.946 0.200 608 227 1.481 0.029 6.546 7.347 Mother received tetanus injection 0.924 0.016 608 223 1.419 0.0170.892 0.956 Received medical care at delivery 0.344 0.020 608 223 0.867 0.059 0.304 0.385 Had diarrhoea in the past 2 weeks 0.174 0.017 559 204 1.022 0.100 0.1390.209Treated with ORS packets 0.415 0.046 95 36 0.843 0.111 0.507 0.323Sought medical treatment 0.522 0.056 95 36 1.038 0.107 0.410 0.634 Having health card 0.889 0.039 118 42 1.296 0.043 0.811 0.966 Received BCG vaccination 0.993 0.007 118 42 0.8850.007 0.978 1.000 42 Received DPT vaccination (3 doses) 0.851 0.027 118 0.803 0.032 0.797 0.905 42 Received polio vaccination (3 doses) 0.851 0.024 118 0.725 0.0290.802 0.900 Received measles vaccination 0.789 0.032 118 42 0.830 0.041 0.725 0.853 Fully immunised 0.754 0.032 118 42 0.797 0.043 0.689 0.819 Weight-for-height (below -2 SD) 0.110 0.012 450 163 0.714 0.107 0.086 0.133 450 Height-for-age (below -2 SD) 0.371 0.024163 0.980 0.0640.324 0.419450 Weight-for-age (below -2 SD) 0.338 0.027 163 1.080 0.0790.2840.3915.930 0.415 NA 676 0.070 Total fertility rate (3 years) 1.342 5.099 6.760 34.598 423 23.235 Neonatal mortality rate (10 years) 5.681 1157 0.8800.164 45,960 Infant mortality rate (10 years) 75.304 7.829 1158 424 0.926 0.104 59.646 90.963 34.773 4.839 425 0.791 0.13925.094 Child mortality rate (10 years) 1160 44.452 425 107.459 8.097 1161 0.075 91.264 Under-five mortality rate (10 years) 0.835 123.654 Postneonatal mortality rate (10 years) 40.706 6.706 1158 424 0.165 27.294 1.164 54.119 NA = Not applicable.

Table B.12.2 Sampling errors - Zanzibar sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value error weighted Weighted effect error Variable (R) (SE) (N) (WN) **DEFT** SE/R R-2SE R+2SE Urban residence 0.383 0.059 108 69 1,247 0.153 0.266 0.500 No education 0.134 0.022 108 69 0.669 0.164 0.090 0.179 Secondary education or more 0.321 0.029 108 69 0.637 0.089 0.264 0.379 Never in union 0.440 0.053 108 69 1.114 0.121 0.334 0.547 Currently married 0.508 0.058 108 69 1.199 0.114 0.392 0.624 Knowing any method 0.985 0.015 56 35 0.894 0.015 0.956 1.000 Knowing any modern method 0.985 0.015 56 35 0.894 0.015 0.956 1.000 Ever use any method 0.254 0.047 56 35 0.797 0.184 0.161 0.348 Using any method 0.233 0.048 56 35 0.846 0.207 0.136 0.329 Using any modern method 0.138 0.049 56 35 1.063 0.358 0.039 0.237 35 Using pill 0.080 0.042 56 1,160 0.531 0.000 0.165 Using IUD 0.000 0.000 56 35 NA NA 0.000 0.000 Using injectables 0.036 0.024 56 35 0.939 0.651 0.0000.084 Using condom 0.022 0.023 56 35 1.155 1.046 0.000 0.067 Using female sterilisation 0.000 0.000 56 35 NA NA 0.000 0.000 Using periodic abstinence 0.073 0.031 56 35 0.871 0.419 0.012 0.134 Using withdrawal 0.022 0.023 56 35 1.189 1.077 0.000 0.068 Want no more children 0.065 0.036 56 35 1.092 0.558 0.000 0.138 Want to delay child at least 2 years 0.870 0.039 56 35 0.868 0.045 0.791 0.949 Ideal number of children 7.530 0.460 73 47 0.974 0.061 6.609 8.450 NA = Not applicable.

Table B.13.1 Sampling errors - Mainland urban sample: women, Tanzania 1996 Confidence limits Relative Standard Un-Design Value weighted Weighted error effect еггог R-2SE R+2SE Variable (SE) (N) SE/R (R) (WN) DEFT Urban residence 1.000 0.000 1853 1811 NA 1.000 0.000 1.000 No education 0.135 0.013 1853 1811 1.614 0.095 0.109 0.161 Secondary education or more 0.131 0.016 1811 2.082 0.098 1853 0.125 0.163 0.293 Never in union 0.017 1853 1811 1.562 0.056 0.260 0.326 0.592 1811 Currently married 0.017 1853 1.510 0.029 0.558 0.627 Married before 20 0.5670.017 1449 1418 1.274 0.029 0.534 0.600 0.020 1449 1418 1.508 0.036 0.514 0.592 First sex relationship before 18 0.553 1811 Children ever born (15-49) 2.343 0.088 1853 1.507 0.038 2.167 2.519 6.074 0.035 Children ever born (40-49) 0.212 208 207 1.053 5.651 6.497 2.019 0.079 1811 0.039 Children surviving 1853 1.556 1.861 2.176 Knowing any method 0.975 0.006 1106 1073 1.190 0.006 0.964 0.987 0.974 0.006 1073 0.986 Knowing any modern method 1106 1.216 0.006 0.963 0.574 0.030 1073 0.052 0.514 Ever use any method 1106 2.023 0.635 Using any method 0.335 0.023 1106 1073 1.652 0.070 0.289 0.382 Using any modern method 0.2730.020 1106 1073 1.478 0.072 0.234 0.313 0.1040.011 1106 1073 1.169 0.103 0.083 0.126 Using pill Using IUD 0.015 0.004 1106 1073 1.050 0.259 0.007 0.022 0.098 0.010 1106 1073 0.102 0.078 0.118 Using injectables 1.1180.021 0.005 1073 0.245 0.010 0.031 Using condom 1106 1.182 0.033 800.0 1073 1.466 0.238 0.017 0.049 Using female sterilisation 1106 0.042 1073 0.206 0.060 Using periodic abstinence 0.009 1106 1.436 0.025 Using withdrawal 0.016 0.004 1106 1073 1.161 0.277 0.007 0.024 428 0.047 0.742 Using public sector source 0.679 0.032 443 1.423 0.616 0.290 0.015 1106 1073 0.050 0.261 0.319 Want no more children 1.062 1073 0.053 0.298 0.369 Want to delay child at least 2 years 0.333 0.018 1106 1.243 1707 0.018 Ideal number of children 4.403 0.079 1748 1.802 4.244 4.561 Mother received tetanus injection 0.960 0.007 1175 1165 1.145 0.008 0.945 0.974 Received medical care at delivery 0.817 0.025 1175 1165 1.913 0.031 0.766 0.868 1066 0.104 0.094 Had diarrhoea in the past 2 weeks 0.1190.012 1070 1.240 0.144 0.110 Treated with ORS packets 0.5500.060 123 127 1.346 0.429 0.671 0.700 0.046 123 127 0.066 0.608 0.793 Sought medical treatment 1.128 0.801 242 0.034 Having health card 0.027 238 1.047 0.747 0.855 Received BCG vaccination 0.996 0.004 242 238 0.933 0.004 0.989 1.000 0.946 238 0.015 0.918 0.974 Received DPT vaccination (3 doses) 0.014 242 0.966 Received polio vaccination (3 doses) 0.837 0.027 242 238 1.146 0.033 0.782 0.891 238 0.979 Received measles vaccination 0.951 0.014 242 1.016 0.015 0.923 0.806 238 0.033 0.752 0.859 Fully immunised 0.027 242 1.056 Weight-for-height (below -2 SD) 0.076 0.011 896 898 1.247 0.142 0.055 0.098 Height-for-age (below -2 SD) 0.329 810.0 896 898 1.140 0.056 0.292 0.366 Weight-for-age (below -2 SD) 0.195 0.014 896 898 1.008 0.072 0.167 0.223 Total fertility rate (3 years) 4.094 0.235 NA 5134 1.357 0.057 3.625 4.564 Neonatal mortality rate (10 years) 33.541 5.405 2228 2192 1.237 0.161 22.731 44.350 Infant mortality rate (10 years) 83.119 7.655 2231 2194 1.199 0.092 67.809 98.430 Child mortality rate (10 years) 42.580 5.246 2244 2206 1.103 0.123 32.089 53.071 Under-five mortality rate (10 years) 122.160 9.063 2248 2210 1.195 0.074 104.034 140.286 Postneonatal mortality rate (10 years) 49.579 4.831 2230 2193 1.046 0.097 39.916 59.241 NA = Not applicable.

Table B.13.2 Sampling errors - Mainland urban sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value error weighted Weighted effect еггог Variable DEFT SE/R R-2SE R+2SE (**R**) (SE) (N) (WN) 1.000 579 1.000 Urban residence 0.000 509 NA 0.000 1.000 0.068 579 509 1.186 0.093 No education 0.012 0.182 0.044 Secondary education or more 0.208 579 509 0.0281.658 0.135 0.152 0.264 509 0.425 0.022 579 1.091 0.470 Never in union 0.053 0.380 0.512 509 1.194 0.049 0.562 Currently married 0.025 579 0.462 Knowing any method 0.969 0.012 290 260 1.199 0.013 0.944 0.993 0.944 Knowing any modern method 0.969 0.012 290 260 1.199 0.013 0.993 0.641 290 260 1.329 0.058 Ever use any method 0.037 0.566 0.716 Using any method 0.362 0.033 290 260 1.179 0.092 0.295 0.429 0.205 Using any modern method 0.267 0.031 290 260 1.193 0.116 0.329 0.095 0.015 290 260 0.862 0.124 Using pill 0.157 0.065 0.012 290 260 0.824 0.438 0.023 Using IUD 0.005 0.002Using injectables 0.029 0.010 290 260 0.988 0.339 0.048 0.009 Using condom 0.110 0.023 290 260 1.243 0.208 0.064 0.156 0.019 290 1.067 Using female sterilisation 0.009 260 0.450 0.002 0.036 0.067 0.988Using periodic abstinence 0.015 290 260 0.216 0.038 0.097 0.022 290 0.050 Using withdrawal 0.014 260 1.563 0.608 0.000 Want no more children 0.246 0.028 290 260 1.097 0.113 0.190 0.301 Want to delay child at least 2 years 0.335 0.030 290 260 1.073 0.089 0.275 0.395 Ideal number of children 4.766 0.156 534 477 1.425 0.033 4.454 5.078 NA = Not applicable.

Table B.14.1 Sampling errors - Mainland rural sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Value Weighted еггог weighted effect error (**R**) (WN) DEFT SE/R R-2SE R+2SE Variable (SE) (N) Urban residence 0.000 0.000 5626 6070 NA NA 0.000 0.000 No education 0.3290.010 5626 6070 1.519 0.0290.310 0.348 Secondary education or more 0.021 0.004 5626 6070 2.189 0.201 0.012 0.029 Never in union 0.214 0.007 5626 6070 1.250 0.032 0.201 0.228 Currently married 0.687 0.008 5626 6070 1.318 0.012 0.671 0.704 Married before 20 0.675 0.010 4431 4779 1.368 0.014 0.656 0.694 First sex relationship before 18 0.644 0.010 4431 4779 1.368 0.015 0.625 0.664 Children ever born (15-49) 3.295 0.049 5626 6070 1.214 0.015 3.196 3.394 Children ever born (40-49) 7.1280.103 953 1026 1.102 0.014 6.922 7.335 Children surviving 2.737 0.044 5626 6070 1.277 0.016 2.650 2.825 Knowing any method 0.8590.008 3855 4172 1.392 0.009 0.843 0.874 Knowing any modern method 0.849 0.008 3855 4172 1.387 0.0090.834 0.865 Ever use any method 0.303 0.010 3855 4172 1.385 0.034 0.282 0.323 Using any method 0.1480.007 3855 4172 1.273 0.049 0.133 0.162 Using any modern method 0.098 0.006 3855 4172 1.263 0.062 0.086 0.110 Using pill 0.043 0.004 3855 4172 1.086 0.083 0.035 0.050 Using IUD 0.004 0.001 3855 4172 1.153 0.304 0.001 0.006 Using injectables 0.031 0.003 3855 4172 1.021 0.091 0.026 0.037 Using condom 0.005 0.001 3855 4172 1.027 0.227 0.003 0.008 Using female sterilisation 0.015 0.002 3855 4172 1.256 0.164 0.010 0.020 Using periodic abstinence 0.015 0.002 3855 4172 0.951 0.1240.011 0.019 Using withdrawal 0.030 0.003 3855 4172 1.043 0.096 0.024 0.035 Using public sector source 0.7890.019 526 506 1.083 0.0240.751 0.828 Want no more children 0.2760.0083855 4172 1.143 0.030 0.260 0.293Want to delay child at least 2 years 0.380 0.009 3855 4172 1.178 0.024 0.362 0.399 Ideal number of children 5.727 0.051 5118 5545 1.525 0.0095.625 5.830 Mother received tetanus injection 0.9040.0075006 5529 1.484 0.008 0.890 0.919 Received medical care at delivery 0.3980.015 5006 5529 1.818 0.0370.369 0.428 Had diarrhoea in the past 2 weeks 0.1390.006 4451 4917 1.061 0.040 0.1280.150 Treated with ORS packets 0.474 0.025 632 684 1.208 0.053 0.424 0.524 0.540 Sought medical treatment 0.024 632 684 1.165 0.045 0.492 0.588 Having health card 0.753 0.016 937 1055 1.127 0.021 0.721 0.784 937 Received BCG vaccination 0.9530.009 1055 1.271 0.0090.936 0.970 Received DPT vaccination (3 doses) 0.8310.013 937 1055 1.069 0.015 0.806 0.857 937 Received polio vaccination (3 doses) 0.7850.014 1055 1.061 0.018 0.756 0.813 937 Received measles vaccination 0.777 0.017 1055 1.248 0.022 0.744 0.811 937 Fully immunised 0.6800.018 1055 1.202 0.027 0.644 0.717 0.070 3880 Weight-for-height (below -2 SD) 0.004 4282 0.951 0.056 0.062 0.078 Height-for-age (below -2 SD) 0.459 0.012 3880 4282 1.412 0.026 0.435 0.482 Weight-for-age (below -2 SD) 0.3290.009 3880 4282 1.191 0.0280.310 0.347 6.330 Total fertility rate (3 years) 0.146NA 16948 1.549 0.023 6.037 6.623 36.979 9679 0.071 Neonatal mortality rate (10 years) 2.624 10625 1.275 31.731 42,227 97.149 4.984 9701 0.051 Infant mortality rate (10 years) 10647 1.489 87.182 107.116 9761 Child mortality rate (10 years) 59.588 3.256 10719 1.104 0.055 53.076 66.101 9784 0.040 138.769 163.127 150.948 10742 Under-five mortality rate (10 years) 6.089 1.464 Postneonatal mortality rate (10 years) 9700 52.912 67.428 60.170 3.629 10646 1.362 0.060NA = Not applicable.

Table B.14.2 Sampling errors - Mainland rural sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value егтог weighted Weighted effect error Variable (R) (SE) (N) (WN) DEFT SE/R R-2SE R+2SE Urban residence 0.000 0.000 1569 1678 0.000 NA NA 0.000 0.155 1.240 No education 0.011 1569 1678 0.073 0.132 0.178 Secondary education or more 0.056 0.006 1569 1678 1.087 0.043 0.113 0.068 Never in union 0.358 0.014 1569 1678 1.187 0.040 0.329 0.387 0.591 0.014 1569 0.024 Currently married 1678 1.136 0.563 0.620 0.923 0.011 922 992 1.1990.011 0.902Knowing any method 0.944 0.916 922 992 0.012 Knowing any modern method 0.0111.170 0.894 0.937 0.455 0.019 922 992 0.042 0.417 Ever use any method 1.155 0.493 0.279 992 Using any method 0.018 922 1.231 0.065 0.243 0.315 0.130 0.013 922 992 1.166 0,099 0.105 Using any modern method 0.156 0.058 922 992 1.095 Using pill 0.0080.146 0.041 0.074 922 0.002 992 0.930 Using IUD 0.002 0.616 0.000 0.006 0.030 0.006 922 992 Using injectables 1.016 0.191 0.018 0.041 Using condom 0.030 0.007 922 992 1.189 0.224 0.016 0.043 0.011 922 992 0.377 Using female sterilisation 0.004 1.201 0.003 0.019 Using periodic abstinence 0.099 922 992 1.399 0.014 0.139 0.071 0.126 0.041 922 992 Using withdrawal 0.008 1.185 0.188 0.026 0.057 0.186 992 922 0.079 Want no more children 0.015 1.146 0.156 0.215 Want to delay child at least 2 years 0.416 922 992 1.089 0.018 0.042 0.381 0.452 Ideal number of children 6.172 0.129 1440 1567 1.329 0.0215.914 6.431 NA = Not applicable.

Table B.15.1 Sampling errors - Mainland Dar es Salaam city sample: women, Tanzania 1996 Confidence limits Standard Un-Design Relative Value weighted Weighted error effect error Variable (R) (SE) (N) (WN) DEFT SE/R R-2SE R+2SE 0.000 1.000 0.000 563 NA 000.1 1.000 Urban residence 666 0.144 563 1.793 0.169 0.095 0.193No education 0.024 666 0.177 563 Secondary education or more 0.028 666 1.919 0.1600.120 0.234 0.306 0.030 666 563 1.698 0.099 0.246 0.367 Never in union 0.604 0.029 666 563 1.541 0.048 0.545 0.662Currently married 436 0.045 Married before 20 0.568 0.026 516 1.173 0.517 0.619 0.498 436 1.517 0.431 0.565 First sex relationship before 18 0.033 516 0.067 2.069 0.094 666 563 1.047 0.045 1.881 2.257 Children ever born (15-49) 53 0.907 5.476 0.292 0.053 Children ever born (40-49) 63 4.893 6.059 1.905 0.072 563 0.938 0.041 1.761 666 1.617 Children surviving 0.974 0.983 0.004 402 340 0.632 0.004 0.991 Knowing any method 0.983 402 340 0.632 0.004 0.974 0.991 Knowing any modern method 0.004 402 340 Ever use any method 0.5800.034 1.398 0.059 0.511 0.649 402 0.378 0.036 340 1.483 0.095 0.306 0.450 Using any method 402 0.301 340 0.093 0.357 Using any modem method 0.028 1.219 0.245 0.102 0.018 402 340 0.176 0.138 1.187 0.066 Using pill 402 340 0.039 0.025 0.007 0.903 0.2820.011 Using IUD Using injectables 0,095 0.014 402 340 0.946 0.146 0.067 0.122 402 340 Using condom 0.037 0.008 0.862 0.219 0.021 0.054 402 340 0.334 0.062 0.037 0.012 1.317 0.012 Using female sterilisation 402 340 0.000 0.000 0.000 NA NA 0.000 Using male sterilisation 402 340 0.377 0.005 0.020 0.008 1.076 0.035 Using withdrawal 134 0.591 0.036 159 0.914 0.060 0.520 0.663 Using public sector source 402 340 0.279 0.020 0.888 0.071 0.239 0.318 Want no more children 402 340 0.326 0.916 0.066 0.283 Want to delay child at least 2 years 0.021 0.369 635 537 0.0254.054 4.478 Ideal number of children 4.266 0.1061.363 0.972 387 0.009 327 0.959 0.009 0.954 0.989 Mother received tetanus injection 0.876 387 327 0.027 0.8290.922 Received medical care at delivery 0.023 1.268 Had diarrhoea in the past 2 weeks 0.093 0.010 354 299 0.636 0.1080.073 0.113 0.052 33 28 Treated with ORS packets 0.606 0.630 0.086 0.502 0.710 33 28 0.788 0.078 1.083 0.099 0.632 0.943 Sought medical treatment 91 77 0.769 0.061 1.386 0.080 0.892Having health card 0.646 91 77 Received BCG vaccination 0.989 0.011 1.008 0.011 0.967 1.000 0.923 0.035 91 77 1.234 0.037 0.854 0.992 Received DPT vaccination (3 doses) 91 77 Received polio vaccination (3 doses) 0.824 0.065 1.623 0.0790.694 0.954 0.934 91 77 0.027 0.0290.880 0.988 Received measles vaccination 1.031 0.791 91 77 0.074 0.909 0.059 1.374 0.674 Fully immunised 0.088 283 239 0.172 Weight-for-height (below -2 SD) 0.015 0.915 0.058 0.119 Height-for-age (below -2 SD) 0.311 0.029 283 239 1.015 0.093 0.253 0.369 0.230 0.031 283 239 1.179 0.136 0.167 0.292 Weight-for-age (below -2 SD) Total fertility rate (3 years) 3.425 0.253 NA 1602 1.234 0.074 2.920 3.931 Neonatal mortality rate (10 years) 28.450 9.242 706 597 1.308 0.325 9.965 46.934 Infant mortality rate (10 years) 70.949 10.557 709 599 1.073 0.14949,835 92.062 Child mortality rate (10 years) 42.029 9.613 711 601 1.155 0.229 22.803 61.254 109.995 603 0.146 77.872 142.119 Under-five mortality rate (10 years) 16.062 714 1.311 709 599 28.918 56.081 Postneonatal mortality rate (10 years) 42.499 6.791 1.032 0.160 NA = Not applicable.

Table B.15.2 Sampling errors - Mainland Dar es Salaam city sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value weighted Weighted effect ептог ептог Variable (R) (SE) (N) (WN) DEFT SE/R R-2SE R+2SE Urban residence 1.000 0.000 272 171 NA 0.000 1.000 1.000 No education 0.081 0.017 272 171 1.005 0.206 0.048 0.114 0.043 272 Secondary education or more 0.246 171 1.637 0.174 0.161 0.332 Never in union 0.471 0.031 272 171 1.024 0.066 0.409 0.533 Currently married 0.485 0.033 272 171 1.080 0.068 0.4200.551 0.985 Knowing any method 0.011 132 83 1.001 0.011 0.963 1.000 Knowing any modern method 0.985 0.011 132 83 1.001 0.011 0.963 1.000 Ever use any method 0.659 0.050 132 83 1.218 0.077 0.558 0.760 Using any method 0.379 0.055 132 83 1.293 0.145 0.269 0.488 Using any modern method 0.295 0.047 132 83 1.180 0.159 0.201 0.389 Using pill 0.083 0.020 132 83 0.814 0.236 0.044 0.123 Using IUD 0.023 0.012 132 83 0.944 0.541 0.000 0.047 Using injectables 0.038 0.014 132 83 0.831 0.366 0.010 0.066 Using condom 0.121 0.037 132 83 1.288 0.303 0.048 0.195 Using female sterilisation 0.030 0.016 132 83 1.080 0.534 0.000 0.063 0.053 0.020 132 83 1.031 Using periodic abstinence 0.381 0.013 0.093 0.023 0.012 83 0.919 Using withdrawal 132 0.527 0.000 0.047 Want no more children 0.159 0.040 132 83 1.257 0.252 0.079 0.239 Want to delay child at least 2 years 0.386 0.047 132 83 1.101 0.121 0.293 0.480 Ideal number of children 4.406 0.191 251 158 1.135 0.043 4.025 4.788 NA = Not applicable.

Table B.16.1 Sampling errors - Mainland other urban sample: women, Tanzania 1996 Confidence limits Standard Un-Relative Design Value weighted Weighted error effect error R-2SE Variable (R) (SE) (N) (WN) DEFT SE/R R+2SE Urban residence 1.000 0.0001187 1248 NA 0.000 1.000 1.000 No education 0.1310.015 1187 1248 1.523 0.114 0.101 0.161 Secondary education or more 0.110 0.0201187 1248 2.172 0.1800.070 0.149Never in union 0.2870.0201187 1248 1.484 0.068 0.2480.326 Currently married 0.587 0.0211187 1248 1.495 0.036 0.545 0.630 1.298 Married before 20 0.567 0.021933 982 0.037 0.524 0.609 933 982 First sex relationship before 18 0.577 0.0241.460 0.041 0.530 0.625 Children ever born (15-49) 2.466 0.117 1187 1248 1.561 0.048 2.231 2.701 Children ever born (40-49) 6.281 0.259145 154 1.044 0.041 5.763 6.800 Children surviving 2.135 0.106 1187 1248 1.618 0.050 1.923 2.346 Knowing any method 0.972 0.008704 733 1.246 0.008 0.957 0.988 704 Knowing any modern method 0.971 0.008 733 1.268 0.008 0.955 0.987 Ever use any method 0.572 0.041 704 733 2.194 0.072 0.490 0.654 704 Using any method 0.316 0.029733 1.673 0.093 0.2570.374 Using any modern method 0.261 0.026704 733 1.547 0.098 0.209 0.312 Using pill 0.1050.013704 733 1.1560.1270.078 0.132704 733 Using IUD 0.010 0.005 1.2530.470 0.001 0.019 704 733 Using injectables 0.099 0.013 1.169 0.133 0.073 0.126 704 733 Using condom 0.013 0.006 1.513 0.501 0.000 0.0260.031 704 733 1.522 Using female sterilisation 0.0100.319 0.011 0.051Using periodic abstinence 0.037 0.010 704 733 1.352 0.262 0.017 0.056 704 733 Using withdrawal 0.014 0.0051.220 0.389 0.003 0.024294 1.593 0.059 Using public sector source 0.719 0.043 284 0.634 0.804 0.295 704 733 1.101 0.064 Want no more children 0.019 0.258 0.333 Want to delay child at least 2 years 0.337 0.024 704 733 1.342 0.071 0.289 0.385 Ideal number of children 4.466 0.103 1113 1171 1,940 0.023 4.259 4.672 Mother received tetanus injection 0.955 0.009788 838 1.125 0.010 0.936 0.974788 1.939 Received medical care at delivery 0.794 0.033838 0.042 0.727 0.860716 Had diarrhoea in the past 2 weeks 0.1290.017 767 1,325 0.130 0.096 0.163Treated with ORS packets 0.534 0.075 90 99 1.391 0.140 0.385 0.683 90 99 Sought medical treatment 0.676 0.055 1.116 0.081 0.566 0.785Having health card 0.816 0.027 151 161 0.846 0.032 0.763 0.869 Received BCG vaccination 1.000 0.000151 161 NA 0.000 1.0001.000 0.957 Received DPT vaccination (3 doses) 0.012 151 161 0.7150.012 0.933 0.980 Received polio vaccination (3 doses) 0.842 0.026 151 161 0.870 0.030 0.791 0.894 Received measles vaccination 0.959 0.016 151 161 1.006 0.017 0.926 0.991 Fully immunised 0.812 0.028151 161 0.886 0.034 0.756 0.868 Weight-for-height (below -2 SD) 0.072 0.014 613 659 1,343 0.191 0.044 0.099 Height-for-age (below -2 SD) 0.335 0.023 613 659 1,160 0.069 0.2890.381659 0.949 Weight-for-age (below -2 SD) 0.1830.016 613 0.086 0.151 0.214Total fertility rate (3 years) 4.358 0.297 NA 3532 1,336 0.068 4.952 3.765 35.455 6.677 1522 1595 Neonatal mortality rate (10 years) 1.217 0.188 22.100 48.809 Infant mortality rate (10 years) 87.752 9.829 1522 1595 1.219 0.112 68.093 107.410 42.806 1533 1605 Child mortality rate (10 years) 6.348 1.085 0.148 30.110 55.502 Under-five mortality rate (10 years) 126.801 1534 1607 880.0 104.530 149.073 11.136 1.170 Postneonatal mortality rate (10 years) 52.297 1521 1594 1.037 39.970 64.623 6.1630.118 NA = Not applicable.

Table B.16.2 Sampling errors - Mainland other urban sample: men, Tanzania 1996 Confidence limits Standard Un-Design Relative Value ептог weighted Weighted effect ептог R+2SE Variable (R) (SE) (N) (WN) **DEFT** SE/R R-2SE Urban residence 1.000 0.000 307 338 NA 0.000 1.000 1.000 No education 0.062 0.017 307 338 1.233 0.274 0.028 0.096 Secondary education or more 0.188 0.035 307 338 1.571 0.186 0.1180.258 338 Never in union 0.402 0.031 307 1.092 0.076 0.340 0.463 Currently married 0.525 0.034 307 338 1.186 0.064 0.458 0.593 Knowing any method 0.961 0.017 158 177 1.117 0.018 0.927 0.996 Knowing any modern method 0.961 0.017 158 177 1.117 0.018 0.927 0.996 Ever use any method 0.633 0.050 158 177 1.289 0.078 0.534 0.732 Using any method 0.354 0.042158 177 1.093 0.118 0.271 0.437 Using any modern method 0.254 0.040 158 177 1.156 0.158 0.173 0.334 Using pill 0.100 0.020 158 177 0.825 0.1980.060 0.139 Using IUD 0.007 0.005 158 177 0.752 0.706 0.000 0.017 Using injectables 0.024 0.013 158 177 1.042 0.528 0.000 0.050Using condom 0.105 0.029158 177 1.187 0.277 0.047 0.163 Using female sterilisation 0.014 0.010 158 177 1.065 0.716 0.000 0.034 Using periodic abstinence 0.074 0.019 158 177 0.914 0.258 0.036 0.112 Using withdrawal 0.022 0.019 158 177 1.629 0.863 0.0000.061 Want no more children 0.286 0.034 158 177 0.951 0.120 0.218 0.355 Want to delay child at least 2 years 0.311 0.036 158 177 0.985 0.117 0.238 0.384 Ideal number of children 4.944 0.207 283 319 1.424 0.042 4.529 5.358 NA = Not applicable.

## APPENDIX C DATA QUALITY

## APPENDIX C

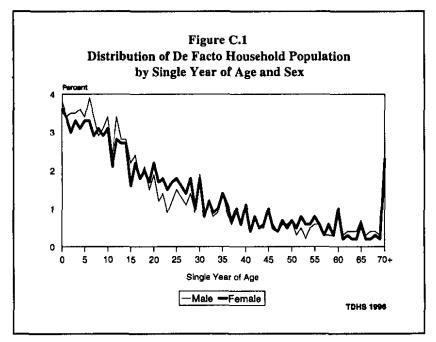
## DATA QUALITY

This appendix provides an assessment of the quality of the 1996 TDHS data. For this purpose, misreporting of ages, respondents' recall problems and other problems encountered during data collection are investigated.

Table C.1 and Figure C.1 present the distribution of the *de facto* household population by single year of age and information on age is obtained from the Household Questionnaire. The table shows some preferences for ages ending in 0, 2, and 5, and, as expected, age heaping is more severe in the older ages. The typical pattern of heaping on age 12 is also prominent. Nevertheless, age reporting is particularly good. The Myer's blended index<sup>1</sup> is commonly used to measure overall digit preference in age reporting. The indices for the male and female population age 10-60 years are 9.3 and 7.8, respectively, suggesting that age heaping exists in the data. Another measure of the quality of the age data is the very small number of persons whose ages were recorded as not known or missing. However, there is some evidence that interviewers "displaced" women and men outside the eligible age range (15-49 for women and 15-59 for men), presumably to avoid the need to interview them. The number of women and men age 15 is substantially lower than the number age 14 or 13. At the other end of the range, the number of women age 50 exceeds the number age 49, implying that interviewers assigned an age of 50 to women whose ages might not have been known with certainty, in

order to avoid interviewing them. Similar displacement of men for 59 years of age to age 60 is also prominent. These lower and upper boundary effects can be explained by looking at the age ratio<sup>2</sup>. The age ratio at 15 years for women and men are 66 and 87, respectively, whereas, age ratio at 49 years for women is 71 and age ratio at 59 years for men is 58. These results suggest a strong boundary effect in the 1996 TDHS.

Table C.2 shows that during the household interview, 8,514 women age 15-49 were recorded, of which 8,142 women were successfully interviewed, yielding a response



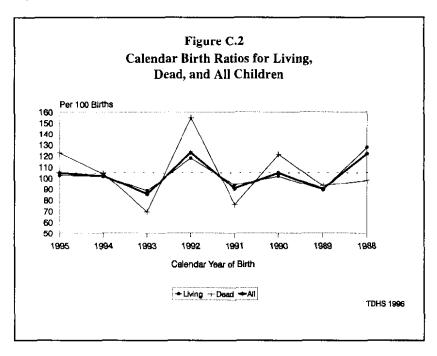
<sup>&</sup>lt;sup>1</sup> The index can range from 0 if no age heaping is present to 90 if all ages were reported at a single digit.

<sup>&</sup>lt;sup>2</sup> The age ratio is the number of respondents in the reference group divided by the average of the number of respondents in the two immediately adjacent age groups, multiplied by 100. Normally, one would expect roughly equal number of respondents at these three ages and therefore, the age ratio should be near 100.

rate of 96 percent. The five-year age distribution of women follows the expected pattern. Little difference can be seen between the age distribution of women recorded in the household schedule and those interviewed with the individual questionnaire, indicating that response rates vary little across the age of respondents (Table C.2).

Information on the completeness of reporting in connection with a set important variables is provided in Table C.3. Among births in the 15 years preceding the survey, the percentage of cases with missing information on month and year of birth or age at death is extremely low (less than 1 percent). Data are 100 percent complete for mother's educational level. Data on height and weight are available for more than 90 percent of the children.

Data quality is also measured by the completeness and accuracy of information on



births. Table C.4 shows the distribution of births by calendar year to ascertain if any unusual patterns exist which may indicate that births have been omitted or that the ages of children have been displaced. The percentage of surviving children with known month and year of births in the 1996 TDHS is 92 and for dead children, the percentage is 82. Age displacement is common in many surveys that include both demographic and health information for children below a specific age. It is difficult to measure the extent of displacement precisely, but examination of the year of birth distributions of children helps to identify whether displacement is a significant problem.

The cutoff date for asking health question was January 1991. Children born in this year are the oldest children included in the health and breastfeeding section of the questionnaire. If births are being incorrectly transferred from this year to the previous year (1990), then a shortage of births should be evident in 1991 and an excess of births should appear in 1990. Observing the calendar ratios, there seems to be deficits of births in 1991 and a surplus in 1990 (Figure C.2). For all births, the ratio of births in 1991 to the average of two adjoining years is 0.91; for births in 1990, the ratio is 1.05 (Table C.5). The phenomenon is more serious among dead children (0.76 in 1991 and 1.21 in 1990). A similar pattern of age distribution was also observed in the 1991-92 TDHS. These numbers may represent a deliberate attempt by some interviewers to reduce their workloads, in particular to shorten the interview by skipping the health sections that contain extensive questions about children under five.

Underreporting of deaths is most severe for deaths which occur very early in infancy. A selective underreporting of early neonatal deaths would result in an abnormally low ratio of deaths under seven days to all neonatal deaths. Early infant deaths have not been severely underreported in the 1996 TDHS as suggested by the high ratio of deaths in the first six days to all neonatal deaths (Table C.5). This ratio also varies little over the 20 years before the survey (between 59 and 67) which further supports the evidence that early infant deaths have not been grossly underreported.

Heaping of the age at death on certain digits is another problem that is inherent in most retrospective surveys. Misreporting of age at death biases estimates of the age pattern of mortality if the net result of misreporting is transference of deaths between age segments for which rates are calculated; for example, an overestimate of child mortality relative to infant mortality may result if children who died during the first year of life are reported as having died at age one or older. To minimise the error in the reporting of age at death, the 1996 TDHS interviewers were instructed to record the age at death in days for deaths under one month, and in months for deaths under two years. They were specifically asked to probe for deaths reported at one year of age to ensure that they had actually occurred at 12 months. Nevertheless, there is evidence of some "heaping" on age 12 months in the reporting of age at death; however, this heaping is more significant for deaths that occurred five or more years before the survey but not in recent years (Table C.6). The index of heaping is 7.4 for deaths occurred 0-4 years before the survey and 10.0 for deaths occurred 15-19 years before the survey. From this standpoint, it is not necessarily to adjust for underreporting of deaths below age one.

The 1996 TDHS uses the direct method to collect data on maternal mortality. The procedure involved listing all the siblings of the respondent and then collecting information on: the survival status of each sibling; the ages of the surviving siblings; the ages and years since the death of deceased siblings. For each deceased sister, additional questions were asked to determine if a death is due to maternal causes. Maternal death is defined as any death that occurs during pregnancy, childbirth, or within two months following the birth or termination of a pregnancy. Table C.7 shows the number of siblings reported by the 1996 TDHS female respondents and level of completeness of the data on survivorship status, current age, age at death, and years since death of siblings. The sex ratio of reported siblings (the ratio of brothers to sisters) was a little low (1.01), possibly indicating slight underreporting of brothers. Respondents were highly knowledgeable about their siblings' survival status; in only less than 1 percent of the cases were respondents unable to report the survival status of their siblings, with negligible differences in reporting for sisters and brothers. Respondents could not tell the ages of their surviving siblings for less than 1 percent cases. As expected, information regarding deceased siblings is less complete than for living siblings. For about 3 percent of deceased siblings, both age at death and the year of death were not reported by the respondents.

Table C.8 provides the distribution of respondents and their siblings by year of birth which is a crude measure of data quality. If there is no bias, the year of birth of siblings should be roughly equivalent to the year of birth of respondents overall. The distribution of respondents and their siblings by year of birth is very similar-- in fact, the median year of birth is about the same, 1969 for respondents and 1970 for siblings. This indicates that there is no serious underreporting of siblings. The mean sibship size (number of siblings) is yet another crude measure of data quality (Table C.9). Since fertility in Tanzania has declined over time, one would expect mean sibship sizes to decline as well. The absence of a monotonic decline in the sibship size suggests there may be some omission in the reporting of older siblings. Table C.9 shows that there may be some omission in the reporting of siblings born before 1965. However, since adult mortality rates are reported here for 9 years preceding the survey this omission is unlikely to affect the calculation of mortality rates.

Table C.1 Household age distribution

Single-year age distribution of the de facto household population by sex (weighted), Tanzania 1996

	M	ales	Fen	nales		Ma	ales	Females		
Age	Number	percent	Number	percent	Age	Number	percent	Number	percent	
<l< td=""><td>707</td><td>3.8</td><td>706</td><td>3.6</td><td>36</td><td>172</td><td>0.9</td><td>215</td><td>1.1</td></l<>	707	3.8	706	3.6	36	172	0.9	215	1.1	
1	632	3.4	672	3.4	37	103	0,6	142	0.7	
2	642	3.5	601	3.0	38	160	0.9	198	1.0	
3	<b>64</b> 1	3.5	653	3.3	39	111	0.6	116	0.6	
4	665	3.6	624	3.1	40	210	1.1	214	1.1	
5	620	3.4	650	3.3	41	96	0.5	76	0.4	
6	713	3.9	655	3.3	42	146	0.8	167	0.8	
7	628	3.4	572	2.9	43	94	0.5	107	0.5	
8	544	2.9	610	3.1	44	95	0.5	125	0.6	
9	578	3.1	571	2.9	45	181	1.0	190	1.0	
10	630	3.4	619	3.1	46	107	0.6	107	0.5	
11	439	2.4	409	2.1	47	78	0.4	78	0.4	
12	627	3.4	557	2.8	48	115	0.6	141	0.7	
13	524	2.8	538	2.7	49	108	0.6	98	0.5	
14	509	2.8	527	2.7	50	134	0.7	137	0.7	
15	414	2,2	318	1.6	51	55	0.3	90	0.5	
16	442	2.4	436	2.2	52	86	0.5	166	0.8	
17	336	1.8	351	1.8	53	41	0.2	127	0.6	
18	385	2.1	400	2.0	54	90	0.5	122	0,6	
19	276	1.5	336	1.7	55	106	0.6	164	0.8	
20	351	1.9	440	2.2	56	103	0.6	115	0.6	
21	230	1.2	340	1.7	57	50	0.3	68	0.3	
22	251	1.4	364	1.8	58	59	0.3	116	0.6	
23	175	0.9	291	1.5	59	60	0.3	65	0.3	
24	216	1.2	345	1.7	60	147	0.8	195	1.0	
25	275	1.5	365	1.8	61	58	0.3	43	0.2	
26	238	1.3	319	1.6	62	82	0.4	68	0.3	
27	202	1.1	278	1.4	63	70	0.4	44	0.2	
28	255	1.4	350	1.8	64	71	0.4	38	0.2	
29	174	0.9	196	1.0	65	135	0.7	121	0.6	
30	344	1.9	358	1.8	66	59	0.3	40	0.2	
31	155	0.8	159	0.8	67	67	0.4	43	0.2	
32	222	1.2	244	1.2	68	68	0.4	60	0.3	
33	139	0.8	177	0.9	69	47	0.3	37	0.2	
34	158	0.9	202	1.0	70+	487	2.6	461	2.3	
35	264	1.4	272	1,4	Don't kn		=			
					missing	17	0.1	11	0.1	
					Total	18,464	100.0	19,807	100.0	

Note: The de facto population includes all residents and nonresidents who slept in the household the night before the interview.

Table C.2 Age distribution of eligible and interviewed women

Percent distribution of the de facto household population of women age 10-54, and percentage of eligible women who were interviewed (weighted) by five-year groups, Tanzania 1996

Age	Household of wo		Interviewe age 1:	Percentage interviewed	
	Number	Percent	Number	Percent	(weighted)
10-14	2,650	NA	NA	NA	NA
15-19	1,840	21.6	1,727	21.2	93.9
20-24	1,781	20.9	1,705	20.9	95.7
25-29	1,508	17.7	1,457	17.9	96.6
30-34	1.140	13.4	1.097	13.5	96.3
25-39	943	11.1	904	11.1	95.9
40-44	688	8.1	667	8.2	96.9
45-49	614	7.2	584	7.2	95.1
50-54	641	NA	NA	NA	NA
15-49	8,514	NA	8,142	NA	95.6

Table C.3 Completeness of reporting

Percentage of observations missing information for selected demographic and health questions, Tanzania 1996

Subject	Reference group	Percentage missing information	Number of cases
Birth Date	Births in past 15 years		
Month only		6.73	17,902
Month and year		0.06	17,902
Age at death	Deaths to births in past 15 year	s 0.54	2,583
Age/date at first union	Ever-married women	1.04	6,233
Respondent's education	All women	0.00	8,120
Anthropometry <sup>2</sup>	Living children 0-59 months		
Height missing	-	7.43	6,188
Weight missing		7.16	6,188
Height/weight missing		7.50	6,188
Diarrhoea last 2 weeks	Living children 0-59 months	3.81	6,188

<sup>&</sup>lt;sup>1</sup> Both year and age missing <sup>2</sup> Child not measured

Table C.4 Births by calendar year

Distribution of births by calendar years for living (L), dead (D), and all (T) children, according to reporting completeness, sex ratio at birth, and ratio of births by calendar year, Tanzania 1996

	Num	ber of bir	rths		ntage with ete binh d	ate <sup>l</sup>	Sex	ratio at bit	th <sup>2</sup>	Cale	ndar ratio	3		Mal	e		Female	3
Year	L	D	T	L	D	T	L	D	T	L	D	T	L	D	T	L	D	T
96	1,194	122	1,316	98.5	87.4	97.4	104.0	143.3	107.1	NA	NA	NA	608	72	681	585	50	635
95	1,202	179	1,381	96.3	88.2	95.3	108.5	124.6	110.4	102.5	122.5	104.7	625	99	725	577	80	657
94	1,152	170	1,322	96.0	90.0	95.2	96.9	114.7	99.0	101.8	104.1	102.1	567	91	658	585	79	665
93	1,061	148	1,209	97.3	88.3	96.2	105.4	136.7	108.8	88.5	69.4	85.6	545	85	630	517	62	579
92	1,248	256	1,503	92.7	85.1	91.4	99.4	117.1	102.2	118.0	154.6	123.0	622	138	760	626	118	743
91	1,053	183	1,236	92.6	86.7	91.7	103.0	131.2	106.7	93.8	75.9	90.6	534	104	638	519	79	598
90	998	226	1,223	91.8	81.4	89.9	94.6	104.9	96.4	101.8	121.4	105.0	485	116	601	513	110	623
89	906	189	1,096	94.7	81.8	92.5	118.1	117.1	117.9	89.3	93.1	90.0	491	102	593	416	87	503
88	1,031	181	1,212	90.4	86.8	89.8	99.1	104.7	100.0	127.5	98.0	122	513	93	606	518	88	606
87	712	180	892	92.7	84.0	90.9	102.4	99.2	101.8	NA	NA	NA	360	90	450	352	90	442
92-96	5,857	876	6,732	96.1	87.5	95.0	102.7	124.7	105.3	NA	NA	NA	2,967	486	3,453	2,889	3 <del>9</del> 0	3,279
87-91	4,700	959	5,659	92.4	84.0	90.9	102.9	110.6	104.2	NA	NA	NA	2,384	504	2,887	2,316	455	2,772
82-86	3,529	792	4,321	90.6	80.2	88.7	97.0	106.5	98.6	NA	NA	NA	1,737	408	2,146	1,792	384	2,175
77-81	2,453	546	2,999	88.7	77.2	86.6	90.2	144.4	98.2	NA	NA	NA	1,163	323	1,486	1,290	223	1,513
<77	2,073	685	2,759	85.8	75.4	83.2	105.4	106.2	105.6	NA	NA	NA	1,064	353	1,417	1,010	332	1,342
All	18,612	3,857	22,469	92.0	81.5	90.2	100.2	116.2	102.8	NA	NA	NA	9,315	2,073	11,388	9,297	1,784	11,081

NA = not applicable.

Both year and month of birth given.  $^{2}(B_{m}/B_{f}) * 100$ , where  $B_{m}$  and  $B_{f}$  are numbers of male and female births, respectively.  $^{3}[2 B_{x}/(B_{x-1} + B_{x+1})] * 100$ , where  $B_{x}$  is the number of births in calendar year x.

Table C.5 Reporting of age at death in days

Distribution of reported deaths under 1 month of age by age at death in days and the percentage of neonatal deaths reported to occur at ages 0-6 days, for five-year periods of birth preceding the survey, Tanzania 1996

	Numl				
Age at death (in days)	0-4	5-9	10-14	15-19	Total 0-19
< 1	47	63	58	27	195
1	35	40	33	24	132
	20	18	20	22	80
2 3 4	17	21	15	13	67
4	7	13	4	5	29
5	7	6	12	5 2	28
6	6	4	3	4	16
7	26	42	30	20	118
8	1	5	5	1	11
9	2	5 2	3	0	7
10	1	4	1	0	6
11	I	0	2	0	3 4
12	2	1	0	1	
13	1	0	0	0	2
14	22	24	19	16	81
15	<b>5</b> 1	1	1	2	10
16		0	0	0	1
17	2	2	0	0	3
18	1	2	0	2	4
19	2	2 2 1	0	0	3 4 3
20	2 2 4 3	2	1	0	4
21	4	3	7	0	15
22	3	0	0	0	3
28	5	1	5	2	13
30	15	11	8	4	38
Total 0-30	235	268	225	144	873
Percent early					
neonatal	58.9	62.0	64.1	67.1	62.5

Table C.6 Reporting of age at death in months

Distribution of reported deaths under 2 years of age by age at death in months and the percentage of infant deaths reported to occur at ages under one month, for five-year periods of birth preceding the survey, Tanzania

Age at deaths	Number	of years p	preceding th	e survey	Total
Age at deaths (in months)	0-4	5-9	10-14	15-19	Total 0-19
<1ª	236	268	225	144	873
1	31	26	22	19	97
2	24	48	27	25	124
3	39	42	26	19	127
4	46	35	22	17	120
5	30	30	21	12	93
6	39	64	28	19	151
7	29	32	20	10	90
8	24	31	26	15	95
9	39	36	29	16	120
10	10	15	9	5	38
11	14	6	12	8	40
12	18	32	38	18	106
13	3	8	3	3	16
14	2	10	10	0	22
15	6	1	7	3	17
16	4	4	4	0	12
17	4	5	0	2	11
18	16	13	18	23	70
19	5	1	0	1	7
20	6	2	9	2	19
21	2	0	2	0	4
23	2	4	2	0	8
l Year	36	45	40	22	144
Total 0-11	561	632	467	308	1,968
Percent neonatalb	42	42	48	46	44
Index of heaping <sup>c</sup>	7.4	7.9	9.2	10.0	8.6

Includes death under 1 month reported in days.

(D = Deaths)

c Index of heaping = D10 + D11 + D13 + D14 where D12 includes all deaths reported at 12 months and one year.

b (Under 1 month/under 1 year) • 100

Table C.7 Completness of information on siblings

Number of siblings reported by survey respondents and completeness of reported data on age, age at death (AD) and years since death (YSD), Tanzania 1996

Sibling status and completeness	Sist	ers	Brothers		Total	
of reporting	Number	Percent	Number	Percent	Number	Percent
All siblings	23,775	100.0	23,952	100.0	47,727	100.0
Living	19,788	83.2	19,401	81.0	39.189	82.1
Dead	3,977	16.7	4,532	18.9	8,508	17.8
Status unknown	10	0	19	0.1	29	0.1
Living siblings	19,788	100.0	19,401	100.0	39,189	100.0
Age reported	19,699	99.6	19,301	99.5	39,000	99.5
Age missing	89	0.4	100	0.5	189	0.5
Dead siblings	3,977	100.0	4,532	100.0	8,508	100.0
AD and YSD reported	3,532	88.8	3,940	86.9	7,472	87.8
Missing only AD	23	0.6	39	0.9	62	0.7
Missing only YSD Missing both AD	322	8.1	412	9.1	734	8.6
and YSD	100	2.5	140	3.1	240	2.8

Table C.8 Data on Siblings: Indicators on Data Quality

Percent distribution of respondents and siblings by years of birth, Tanzania 1996

Year of birth	Respondents	Siblings
Before 1945	0.0	2.7
1945-49	3.9	3.4
1950-54	8.1	6.0
1955-59	9.4	9.3
1960-64	13.4	12.4
1965-69	16.0	14.6
1970-74	19.8	15.6
1975 or later	29.4	36.2
Total	100.0	100.0
Lower range	1946	1915
Upper range	1981	1996
Median	1969	1970
No. of cases	8,120	47,705

Table C.9 Sibship size and sex ratio o	<u>f</u>
siblings	

Mean sibship size and sex ratio of births, Tanzania 1996

Year of birth of respondents' siblings	Mean sibship size	Sex ratio at birth	
1940s	6.2	93.5	
1950-54	6.2	99.8	
1955-59	6.7	101.3	
1960-64	7.0	101.0	
1965-69	7.2	103.2	
1970-74	7.2	101.8	
1975-79	6.8	99.4	
Total	6.9	100.7	

# APPENDIX D ADDITIONAL TABLES

Table D.1 Knowledge of contraceptive methods by background characteristics: married respondents

Percentage of currently married respondents who know at least one contraceptive method and at least one modern method, by selected background characteristics, Tanzania 1996

		Women			Men	
	Know	Know	Number	Know	Know	
Background	any	modern	of	any	modern	Numbe
characteristic	method	method	women	method	method	of men
Age	20.5	an a	404		4	,
15-19	80.0	79.7	401		•	6
20-24	90.7	90.2	1,131	92.0	92.0	91
25-29	92.6	92.0	1,184	94.7	94.7	196
30-34	91.1	90.7	947	96.6	95.0	232
35-39	88.5	87.5	740	95.2	95.2	230
40-45	85.3	84.1	561	98.2	98.2	194
45-49	78.2	75.9	447	89.7	89.7	137
50-54 55-59	NA NA	NA NA	NA NA	90.5 78.4	89.0 76.4	110 90
33-39	NA	NA	NA	78.4	76.4	90
Residence Mainland	88.3	87.5	5,245	93.2	92.7	1,253
Total urban	97.5	97.4	1,073	96.9	96.9	260
Dar es Salaam city	97.3 98.3	98.3	340	98.5	98.5	83
Other urban	97.2	97.1	733	96.1	96.1	177
Total rural	85.9	84.9	4,172	92,3	91.6	992
Zanzibar	95.7	95.4	166	98.5	91.6 98.5	35
Pemba Pemba	93.7 93.9	93.4	61	(96.8)		16
Unguja	93.9 96.7	95. <del>9</del> 96.3	105	(100.0)	(96.8) (100.0)	19
		2		(200.0)	(100.0)	
Region Dodoma	90.0	89.1	258	93.3	93.3	51
Arusha	59.2	56.4	403	80.0	76.4	92
Kilimanjaro	95.5	95.5	221	83.3	83.3	55
Tanga	87.2	87.2	282	(81.4)	(81.4)	62
Morogoro	94,9	94.5	257	93.9	93.9	54
Coast	97.7	96.5	98	(100.0)	(100.0)	22
Dar es Salaam	98.1	98.1	399	98.7	98.7	94
Lindi	97.1	96.2	123	(100.0)	(100.0)	35
Mtwara	91.9	90.2	248	100.0	100.0	61
Ruvuma	95.8	95.8	205	95.5	95.5	54
Iringa	89.7	88.9	291	97.5	97.5	59
Mbeya	96.7	96.2	318	(100.0)	(100.0)	78
Singida	84.4	82.6	194	98.1	96.2	50
Tabora	91.3	91.3	157	<b>70.1</b> <b>★</b>	90.2 •	32
Rukwa	86.9	86.1	177	96.3	94.4	49
Kukwa Kigoma	93.0	92.6	233	(95.9)	(95.9)	49 67
Shinyanga	77.2	76.8	464	89.6	89.6	118
Kagera	92.2	90,2	337	(100.0)	(97.8)	90
Mwanza	87.4	90.2 87.4	395	(88.6)	(88.6)	99
Mara	89.8	89.8	183	(85.2)	(85.2)	32
Education						
No education	75.6	73.8	1.829	84.6	82.2	213
Primary incomplete	90.6	90.2	920	91.2	91.2	342
Primary complete	96.3	96.2	2.462	96.5	96.2	612
Secondary+	100.0	100.0	200	99.3	99.3	122
Total	88.5	87.7	5,411	93.4	92.8	1,288

Note: Figures in parentheses are based on 25 to 49 respondents. An asterisk indicates a figure is based on fewer than 25 respondents and has been suppressed. NA = Not applicable.

Table D.2.1 Current use of contraception by background characteristics: currently married women

Percent distribution of currently married women by contraceptive method currently used, according to selected background characteristics, Tanzania 1996

			Mod	lem met	hod			Traditional/folk method						
Background characteristic	Any method	Any modern method		iUD	In- ject- ables	Con- dom	Female steri- lisa- tion	Any trad./ folk method	Cal- endar/ mucus	With- drawal	Other methods	Not cur- rently using	Total	Number of women
Residence														
Mainland	18.6	13.4	5.5	0.6	4.5	0.8	1.9	5.2	2.1	2.7	0.4	81.4	100.0	5,245
Total urban	33.5	27.3	10.4	1.5	9.8	2.1	3.3	6.2	4.2	1.6	0.4	66.5	100.0	1,073
Dar es Salaam city	37.8	30.1	10.2	2.5	9.5	3,7	3.7	7.7	5.5	2.0	0.2	62.2	100.0	340
Other urban	31.6	26.1	10.5	1.0	9.9	1.3	3.1	5.5	3.7	1.4	0.5	68.4	100,0	733
Total rural	14.8	9.8	4.3	0.4	3.1	0.5	1.5	5.0	1.5	3.0	0.5	85.2	100.0	4,172
Zanzibar	13.1	10.8	5.5	0.3	3.1	0.4	1.5	2.3	1.1	0.6	0.5	86.9	100.0	166
Pemba	9.6	7.6	3.0	0.0	2.0	0.5	2.0	2.0	1.0	1.0	0.0	90.4	0.001	61
Unguja	15.1	12.7	6.9	0,4	3.7	0.4	1.2	2.4	1.2	0.4	0.8	84.9	100.0	105
Region														
Dodoma	12,7	10.9	5.2	0.9	4.4	0.0	0.4	1.7	0.9	0.9	0.0	87.3	100.0	258
Arusha	20.2	12.8	3.7	1.9	3.4	0.9	2.8	7.5	1.9	5.3	0.3	79.8	0.001	403
Kilimanjaro	50.7	32.7	11.2	3.1	7.2	2.7	8.5	17.9	6.7	10.3	0.9	49.3	100.0	221
Tanga	26.0	13.6	6.2	0.4	5.4	8.0	0.8	12.4	2.5	8.7	1.2	74.0	100.0	282
Morogoro	18.6	14.8	7.6	0.0	5.1	8.0	1.3	3.8	1.7	1.3	0.8	81.4	100.0	257
Coast	33.3	28.7	11.7	0.0	12.9	2.3	1.2	4.7	1.2	2.9	0.6	66.7	100.0	98
Dar es Salaam	35.4	28.0	9.7	2.3	9.1	3.2	3.2	7.4	5.5	1.7	0.2	64.6	0.001	399
Lindi	19.0	17.1	8.6	0.5	4.3	1.4	2.4	1.9	1.4	0.0	0.5	81.0	100.0	123
Mtwara	14.3	12.3	6.8	0.0	3.9	0.0	1.6	1.9	0.3	0.3	1.3	85.7	0.001	248
Ruvuma	22.7	20.1	9.6	0.0	6.4	2.2	1.9	2.6	1.3	0.6	0.6	77.3	100.0	205
Iringa	13.2	8.6	5.3	0.0	2.1	0.4	0.8	4.5	1.6	2.1	8.0	86.8	100.0	291
Mbeya	23.7	13.3	5.7	0.0	4.7	0.5	2.4	10.4	0.9	9.0	0.5	76.3	100.0	318
Singida	17.8	16.3	6.7	0.4	7.4	0.4	1.5	1.5	0.7	0.7	0.0	82.2	100.0	194
Tabora	18.8	13.0	6.5	0.0	4.3	0.7	1.4	5.8	5.8	0.0	0.0	81.2	100.0	157
Rukwa	14.7	7.7	4.2	0.0	1.9	0.4	1.2	6.9	0.4	5.8	0.8	85.3	0.001	177
Kigoma	17.2	13.1	4.5	0.4	5.3	0.0	2.5	4.1	3.3	0.4	0.0	82.8	100.0	233
Shinyanga	5.1	4.7	1.2	0.4	1.6	0.0	1.6	0.4	0.0	0.4	0.0	94.9	0.001	464
Kagera	12.2	6.8	2.9	0.0	1.5	1.0	1.5	5.4	3.4	1.5	0.5	87.8	100.0	337
Mwanza	6.1	5.1	1.9	0.0	2.8	0.0	0.5	0.9	0.9	0.0	0.0	93.9	100.0	395
Mara	8.6	6.6	2.0	0.0	4.6	0.0	0.0	2.0	1.0	0.5	0.5	91.4	100.0	183
Education														
No education	7.5	5.2	1.8	0.0	2.1	0.2	1.1	2.3	0.5	1.3	0.5	92.5	100.0	1,829
Primary incomplete	16.8	13.0	4.9	0.5	3.8	0.4	3.3	3.8	1.1	2.4	0.4	83.2	100.0	920
Primary complete	25.0	18.0	8.0	0.9	6.2	1.3	1.6	7.0	2.8	3.7	0.5	75.0	100.0	2,462
Secondary+	44.6	31.2	11.8	3.2	7.7	2.9	5.2	13.3	11.1	2.3	0.0	55.4	100.0	200
No. of living children														
0	1.2	0.5	0.2	0.0	0.0	0.2	0.2	0.7	0.7	0.0	0.0	98.8	100.0	562
1	16.4	11.7	6.9	0.6	2.4	1.5	0.3	4.7	1.9	2.8	0.1	83.6	100.0	941
2	20.2	14.0	7.1	0.7	4.6	0.9	0.6	6.2	3.0	2.7	0.4	79.8	100.0	879
3	21.9	15.4	7.7	1.0	4.6	1.3	0.9	6.5	2.3	3.5	0.7	78.1	100.0	812
4+	21.7	16.2	4.8	0.5	6.4	0.5	3.9	5.5	1.9	2.9	0.6	78.3	100.0	2,217
Total	18.4	13.3	5.5	0.6	4.5	0.8	1.9	5.1	2.0	2.6	0.4	81.6	100.0	5,411

Table D 2.2 Current use of contraception by background characteristics: currently married men

Percent distribution of currently married men by contraceptive method currently used, according to selected background characteristics, Tanzania 1996

				Mod	em metl	od			Traditio	onal/folk	method			
Background characteristic	Any method	Any modern meth- od	Pill	IUD	In- ject- ables	Con- dom	Female steri- lisa- tion	Any trad./ folk method	Cal- endar mucus	With- draw- al	Other methods	Not cur- rently using	Total	Number of women
Residence														
Mainland	29.6	15.9	6.5	0.4	3.0	4.6	1.3	13.7	9.2	3.7	0.5	70.4	100.0	1,253
Total urban	36.2	26.7	9.5	1.2	2.9	11.0	1.9	9.5	6.7	2.2	0.2	63.8	100.0	260
Dar es Salaam city	37.9	29.5	8.3	2.3	3.8	12.1	3.0	8.3	5.3	2.3	0.8	62.1	100.0	83
Other urban	35.4	25.4	10.0	0.7	2.4	10.5	1.4	10.1	7.4	2.2	0.0	64.6	100.0	177
Total rural	27.9	13.0	5.8	0.2	3.0	3.0	1.1	14.9	9.9	4.1	0.6	72.1	100.0	992
Zanzibar	23.3	13.8	8.0	0.0	3.6	2.2	0.0	9.5	7.3	2.2	0.0	76.7	100,0	35
Pemba	(12.9)	(6.5)	(3.2)	(0.0)	(3.2)	(0.0)	(0.0)	(6.5)	(6.5)	(0.0)	(0.0)	(87.1)	(100.0)	16
Unguja	(32.0)	(20.0)	(12.0)	(0.0)	(4.0)	(4.0)	(0.0)	(12.0)	(8.0)	(4.0)	(0.0)	(68.0)	(100.0)	19
Region														
Dodoma	16.0	12.0	4.0	0.0	2.7	5.3	0.0	4.0	2.7	0.0	0.0	84.0	100.0	51
Arusha	32.7	16.4	5.5	0.0	1.8	5.5	3.6	16.4	7.3	9.1	0.0	67.3	100.0	92
Kilimanjaro	40.0	20.0	6.7	3.3	3.3	4.4	2.2	20.0	7.8	10.0	0.0	60.0	100.0	55
Tanga	(30.2)	(14.0)	(7.0)	(0.0)	(2.3)	(4.7)	(0.0)	(16.3)	(7.0)	(9.3)	(0.0)	(69.8)	100.0	62
Morogoro	24.4	19.5	8.5	1.2	2.4	6.1	0.0	4.9	1.2	2.4	1.2	75.6	100.0	54
Coast	(45.2)	(38.7)	(19.4)	(0.0)	(9.7)	(9.7)	(0.0(	(6.5)	0.0	(6.5)	(0.0)	(54.8)	100.0	22
Dar es Salaam	37.3	28.7	8.7	2.0	3.3	11.3	3.3	8.7	5.3	2.0	1.3	62.7	100.0	94
Lindi	(30.4)	(21.7)	(8.7)	(0.0)	(6.5)	(6.5)	(0.0)	(8.7)	(4.3)	(0.0)	(2.2)	(69.6)	100.0	35
Mtwara	21.9	20.3	17.2	0,0	1.6	1.6	0.0	1.6	0.0	1.6	0.0	78.1	100.0	61
Ruvuma	41.8	26.9	19.4	0.0	4.5	1.5	1.5	14.9	10.4	3.0	1.5	58.2	100.0	54
Iringa	20.0	10.0	3.7	0.0	1.2	1.2	3.7	10.0	2.5	6.2	0.0	80.0	100.0	59
Mbeya	39.0	24.4	2.4	0.0	7.3	14.6	0.0	(14.6)	4.9	(7.3	(2.4)		(100.0)	(78)
Singida	32.7	26.9	7.7	0.0	7.7	9.6	1.9	5.8	3.8	0.0	1.9	67.3	100.0	50
Tabora	*		*		*		+	*	•		*	*	100.0	32
Rukwa	64.8	16.7	7.4	0.0	5.6	1.9	1.9	48.1	31.5	16.7	0.0	35.2	100.0	49
Kigoma	46.9	14.3	8.2	0.0	4.1	2.0	0.0	(32.7)	32.7	(0,0)	(0.0)		(100.0)	(67)
Shinyanga	7.3	5.2	1.0	1.0	0.0	2.1	1.0	2.1	1.0	1.0	0.0	92.7	100.0	118
Kagera	42.2	11.1	6.7	0.0	0.0	2.2	2.2	(31.1)	31.1	(0.0)	(0.0)		(100.0)	
Mwanza	0.0	0.0	0.0	0.0	0.0	0.0	0.0	(0.0)	0.0	(0.0)	(0.0)	, ,	(100.0)	, ,
Mara	22.2	7.4	0.0	0.0	3.7	3.7	0.0	(14.8)	11.1	(3.7)	(0.0)	•	(100.0)	. ,
Education														
No education	16.3	4.7	1.4	0.0	0.7	1.9	0.8	11.6	9.0	2.6	0.0	83.7	100.0	213
Primary incomplete	17.6	8.3	3.3	0.2	1.7	2.0	1.2	9.3	6.6	1.8	0.4	82.4	100.0	342
Primary complete	37.3	20.9	9.7	0.4	4.6	5.6	0.5	16.4	10.6	4.7	0.8	62.7	100.0	612
Secondary+	46.3	30.8	9.1	2.0	2.7	11.2	5.8	15.4	9.7	5.8	0.0	53.7	100.0	122
No. of living children														
0	10.3	5.2	2.0	0.0	0.0	3.2	0.0	5.1	4.5	0.6	0.0	89.7	100.0	108
1	25.0	12.7	4.6	0.4	1.3	6.1	0.4	12.3	8.1	3.0	0.8	75.0	100.0	176
2	28.5	14.3	6.8	1.7	1.2	4.5	0.0	14.2	8.9	5.4	0.0	71.5	100.0	179
3	42.4	24.9	12.4	0.0	3.5	8.2	0.8	17.5	14.3	3.1	0.0	57.6	100.0	175
4+	30.6	16.4	6.2	0.3	4.3	3.4	2.1	14.2	8.9	4.1	0.7	69.4	100.0	650
Total	<b>2</b> 9.4	15.8	6.6	0.4	3.0	4.6	1.2	13.6	9.2	3.7	0.5	70.6	100.0	1.288

Note: Figures in parentheses are based on 25 to 49 women. An asterisk indicates a figure is based on fewer than 25 women and has been suppressed.

### **APPENDIX E**

## PERSONS INVOLVED IN THE 1996 TANZANIA DEMOGRAPHIC AND HEALTH SURVEY

#### APPENDIX E

#### PERSONS INVOLVED IN THE 1996 TANZANIA DEMOGRAPHIC AND HEALTH SURVEY

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Zainab Mdimi

Rose Ngumbasi

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Devota Kanani

#### LINDI/MTWARA/RUVUMA

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Mary Nchimbi

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Elina Malila

Ellila Mallia

Mary Kitego Monica Kayembele

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Elias Sihika Hassan Mateka Ahmed Ngao John Sweke Kassim Ngao Shabani Issa Simon Milanzi Juma A. Juma

# APPENDIX F QUESTIONNAIRES

# UNITED REPUBLIC OF TANZANIA BUREAU OF STATISTICS, PLANNING COMMISSION TANZANIA DEMOGRAPHIC AND HEALTH SURVEY 2 HOUSEHOLD SCHEDULE

	IDE	ENTIFICATIO	ON					
NAME OF HOUSEHOLD	HEAD							
CLUSTER NUMBER	, <b></b> .		• • • • • • • • • • • • • • • • • • •					
HOUSEHOLD NUMBER.	, <b></b> .							
REGION								
DISTRICT								
WARD								
ENUMERATION AREA_								
LARGE CITY=1; SMAI	LL CITY*=2;	; TOWN=3;	COUNTRYSIDE	Ξ=4				
HOUSEHOLD SELECTEI	FOR MALE	SURVEY (Y	ES=1, NO=2)					
*SMALL CITIES ARE IRINGA, N				OOMA, MOSHI, T AN AREAS ARE T				
	INTE	ERVIEWER V	ISITS					
	1	2	3	FINAL VISIT				
DATE				DAY				
			:	MONTH				
				YEAR 9	6			
INTERVIEWER'S NAME				ID NO.				
RESULT*				RESULT				
NEXT VISIT: DATE TIME				TOTAL NUMBER OF VISITS				
* RESULT CODES: 1 COMPLETED	EMPLID AM IX		OMPEREN	TOTAL IN HOUSEHOLD				
2 NO HOUSEHOLD MI RESPONDENT AT I 3 ENTIRE HOUSEHOL	HOME AT TIM	ME OF VISI	Г	TOTAL ELIG				
4 POSTPONED 5 REFUSED 6 DWELLING VACAN		ss not a di	WELLING	TOTAL ELIG				
7 DWELLING DESTRO 8 DWELLING NOT FO		FY)		LINE NO.OF RESP. TO HOUSEHOLD				
SUPERVISOR		FIELD EDI	TOR (	DFF.EDIT. KEY	ED BY			
NAME	NAME_		- [ ]					
DATE	└──   DATE			` <u> </u>				

 $\frac{ \text{HOUSEHOLD SCHEDULE}}{\text{Now we would like some information about the people who usually live in your household or who are staying with you now.}$ 

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD*	RESI	DENCE	SEX	AGE		EDUCATION D 5 YEARS	OR OLDER	FOR PERS		HIP AND RESI HAN 15 YEARS		ELIGI- BILITY WOMEN	HUSBAND LINE NUMBER	ELIGI- BILITY MEN
(1)	your household and guests of the household who stayed here last night, starting with the head of the household.	What is the relationship of (NAME) to the head of the household?	(NAME) usually live here?	here last night?	: 1		Has (NAME) ever been to school?	school (NAME) complet- ed?	IF AGED LESS THAN 25 YEARS Is (MAME) still in school?	mother alive?	Does (MAME)'s natural mother live in this house-hold? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER	Is (NAME)'s natural father alive?	Does (NAME)'s natural father live in this house-hold? If YES: What is his name? RECORD FATHER'S LINE NUMBER	WOMEN AGED 15-49	WRITE LINE NUMBER OF THE HUSBAND OF EACH ELIGIBLE WOMAN WRITE OO IF NOT MARRIED OR IF HUSBAND HOUSE- HOLD.	(IF HOUSE- HOLD FALLS IN MALE SAMPLE)
<u> </u>	(2)	(3)	(4) YES NO	(5) YES NO	(6) M F	(7)	(8)	(9)	(10)	(11) YES NO DK	(12)	(13) YES NO DK	(14)	(15)	(16)	(17)
01			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		01		01
02			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		02		02
03			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		03		03
04			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		04		04
05			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		05		05
06			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		06		06
07			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		07		07
08			1 2	1 2	1 2		1 2		1 2	128		1 2 8		08		08

#### HOUSEHOLD SCHEDULE CONTINUED

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
			YES NO	YES NO	H F	IN YEARS	YES NO	1	YES NO	YES NO DK		YES NO DK	1		_	•
09			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		11		11
10			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		12		12
11			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		13		13
12			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		14		14
13			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		15		15
14			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		16		16
15			1 2	1 2	1 2		1 Z		1 2	1 2 8		1 2 8		17		17
16			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		18		18
17			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		19		19
18			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		20		20
TIC	HERE IF CONTINUATION	SHEET USED														
Just	to make sure that I	have a comple	te listi	ng:											_	
1)	Are there any other p	persons such	as smali	childre	n or in	fants that	we have	not list	ed?	YES	→ ENTER EA	CH IN TABLE		NO		
2)	In addition, are then as domestic servants,						your fam	ily, such	1	YES	→ ENTER EA	CH IN TABLE		NO		
3)	Do you have any guest here last night?	ts or tempora	ry visit	ors stay	ing here	e, or a <b>nyo</b>	ne else i	who slept	: 	YES	→ ENTER EA	CH IN TABLE		NO		
* COE	DES FOR Q.3, RELATIONS	HIP TO HEAD O	F HOUSEH	OLD:				**	CODES FOR	Q. 9, HIGHE	ST FORMAL	SCHOOL:				
02= 0 <b>3</b> =	HEAD WIFE OR HUSBAND SON OR DAUGHTER SON OR DAUGHTER-IN-LAW	05= GRAND 06= PAREN 07= PAREN W 08= BROTH	T T-IN-LAW		10= 0 11= <i>j</i>	CO-WIFE OTHER RELA ADOPTED/FO NOT RELATE (	STER CHII	01 LD 02 03	D= LESS THA  = STANDAR  P= STANDAR  S= STANDAR  S= STANDAR	0 2 06= 0 3 07=	DMPLETED  STANDARD  STANDARD  STANDARD  STANDARD	6 10= 1 7 11= 1 8 12= 1	FORM 1 FORM 2 FORM 3 FORM 4 FORM 5	15= U 96= 0	ORM 6 NIVERSITY THER ON'T KNOW	

<sup>\*\*\*</sup> QUESTIONS 12 AND 14: RECORD '00'IF THE NATURAL (BIOLOGICAL) PARENT IS NOT A MEMBER OF THE HOUSEHOLD.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
18	What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO HOUSE/YARD/PLOT	20
19	How long does it take to go there, get water, and come back?	NINUTES	
20	What kind of toilet facility does your household have?  IF FLUSH TOILET, ASK IF IT IS SHARED WITH ANOTHER HOUSEHOLD.	FLUSH TOILET OWN FLUSH TOILET	
21	Does your household have:	YES NO	ī
22	Electricity? A radio? A television? A refrigerator?  How many rooms in your household are used for sleeping?	ELECTRICITY	
			<u>.                                    </u>
23	MAIN MATERIAL OF THE FLOOR.  RECORD OBSERVATION.	NATURAL FLOOR	
24	Does any member of your household own:	YES NO	
	A bicycle? A motorcycle? A car?	BICYCLE	
25	Does your household always enough food to eat, or do you have sometimes or frequently have not enough food to eat?	ALWAYS ENOUGH	

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# UNITED REPUBLIC OF TANZANIA BUREAU OF STATISTICS, PLANNING COMMISSION TANZANIA DEMOGRAPHIC AND HEALTH SURVEY 2

#### WOMAN'S QUESTIONNAIRE

IDENTIFICATION						
NAME OF HOUSEHOLD	HEAD					
CLUSTER NUMBER						
HOUSEHOLD NUMBER						
REGION_						
DISTRICT						
WARD						
ENUMERATION AREA_	······································		·····			
LARGE CITY=1; SMAI	LL CITY*=2;	; TOWN≈3;	COUNTRYSIDE	Ξ=4		
NAME AND LINE NUME	BER OF WOMA	AN NA				
NAME AND LINE NUME	BER OF HUSI	BAND				
*SMALL CITIES ARE: IRINGA, M				OOMA, MOSHI AN AREAS ARI		
	II	NTERVIEWER	VISITS			
	1	2	3	FINAL V	ISIT	
DATE				DAY MONTH YEAR	9 6	
INTERVIEWER'S NAME				ID NO.		
RESULT*			] 	RESULT		
NEXT VISIT: DATE TIME				TOTAL NUMI	BER	
* RESULT CODES:  1 COMPLETED 4 REFUSED 7 OTHER  2 NOT AT HOME 5 PARTLY COMPLETED (SPECIFY)  3 POSTPONED 6 INCAPACITATED  TRANSLATOR USED (1=NOT AT ALL; 2=SOMETIME; 3=ALL THE TIME)						
SUPERVISOR		FIELD ED	TTOR	OFFICE	KEYED	
NAMEDATE	NAMI DATI	Ξ		EDITOR	BY	

#### SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME.	MORNING/AM1 HOURS	
102	First I would like to ask some questions about you and your household. For most of the time until you were 12 years old, did you live in Dar es Salaam city, another urban area or in a rural area?	DAR ES SALAAM	
103	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)?	YEARS	1 105
104	Just before you moved here, did you live in Dar es Salaam city, another urban area or in a rural area?	DAR ES SALAAM	
105	In what month and year were you born?	MONTH	
106	How old were you at your last birthday?  COMPARE AND CORRECT 105 AND/OR 106 IF INCONSISTENT.	AGE IN COMPLETED YEARS	
107	Can you read and write kiswahili easily, with difficulty, or not at all?	EASILY	109
108	How often do you read a newspaper?	EVERY DAY/ALMOST EVERY DAY	
109	Have you ever attended school?	YES	<u>→114</u>
110	What is the highest formal school you completed?	LESS THAN 1 YEAR	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES SK		
111	CHECK 106:  AGE 24 OR BELOW OR ABOVE		<b>-</b> ⊁114	
112	Are you currently attending school?	YES1 — NO	→114	
113	What was the main reason you stopped attending school?	GOT PREGNANT		
114	How often do you listen to the radio?	EVERY DAY/ALMOST EVERY DAY		
115	Do you usually watch television at least once a week?	YES		
116	What is your religion?	MOSLEM		
117	To which tribe do you belong?  IF NOT A TANZANIAN CITIZEN, WRITE NAME OF COUNTRY.			
118	CHECK Q.4 IN THE HOUSEHOLD QUESTIONNAIRE:  THE WOMAN INTERVIEWED THE WOMAN INTERVIEWED IS A USUAL RESIDENT  THE WOMAN INTERVIEWED IS A USUAL RESIDENT	MED	— <b>&gt;2</b> 01	
119	Now I would like to ask about the place in which you usually live. Do you usually live in Dar es Salaam city, another urban area or in a rural area?  IF CITY: In which city do you live?  (NAME OF CITY)	DAR ES SALAAM, LARGE CITY		
120	In which region is that located?  IF USUAL RESIDENCE IS OUTSIDE TANZANIA, WRITE COUNTRY.	REGION_	: [	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
121	Now I would like to ask about the household in which you usually live.  What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO HOUSE/YARD/PLOT	123
122	How long does it take to go there, get water, and come back?	MINUTES	
123	What kind of toilet facility does your household have?  IF FLUSH TOILET, ASK IF IT IS SHARED WITH  ANOTHER HOUSEHOLD.	FLUSH TOILET OWN FLUSH TOILET	
124	Does your household have:  Electricity? A radio? A television? A refrigerator?	YES NO  ELECTRICITY	
125	Could you describe the main material of the floor of your home?	NATURAL FLOOR	
126	Does any member of your household own:  A bicycle?  A motorcycle?  A car?	YES NO BICYCLE	
127	Does your household always enough food to eat, or do you have sometimes or frequently have not enough food to eat?	ALWAYS ENOUGH	

#### SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Now I would like to ask about all the births you have had during your life. Have you ever given birth?	YES1 NO2 —	→206
202	Do you have any sons or daughters to whom you have given birth who are now living with you?	YES	204
203	How many sons live with you?  And how many daughters live with you?  IF NONE RECORD '00'.	SONS AT HOME	
204	Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	YES	→206
205	How many sons are alive but do not live with you?  And how many daughters are alive but do not live with you?  IF NONE RECORD '00'.	SONS ELSEWHERE	
206	Have you ever given birth to a boy or a girl who was born alive but later died?  1F NO,  PROBE: Any baby who cried or showed signs of life but survived only a few hours or days?	YES	→208
207	How many boys have died?  And how many girls have died?  IF NONE RECORD '00'.	BOYS DEAD	
208	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL.  IF NONE RECORD '00'.	TOTAL	
209	CHECK 208:  Just to make sure that I have this right: you have had in TOTAL births during your life. Is that correct?  PROBE AND CORRECT YES NO 201-208 AS NEEDED		
210	CHECK 208:  ONE OR MORE NO BIRTHS BIRTHS		<b>→</b> 226

212	213	214	215	216	217 IF ALIVE:	218 IF ALIVE	219 IF DEAD:	220	221
What name was given to your (first/next) baby? (NAME)	Were any of these births twins?	Is (NAME) a boy or a girl?	In what month and year was (NAME) born?  PROBE: What is his/ her birthday? OR: In what season was he/she born?	Is (NAME) still alive?	How old was (NAME) at his/her last birthday? RECORD AGE IN COMPLETED YEARS.	Is (NAME) (fying with you?	How old was (NAME) when he/she died?  IF '1 YR.', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	FROM YEAR OF BIRTH OF (NAME) SUBTRACT YEAR OF PREVIOUS BIRTH. IS THE DIFFERENCE 4 OR MORE?	Were there any other live births between OF PREVIOUS BIRTH and (NAME)
01	SING1	BOY1	MONTH.	YES1	AGE IN	YES1-	DAYS1		
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2-	MONTHS2		
		l		     219		(NEXT ◀	YEARS3		
02	SING1	BOY1	MONTH	YES1	AGE IN	YES17	DAYS1	YES1	YES1
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2	MONTHS2	NO2	NO2
				219		(GO TO∢ 220)	YEARS3	(NEXT ∢ BIRTH)	
03	SING1	BOY1	MONTH	YES1	AGE IN	YES17	DAYS1	YES1	YES1
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2	MONTHS2	NO2	NO2
				219		(GO TO→ 220)	YEARS3	(NEXT → BIRTH)	
04	SING1	BOY1	MONTH	YES1	AGE IN	YES1 <sub>7</sub>	DAYS1	YES1	YES1
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2-	MONTHS2	NO2	NO2
				219		(GO TO∢- 220)	YEARS3	(NEXT ∢ BIRTH)	
05	SING1	BOY1	MONTH	YES1	AGE IN	YES17	DAYS1	YES1	YES1
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2-	MONTHS2	NO2	NO2
				219		(GO TO₄ 220)	YEARS3	(NEXT → BIRTH)	
06	SING1	BOY1	MONTH	YES1	AGE IN	YES17	DAYS1	YES1	YES1
İ	MULT.,2	GIRL2	YEAR	NO2	YEARS	NO2-	MONTHS,.2	NO2	NO2
				219		(GO TO∢ 220)	YEARS3	(NEXT ◀ BIRTH)	
07	SING1	воү1	MONTH	YES1	AGE IN	YES17	DAYS1	YES1	YES1
	MULT2	GIRL2	YEAR	NO2	YEARS	NO2-	MONTHS2	NO2	NO2
	į			¥ 219		(GO TO∢ 220)	YEARS3	(NEXT +	

212	213	214	215	216	217 IF ALIVE:	218 IF ALIVE	219 IF DEAD:	220	221
What name was given to your next baby?	Were any of these births twins?	Is (NAME) a boy or a girl?	In what month and year was (NAME) born?  PROBE: What is his/her birthday? OR: In what season was he/she born?	Is (NAME) still slive?	How old was (NAME) at his/her last birthday? RECORD AGE IN COMPLETED YEARS.	Is (NAME) (iving With you?	How old was (NAME) when he/she died?  IF '1 YR.', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	FROM YEAR OF BIRTH OF (NAME) SUBTRACT YEAR OF PREVIOUS BIRTH.  IS THE DIFFERENCE 4 OR MORE?	Were there any other live births between (NAME OF PREVIOUS BIRTH) and NAME)?
80	SING1	80Y1	MONTH	YES1 NO2	AGE IN YEARS	YES1 <sub>]</sub> NO2- (GO TO∢- 220)	DAYS1 MONTHS2 YEARS3	YES1 NO2 (NEXT 4) BIRTH)	YES1
09	SING1 MULT2	BOY1	MONTH	YES1 NO2	AGE IN YEARS	YES1- NO2- (GO TO- 220)	DAYS1 MONTHS2 YEARS3	YES1 NO2 (NEXT 4) BIRTH)	YES1
10	SING1	BOY1	MONTH	YES1 NO2	AGE IN YEARS	YES1 <sub>1</sub> NO2- (GO TO∢ <sup>J</sup> 220)	DAYS1  MONTHS2  YEARS3	YES1 NO2 (NEXT 4 BIRTH)	YES1
11]	SING1	BOY1	MONTH	YES1 NO2	AGE IN YEARS	YES1 NO2- (GO TO-	DAYS1 MONTHS2 YEARS3	YES1 NO2 (NEXT 4 BIRTH)	YES1
12	SING1	BOY1	MONTH	YES1 NO2	AGE IN YEARS	YES1 <sub>7</sub> NO2- (GO TO-4- 220)	DAYS1 MONTHS2 YEARS3	YES1  NO2  (NEXT 4  BIRTH)	YES1
222 FROM Y	EAR OF IN	TERVIEW SUE	STRACT YEAR OF LA	AST BIRTH.			YES	1 → G	O TO 223
IS THE	DIFFERENC	CE 4 YEARS	OR MORE?				NO	2 —→G	0 TO 224
223   Have )	ou had any	/ live birt	ths since the bir	th of (N/	ME OF LAST	BIRTH)?		YES	
224 COMPAR	F 20R UITI	NUMBED OF	RIRTHS IN HISTO	DRY AROVE	AND MAPK.	<u></u>		NO	
SWITE PO	224 COMPARE 208 WITH NUMBER OF BIRTHS IN HISTORY ABOVE AND MARK:  NUMBERS  ARE SAME  DIFFERENT  (PROBE AND RECONCILE)								
	CHECK: FOR EACH BIRTH: YEAR OF BIRTH IS RECORDED.  FOR EACH LIVING CHILD: CURRENT AGE IS RECORDED.  FOR EACH DEAD CHILD: AGE AT DEATH IS RECORDED.  FOR AGE AT DEATH 12 MONTHS OR 1 YR.: PROBE TO DETERMINE EXACT NUMBER OF MONTHS.								
	215 AND EN		JMBER OF BIRTHS S	SINCE JANU	JARY 1991.				

253

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES SKIP
226	Are you pregnant now?	YES
227	How many months pregnant are you?  RECORD NUMBER OF COMPLETED MONTHS.	MONTHS
228	At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any more children at all?	THEN
229	When did your last menstrual period start?  (DATE, IF GIVEN)	DAYS AGO
230	Between the first day of a woman's period and the first day of her next period, are there certain times when she has a greater chance of becoming pregnant than other times?	YES
231	During which times of the monthly cycle does a woman have the greatest chance of becoming pregnant?	DURING HER PERIOD

#### SECTION 3. CONTRACEPTION

Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy. CIRCLE CODE 1 IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 302, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED, AND CODE 3 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN 301 OR 302, ASK 303.

301	Which ways or methods have you heard about?	SPONTANEOUS YES	302 Have you heard of ( PROBED YES		303 Have you ever used (METHOD)?
	PILL Women can take a pill every day.	1	2	3-7	YES1 NO2
	IUD Women can have a loop or coil placed inside them by a doctor or a nurse.	1	2	3	YES1
	INJECTIONS Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months.	1	2	3	YES1
	IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1	2	3-7	YES1
	DIAPHRAGM,FOAM,JELLY Women can place a sponge, suppository, diaphragm, jelly, or cream inside themselves before intercourse.	1	2	3¬	YES1 NO2
	CONDOM, RUBBER, RAINCOAT, DUREX A man can wear a rubber bag on his penis during sex to prevent pregnancy. The rubber bag is also used to prevent passing diseases such as AIDS and for cleanliness.	1	2	37	YES1 NO2
	FEMALE STERILIZATION Women can have an operation to avoid having any more children.	1	2	3	Have you ever had an operation to svoid having any more children? YES
	MALE STERILIZATION Men can have an operation to avoid having any more children.	1	2	3-7	Have you ever had a partner who had an operation to avoid having children? YES
1	CALENDAR/SAFE PERIOD Couples can have sexual intercourse only during the safe period of the monthly cycle that is the times during monthly cycle when women is least likely to get pregnant.	1	2	3	YES1 NO2
	MUCUS METHOD A woman can observe daily the state of the mucus and avoid sexual intercourse at the time when the mucus is colorless and extremely elaastic.	1	2	<b>√</b> -	YES1
	WITHDRAWAL Men can be careful and pull out before climax.	1	2	▼ ·	YES1 NO2
	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	) (SPECIFY	<del>)</del>	3	YES1 NO2
		(SPECIF	<u>Y)</u>		YES1
304	CHECK 303:  MOT A SINGLE  "YES"  "YES"  (NEVER USED)  (EVER USED)	su └─┴			→SKIP TO 307

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
305	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	YES	→330
306	What have you used or done?  CORRECT 303 AND 304 (AND 302 IF NECESSARY).		
307	Now I would like to ask you about the first time that you did something or used a method to avoid getting pregnant. How many living children did you have at that time, if any?  IF NONE, RECORD '00'.	NUMBER OF CHILDREN	
308	CHECK 303: WOMAN NOT WOMAN STERILISED STERILISED	,	- <b>→</b> 311A
309	CHECK 226:  NOT PREGNANT OR UNSURE  PREGNAN		<b>-</b> →331
310	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES1 NO2	→330
311 311A	Which method are you using?  CIRCLE '07' FOR FEMALE STERILISATION.	PILL	
312	May I see the package of pills you are now using?  RECORD NAME OF BRAND IF PACKAGE IS SEEN.	PACKAGE SEEN	->314
313	Do you know the brand name of the pills you are now using?  RECORD NAME OF BRAND.	BRAND NAME  DOES NOT KNOW	
314	How much does one packet (cycle) of pills cost you?	FREE	
315	When was the last time you took a pill?	MORE THAN ONE MONTH AGD97	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
316	CHECK 315:  MORE THAN 2 DAYS AGO THO DAYS AGO OR L	ESS	<b>→</b> 318
317	V Why aren't you taking the pill these days?	HUSBAND AWAY	
318	Just about everyone forgets to take a pill sometime. What do you do when you forget to take a pill for two days in a row?	START TAKING AGAIN AS USUAL	<b>1</b> →324
319	Where did the sterilisation take place?  IF SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)	GOVERNMENT AND PARASTATAL REGIONAL/CONSULTANT HOSPITAL	
320	Do you regret that (you/your husband) had the operation not to have any (more) children?	YES1 NO2	→322
321	Why do you regret the operation?	RESPONDENT WANTS ANOTHER CHILD	
322	In what month and year was the sterilisation performed?	MONTH	→ <b>3</b> 25
323	You said that you have avoided having sexual intercourse on certain days of the month to avoid getting pregnant.  How do you determine which days of your monthly cycle not to have sexual relations?	BASED ON CALENDAR	
324	For how many months have you been using (METHOD) continuously?  IF LESS THAN 1 MONTH, RECORD '00'.	MONTHS	
	1		1

HOM 11

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
325	CHECK 311: CIRCLE METHOD CODE:	PILL	→328A →331
326	Where did you obtain (METHOD) the last time?  IF SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)	GOVERNMENT AND PARASTATAL REGIONAL/CONSULTANT HOSPITAL	
327	Who obtained/helped to have the contraceptive?	HERSELF	
328 328A	Do you know another place where you could have obtained (METHOD) the last time?  At the time of the sterilisation operation, did you know another place where you could have received the operation?	YES1 ¬ NO2 ¬	       
329	People select the place where they get family planning services for various reasons.  What was the main reason you went to (NAME OF PLACE IN Q.319 OR Q.326) instead of the other place you know about?	ACCESS-RELATED REASONS CLOSER TO HOME	→333

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
3 <b>3</b> 0	What is the main reason you are not using a method of contraception to avoid pregnancy?	NOT MARRIED11	
		FERTILITY-RELATED REASONS   NOT HAVING SEX	
		OPPOSITION TO USE RESPONDENT OPPOSED	
		LACK OF KNOWLEDGE KNOWS NO METHOD41 KNOWS NO SOURCE42	
		METHOD-RELATED REASONS HEALTH CONCERNS	
		OTHER 96  (SPECIFY)  DOES NOT KNOW	
331	Do you know of a place where you can obtain a method of family planning?	YES	3333
332	Where is that?  If SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITAL	
		(SPECIFY)	
333	Were you visited by a family planning program worker in the last 12 months?	YES	
334	Have you visited a health facility in the last 12 months for any reason?	YES1 NO2	335A
335	Did anyone at the health facility speak to you about family planning methods?	YES	
•			<del></del>

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
335A	Have you seen or heard of the Green Star Logo (Symbol)?	YES	→336
3358	What does the Green Star Logo mean to you?	FAMILY PLANNING RELATED	
335C	How did you learn about the Green Star? CIRCLE ALL MENTIONED.	BILLBOARDS	
336	Some women think that breastfeeding can affect their chance of becoming pregnant. Do you think a woman's chance of becoming pregnant is <u>increased</u> , <u>decreased</u> , or <u>not affected</u> by breastfeeding?	INCREASED	¥401   
337	CHECK 210:  ONE OR MORE BIRTHS  NO BIRTHS	·	→401
338	Have you ever relied on breastfeeding as a method of avoiding pregnancy?	YES1 NO2 —	→401 L
339	CHECK 226 AND 308:  NOT PREGNANT OR UNSURE EITHER PRESENTED STERILISED STERILISED	REGNANT OR	<b>→</b> 401
340	Are you currently relying on breastfeeding to avoid getting pregnant?	YES	

#### SECTION 4A. PREGNANCY AND BREASTFEEDING

401	CHECK 225 : ONE OR MORE LIVE BIRTHS SINCE JAN. 1991	NO LIVE BIRTHS SINCE JAN. 1991	□_> (SKIP TO 465)				
402	ENTER THE LINE NUMBER, NAME, AND SURVIVAL STATUS OF EACH BIRTH SINCE JANUARY 1991 IN THE TABLE.  ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. (IF THERE ARE MORE THAN 3 BIRTHS, USE ADDITIONAL FORMS).						
	Now I would like to ask you some more questions about the health of children you had in the past five years. We will talk about one child at a time.						
403	LINE NUMBER FROM Q. 212						
		LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH			
404	FROM Q. 212	NAME	NAME	NAME			
	AND Q. 216	ALIVE Y DEAD Y	ALIVE U DEAD	ALIVE Y DEAD Y			
405	At the time you became pregnant with (NAME), did you want to become	THEN1	(SKIP TO 407)<	THEN1 (SKIP TO 407)<			
	pregnant then, did you want to wait until later or did you want no more children at all?	LATER	LATER	LATER			
406	How much longer would you like to have waited?	MONTHS	MONTHS1 YEARS2 DON'T KNOW998	MONTHS1 YEARS2 DON'T KNOW			
407	When you were pregnant with (NAME), did you see anyone for antenatal care for this pregnancy?  If YES: Whom did you see? Anyone else?  PROBE FOR THE TYPE OF PERSON	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB MURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAINED BIRTH ATTENDANTF TRADITIONAL BIRTH ATTENDANTG	TRADITIONAL BIRTH ATTENDANT	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB NURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAINED BIRTH ATTENDANTF TRADITIONAL BIRTH ATTENDANTG OTHERX			
	AND RECORD ALL PERSONS SEEN.	NO ONEY	(SKIP TO 410)	ND ONEY			
408	How many months pregnant were you when you first received antenatal care?	MONTHS	MONTHS	MONTHS			
409	How many times did you receive antenatal care during this pregnancy?	NO. OF TIMES	NO. OF TIMES	NO. OF VISITS			

		NAME _	LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH NAME
410	When you were pregnant with (NAME) were you given an injection in the arm to prevent the baby from getting tetanus, that is, convulsions after birth?	NO			(SKIP TO 412)<
411	During this pregnancy, how many times did you get this injection?	1		DON'T KNOW8	TIMES
412	Where did you give birth to (NAME)?	OTHER HO GOVERNMEN HOSPITAL HEALTH C DISPENSA PARASTAT OTHER PU PRIVATE S RELIGIOU PRIVATE	(SPEC1FY)	HOME YOUR HOME	HOME YOUR HOME
		OTHER		(SPECIFY) 36 OTHER 36 (SPECIFY)	(SPECIFY)  OTHER
412A	CHECK 412 (11 OR 12) DELIVERED AT HOME	DELIVE AT HOM	NOT DELIVERED ERED AT HOME	DELIVERED AT HOME AT HOME	NOT DELIVERED DELIVERED AT HOME AT HOME V
412B	Why did you deliver (NAME) at home?	TOO EXPENSERVICE NOT COULD NOT ON OTHER REA	NSIVE AT OUTSIDE2 NOT AVAILABLE3 KNOW WHERE TO GO.4 T REACH CLINIC TIME5	PREFERRED AT HOME	TOO EXPENSIVE AT OUTSIDE2
413	Who assisted with the delivery of (NAME)? Anyone else?  PROBE FOR THE TYPE OF PERSON AND RECORD ALL PERSONS ASSISTING.	DOCTOR/M RURAL ME NURSE/MI MCH AIDE OTHER PER VILLAGE TRAINED TRADITIO ATTENDA	ROFESSIONAL MEDICAL ASSTA EDICAL AIDEB IDWIFEC ED RSON HEALTH WORKERE BIRTH ATTENDANTF OMAL BIRTH ANTG RS/RELATIVESH  (SPECIFY)	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB NURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAINED BIRTH ATTENDANTF TRADITIONAL BIRTH ATTENDANTG NEIGHBORS/RELATIVESH OTHERX	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB NURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAINED BIRTH ATTENDANTF TRADITIONAL BIRTH ATTENDANTG NEIGHBORS/RELATIVESH OTHERX
		NO ONE	Y	NO ONEY	NO ONEY

		LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH NAME
414	Around the time of the birth of (NAME), did you have any of the following problems:	YES NO	YES NO	YES NO
	Long labor, that is, did your regular contractions last more than 12 hours?	LABOR MORE THAN 12 HOURS1 2	LABOR MORE THAN 12 HOURS1 2	LABOR MORE THAN 12 HOURS1 2
	Excessive bleeding that was so much that you feared it was life threatening?	EXCESSIVE BLEEDING	EXCESSIVE BLEEDING1 2	EXCESSIVE BLEEDING1 2
	A high fever with bad smelling vaginal discharge?	FEVER/BAD SMELLING VAG. DISCHARGE1 2	FEVER/BAD SMELLING VAG. DISCHARGE1 2	FEVER/BAD SMELLING VAG. DISCHARGE1 2
	Convulsions not caused by fever?	CONVULSIONS	CONVULSIONS	CONVULSIONS
414A	CHECK 412 (11 OR 12) DELIVERED AT HOME	NOT DELIVERED DELIVERED AT HOME AT HOME V (SKIP TO 416)	NOT DELIVERED DELIVERED AT HOME AT HOME V (SKIP TO 416)	NOT DELIVERED DELIVERED AT HOME AT HOME V (SKIP TO 416)
415	Was (NAME) delivered by caesarian section?	YES	YES	YES
416	When (NAME) was born, was he/she: very large, larger than average, average, smaller than average, or very small?	VERY LARGE	VERY LARGE	VERY LARGE
417A	Was (NAME) weighed at birth?	YES	YES	YES
417B	How much did (NAME) weigh?	GRAMS FROM CARD1	GRAMS FROM CARD1	GRAMS FROM CARD1
	RECORD WEIGHT FROM HEALTH CARD, IF AVAILABLE	GRAMS FROM RECALL2  DON'T KNOW99998	GRAMS FROM RECALL2 DON'T KNOW	GRAMS FROM RECALL2 DON'T KNOW
418A	Did you see anyone for pospartum care within six weeks after delivery of (NAME)?	YES	YES	YES
418B	Who provided the postnatal care? Anyone else?	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB NURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAINED BIRTH ATTENDANTF	HEALTH PROFESSIONAL  DOCTOR/MEDICAL ASSTA  RURAL MEDICAL AIDEB  NURSE/MIDWIFEC  MCH AIDED  OTHER PERSON  VILLAGE HEALTH WORKERE  TRAINED BIRTH ATTENDANT.F	HEALTH PROFESSIONAL DOCTOR/MEDICAL ASSTA RURAL MEDICAL AIDEB NURSE/MIDWIFEC MCH AIDED OTHER PERSON VILLAGE HEALTH WORKERE TRAIMED BIRTH ATTENDANT.F
	PROBE FOR THE TYPE OF PERSON AND RECORD ALL PERSONS CONSULTED.	TRADITIONAL BIRTH ATTENDANT	TRADITIONAL BIRTH ATTENDANT	TRADITIONAL BIRTH ATTENDANT
419	Hes your period returned since the birth of (NAME)?	YES1 (SKIP TO 421)<————————————————————————————————————		

		NAME LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH NAME
420	Did your period return between the birth of (NAME) and your next pregnancy?		YES	YES
421	For how many months after the birth of (NAME) did you not have a period?	MONTHS	MONTHS	MONTHS,
422	CHECK 226:	NOT PREGNANT PREGNANT OR UNSURE		
	RESPONDENT PREGNANT?			
423	Have you resumed sexual relations since the birth of (NAME)?	YES		
424	For how many months after the birth of (NAME) did you not have sexual relations?	MONTHS	MONTHS	MONTHS
425	Did you ever breastfeed (NAME)?	YES	YES	YES
426	How long after birth did you first put (NAME) to the breast?  IF LESS THAN 1 HOUR, RECORD '00'.  IF LESS THAN 24 HOURS, RECORD HOURS.  OTHERWISE, RECORD DAYS.	IMMEDIATELY	IMMEDIATELY	IMMEDIATELY000 HOURS1 DAYS2
427	CHECK 404: CHILD ALIVE?	ALIVE DEAD CONTROL (SKIP TO 429)	ALIVE DEAD (SKIP TO 429)	ALIVE DEAD CONTROL (SKIP TO 429)
428	Are you still breastfeeding (NAME)?	YES2 (SKIP TO 432)<——2 NO2	YES	
429	For how many months did you breastfeed (MAME)?	MONTHS	MONTHS	MONTHS
		DON'T KNOW98	DON'T KNOW98	DON'T KNOW98
430	Why did you stop breastfeeding (NAME)?	MOTHER ILL/WEAK	MOTHER ILL/WEAK	MOTHER ILL/WEAK

₩0M 18

		LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH
431	CHECK 404:	ALIVE DEAD	ALIVE DEAD	ALIVE DEAD
	CHILD ALIVE?		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		│ (GO BACK TO 405 ▼ IN NEXT	(GO BACK TO 405)	(GO BACK TO 405 ✓ IN NEXT
		(SKIP TO 434) COLUMN OR, IF NO MORE	(SKIP TO 434) COLUMN OR, IF NO MORE	(SKIP TO 434) COLUMN OR, IF NO MORE
		BIRTHS, GO TO 440)	BIRTHS, GO TO 440)	BIRTHS, GO TO 440)
432	How many times did you breastfeed last night between sunset and sunrise?	NUMBER OF NIGHTIME FEEDINGS	NUMBER OF NIGHTIME FEEDINGS.	
	IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER.			
433	How many times did you breastfeed yesterday during the daylight hours?	NUMBER OF DAYLIGHT FEEDINGS.	NUMBER OF DAYLIGHT FEEDINGS	
l	IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER.			
434	Did (NAME) drink anything from a bottle with a nipple yesterday or last night?	YES	YES	YES
435			JOHN KNOWITTING	- KROBIIII
455	or last night was (NAME) given any of the following?:			
	Plain water?	YES NO DK PLAIN WATER1 2 8	YES NO DK PLAIN WATER1 2 8	YES NO DK PLAIN WATER1 2 8
	Sugar water?	SUGAR WATER 1 2 8	SUGAR WATER 2 8	SUGAR WATER1 2 8
	Juice?	JUICE 2 8	JUICE 1 2 8	JUICE 2 8
	Beby formula?	BABY FORMULA1 2 8	BABY FORMULA1 2 8	BABY FORMULA1 2 8
	Cow's milk?	FRESH MILK 1 2 8	FRESH MILK 2 8	FRESH MILK 1 2 8
	Any other liquids?	OTHER LIQUIDS1 2 8	OTHER LIQUIDS1 2 8	OTHER LIQUIDS1 2 8
	Ugali, uji or other food from rice, wheat or maize?	FOOD MADE FROM RICE/WHEAT/MAIZE.1 2 8	FOOD MADE FROM RICE/WHEAT/MAIZE.1 2 8	FOOD MADE FROM RICE/WHEAT/MAIZE.1 2 8
	Any green vegetables?	GREEN VEGETABLES1 2 8	GREEN VEGETABLES1 2 8	GREEN VEGETABLES1 2 8
	Any yellow food like yams, mangoes, paw paws or carots?	YELLOW FOOD - YAMS MANGOES1 2 8	YELLOW FOOD - YAMS MANGOES1 2 8	YELLOW FOOD - YAMS MANGOES1 2 8
	Egg, fish or poultry?	EGG/FISH/POULTRY1 2 8	EGG/FISH/POULTRY1 2 8	EGG/FISH/POULTRY1 2 8
	Meat?	MEAT1 2 8	MEAT 1 2 8	MEAT1 2 8
	Any other solid or semi-solid food?	OTHER SOLID/ SEMI-SOLID FOOD1 2 8	OTHER SOLID/ SEMI-SOLID FOOD1 2 8	OTHER SOLID/ SEMI-SOLID FOOD1 2 8
436	CHECK 435 : FOOD OR LIQUID GIVEN YESTERDAY?	"YES" TO "NO/DK" TO ONE OR ALL TO MORE	"YES" TO "NO/DK" TO ONE OR ALL MORE	"YES" TO "NO/DK" TO ONE OR ALL MORE
		(SKIP TO 439)	(SKIP TO 439)	(SKIP TO 439)
437	(Aside from breastfeeding) how meny times did (NAME) eat yesterday, including both	NUMBER OF TIMES	NUMBER OF TIMES	NUMBER OF TIMES
	meals and snacks? IF 7 OR MORE TIMES, RECORD '7'	DON'T KNOW8	DON'T KNOW8	DON'T KNOW8
439		GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 440.	GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 440.	GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 440.

### SECTION 4B. IMMUNIZATION AND HEALTH

440	ENTER THE LINE NUMBER, NAME, AND SURVIVAL STATUS OF EACH BIRTH SINCE JANUARY 1991 IN THE TABLE.  ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. (IF THERE ARE MORE THAN 3 BIRTHS, USE ADDITIONAL QUESTIONNAIRES).				
441	LINE NUMBER	LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH	
	FROM Q. 212	LINE	LINE	LINE.	
442	FROM Q. 212	NAME	NAME	NAME	
	AND Q. 216	ALIVE T DEAD T	ALIVE P DEAD P	ALIVE P DEAD P	
		(GO TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.)	(GO TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.)	(GO TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.)	
443	Do you have a card where (NAME'S) vaccinations are written down?	YES, SEEN	YES, SEEN	YES, SEEN17 (SKIP TO 445)<	
	IF YES: May I see it, please?	(SKIP TO 447)<	YES, NOT SEEN2 (SKIP TO 447)<	YES, NOT SEEN2 (SKIP TO 447)<	
	<u> </u>		NO CARD3		
444	Did you ever have a vaccination card for (NAME)?	YES	(SKIP TO 447)<	(SKIP TO 447)<	
445	(1) COPY VACCINATION DATES FOR EACH VACCINE FROM THE CARD.				
	(2) WRITE '44' IN 'DAY' COLUMN, IF CARD SHOWS THAT A VACCINATION WAS GIVEN, BUT NO DATE RECORDED.	DAY MO YR	DAY MO YR	DAY MO YR	
	BCG	BCG BCG	BCG	BCG	
	Polio O (at birth)	PO	PO	PO	
	Polio 1	P1	P1	P1	
	Polio 2	P2	P2	P2	
	Polio 3	P3	P3	P3	
	DPT1	D1	D1	D1	
	DPT2	D2	D2	02	
	DPT3	D3	D3	D3	
	MEASLES	MEA	MEA	MEA	
446	Has (NAME) received any vaccinations that are not recorded on this card?  RECORD 'YES' ONLY IF	YES	YES	YES1 (PROBE FOR VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 445)	
	RESPONDENT MENTIONS BCG, POLIO 0-3, DPT 1-3, AND/OR MEASLES VACCINATIONS.	NO	NO	NO2- DON'T KNOW8- (SKIP TO 449)<	
447	Did (NAME) ever receive any vaccinations to prevent him/her from getting diseases?	YES	YES	YES	

		LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH
		NAME	NAME	NAME
448	Please tell me if (NAME) (has) received any of the following vaccinations:			
448A	A BCG vaccination against tuberculosis, that is, an injection in the right shoulder that left a scar?	YES	YES	YES
448B	Polio vaccine, that is, drops in the mouth?	YES	YES	YES
448C	How many times?	NUMBER OF TIMES	NUMBER OF TIMES	NUMBER OF TIMES
448D	When was the first polio vaccine given, just after birth or later?	JUST AFTER BIRTH1 LATER2	JUST AFTER BIRTH1 LATER2	JUST AFTER BIRTH1 LATER2
448E	DPT vaccination, that is, an injection usually given at the same time as polio drops?	YES	YES	YES
448F	How many times?	NUMBER OF TIMES	NUMBER OF TIMES	NUMBER OF TIMES
448G	An injection against measles?	YES	YES	YES
449	Has (NAME) been ill with a fever at any time in the last 2 weeks?	YES	YES	YES
450	Has (NAME) been ill with a cough at any time in the last 2 weeks?	YES	YES	YES
451	When (NAME) had the illness with a cough, did he/she breathe faster than usual with short, fast breaths?	YES	YES	YES
452	Did you seek advice or treatment for the cough?	YES	YES	YES
453	Where did you seek advice or treatment?	GOVERNMENT AND PARASTATAL HOSPITALA HEALTH CENTREB	GOVERNMENT AND PARASTATAL HOSPITAL	GOVERNMENT AND PARASTATAL HOSPITALA HEALTH CENTREB
	Anyone else?	DISPENSARYC PARASTATAL HOSP/CLINICD VILLAGE HEALTH POST/	DISPENSARYC PARASTATAL HOSP/CLINICD VILLAGE HEALTH POST/	DISPENSARYC PARASTATAL HOSP/CLINICD VILLAGE HEALTH POST/
	RECORD ALL MENTIONED.	OTHER PUBLIC	OTHER PUBLIC	OTHER PUBLIC
		(SPECIFY)	(SPECIFY)	(SPECIFY)
		MEDICAL PRIVATE SECTOR RELIGIOUS ORG. HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STOREI OTHER PRIVATE MEDICAL	MEDICAL PRIVATE SECTOR RELIGIOUS ORG. HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STORE] OTHER PRIVATE MEDICAL	MEDICAL PRIVATE SECTOR RELIGIOUS ORG. HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STORE1 OTHER PRIVATE MEDICAL
		(SPECIFY)	(SPECIFY)	(SPECIFY)
		OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL	OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL	OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL
		OTHER X	OTHERX	OTHER X

		LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH
454	Has (NAME) had diarrhea (three or more watery stools) in the last two weeks?	YES	YES	YES
455	Was there any blood in the stools?	YES	YES	YES
456	On the worst day of the diarrhea, how many bowel movements did (NAME) have?	NUMBER OF BOWEL MOVEMENTS	NUMBER OF BOWEL MOVEMENTS	NUMBER OF BOWEL MOVEMENTS
457	Was he/she given the same amount to drink as before the diarrhea, or more, or less?	SAME	SAME	SAME
458	Was he/she given the same amount of food as before the diarrhea, or more, or less?	SAME	SAME	SAME
460	Was anything (else) given to treat the diarrhea ?	YES	YES	YES
461	What was given to treat the diarrhea?	FLUID FROM DRS PACKETA HOMEMADE SUGAR SALT SOLN.B ANTIBIOTIC PILL OR	FLUID FROM ORS PACKETA HOMEMADE SUGAR SALT SOLN.B ANTIBIOTIC PILL OR	FLUID FROM ORS PACKETA HOMEMADE SUGAR SALT SOLN.B ANTIBIOTIC PILL OR
i	Anything else?  RECORD ALL TREATMENTS  MENTIONED.	SYRUP	SYRUP	SYRUP
		OTHER X	OTHER X	OTHER X (SPECIFY)
462	Did you seek advice or treatment for the diarrhea?	YES	YES	NO
463	From whom or where did you seek advice or treatment? Anyone etse?	GOVERNMENT AND PARASTATAL HOSPITALA HEALTH CENTREB DISPENSARYC PARASTATAL HOSP/CLINICD	GOVERNMENT AND PARASTATAL HOSPITALA HEALTH CENTREB DISPENSARYC PARASTATAL HOSP/CLINICD	GOVERNMENT AND PARASTATAL HOSPITALA HEALTH CENTREB DISPENSARYC PARASTATAL HOSP/CLINICD
	RECORD ALL MENTIONED.	VILLAGE HEALTH POST/ WORKERE OTHER PUBLIC MEDICAL	VILLAGE HEALTH POST/ WORKERE OTHER PUBLIC MEDICAL	VILLAGE HEALTH POST/ WORKERE OTHER PUBLIC MEDICAL
		(SPECIFY) MEDICAL PRIVATE SECTOR RELIGIOUS ORG, HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STOREI OTHER PRIVATE MEDICAL	(SPECIFY) MEDICAL PRIVATE SECTOR RELIGIOUS ORG. HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STOREI OTHER PRIVATE MEDICAL	(SPECIFY)  MEDICAL PRIVATE SECTOR  RELIGIOUS ORG. HOSP/CLIN.G PRIVATE DOCTOR/HOSP/CLIN.H PHARMACY/MEDICAL STOREI  OTHER PRIVATE MEDICAL
		(SPECIFY) OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL OTHERX	(SPECIFY) OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL OTHERX	(SPECIFY) OTHER PRIVATE SECTOR TRADITIONAL PRACTIONERK NEIGHBORS/RELATIVESL OTHERX
464		GO BACK TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.	GO BACK TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.	GO BACK TO 442 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 465.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
465	When a child has diarrhea, should he/she be given less to drink than usual, about the same amount, or more than usual?	LESS TO DRINK	
466	When a child has diarrhea, should he/she be given less to eat than usual, about the same amount, or more than usual?	LESS TO EAT	
467	When a child is sick with diarrhea, what signs of illness would tell you that he or she should be taken to a health facility or health worker?  RECORD ALL MENTIONED.	REPEATED WATERY STOOLS	
468	When a child is sick with a cough, what signs of illness would tell you that he or she should be taken to a health facility or health worker?  RECORD ALL MENTIONED.	FAST BREATHING	
469	CHECK 461, ALL COLUMNS:		
, , , , , , , , , , , , , , , , , , ,	NO CHILD QUESTION A	RECEIVED ORS	→471
470	Have you ever heard of a special product called ORS you can get for the treatment of diarrhea?	YES	
471	Have you fallen sick during the last 4 weeks?	YES	480
472	What is the type of most recent illness?	FEVER	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
473	Where did you go for the last treatment?	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITAL	
474A	How long did it take to get there? (in minutes)	M1NUTES	
474B	How many kilometers did you travel?	KILOMETERS	
475	Is there another health facility nearer your home than the one you went for treatment?	YES	       
476	What is the main reason you didn't go to the closer facility?  CIRCLE ONE ONLY	WAS REFERRED HERE	
477	How do you rate the service you received from the facility where you went?	POOR	
478	How much did treatment cost you?	NO COST/EMPLOYER PAID00000 -	! →480
	i. Transport cost	TRANSPORT COST	
	ii. Clinic fee	CLINIC FEE	
	iii. Cost of drugs	COST OF DRUGS	
	iv. Other expenses	OTHER EXPENSES	<u> </u>
479	Do you think the cost was too high, fair or too low?	HIGH	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
480	Do you think that patients should be charged for each visit to raise funds for more drugs and other supplies for the facility?	YES	
481	Do you ever go to a facility where you have to pay?	YES1 - NO	
482	Why not?	TOO EXPENSIVE	<b></b> >501
483	How often do you visit a health facility where you have to pay?	RARELY	
484	For what service did you go there last time? CHOOSE ONE ONLY	CONSULTATION FOR ILLNESS	
		(SPECIFY) DOES NOT KNOW	<u> </u>

### SECTION 5. MARRIAGE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501	PRESENCE OF OTHERS AT THIS POINT.	YES NO  CHILDREN UNDER 10	
502	Are you currently married or living with a man?	YES, CURRENTLY MARRIED	
503	Have you ever been married or lived with a man?	YES	<b>I</b> →512
504	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED	>509
	Is your husband/partner living with you now or is he staying elsewhere?	LIVES WITH HER	
506	Does your husband/partner have any other wives besides yourself?	YES	1 <sub>509</sub>
507	Ноы many other wives does he have?	NUMBER	<b>→</b> 509
508	Are you the first, second,wife?	RANK	
509	Have you been married or lived with a man only once or more than once?	ONCE	
510	In what month and year did you start living with your (first) husband/partner?	MONTH	<b>→</b> 512
511	How old were you when you started living with him?	AGE	
512	CHECK 502:  MARRIED OR LIVING WITH A  NOT MARRIED AND NOT MARR		→515
513	Now I need to ask you some questions about sexual activity in order to gain a better understanding of some family planning issues.	DAYS AGO	
	When was the last time you had sexual intercourse with your husband?	MONTHS AGO	
		BEFORE LAST BIRTH996	
514	For that sexual intercourse, was a condom used?	YES	
515	Do you now have a regular partner (apart from your husband)? I mean someone with whom you have been having sex for about a year or more?	YES1 NO2	→517
516	How many such regular partners do you have (aside from your husband)?	NUMBER	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
516A	When was the last time you had sexual intercourse with the regular partner (other than your husband)?	DAYS AGO	
516B	For that sexual intercourse, was a condom used?	YES	
517	Have you had sexual intercourse with anyone (else) in the last 12 months? (I mean, with someone other than your husband or regular partner that you mentioned earlier?)	YES1 NG2 -	524
518	With how many different people have you had sexual intercourse in the last 12 months (apart from your husband or regular partners)?	NUMBER	
519	When was the last time you had sexual intercourse (apart from your husband/regular partner)?	DAYS AGO	
520	For that last sexual intercourse, did you receive money, gifts or favours in return for sex?	YES1 NG2	1
521	Was this person someone you had met before or someone you met for the first time?	MET BEFORE	
522	Was a condom used for that last sexual intercourse?	YES1 - NO	→524 
523	What was the main reason that you did not use a condom that time?		
524	CHECK 514, 516B OR 522:  CONDOMS USED WITH HUSBAND OR PARTNER(S)  UITH ANY ONE	IDOM	<b> </b> 
524A	Last time you used condom, where was that condom obtained?  IF SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITAL	
524B		NO2	1
525	Now think back to the past. How old were you when you had sexual intercourse for the first time?	NEVER HAD SEX	<b> </b> -→601
526	In the last four weeks, how many times have you had sexual intercourse?	NUMBER OF TIMES	

### SECTION 6. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	CHECK 311:  NEITHER STERILISED HE OR SHE STERI	LISED	<b>→</b> 612
602	NOT PREGNANT OR UNSURE  Now I have some questions about the future.  Would you like to have (a/another) child or would you prefer not to have any (more) children?  PREGNANT  Now I have some questions about the future.  After the child you are expecting, would you like to have another child or would you prefer not to have any more children?	HAVE (A/ANOTHER) CHILD	<b>→606</b>
603	CHECK 226:  NOT PREGNANT OR UNSURE  How long would you like to wait from now before the birth of (a/another) child?  PREGNANT  How long would you like to wait after the birth of the child you are expecting before the birth of another child?	AFTER MARRIAGE995	→606
604	CHECK 226:  NOT PREGNANT OR UNSURE  PREGNAN	T	→607
605	If you became pregnant in the next few weeks, would you be <u>happy</u> , <u>unhappy</u> , or would it <u>not matter</u> very much?	HAPPY	
606	CHECK 310: USING A METHOD?  NOT	ENTLY G	→612
607	Do you think you will use a method to delay or avoid pregnancy within the next 12 months?	YES	→609
608	Do you think you will use a method at any time in the future?	YES	<b>610</b>
609	Which method would you prefer to use?	PILL 01	→612

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
NO.	What is the main reason you think you will never use a method?	NOT MARRIED	→612
		LACK OF ACCESS/TOO FAR	
611	Would you ever use a method if you were married?	YES	İ
612	CHECK 216:  HAS LIVING CHILDREN  If you could go back to If you could choose the time you did not have any children and could children to have in choose exactly the number of children to have in your whole life, how many would that be?  PROBE FOR A NUMERIC RESPONSE.	OTHER96	614
613	How many of these children would you like to be boys and how many would you like to be girls?	NUMBER	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
614	In general, do you approve or disapprove of couples using a method to avoid getting pregnant?	APPROVE	<b>i</b> 1→617
615	Have you ever recommended family planning to a friend, relative, or anyone else?	YES	1
616	If you wanted to get information on family planning, who would you like to talk to most:		1
	Family planning worker from your community? Health clinic staff? Traditional Birth Attendant (TBA)? Your husband or partner? Friend? Relative? Religious leader? Somebody else?	CBD WORKER	
617	Is it acceptable or not acceptable to you for information on family planning to be provided:	NOT Accept- Accept- Able able DK	
	On the radio? On the television?	RADIO	
618	In the last six months have you heard about family planning:	YES NO	
	On the radio? On the television? In a newspaper or magazine? From a poster? From billboards? At community events/logo launches From live drama? From a doctor or nurse? From a community health worker?	RADIO.	
619	In the past six months, what drama series have you listened to on the radio?  CIRCLE THE SERIES MENTIONED SPONTANEOUSLY. FOR SERIES NOT MENTIONED ASK,  In the 6 months, have you listened to (NAME OF SERIES)?	YES YES NO SPO- PRO- NTA- BED	
	Zinduka Twende na Wakati Ukweli Kuhusu Maisha Other	EOUS     2 3   3   1 2 3   3   1 2 3   3   1 2 3   3   3   3   3   3   3   3   3   3	i (
619A	CHECK 619:  LISTENED TO  ZINDUKA  LISTENED TO  LISTENED TO		+619E
619B	Ноы often do you listen to Zinduka?	TWICE A WEEK. 1 ONCE A WEEK. 2 ONCE OR TWICE A MONTH. 3 RARELY 4 DOES NOT KNOW. 8	
619C	As a result listening to Zinduka, did you do anything or take any any action related to family planning?	YES	      6198
619D	What did you do as a result of listening to Zinduka?	TALKED TO PARTNERA TALKED TO HEALTH WORKERB TALKED TO SOMEONE ELSEC	
i	RECORD ALL MENTIONED.	VISITED A CLINIC FOR FAMILY PLANN.D BEGAN USING A MODERN METHODE CONTINUED USING A MODERN METHODF	
		OTHER X  (SPECIFY)  DOES NOT KNOW	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
619E	CHECK 619: LISTENED TO HAS NOT LISTEN. TWENDE NA WAKAT! TWENDE NA WA		<b>620</b>
619F	How often do you listen to Twende na Wakati?	TWICE A WEEK	
620	In the last six months have you discussed family planning with your friends or relatives?	YES	622
621	With whom? Anyone else? RECORD ALL MENTIONED.	HUSBAND/PARTNER	
		(SPECIFY)	
622	CURRENTLY   LIVING WITH	NO, NOT IN A UNION	701
623	Spouses/partners do not always agree on everything. Now I want to ask you about your husband's/partner's views on family planning.		
	Do you think that your husband/partner approves or disapproves of couples using a method to avoid pregnancy?	APPROVES	
624	How often have you talked to your husband/partner about family planning in the past year?	NEVER	
625	Have you and your husband/partner ever discussed the number of children you would like to have?	YES	
626	Who mainly decides how many children should you have?	HERSELF	
627	Do you think your husband/partner wants the same number of children that you want, or does he want more or fewer than you want?	SAME NUMBER	

### SECTION 7. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	CHECK 502 AND 503  CURRENTLY MARRIED/ MARRIED/ MARRIED/ LIVED WITH MARRIED AND NEVER AND NEVER IN UNION	ER	703 1 708
702	How old was your husband/partner on his last birthday?	AGE	
703	Did your (last) husband/partner ever attend school?	YES	<b>I</b> →705
704	What is the highest formal school he completed?	LESS THAN 1 YEAR	
705	What is (was) your (last) husband/partner's occupation? That is, what kind of work does (did) he mainly do?		:
706	CHECK 705: WORKS (WORKED) IN AGRICULTURE  OUT WORK IN AGRICULTURE	RE	<b> </b> →708
707	(Does/did) your husband/partner work mainly on his own land or on family rent land, or borrow for share crop, government allocation, shifting cultivation land?	OWN LAND	
708	Aside from your own housework, are you currently working?	YES	710
709	As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business.  Are you currently doing any of these things or any other work?		801
710	Do you work for money for yourself, for someone else, or both?	HERSELF	720

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
711	How many employees are working for you?	NUMBER OF EMPLOYEES	
712	Do you work in agriculture, livestock, or poultry production?	YES	
713	Do you collect and sell wild products like honey, nuts, firewood, etc ?	YES1 NO2	
714	Do you process food products for sale like pombe?	YES1	
715	Do you engage in a craft or skilled work such as tailoring, making bricks, pottery, etc for money?	YES1 NO2	
716	Do you do any other work for yourself such as own a shop or driving a taxi? IF YES, specify	YES	
	(SPECIFY)		
717	CHECK 712		j
	WORKS IN DOES NOT WORK AGRICULTURE IN AGRICULTURE		719
718	Do you work mainly on your own land or on family rent land, or borrow for share crop, government allocation, shifting cultivation land?	OWN LAND	
719	CHECK 710 WORKS FOR SOMEONE ELSE OR BOTH HERSELF		723
720	You told me that you (also) work for someone else.	GOVERNMENT	J
	Do you work for the government, for a private business, or a semi-government (parastatal) organization, or for family/friend?	SEMI-GOVERNMENT	
721	Do you work in agriculture, I mean on a farm?	YES1 NO2	
722	Do you yourself receive money from the following:	YES NO	1
	Money from friends/relatives? Pension? Rent? Savings/Loans?	FRIENDS/RELATIVES	
723	CHECK 502:		1
	YES, CURRENTLY MARRIED OR LIVING WITH A MAN NOT IN UNION  Who mainly decides how the money you earn will be used: you, your husband/partner, you and your husband/partner jointly, or someone else?	RESPONDENT DECIDES	

### SECTION 8. AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	CHECK 302 (06):		i
	HAS HEARD OF CONDOMS NEVER H	EARD OF CONDOMS	<b> </b> →809
802	CHECK 303 (06), 514, 516B, AND 522	\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"	}
		S USED CONDOMS T LEAST ONE 'YES')	→804
803	Have you ever seen a condom?	YES1 NO2	
804	Do you know where you can get condoms?	YES1 NO2 -	806
805	Where can you get condoms?  CIRCLE ALL MENTIONED.  PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITALA  DISTRICT HOSPITALB  HEALTH CENTREC  DISPENSARY/PARASTATAL FACILITYD  VILLAGE HEALTH POST/WORKERE  MEDICAL PRIVATE SECTOR  RELIGIOUS ORG. FACILITYF  PRIV.DOCTOR/CLINIC/HOSPITALG  PHARMACY/MEDICAL STOREH  CBD WORKERI  OTHER PRIVATE SECTOR  SHOPJ  CHURCHK  FRIENDS/RELATIVES/NEIGHBORSL  OTHERX  OTHERX  (SPECIFY)  DOES NOT KNOWZ	
806	How many times can a condom be used?	ONCE	
808	In general, do you think that most women like men to use condoms, they don't like men to use condoms, or it does not matter?	LIKE MEN TO USE CONDOMS	
809	Have you heard about diseases that can be transmitte through sex?	d YES	         
810	Which diseases do you know?	SYPHILISA GONORRHOEAB AIDSC GENITAL WARTS/CONDYLOMATAD	
	(RECORD ALL DISEASES SHE MENTIONED)	OTHER X (SPECIFY) DON'T KNOWZ	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
811	CHECK 525:		1
	HAS HAD SEX	NEVER HAD SEX	<b> </b> >822
812	During the last 12 months, did you have any of these diseases (MENTIONED IN 0.810)?	YES	<b> </b>    -822
813	Which of the diseases did you have?	SYPHILISA GONORRHOEAB AIDSC GENITAL WARTS / CONDYLOMATAD	
	CIRCLE ALL MENTIONED.	OTHERX  (SPECIFY)  DON'T KNOW	
817	When you had this (DISEASE FROM Q.813) did you seek advice or treatment?	ADVICE /TREATMENT	819
818	Where did you seek advice or treatment?	GOVERNMENT AND PARASTATAL  CONSULTANT HOSPITAL A  REGIOMAL HOSPITAL B  DISTRICT HOSPITAL C  HEALTH CENTRE D  DISPENSARY E  PARASTATAL HEALTH FACILITY F  VILLAGE HEALTH POST/WORKER G	
	Any other place or person? RECORD ALL MENTIONED	MEDICAL PRIVATE SECTOR RELIGIOUS ORG. FACILITY	
818A	CHECK 502 AND 503 CURRENTLY FORMERLY MARRIED/ IN A UNION T	NEVER IN A UNION	822
819	Did you tell your husband/partner that you had (DISEASE(S) FROM 813)?	YES1 NO2	
820	When you had this (DISEASE(S) FROM 813) did you do something so as not to infect your partner?	YES	822
821	What did you do? CIRCLE ALL MENTIONED.	NO SEXUAL INTERCOURSE	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
822	CHECK 810:		I
	DID NOT MENTION AIDS MENTIONED OR QUESTION NOT ASKED	'AIDS'	→824
823	Have you ever heard of an illness called AIDS?	YES1 NO2—	901
824	From which sources of information have you learned about AIDS?	RADIO	
	Any other sources?  RECORD ALL MENTIONED.	HEALTH WORKERS. E MOSQUES/CHURCHES. F SCHOOLS/TEACHERS. G COMMUNITY MEETINGS. H FRIENDS/RELATIVES. I WORK PLACE. J OTHER X	
825	Is there anything a person can do to avoid getting AIDS or the virus that causes AIDS?	YES	827
826	What can a person do to avoid getting AIDS or the virus that causes AIDS?	DO NOT HAVE SEX AT ALLA USE CONDOMS DURING SEX	
	Any other ways? CIRCLE ALL MENTIONED	HOMOSEXUALS. D DO NOT HAVE MANY SEX PARTNERS. E HAVE ONLY ONE SEX PARTNERS. F AVOID BLOOD TRANSFUSIONS. G AVOID INJECTIONS. H DON'T HAVE CHILDREN. I AVOID KISSING. J AVOID MOSQUITO BITES. K SEEK PROTECTION FROM IRADITIONAL HEALER. L DO NOT DRINK TOO MUCH ALCOHOL. M OTHER X  (SPECIFY) DOES NOT KNOW. Z	
827	Do you think a person can protect themselves from getting AIDS by:	YES NO DK	
	having a good diet?	GOOD DIET 2 8	
	staying with one faithful partner?  avoid stepping on the urine or stool of a person with AIDS?	STAY WITH ONE PARTNER1 2 B	
	using condoms?	USE CONDOMS	]
i	avoiding touching a person who has AIDS?	DON'T TOUCH PERSON	
	not sharing eating utensils with a person with AIDS		į
	avoiding being bitten by mosquitos or other insects		
	making sure any injection they have is done with a clean needle?	INJECTION WITH CLEAN NEEDL 1 2 8	
828	Is it possible for a healthy-looking person to have the AIDS virus?	YES	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
829	Can AIDS be cured?	YES	
830	Can AIDS be transmitted from mother to child?	YES	<u> </u> 1→831
830A	How do you think that it can be transmitted?	DURING PREGNANCYA DURING DELIVERYB THROUGH BREASTFEEDINGC	
	CIRCLE ALL MENTIONED	OTHER X (SPECIFY) DOES NOT KNOWZ	<u> </u>
831	Does any member of your household have AIDS or has any member of your household died of AIDS?	YES	832
831A	Do you personally know someone who has AIDS or has died of AIDS?	YES	
832	Do you think your chances of getting AID\$ are small, moderate, great, or no risk at all?	SMALL	
833	Why do you think that you have (NO RISK/ A SMALL CHANCE) of getting AIDS?	MO SEXUAL INTERCOURSEA - NO SEX WITH PROSTITUTESB SLEEP ONLY WITH SPOUSE/PARTNERC USE CONDOMSD NO INJECTIONSE	]
	Any other reasons?  CIRCLE ALL MENTIONED	NO BLOOD TRANSFUSIONSF  OTHER X  (SPECIFY)  DOES NOT KNOWZ	
834	Why do you think that you have a (MODERATE/GREAT) chance of getting AIDS?	MULTIPLE PARTMERSA SEX WITH PROSTITUTESB SPOUSE HAS MULTIPLE PARTMERSC	
į	Any other reasons?	DO NOT USE CONDOMSD HAD INJECTIONSE HAD BLOOD TRANSFUSIONF	
	CIRCLE ALL MENTIONED	OTHER X  (SPECIFY)  DOES NOT KNOW	
834A	CHECK 811:		I
	HAS HAD SEX HAS NET	VER HAD SEX	838
835	Since you heard of AIDS, have you changed your sexual behaviour to prevent getting AIDS?	YES	837

₩OM 37

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
836	What did you do?  Anything else?  CIRCLE ALL MENTIONED	ONE PARTNER	838
837	Have you ever used a condom during sex to avoid getting or transmitting diseases, such as AIDS?	YES	
838	Have you ever been tested to see if you have the AIDS virus?	YES	       
839	Would you like to be tested for the AIDS virus?	YES	
840	Do you know a place where you could go to get an AIDS test?	YES	842
841 841a	Where could you go? Where did you go?	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITALA  DISTRICT HOSPITALB  HEALTH CENTREC  DISPENSARY/PARASTATAL FACILITYD  VILLAGE HEALTH POST/WORKERE  MEDICAL PRIVATE SECTOR  RELIGIOUS ORG. FACILITYF  PRIV.DOCTOR/CLINIC/HOSPITALG	
		PHARMACY/NEDICAL STOREH CBD WORKERI OTHER PRIVATE SECTOR SHOPJ CHURCHK FRIENDS/RELATIVES/NEIGHBOURSL OTHERX CSPECIFY) DOES NOT KNOWZ	
842	What do you suggest is the most important thing the government should do for people who have AIDS?	PROVIDE MEDICAL TREATMENT	
843	If a member of your family is suffering from AIDS would you be willing to care for him or her at home?	YES	

### SECTION 9. MATERNAL MORTALITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
901	Now I would like to ask you some questions about your brothers and sisters, that is, all of the children born to your natural mother, including those who are living with you, those living elsewhere and those who have died.  How many children did your mother give birth to, including you?	NUMBER OF BIRTHS TO NATURAL MOTHER	
902		Y ONE BIRTH ONDENT ONLY)	→1001
903	How many of these births did your mother have before you were born?	NUMBER OF PRECEDING BIRTHS	

904 What was the name given to your oldest (next oldest) brother or	[1]	(2)	[3]	[43	[5]	[6]
sister?						
905 Is (NAME) male or	MALE1	MALE1	MALE1	MALE1	MALE1	MALE1
female?	FEMALE2	FEMALE2	FEMALE2	FEMALE2	FEMALE2	FEMALE2
906 Is (NAME) still alive?	YES1 NO2 GO TO 9084	YES1 ND2 <sub>]</sub> GO TO 9084	YES1 NO2 GO TO 9084	YES1 NO2 <sub>1</sub> GO TO 9084	YES1 NO2- GO TO 9084	YES1 NO2 GO TO 9084
	OK8 GO TO [2] 4	DK8 GO TO [3] 4	DK8 GO TO [4] →	DK8 <sub>]</sub> GO TO [5] 4	DK8 <sub>7</sub> GO TO [6]∢	DK8 <sub>7</sub> GO TO [7] 4
907 How old is (NAME)?	GO 10 [2]	GO TO [3]	GO TO [4]	GO TO [5]	GO TO [6]	GO TO [7]
908 In what year did (NAME) die?	19 GO TO 910∢	19 GO TO 9104	19 GO TO 910∢			
, 	DK98	DK98	DK98	DK98	DK98	DK98
909 How many years ago did (NAME) die?						
91D How old was (NAME) when she/he died?	IF MALE OR DIED BEFORE 12 YEARS OF AGE GD TO [2]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO (3)	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [4]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [5]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [6]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [7]
911 Was (NAME)	YES1	YES17	YES17	YES1	YES1	YES1
pregnant when she died?	GO TO 914←→ 1	GO TO 9144→	GO TO 9144    NO2	GO TO 9144 NO2	GO TO 9144— NO2	GO TO 9144—    NO2
912 Did (NAME) die during	YES1, GO TO 915◀	YES1 <sub>7</sub> GO TO 915←	YES1 <sub>7</sub> GO TO 9154	YES1 <sub>7</sub> GO TO 915∢	YES1 <sub>7</sub> GO TO 915₄	YES1 <sub>]</sub> GO TO 9154
childbirth?	NO2	NO2	NO2	NO2	NO2	NO2
913 Did (NAME) die within two	YES1	YES1	YES1	YES1	YES1	YES1
months after the end of a pregnancy or childbirth?	NO2 GO TO 915∢—	NO2 GO TO 915∢—	NO2 <sub>7</sub> GO TO 915∢—	NO2 GO TO 915∢	NO2 <sub>]</sub> GO TO 915∢—	NO2 <sub>7</sub> GO TO 915∢—
914 Was her death due to complications of pregnancy or childbirth?	YES1	YES1	YES1	YES1	YES1	YES1
915 How many children did (NAME) give birth to during						
her lifetime?	GO TO [2]	GO TO [3]	GO 10 [4]	GO TO [5]	GO TO [6]	GO TO [7]
		IF NO MO	ORE BROTHERS OR	SISTERS, GO TO	1001	

904 What was the name given to your oldest (next oldest) brother or sister?	(7)	[8]	[9]	[10]	[11]	[12]
905 (s (NAME)	MALE1	MALE1	MALE1	MALE1	MALE1	MALE1
male or female?	FEMALE2	FEMALE2	FEMALE2	FEMALE2	FEMALE2	FEMALE2
906 [s (NAME) still alive?	YES1 NO2 GO TO 9084	YES1 NO2 GO TO 9084	YES1 NO2 GO TO 9084	YES1 NO2 GO TO 9084	YES1 NO2 GO TO 9084	YES1 NO2 <sub>1</sub> GO TO 9084
	OK8	OK8 <sub>]</sub> GO TO [9] ∢	ok8 <sub>]</sub> GO TO [10] ◀	DK8 <sub>1</sub> GO TO [11] ◀	DK8 <sub>7</sub> GO TO [12] ∢	OK8 GO TO [13] ←
907 How old is (NAME)?	GO TO (8)	GO TO [9]	GO TO [10]	GO TO [11]	GO TO [12]	GO TO [13]
908 In what year did (NAME) die?	19 GO TO 9104 OK98	19 GO TO 9104 0K98	19 GO TO 9104 OK98	19 GO TO 910∢ OK98	19 GO TO 9104 DK98	19 GO TO 9104 DK98
909 How many years ago did (NAME) die?						
910 How o(d was (NAME) when she/he died?	YEARS OF AGE GO TO [8]	YEARS OF AGE GO TO [9]	YEARS OF AGE GO TO [10]	YEARS OF AGE GO TO [11]	YEARS OF AGE GO TO [12]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO (13)
911 Was (NAME) pregnant when she died?	YES1 GO TO 9144	YES1 GO TO 9144	YES1, GO TO 9144	YES1, GO TO 9144	YES1, GO TO 914-	YES1, GO TO 9144
912 Did (NAME) die during childbirth?	YES1 <sub>1</sub> GO TO 915∢— NO2	YE\$1 <sub>1</sub> GO TO 9154— NO2	YES1 GO TO 915← NO2	YES17 GO TO 9154— NO2	YES1 GO TO 9154— NO2	YES1 GO TO 9154-
913 Did (NAME) die within two months after the end of a pregnancy or childbirth?	YES1 NO2 GO TO 915←	YES1 NO2 GO TO 9154	YES1 NO27 GO TO 9154	YES1 NO2 GO TO 9154	YES1   NO2   GO TO 9154	YES1
914 Was her death due to complications of pregnancy or childbirth?	YES1	YES1	YES1	YES1	YES1	YES1
915 How many children did (NAME) give birth to during her lifetime?	GO TO [8]	GO TO [9]	GO TO [10]	GO TO [11]	GO TO [12]	GO TO [13]
		IF NO M	ORE BROTHERS OR	SISTERS, GO TO	1001	

### SECTION: 10 FEMALE CIRCUMCISION MODULE

1001	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1001	Are women circumcised in this area?	YES	
1002	Have you ever been circumcised?	YES1 NO2	→1006
1003	What type of circumcision did you have? Did you have clitoridectomy, excision, or infibulation?	CLITORIDECTOMY	
		OTHER6	
1004	How ald were you when you were circumcised?	AGE IN COMPLETED YEARSDDOES NOT KNOW98	
1005	Who performed the circumcision?	DOCTOR	! !
		DOES NOT KNOW	
1006	CHECK 214 AND 216:		
	HAS AT LEAST ONE HAS NO LIVIN LIVING DAUGHTER DAUGHTER	G	<b>→</b> 1011
	<u>                           </u>		
1007	Has (NAME OF ELDEST DAUGHTER) been circumcised?	YES1 NO2	<u></u>
1007	Has (NAME OF ELDEST DAUGHTER) been circumcised?  How old was she when she was circumcised?		<u></u>
		AGE IN COMPLETED YEARS	<u></u>
1008	How old was she when she was circumcised?	AGE IN COMPLETED YEARS  DOES NOT KNOW	<u></u>
1008	How old was she when she was circumcised?	AGE IN COMPLETED YEARS  DOES NOT KNOW	<u></u>
1008	How old was she when she was circumcised?  Who performed the circumcision?  Did anyone object to your eldest daughter being circumcised?  Anyone else?	AGE IN COMPLETED YEARS	<u></u>
1008	How old was she when she was circumcised?  Who performed the circumcision?  Did anyone object to your eldest daughter being circumcised?  Anyone else?	AGE IN COMPLETED YEARS	<u></u>

1101 CHECK 215:				
ONE OR MORE BIRTHS SINCE JAN. 1991	Ţ	NO BIRT SINCE		END
NTERVIEWER: IN 1102 (COLUMNS 2-4) IN 1103 AND 1104 RECO SINCE JANUARY 1991. (NOTE: ALL RESPONDENT IF ALL OF THE CHILDRE USE ADDITIONAL FORMS	ORD THE NAME AND BIF IN 1106 AND 1108 RE IS WITH ONE OR MORE IN HAVE DIED. IF TH	RTH DATE FOR THE RES ECORD HEIGHT AND WE: BIRTHS SINCE JANUAR	SPONDENT AND FOR ALI IGHT OF THE RESPONDI RY 1 <b>991</b> SHOULD BE WI	L LIVING CHILDREN BO ENT AND THE LIVING ( EIGHED AND MEASURED
	1 RESPONDENT	2 YOUNGEST LIVING CHILD	3 NEXT-TO- YOUNGEST LIVING CHILD	4 SECOND-TO- YOUNGEST LIVING CHILD
102 LINE NO. FROM Q212				
103 NAME FROM Q.212 FOR CHILDREN	(NAME)	(NAME)	(NAME)	(NAME)
104 DATE OF BIRTH FROM Q.105 FOR RESPONDENT	MONTH	DAY	DAY	DAY
FROM Q.215 FOR CHILDREN, AND ASK FOR DAY OF BIRTH	YEAR	YEAR	YEAR	YEAR
105 BCG SCAR ON TOP OF RIGHT SHOULDER		SCAR SEEN1	SCAR SEEN1	SCAR SEEN1
106		NO SCAR2	NO SCAR2	NO SCAR2
HEIGHT (in centimeters)				
107 WAS HEIGHT/LENGTH OF CHILD MEASURED WHILE CHILD WAS LYING DOWN OR STANDING UPRIGHT?		LYING1	LYING1	LYING1
108 WEIGHT (in kilograms)		0 .	0 .	0 .
1D9 DATE WEIGHED AND MEASURED	DAY	DAY	DAY	DAY
į	YEAR	YEAR	YEAR	YEAR
110 RESULT	MEASURED1	CHILD MEASURED.1 CHILD SICK2 CHILD NOT	CHILD MEASURED.1 CHILD SICK2 CHILD NOT	CHILD MEASURED.1 CHILD SICK2 CHILD NOT
	REFUSED4	PRESENT3 CHILD REFUSED4 MOTHER REFUSED.5 OTHER6	PRESENT	PRESENT3 CHILD REFUSED4 MOTHER REFUSED.5 OTHER6
	(SPECIFY)	(SPECIFY)	(SPECIFY)	(SPECIFY)
NAME OF MEASURER:		NAME OF ASSISTANT:		

## INTERVIEWER'S OBSERVATIONS To be filled in after completing interview

omments about Respondent:		
_		
omments on	<del></del>	
pecific Questions:		
-		·····
ny Other Comments:		· · · · · · · · · · · · · · · · · · ·
-		
	SUPERVISOR'S OBSERVATIONS	
Name of Supervisor		Date:
Marie 57 Saper 17357:		
	EDITOR'S OBSERVATIONS	
Name of Editor:		Date:

# UNITED REPUBLIC OF TANZANIA BUREAU OF STATISTICS, PLANNING COMMISSION TANZANIA DEMOGRAPHIC AND HEALTH SURVEY 2 MAN'S QUESTIONNAIRE

		IDENTIFICA	ATION	<del></del>	
NAME OF HOUSEHOLD F	IE <b>A</b> D				
CLUSTER NUMBER					
HOUSEHOLD NUMBER					
REGION					<del>                                     </del>
DISTRICT					
WARD					<del>                                     </del>
ENUMERATION AREA					+ +
LARGE CITY=1; SMALI		TOWN=3; C	COUNTRYSIDE	=4	<del>-</del>
NAME AND LINE NUMBE	_	·		1	
NAME AND LINE NUMBE					<del>  -   -  </del>
NAME AND LINE NUMBE					<del>  -   -    </del>
NAME AND LINE NUMBE				`	<del>       </del>
NAME AND LINE NUMBE				J	<del>                                     </del>
<b>,</b>				· ·	TANGA.
*SMALL CITIES ARE: IRINGA, ME	BEYA, & TA	BORA. ALL	OTHER URBA	N AREAS AR	E TOWN.
	IN	TERVIEWER	VISITS		
	1	2	3	FINAL V	ISIT
DATE				DAY	
				MONTH	
				YEAR	9 6
INTERVIEWER'S NAME				ID NO.	
RESULT*				RESULT	
NEXT VISIT: DATE TIME				TOTAL NUM! OF VISITS	3ER
* RESULT CODES: 1 COMPLETED 4 REFUSED 7 OTHER 2 NOT AT HOME 5 PARTLY COMPLETED (SPECIFY) 3 POSTPONED 6 INCAPACITATED					
TRANSLATOR USED (1=N	ILA TA TON	; 2≈SOMET	IME; 3=ALL	THE TIME).	<u></u>
SUPERVISOR		FIELD ED	TOR	OFFICE	KEYED
NAME		S		EDITOR	BY
DATE	DATE	S			╽┖╌┸╌┚╵

### SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME.	MORNING/AM1 HOURS	
102	First I would like to ask some questions about you and your household. For most of the time until you were 12 years old, did you live in Dar es Salaam city, another urban area or in a rural area?	DAR ES SALAAM	
103	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)?	YEARS	1,105
104	Just before you moved here, did you live in Dar es Salaam city, another urban area or in a rural area?	DAR ES SALAAM	
105	In what month and year were you born?	MONTH	
106	Now old were you at your last birthday?  COMPARE AND CORRECT 105 AND/OR 106 IF INCONSISTENT.	AGE IN COMPLETED YEARS	
107	Can you read and write kiswahili easily, with difficulty, or not at all?	EASILY	→109
108	Ком often do you read a newspaper?	EVERY DAY/ALMOST EVERY DAY	!
109	Have you ever attended school?	YES	→113
110	What is the highest formal school you completed?	LESS THAN 1 YEAR	

MAN 2

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
111	CHECK 106:  AGE 24  OR BELOW OR ABOVE		 
112	Are you currently attending school?	YES	
113	How often do you listen to the radio?	EVERY DAY/ALMOST EVERY DAY	
114	Do you usually watch television at least once a week?	YES1 NO2	
115	What is your occupation, that is, what kind of work do you mainly do?		
116	CHECK 115: WORKS (WORKED) IN AGRICULTURE NOT WORK IN AGRICULTU	RE .	<b>1</b> 118
117	Do you work mainly on your own land or on family rent land, or borrow for share crop, government allocation, or shifting cultivation land?	OWN LAND 1 FAMILY RENT 2 BORROW SHARE CROP 3 GOVERNMENT ALLOCATION 4 SHIFTING CULTIVATION 5	
118	What is your religion?	MOSLEM	
119	To which tribe do you belong?		
	IF NOT A TANZANIAN CITIZEN, WRITE NAME OF COUNTRY.		

### SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Now I would like to ask about all the children you have had during your life.  I mean your own children, not ones you may have adopted or care for as a father but whose real father is someone else,  Do you have children?	YES1 NO2	→206
202	Do you have any sons or daughters who are living with you?	YES1 NO2—	 →204 
203	How many sons live with you?  And how many daughters live with you?  IF NONE RECORD '00'.	SONS AT HOME	
204	Do you have any sons or daughters who are alive but do not live with you?	YES	→206
205	How many sons are alive but do not live with you?  And how many daughters are alive but do not live with you?  IF NONE RECORD '00'.	SONS ELSEWHERE	
206	Have you ever had a son or daughter who was born alive but later died? IF NO, PROBE: Any baby who cried or showed signs of life but survived only a few hours or days?	YES1 NO2	→208
207	How many boys have died?  And how many girls have died?  IF NONE RECORD '00'.	BOYS DEAD	
20B	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL.	TOTAL	
20 <b>9</b>	CHECK 208:  Just to make sure that I have this right: you have had in TOTAL children during your life.  Is that correct?  YES NO PROBE AND CORRECT 201-208 AS NEEDED		

Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.

CIRCLE CODE 1 IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 302, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED, AND CODE 3 IF NOT RECOGNIZED, THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN 301 OR 302, ASK 303.

301	Which ways or methods have you heard about?	SPONTANEOUS YES		ever (METHOD)? NO	303 Have you ever used (METHOD)?
_=					
	PILL Women can take a pill every day.	1	2	3-	YES1 NO2
	IUD Women can have a loop or coil placed inside them by a doctor or a nurse.	1	2	•	YES1
				37	NO2
03	INJECTIONS Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months.	1	2	3-,	YES1 No2
04	IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1	2	3-,	YES1
				<del> </del>	
05]	DIAPHRAGM, FOAM, JELLY Women can place a sponge, suppository, diaphragm, jelly, or cream inside themselves before intercourse.	1	2	3-7	YES1
nsi	CONDOM, RUBBER, RAINCOAT, DUREX A man			<del>•</del>	YFS1
==1	can wear a rubber bag on his penis during sex to prevent pregnancy. The rubber bag is also used to prevent passing diseases such as AIDS and for cleanliness.	1	2	3-	No2
07	FEMALE STERILIZATION Women can have an operation to avoid having any more children.	1	2	3-	Have you ever had a partner who had an operation to avoid having children? YES
08	MALE STERILIZATION Men can have an operation to avoid having any more children.	1	2	3-7	Have you ever had an operation to avoid having any more children? YES
	CALENDAR/SAFE PERIOD Couples can have sexual intercourse only during the safe period of the monthly cycle that is the times during monthly cycle when women is least likely to get pregnant.	1	5	3-	YES1
10	MUCUS METHOD A woman can observe daily the state of the mucus and avoid sexual intercourse at the time when the mucus is colorless and extremely elastic.	1	2	3-7	YES1
11	WITHDRAWAL Men can be careful and pull out before climax.	1	2	3	YES1
12)	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	1		3	YES1
		(SPECIFY	)		NO2
		(SPECIF	7)		YES1 No2
304	CHECK 303:  NOT A SINGLE  "YES"  "YES"  "YES"  (NEVER USED)  (EVER	s"			

MAN 5

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
305	Have you ever done anything or tried in any way to delay or avoid having a child?	YES	<u> </u> 312
306	What have you used or done?  CORRECT 303 AND 304 (AND 302 1F NECESSARY).		
307	Are you currently doing something or using any method to delay or avoid having a child?	YES	312
308	Which method are you using?  RECORD FIRST, SECOND AND THIRD PARTNER IN SEPARATE COLUMNS.	1ST	
309	CHECK 308 (ALL COLUMNS):		
	CONDOMS MARKED IN ANY COLUMN  CONDOMS NOT MARKED IN ANY COLUMN		1 —→315
310	Where did you obtain condoms the last time?  IF SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)	GOVERNMENT AND PARASTATAL REGIONAL/CONSULTANT HOSPITAL	
; 311	What is the brand name of the condom you last used?	BRAND NAME	<u>-</u>
	RECORD NAME OF BRAND.	DOES NOT KNOW	→315

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
312	What is the main reason you are not using	NOT MARRIED11	]
	a method of contraception to avoid pregnancy?	FERTILITY-RELATED REASONS	[
		NOT HAVING SEX	
		INFREQUENT SEX	1
		WIFE MENOPAUSAL/HYSTERECTOMY23	J
		WIFE SUBFECUND/INFECUND24	1
		POSTPARTUM/BREASTFEEDING25	J
		WANTS (MORE) CHILDREN26	1
		WIFE PREGNANT27	ł
		OPPOSITION TO USE RESPONDENT OPPOSED	ì
		WIFE/PARTNER OPPOSED32	
		OTHERS OPPOSED	1
		RELIGIOUS PROHIBITION34	
		LACK OF KNOWLEDGE	(
		KNOWS NO METHOD41	J
		KNOWS NO SOURCE42	ì
		METHOD-RELATED REASONS	ı
		HEALTH CONCERNS51	
		FEAR OF SIDE EFFECTS52 LACK OF ACCESS/TOO FAR53	ł
		COST TOO MUCH	
		INCONVENIENT TO USE55	i
		INTERFERES WITH BODY'S	1
		NORMAL PROCESSES56	
		UP TO THE WOMAN TO USE	Ì
		OTHER 96	ł
		DOES NOT KNOW98	]
	<u> </u>	1	1
313	Do you know of a place where you can obtain a method of	YES1	ł
	family planning?	NO2 -	
		ł	1
		GOVERNMENT AND PARASTATAL	1
314	Where is that?	REGIONAL/CONSULTANT HOSPITAL11	
	TE POURSE TO HOODERAL DESIRED CENTER OR STANTO	DISTRICT HOSPITAL12	i i
	IF SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY	HEALTH CENTRE	
	THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.		ł
	THE THE G. COURT AND STREET THE MITTER SEPTE	MEDICAL PRIVATE SECTOR	
		RELIGIOUS ORG. FACILITY21	ł
		PRIV.DOCTOR/CLINIC/HOSPITAL22	
	(NAME OF PLACE)	PHARMACY/MEDICAL STORE23	1
		CBD WORKER24	
		OTHER PRIVATE SECTOR SHOP31	ł
		CHURCH32	1
		FRIENDS/RELATIVES/NEIGHBORS33	ĺ
		OTHER96	ł
		(SPECIFY)	<u> </u>
315	Have you seen or heard of the Green Star Logo (Symbol)?		1
		NO S	7
	<u> </u>	DOESN'T KNOW8 -	<del>-</del> →401
	<b>]</b>	FAMILY PLANNING RELATED1	1
316	What does the Green Star Logo mean to you?	NOT FAMILY PLANNING RELATED2	
	<u> </u>	DOESN'T KNOW8	1
317	How did you learn about the Green Star?	BILLBOARDSA BUSB	1
	CIRCLE ALL MENTIONED.	POSTERS	1
	CONTRACTOR CONTRACTOR	LEAFLETSD	1
		RADIOE	1
		CLINIC SIGNF	ſ
		SERVICE PROVIDER	1
		OTHERX	[
		(SPECIFY)	ł

### SECTION 4. MARRIAGE AND SEXUAL BEHAVIOUR

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	PRESENCE OF OTHERS AT THIS POINT.	YES NO CHILDREN UNDER 10	
402	Are you currently married or living with a woman?	YES, CURRENTLY MARRIED	
403	Have you ever been married or lived with a woman?	YES	→412 ————
404	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED	<b>4</b> 10
407	How many wives do you have?	NUMBER	
410	In what month and year did you start living with your (first) wife/partner?	MONTH	→412
411	How old were you when you started living with her?	AGE	
412	CHECK 402:  MARRIED OR LIVING WITH A  NOT MARRIED AND NOT MARR	[ ]	<b>→</b> 415
413	Now I need to ask you some questions about sexual activity in order to gain a better understanding of some family planning issues.  When was the last time you had sexual intercourse with your wife?	DAYS AGO	
414	For that sexual intercourse, did you use a condom?	YES	
415	Oo you now have a regular partner (apart from your wife)? I mean someone with whom you have been having sex for about a year or more?	YES1 NO2	
416	Ном many such regular partners do you have (aside from your wife)?	NUMBER	
416A	When was the last time you had sexual intercourse with the regular partner (other than your wife)?	DAYS AGD	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
416B	Did you use a condom for that sexual intercourse?	YES	}
417	Have you had sexual intercourse with anyone (else) in the last 12 months? (I mean, with someone other than your wife or regular partner that you mentioned earlier?)	YES1 NO2 -	J →424
418	With how meny different women have you had sexual intercourse in the last 12 months (apart from your wife or regular partners)?	NUMBER OF WOMEN	
419	When was the last time you had sexual intercourse (apart from your wife/regular partner)?	DAYS AGO	
420	For that last sexual intercourse, did you give money, gifts or favours in return for sex?	YES1	
421	Was this person someone you had met before or someone you met for the first time?	MET BEFORE	
422	Did you use a condom for that last sexual intercourse?	YES1 - NO2	
423	What was the main reason that you did not use a condom that time?		
424	CHECK 414, 416B OR 422:  CONDOMS USED WITH WIFE DID NOT USE CONDOM OR PARTNER(S)  OR PARTNER(S)	NDOM	<b>↓</b>
424A 424B 425	Last time you used condom, where was that condom obtained?  If SOURCE IS HOSPITAL, HEALTH CENTRE, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.  (NAME OF PLACE)  Have you heard of a condom called 'Salama'?  Now think back to the past. How old were you when you had sexual intercourse for the first time?	GOVERNMENT AND PARASTATAL   REGIONAL/CONSULTANT HOSPITAL   12   HEALTH CENTRE   13   DISPENSARY/PARASTATAL FACILITY   14   VILLAGE HEALTH POST/WORKER   15   MEDICAL PRIVATE SECTOR   RELIGIOUS ORG. FACILITY   21   PRIV.DOCTOR/CLINIC/HOSPITAL   22   PHARMACY/MEDICAL STORE   23   CBD WORKER   24   OTHER PRIVATE SECTOR   31   CHURCH   32   FRIENDS/RELATIVES/NEIGHBORS   33   OTHER   96   OTHER   96   OTHER   96   OTHER   97   ODES NOT KNOW   98   YES   1   NO   2   2   AGE   NEVER HAD SEX   95   FIRST TIME WHEN MARRIED   96   OTHER   96   OTHER   97   OTHER   9	         
426	In the last four weeks, how many times have you had sexual intercourse?	NUMBER OF TIMES	

#### SECTION 5: FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501		NTLY IN UNION NOR REGULAR PARTNER HAD SEX	→504A
502	Spouses/partners do not always agree on everything. Now I want to ask you about your wife's/partner's views on family planning.	WIFE WIFE WIFE 1 2 3 4	
	Do you think that your wife/partner approves or disapproves of couples using a method to avoid pregnancy?	APPROVES1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
503	Do you think your wife/partner wants the same number of children that you want, or does she want more or fewer than you want?	WIFE WIFE WIFE TO 1 2 3 4	
		SAME NUMBER1 1 1 1 1 1 1 MDRE CHILDREN2 2 2 2 2 FEWER CHILDREN3 3 3 3 DOES NOT KNOW8 8 8 8	
503A	How often have you talked to your wife/partner about family planning in the past year?	WIFE WIFE WIFE WIFE 1 2 3 4	
		NEVER	
5038	Have you and your wife/partner ever discussed the number of children you would like to have?	WIFE WIFE WIFE TO 1 2 3 4	
		YES	
503C	Who mainly decides how many children should you have?	WIFE WIFE WIFE WIFE 1 2 3 4	
		HIMSELF1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
504A	CHECK 308		1
	NEITHER STERILISED	HE OR SHE STERILISED	<b>i</b> →506
504B	Now I have some questions about the future.		
	Would you like to have (a/another) child or would you prefer not to have any (more) children?	HAVE (A/ANOTHER) CHILD	- <b>→</b> 506
505	How long would you like to wait before the birth of (a/another) child?	MONTHS	

NQ.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
506	CHECK 307: USING A METHOD?		
	NOT NOT CURR ASKED CURRENTLY USIN USING	ENTLY G	→512
507	Do you intend to use a method to delay or avoid pregnancy within the next 12 months?	YES	<u>1</u> 509
508	Do you intend to use a method at any time in the future?	YES	] -510
509	Which method would you prefer to use?	PILL	<b>1</b> →512
510	What is the main reason you think you will never use a method?	NOT MARRIED	<b>→</b> 512
511	Would you ever use a method if you were married?	YES	}

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES SKI			
512	CHECK 203 AND 205:	NUMBER.	Ī		
	HAS LIVING CHILDREN P NO LIVING CHILDREN	NUMBER	ĺ		
	[	-	]		
	If you could go back to	OTHER 96 (SPECIFY)	<del> </del> →514		
	the time you did not have exactly the number of	(SFECIFI)	1		
	any children and could children to have in	}	1		
	choose exactly the number your whole life, how of children to have in many would that be?	Į.	1		
	your whole life, how many	1			
	would that be?	}	ì		
	PROBE FOR A NUMERIC RESPONSE.	ļ			
	·	BOYS	<u>-</u>		
513	How many of these children would you like to be boys	<u> </u>	1		
	and how many would you like to be girls?	NUMBER	1		
		OTHER 96	1		
		(SPECIFY)	į .		
		GIRLS	1		
		NUMBER	•		
		OTHER 96	l		
		OTHER 96	1		
		EITHER	1		
		NUMBER	1		
		OTHER 96	l		
		OTHER 96 (SPECIFY)	]		
514	In general, do you approve or disapprove of couples	I APPROVE1			
J 14	using a method to avoid getting pregnant?	DISAPPROVE2 -	7		
		NO OPINION8 -	<sup>_</sup> >517		
515	Have you ever recommended family planning to a friend,	YES1	<u> </u>		
	relative, or anyone else?	NO2	1		
	<u> </u>	<u> </u>	<u> </u>		
516	If you wanted to get information on family planning,	l	Į		
	who would you like to talk to most:	}	i		
	Family planning worker from your community?	CBD WORKER01	i		
	Traditional Birth Attendant (TBA)? Your wife or partner?	TBA02 W1FE/PARTNER03	Į.		
	Friend?	FRIEND04	i		
	Relative?	RELATIVE05	1		
	Religious leader? Somebody else?	RELIGIOUS LEADERS	1		
	Solicing Ecse:	96	i		
	1	(SPECIFY)	i		
517	Is it acceptable or not acceptable to you for	) NOT	1		
	information on family planning to be provided:	ACCEPT- ACCEPT-	Į		
	On the radio?	ABLE ABLE DK RADIO1 2 8			
	On the television?	TELEVISION1 2 8	}		
518	In the last six months have you heard about family	1	ī		
	planning:	YES NO	l		
	On the radio?	RADIO 1 2	[		
	On the television?	TELEVISION	1		
	In a newspaper or magazine?	NEWSPAPER OR MAGAZINE	1		
	From a poster? From billboards?	POSTER			
	At community events/logo launches	COMMUNITY EVENT/LOGO LAUNCHES1 2	1		
	From live drama?	LIVE DRAMA	l		
	From a doctor or nurse? From a community health worker?	DOCTOR OR NURSE	1		
	and the second s		-		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
519	In the past six months, what drama series have you listened to on the radio?		<u> </u>
	CIRCLE THE SERIES MENTIONED SPONTANEOUSLY. FOR SERIES NOT MENTIONED ASK,	YES YES NO	
	In the 6 months, have you listened to (NAME OF SERIES)?	SPO- PRO- NTA- BED EOUS	
	Zinduka Twende na Wakati Ukweli Kuhusu Maisha Other	ZINDUKA	
519A	CHECK 519:  LISTENED TO HAS NO ZINDUKA LISTENED TO		→519E
519B	Ноы often do you listen to Zinduka?	THICE A WEEK	
5190	As a result of listening to Zinduka, did you do anything or take any any action related to family planning?	YES	<b> </b> →519E
5190	What did you do as a result of listening to Zinduka? Anything else? RECORD ALL MENTIONED.	TALKED TO PARTNERA TALKED TO HEALTH WORKERB TALKED TO SOMEONE ELSEC VISITED A CLINIC FOR FAMILY PLANND BEGAN USING A MODERN METHODE CONTINUED USING A MODERN METHODF	
		OTHERX (SPECIFY) DOES NOT KNOW	
519E	CHECK 519:  LISTENED TO TWENDE NA WAKATI TWENDE NA WAKATI		<b> </b> →520
519F	How often do you listen to Twende na Wakati?	TWICE A WEEK	
520	In the last six months have you discussed family planning with your friends or relatives?	YES	601
521	With whom? Anyone else? RECORD ALL MENTIONED.	WIFE/PARTNER. A MOTHER. B FATHER. C SISTER(S) D BROTHER(S) E DAUGHTER. F SONS. G MOTHER-IN-LAW H FRIENDS. I	
		OTHER X	L

## SECTION 6. AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	CHECK 302 (06):	,	1
	HAS HEARD OF CONDOMS NEVER HEA	RD OF CONDOMS	<u>}</u>
602	CHECK 303 (06), 414, 4168 AND 422		ì
	HAS NEVER USED CONDOMS - HAS	USED CONDOMS	{
	(ALL ARE 'NO') (AT	LEAST ONE 'YES')	→604
603	Have you ever seen a condom?	YES	
604	Do you know where you can get condoms?	YES1 NO2 -	606
605	Where can you get condoms?  Any other places?  CIRCLE ALL MENTIONED.  PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	GOVERNMENT AND PARASTATAL  REGIONAL/CONSULTANT HOSPITALA  DISTRICT HOSPITALB  HEALTH CENTREC  DISPENSARY/PARASTATAL FACILITYD  VILLAGE HEALTH POST/WORKERE  MEDICAL PRIVATE SECTOR  RELIGIOUS ORG. FACILITYF  PRIV.DOCTOR/CLINIC/HOSPITALG  PHARMACY/MEDICAL STOREH  CBD WORKERI  OTHER PRIVATE SECTOR  SHOPJ  CHURCHK  FRIENDS/RELATIVES/NEIGHBORSL  OTHERX	
606	ਮਿਹਮ many times can a condom be used?	DOES NOT KNOW,	
607	Do you think that using condoms can give you AIDS?	YES	
608	In general, do you think that most women like men to use condoms, they don't like men to use condoms, or it does not matter?	LIKE MEN TO USE CONDOMS	
609	Have you heard about diseases that can be transmitted through sex?	YES1 NO2 —	611
610	Which diseases do you know?	SYPHILISA GONORRHOEAB AIDSC GENITAL WARTS/CONDYLOMATAO	
	Any other diseases?	OTHER X  OON'T KNOWZ	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
444			
611	CHECK 425:		
•	HAS HAD SEX HAS N	EVER HAD SEX	8 1
}	,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		613A
			ł
612	During the last 12 months, did you have any of these	YES1	
ſ	diseases?	NO	L-622
		DON   KNOW	
1		1	1
ĺ		SYPHILISA	1
613	Which of these diseases?	GONORRHOEAB	ł
		GENITAL WARTS / CONDYLOMATAD	İ
ſ		GENTIAL MAKIS / COMDITIONALA	1
1	CIRCLE ALL MENTIONED.	OTHERX	ł
		(SPECIFY)	İ
ſ		DON'T KNOWZ	1
,			ı
613A	During the last twelve months, did you have a	1 YES1	
_ ,_,	discharge from your penis?	NO2	<b>[</b>
1	, ,	DOES NOT KNOW	!
/47-	During Alexander and the second	1 vea	
6138	During the last twelve months, did you have a sore or	YES	1
ì	ulcer on your penis?	DOES NOT KNOW8	ł
			وسط
613C	CHECK 612, 613A, AND 613B		) <b>[</b>
t ł	HAD ONE OR MORE	NONE OF THE	ł
1	DISEASES	DISEASES	22
		Ì	1
617	When you had this (DISEASE FROM Q.613)	ADVICE /TREATMENT1	l
	did you seek advice or treatment?	SELF TREATMENT2- DID NOT DO ANYTHING3-	→619
1		The second per Additional second seco	1
		<u> </u>	
		GOVERNMENT AND PARASTATAL	
618	Where did you seek advice or treatment?	CONSULTANT HOSPITALA REGIONAL HOSPITALB	ľ
		DISTRICT HOSPITAL	1
		HEALTH CENTRED	
ľ		DISPENSARYE	l
}		PARASTATAL HEALTH FACILITYF	•
	Any other place or popular	VILLAGE HEALTH POST/WORKERG	
ľ	Any other place or person?	MEDICAL PRIVATE SECTOR RELIGIOUS ORG. FACILITYH	1
	RECORD ALL MENTIONED	PRIV.DOCTOR/CLINIC/HOSPITALI	Į
		PHARMACY/MEDICAL STORE	1
ľ		UMATI CBD WORKERK	í
}		OTHER PRIVATE SECTOR	!
1		SHOPL	
ľ		FRIENDS/RELATIVES/NEIGHBOURSN	ł
1			1
ł		OTHERX	l
ľ		(SPECIFY)	í
1		<u> </u>	<u> </u>
1		<u> </u>	I
619	Did you tell your wife/partner that you had this	YES1	1
1	(disease/discharge/sore)?	NO2	1
1		<u> </u>	<u> </u>
1		1	1
620	When you had this disease, did you do something so	YES1	l
	as not to infect your partner?	NO2-	حدي ا
[		PARTNER ALREADY INFECTED3-	622 <b>I</b>
		<u>-</u>	<u>-</u>
,,, J	10 a a a a a a a a a a a a a a a a a a a	No. 25 Mar. 112 - 22 - 22 - 22 - 22 - 22 - 22 - 22	Į
621	What did you do?	NO SEXUAL INTERCOURSEA USED CONDOMSB	
1		TOOK MEDICINES	ſ
J	CIRCLE ALL MENTIONED.	TOLD HIM TO GO FOR MEDICAL HELPD	1
Ì			
ł		OTHERX	t
		(SPECIFY)	l

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES		
622	CHECK 610:		[	
	DID NOT MENTION AIDS OR QUESTION NOT ASKED	'AIDS'	<b>→</b> 624	
623	Have you ever heard of an illness called AIDS?	YES	] 701	
624	From which sources of information have you learned about AIDS?	RADIO		
	Any other sources?	PAMPLETS/POSTERSD HEALTH WORKERSE MOSQUES/CHURCHESF		
	RECORD ALL MENTIONED.	SCHOOLS/TEACHERS		
		OTHERX	<u> </u>	
625	Is there anything a person can do to avoid getting AIDS or the virus that causes AIDS?	YES	L→627	
626	What can a person do to avoid getting AIDS or the virus that causes AIDS?	DO NOT HAVE SEX AT ALLA USE CONDOMS DURING SEX	 	
;	Any other ways?  CIRCLE ALL MENTIONED	HOMOSEXUALS. D DO NOT HAVE MANY SEX PARTNERS. E HAVE ONLY ONE SEX PARTNERS. F AVOID BLOOD TRANSFUSIONS. G AVOID INJECTIONS. H MOTHERS DON'T HAVE CHILDREN. I AVOID KISSING. J AVOID MOSQUITO BITES. K SEEK PROTECTION FROM TRADITIONAL HEALER. L DO NOT DRINK TOO MUCH ALCOHOL. M		
		OTHER X  (SPECIFY)  DOES NOT KNOW	} }	
627	Do you think a person can protect themselves from getting AIDS by:	YES NO		
	having a good diet?	GOOD DIET 2		
1	staying with one faithful partner?	STAY WITH ONE PARTNER		
	avoid stepping on the urine or stool of a person with AIDs?	AVOID URINE OR STOOL		
	using condoms?	USE CONDOMS		
	avoiding touching a person who has AIDS?	DON'T TOUCH PERSON WITH AIDS1 2	ļ	
	not sharing eating utensils with a person with AIDS	7 DON'T SHARE UTENSILS	Į	
	avoiding being bitten by mosquitoes or insects?	AVOID INSECT BITES 2	ł	
	making sure any injection they have is done with a clean needle?	INJECTION WITH CLEAN NEEDLE1 2		
628	Is it possible for a healthy-looking person to have the AIDS virus?	YES		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP			
629	Can AID\$ be cured?	YES				
630	Can AID\$ be transmitted from mother to child?	YES	<b> </b> 1 <sub>→631</sub>			
630A	How do you think that it can be transmitted?	DURING PREGNANCYA DURING DELIVERYB THROUGH BREASTFEEDINGC				
	CIRCLE ALL MENTIONED	OTHER X (SPECIFY) DOES NOT KNOWZ				
631	Does any member of your household have AIDS or has any member of your household died of AIDS?	YES	<del> </del> 632			
631A	Do you personally know someone who has AIDS or has died of AIDS?	YES				
632	Do you think your chances of getting AIDS are small, moderate, great, or no risk at all?	SMALL				
633	Why do you think that you have (NO RISK/ A SMALL CHANCE) of getting AIDS?  Any other reasons?	NO SEXUAL INTERCOURSEA - NO SEX WITH PROSTITUTESB SLEEP ONLY WITH SPOUSE/PARTNERC USE CONDOMSD NO INJECTIONSE	→634A			
	CIRCLE ALL MENTIONED	NO BLOOD TRANSFUSIONSF  OTHER X  (SPECIFY)  DOES NOT KNOW				
634	Why do you think that you have a (MODERATE/GREAT) chance of getting AIDS?	MULTIPLE PARTMERSA SEX WITH PROSTITUTESB SPOUSE HAS MULTIPLE PARTMERSC DO NOT USE CONDOMSD				
	Any other reasons?	HAD INJECTIONSE				
	CIRCLE ALL MENTIONED	OTHER X  (SPECIFY)  DOES NOT KNOWZ				
634A	CHECK 425:					
	HAS HAD SEX HAS NE	VER HAD SEX	→638			
635	Since you heard of AIDS, have you changed your sexual behaviour to prevent getting AIDS?	YES	<b> </b> □ <sub>▶637</sub>			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
636	What did you do?  Anything else?  CIRCLE ALL MENTIONED	ONE PARTMER	638
l		OTHER X	1
637	Some people use a condom during sexual intercourse to avoid getting AIDS or other sexually transmitted diseases.		
	Have you ever used a condom during sex to avoid getting or transmitting diseases, such as AIDS?	YES	
638	Have you ever been tested to see if you have the AIDS virus?	YES	<b>I</b> ▶641 <i>A</i>
639	Would you like to be tested for the AIDS virus?	YES	
640	Do you know a place where you could go to get an AIDS test?	YES	642
641	Where could you go?	GOVERNMENT AND PARASTATAL REGIONAL/CONSULTANT HOSPITALA DISTRICT HOSPITALB HEALTH CENTREC DISPENSARY/PARASTATAL FACILITYD VILLAGE HEALTH POST/WORKERE	
641A	Where did you go?	MEDICAL PRIVATE SECTOR  RELIGIOUS ORG. FACILITY	
642	What do you suggest is the most important thing the government should do for people who have AIDS?	PROVIDE MEDICAL TREATMENT	
643	If a member of your family is suffering from AIDS would you be willing to care for him or her at home?	YES	

## SECTION 7. MATERNAL MORTALITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES			
701	Now I would like to ask you some questions about your brothers and sisters, that is, all of the children born to your natural mother, including those who are living with you, those living elsewhere and those who have died.  How many children did your mother give birth to, including you?	NUMBER OF BIRTHS TO NATURAL MOTHER			
702		Y ONE BIRTH ONDENT ONLY)	<b>→</b> 716		
703	How many of these births did your mother have before you were born?	NUMBER OF PRECEDING BIRTHS			

704 What was the name given to	[1]	[2]	[3]	[4]	[5]	[6]
your oldest (next oldest) brother or sister?				<i></i>		
705 Is (NAME)	MALE1	MALE1	MALE1	MALE1	MALE1	MALE1
male or female?	FEMALE2	FEMALE2	FEMALE,2	FEMALE2	FEMALE2	FEMALE2
706 Is (NAME) still alive?	YES1 NO2 <sub>1</sub> GO TO 7084	YES	YES1 NO2 <sub>1</sub> GO TO 7084	YES1 NO2 <sub>1</sub> GO TO 7084	YES1 NO2 <sub>1</sub> GO TO 7084	YES1 NO2 GO TO 7084
ı	OK8 GO TO [2] ◀	OK8 GO TO [3] ←	GO TO [4] 4	DK8 GO TO [5] ∢	οκ8 GO TO [6] «	0K8 GO TO [7] ∢
707 How old is (NAME)?	GO TO [2]	60 TO [3]	GO TO [4]	GO TO (5)	GO TO [6]	GO TO [7]
708 In what year did (NAME) die?	19 GO TO 710∢	19 GO TO 7104	19 GO 70 710∢	19 GO TO 710₄	19 G0 TO 710∢	19 GO ТО 710∢
	DK98	DK98	DK98	DK98	DK98	DK98
709 How many years ago did (NAME) dic?						
710 How old was (NAME) when she/he died?						
	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [2]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GD TO [3]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [4]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [5]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [6]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO 10 [7]
711 Was (NAME)	YES1	YES17	YES17	YES17	YES17	YES17
pregnant when she died?	GO TO 7144→	G0 TO 714←J	GO 70 714∢-	GO TO 714∢→	GO TO 7144	GO TO 7144-J
712 0:4 (11415)	NO2	NO2	NO2	NO2	NO2	NO2
712 Did (NAME) die during childbirth?	YES1 GO TO 715←	YES1	YES1 GO TO 7154	YES1 GO TO 715←	YES1 GO TO 715 ←	YES1 GO TO 715∢—
en rabii tii?	NO2	NO2	NO2	NO2	NO2	NO2
713 Did (NAME) die within two months after	YES1	YES1	YES1	YES1	YES1	YES1
the end of a pregnancy or childbirth?	NO2 GO TO 715←	NO2 GO TO 715	NO2 GO TO 715←	NO2 GO TO 715◀	NO2 <sub>1</sub> GO TO 715 4	NO2 GO TO 7154
714 Was her death due to	YES1	YES1	YES1	YES1	YES1	YES1
complications of pregnancy or childbirth?	NO2	NO2	NO2	NO2	NO2	NO2
715 How many children did (NAME) give						
birth to during her lifetime?	GO TO [2]	60 TO [3]	GO TO [4]	GO TO (5)	GO TO [6]	GO TO [7]
	-				, 	=

ΙF	NO	MORE	BROTHERS	OR	SISTERS,	STOP

704 What was the name given to your oldest (next oldest) brother or sister?	(7)	(8)	[9]	[10]	[11]	[12]
705 Is (NAME) male or female?	MALE1	MALE1 FEMALE2	MALE1	MALE1	MALE1	MALE1 FEMALE2
706 Is (NAME) still alive?	YES1 NO2 <sub>1</sub> GO TO 708∢	YES1 NO2 <sub>7</sub> GO TO 708⊲	YES1 NO2 GO TO 7084	YES1 NO2 GO TO 7084	YES1 NO2₁ GO TO 708∢	YES1 NO2 GO TO 7084
	DK8 GO TO [8] ←	DK8 GO TO [9]∢	DK8- GO TO [10] 4-	DK8 GO TO [11] ∢	DK8 <sub>]</sub> GO TO [12] 4	DK8 GO TO [13] 4
707 How old is (NAME)?	60 TO [8]	GO TO [9]	GO TO [10]	GO TO [11]	GO TO [12]	GO TO [13]
708 In what year did (NAME) die?	19 GO TO 7104 DK98	19 GO 70 710 ← DK98	19 GO TO 710 d OK98	19 GO TD 710₄ DK98	19 GO 70 710₄ DK98	19 GO TO 710.  GO TO 710.  DK98
709 How many years ago did (NAME) die?						
710 How old was (NAME) when she/he died?	YEARS OF AGE GO TO [8]	YEARS OF AGE GO TO [9]	YEARS OF AGE GO TO [10]	YEARS OF AGE GO TD [11]	YEARS OF AGE GO TO [12]	IF MALE OR DIED BEFORE 12 YEARS OF AGE GO TO [13]
711 Was (NAME) pregnant When she died?	YES1 GO TO 7144	YES1 GO ΤΟ 7144	YES1 GO TO 714←	YES1 GO TO 9144	YES1 GO TO 7144	YES1 GO TO 7144
712 Did (NAME) die during childbirth?	YES1 GO TO 715↓ NO2	YES1 GO TO 715∢ NO2	YES1 GO TO 7154 NO2	YES1 GO TO 7154 NO2	YES1 GO TO 715∢ NO2	YES1 GO TO 7154 NO2
713 Did (NAME) die within two months after the end of a pregnancy or	YES1 NO2 GO TO 7154	YES1 NO2 GO TO 715		YES1 NO2 <sub>1</sub> GO TO 715₄	YES1 NO2 GO TO 7154	YES1 NO2 <sub>7</sub> GO TO 715∢~
childbirth?  714 Was her death due to complications of pregnancy or childbirth?	YES1	YES1	YES1	YES1	YES1	YES1
715 How meny children did (NAME) give birth to during her lifetime?	GO TO [8]	GO TO (9)	GO TO [10]	GO TO [11]	GO TO [12]	GO TO [13]
		IF NO M	ORE BROTHERS OR	SISTERS, GO TO	716	
716 RECORD THE TI	ME			ORNING/AM1	Ļ.	

## INTERVIEWER'S OBSERVATIONS To be filled in after completing interview

omments about Respondent:		
omments on pecific Questions:		
pectific edescions.		
ny Other Comments:		
	SUPERVISOR'S OBSERVATIONS	
Name of Supervisor:		Date:
	EDITOR'S OBSERVATIONS	
		<b>j</b>
Name of Editor:		Date: